
INCIDENT REPORT

______ INCIDENT ______ Garden Grove Fire Department Fire Department: Incident Number: G1608497 Exposure Number: 00 Multi-Agency IC#: 00254580 Incident Date: 07/26/16 Dispatch Time: 17:32:14 Arrival Time: 17:35:24 Controlled Time: Ending Time: 17:43:14 First-In Company: GE5 District G2417 Incident Type: EMS call, excluding vehicle accident with injury Mutual Aid: None Method of Alarm: E911 Type of Weather: Air Temperature 88 Address, CSZ: 12792 DALE ST Census Tract: Fire Haz Sev Zone: Medium RESOURCES & CASUALTIES _____ Actions Taken 1: Provide basic life support (BLS) Actions Taken 2: Actions Taken 3: #Apparatus Resp Engine: 0 #Apparatus Resp Trk: 0 #Apparatus Resp Med: #Apparatus Resp Oth: 0 1 Fire Svs Injury: 0 Fire Svs Fatal: Non-FS Injury: Non-FS Fatal: PROPERTY & STUDIES ______ Property Losses: Content Losses: Property Value: Contents Value: Insurance Co: Building Ins: Mixed Prop Use:

Multifamily dwelling

Property Use:

Detector

| TNCT | DENT | REPORT | Γ |
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| | | | |

Hazmat Rel:

None

Critical Inc:

Special Studies:

EMERGENCY MEDICAL SERVICE

Number of Patients:

Billing Care:

Status:

Transported to:

Patients Trans - Fire:

Patients Trans - Amb:

COMMENTS

**** GE5 ****

HEAD PAIN

GE5 RESPONDED TO A FEMALE THAT WAS HIT ON HEAD BY A GARAGE DOOR, PT WAS EVALUATED AND TRANSPORTED POV BY FAMILY, SEE EPCR.

CAPT ACOSTA