INCIDENT REPORT

______ INCIDENT ______ Fire Department: Garden Grove Fire Department Incident Number: G1710595 Exposure Number: 00 Multi-Agency IC#: Incident Date: 09/14/17 Dispatch Time: 16:39:53 Arrival Time: 16:41:39 Controlled Time: Ending Time: 17:46:58 GE4 First-In Company: District
Incident Type:
Mutual Aid: G2212 Motor vehicle/pedestrian accident (MV Ped) None Method of Alarm: Telephone Type of Weather: Air Temperature 79 Address, CSZ: Census Tract: ONYX ST / CHAPMAN AV Fire Haz Sev Zone: Medium RESOURCES & CASUALTIES ______ Actions Taken 1: Provide basic life support (BLS) Actions Taken 2: Actions Taken 3: #Apparatus Resp Engine: 2 #Apparatus Resp Trk: 0 #Apparatus Resp Med: 0
#Apparatus Resp Oth: 1 1 Fire Svs Fatal: Non-FS Injury: Non-FS Fatal: PROPERTY & STUDIES _______ Property Losses: Content Losses: Property Value: Contents Value: Insurance Co: Building Ins:

Property Use: Residential street, road or residential

Mixed Prop Use:

Detector

TNCT	חביאיתי	REPORT
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Hazmat Rel: Critical Inc: Special Studies:	None	
	EMERGENCY MEDICAL SERVICE	
Number of Patients: Billing Care: Status: Transported to: # Patients Trans - Fire # Patients Trans - Amb:	:	
	COMMENTS	

**** GE4 ****

MEDICAL AID AUTO VS PED CAPT RUHMAN
GE4 AND GE5 RESPONDED TO A STREET FOR A MALE C/O SHOULDER PAIN. PT WAS GIVEN
BLS TREATMENT AND TRANSPORTED VIA CARE AMB TO LOS AL HOSP. GE4 COMPLETE.