

NFPA 1584

Recommended Practice on Rehabilitation for Members Operating at Incident Scene Operations and Training Exercises

2003 Edition



NFPA, 1 Batterymarch Park, PO Box 9101, Quincy, MA 02269-9101
An International Codes and Standards Organization

NFPA License Agreement

This document is copyrighted by the National Fire Protection Association (NFPA), 1 Batterymarch Park, Quincy, MA 02269-9101 USA.
All rights reserved.

NFPA grants you a license as follows: The right to download an electronic file of this NFPA document for temporary storage on one computer for purposes of viewing and/or printing one copy of the NFPA document for individual use. Neither the electronic file nor the hard copy print may be reproduced in any way. In addition, the electronic file may not be distributed elsewhere over computer networks or otherwise. The hard copy print may only be used personally or distributed to other employees for their internal use within your organization.

IMPORTANT NOTICES AND DISCLAIMERS CONCERNING THIS DOCUMENT

Notice and Disclaimer of Liability Concerning the Use of NFPA Documents

NFPA codes, standards, recommended practices, and guides, of which the document contained herein is one, are developed through a consensus standards development process approved by the American National Standards Institute. This process brings together volunteers representing varied viewpoints and interests to achieve consensus on fire and other safety issues. While the NFPA administers the process and establishes rules to promote fairness in the development of consensus, it does not independently test, evaluate, or verify the accuracy of any information or the soundness of any judgments contained in its codes and standards.

The NFPA disclaims liability for any personal injury, property or other damages of any nature whatsoever, whether special, indirect, consequential or compensatory, directly or indirectly resulting from the publication, use of, or reliance on this document. The NFPA also makes no guaranty or warranty as to the accuracy or completeness of any information published herein.

In issuing and making this document available, the NFPA is not undertaking to render professional or other services for or on behalf of any person or entity. Nor is the NFPA undertaking to perform any duty owed by any person or entity to someone else. Anyone using this document should rely on his or her own independent judgment or, as appropriate, seek the advice of a competent professional in determining the exercise of reasonable care in any given circumstances.

The NFPA has no power, nor does it undertake, to police or enforce compliance with the contents of this document. Nor does the NFPA list, certify, test or inspect products, designs, or installations for compliance with this document. Any certification or other statement of compliance with the requirements of this document shall not be attributable to the NFPA and is solely the responsibility of the certifier or maker of the statement.

Important Notices and Disclaimers continued on inside back cover.

IMPORTANT NOTICES AND DISCLAIMERS CONCERNING NFPA DOCUMENTS

(Continued from inside front cover)

ADDITIONAL NOTICES AND DISCLAIMERS

Updating of NFPA Documents

Users of NFPA codes, standards, recommended practices, and guides should be aware that these documents may be superseded at any time by the issuance of new editions or may be amended from time to time through the issuance of Tentative Interim Amendments. An official NFPA document at any point in time consists of the current edition of the document together with any Tentative Interim Amendments and any Errata then in effect. In order to determine whether a given document is the current edition and whether it has been amended through the issuance of Tentative Interim Amendments or corrected through the issuance of Errata, consult appropriate NFPA publications such as the National Fire Codes Subscription Service, visit the NFPA website at www.nfpa.org, or contact the NFPA at the address listed below.

Interpretations of NFPA Documents

A statement, written or oral, that is not processed in accordance with Section 6 of the Regulations Governing Committee Projects shall not be considered the official position of NFPA or any of its Committees and shall not be considered to be, nor be relied upon as, a Formal Interpretation.

Patents

The NFPA does not take any position with respect to the validity of any patent rights asserted in connection with any items which are mentioned in or are the subject of NFPA codes, standards, recommended practices, and guides, and the NFPA disclaims liability for the infringement of any patent resulting from the use of or reliance on these documents. Users of these documents are expressly advised that determination of the validity of any such patent rights, and the risk of infringement of such rights, is entirely their own responsibility.

NFPA adheres to applicable policies of the American National Standards Institute with respect to patents. For further information, contact the NFPA at the address listed below.

Laws & Regulations

Users of these documents should consult applicable federal, state, and local laws and regulations. NFPA does not, by the publication of its codes, standards, recommended practices, and guides, intend to urge action that is not in compliance with applicable laws, and these documents may not be construed as doing so.

Copyrights

This document is copyrighted by the NFPA. It is made available for a wide variety of both public and private uses. These include both use, by reference, in laws and regulations, and use in private self-regulation, standardization, and the promotion of safe practices and methods. By making this document available for use and adoption by public authorities and private users, the NFPA does not waive any rights in copyright to this document.

Adoption by Reference. Use of NFPA documents for regulatory purposes should be accomplished through adoption by reference. The term “adoption by reference” means the citing of title, edition and publishing information only. Any deletions, additions, and changes desired by the adopting authority should be noted separately in the adopting instrument. In order to assist NFPA in following the uses made of its documents, adopting authorities are requested to notify the NFPA (Attention: Secretary, Standards Council) in writing of such use. For technical assistance and questions concerning adoption of NFPA documents, contact NFPA at the address below.

For Further Information

All questions or other communications relating to NFPA codes, standards, recommended practices, and guides and all requests for information on NFPA procedures governing its codes and standards development process, including information on the procedures for requesting Formal Interpretations, for proposing Tentative Interim Amendments, and for proposing revisions to NFPA documents during regular revision cycles, should be sent to NFPA headquarters, addressed to the attention of the Secretary, Standards Council, NFPA, 1 Batterymarch Park, P.O. Box 9101, Quincy, MA 02269-9101.

For more information about NFPA, visit the NFPA website at www.nfpa.org.

Copyright © 2003, National Fire Protection Association, All Rights Reserved

NFPA 1584

Recommended Practice on the Rehabilitation of Members Operating at Incident Scene Operations and Training Exercises

2003 Edition

This edition of NFPA 1584, *Recommended Practice on the Rehabilitation of Members Operating at Incident Scene Operations and Training Exercises*, was prepared by the Technical Committee on Fire Service Occupational Medical and Health and acted on by NFPA at its November Association Technical Meeting held November 16–20, 2002, in Atlanta, GA. It was issued by the Standards Council on January 17, 2003, with an effective date of February 6, 2003.

This edition of NFPA 1584 was approved as an American National Standard on January 17, 2003.

Origin and Development of NFPA 1584

The Technical Committee on Fire Service Occupational Medical and Health has responsibility for this document. The members of the committee have developed standards in areas of incident management, occupational medical programs, fitness evaluation, fire department safety officer, and infectious disease control programs. These standards fall under the umbrella of NFPA 1500, *Standard on Fire Department Occupational Safety and Health Program*, 2002 edition.

An integral component of both an occupational safety and health program and incident scene management is an organized approach for fire department members' rehabilitation at incident scene operations.

The concept of incident scene rehabilitation has been discussed and utilized throughout the fire service in various sizes and configurations. Many departments have utilized material from the United States Fire Administration, as well as material from emergency medical services. Progressive departments have shared their "lessons learned" in the development of this document.

Technical Committee on Fire Service Occupational Medical and Health

Murrey E. Loflin, *Chair*
Virginia Beach Fire Department, VA [U]
Rep. NFPA Fire Service Section

Judy Janing, *Secretary*
IOCAD Emergency Services Group, NE [SE]
(Alt. to G. M. Sachs)

David J. Barillo, Medical University of South Carolina, SC [U]

Paul “Shon” Blake, City of Baytown Fire & Rescue Services, TX [E]

Rep. Industrial Emergency Response Working Group

Mary S. Bogucki, Yale University, CT [SE]

Anthony L. Clark, Kenton County Airport Board, OH [U]

Thomas J. Cuff, Jr., Firemen’s Association of the State of New York, NY [U]

Patricia L. Doler, Santa Clara County Fire Protection District, CA [L]

Rep. Women in the Fire Service

John F. Folan, Healthworks, NY [SE]

Sandra Kirkwood, Las Vegas Fire/Rescue, NV [U]

Dick Knopf, City of Lancaster, TX [E]

Tammy Lopes, Reno Fire Department, NV [U]

Sandra MacLean, Washington Audiology Services, Inc. WA [RT]

David J. Prezant, New York City Fire Department, NY [E]

Timothy D. Riley, City of Newport Beach Fire Department, CA [E]

Rep. International Association of Fire Chiefs

Gordon M. Sachs, IOCAD Emergency Services Group, MD [SE]

Rep. Fairfield Fire & EMS

Daniel G. Samo, ENH – OMEGA, IL [SE]

Donald F. Stewart, Hunter Medical/Fairfax County Fire & Rescue, VA [U]

Philip C. Stittleburg, LaFarge Fire Department, WI [E]
Rep. National Volunteer Fire Council

Robert M. Stratman, West Metro Fire Protection District, CO [RT]

Rep. Metropolitan State College of Denver

Andy C. Teeter, Tulsa Fire Department, OK [U]

Rep. International Fire Service Training Association

Kathy Tinios, CPS Human Resource Services, CA [SE]

Clifford H. Turen, Shock Trauma Associates, MD [SE]

Teresa Wann, Santa Ana College, CA [SE]

Don N. Whittaker, Bechtel BWXT Idaho, LLC (BBWI), ID [E]

Decker Williams, Phoenix Fire Department, AZ [E]

Alternates

Michael S. Gray, Virginia Beach Fire Department, VA [U]
(Alt. to M. E. Loflin)

Kerry J. Kelly, New York City Fire Department, NY [E]
(Alt. to D. J. Prezant)

Brian V. Moore, Phoenix Fire Department, AZ [E]
(Alt. to D. Williams)

Kristy A. Wyatt, Tulsa Fire Department, OK [U]
(Alt. to A. C. Teeter)

Nonvoting

Thomas R. Hales, National Institute for Occupational Safety & Health, OH [RT]

Stephen N. Foley, NFPA Staff Liaison

Committee Scope: This Committee shall have primary responsibility for documents on occupational medicine and health in the working environment of the fire service.

This list represents the membership at the time the Committee was balloted on the final text of this edition. Since that time, changes in the membership may have occurred. A key to classifications is found at the back of the document.

NOTE: Membership on a committee shall not in and of itself constitute an endorsement of the Association or any document developed by the committee on which the member serves.

Contents

Chapter 1 Administration	1584- 4	Chapter 6 Incident Scene and Fireground	
1.1 Scope	1584- 4	Training Rehabilitation	1584- 6
1.2 Purpose	1584- 4	6.1 Criteria for Implementation	1584- 6
Chapter 2 Referenced Publications	1584- 4	6.2 Providing Rehabilitation Operations	1584- 6
2.1 General	1584- 4	6.3 Role of Emergency Medical Services	
2.2 NFPA Publications	1584- 4	(EMS)	1584- 6
2.3 Other Publications. (Reserved)	1584- 4	6.4 Role of Members	1584- 6
Chapter 3 Definitions	1584- 4	6.5 Rehabilitation Process	1584- 6
3.1 General	1584- 4	6.6 Medical Evaluation and Treatment	1584- 7
3.2 NFPA Official Definitions	1584- 4	6.7 Company/Crew Level Rehabilitation	
3.3 General Definitions	1584- 4	(Self-Rehabilitation)	1584- 7
Chapter 4 Pre-Incident Response	1584- 5	6.8 Fluid Intake	1584- 7
4.1 General	1584- 5	6.9 Rehabilitation in the Rehabilitation	
4.2 Training and Recognition of Heat/Cold		Area	1584- 7
Stressors and Stress Symptoms	1584- 5	6.10 Member Accountability	1584- 7
4.3 Pre-Incident and Fireground Training		6.11 Work-to-Rest Ratio	1584- 7
Operations	1584- 5	6.12 Reassignment	1584- 7
Chapter 5 Rehabilitation Area Characteristics	1584- 5	6.13 Documentation	1584- 7
5.1 Area for Rehabilitation	1584- 5	Chapter 7 Post-Incident	1584- 7
5.2 Site Characteristics	1584- 6	7.1 Recovery	1584- 7
5.3 Establishing Rehabilitation Facilities	1584- 6	7.2 Monitoring for Signs of Dehydration	1584- 8
5.4 Establishing Rehabilitation Resources	1584- 6	Annex A Explanatory Material	1584- 8
		Annex B Accountability	1584-14
		Annex C Informational References	1584-14
		Index	1584-16

NFPA 1584

Recommended Practice on the Rehabilitation of Members Operating at Incident Scene Operations and Training Exercises

2003 Edition

NOTICE: An asterisk (*) following the number or letter designating a paragraph indicates that explanatory material on the paragraph can be found in Annex A.

A reference in brackets [] following a section or paragraph indicates material that has been extracted from another NFPA document. As an aid to the user, Annex C lists the complete title and edition of the source documents for both mandatory and nonmandatory extracts. Editorial changes to extracted material consist of revising references to an appropriate division in this document or the inclusion of the document number with the division number when the reference is to the original document. Requests for interpretations or revisions of extracted text should be sent to the technical committee responsible for the source document.

Information on referenced publications can be found in Chapter 2 and Annex C.

Chapter 1 Administration

1.1 Scope. This recommended practice establishes the minimum level of criteria for developing and implementing a rehabilitation process for fire department members at incident scene operations and training exercises.

1.2 Purpose. This recommended practice provides for the rehabilitation of members operating within an incident management system rehabilitation component, including but not limited to, the following:

- (1) Medical evaluation and treatment
- (2) Food and fluid replenishment
- (3) Relief from climatic conditions
- (4) Rest and recovery
- (5) Member accountability

Chapter 2 Referenced Publications

2.1 General. The documents or portions thereof listed in this chapter are referenced within this recommended practice and should be considered part of the recommendations of this document.

2.2 NFPA Publications. National Fire Protection Association, 1 Batterymarch Park, P. O. Box 9101, Quincy, MA 02269-9101.

NFPA 1500, *Standard on Fire Department Occupational Safety and Health Program*, 2002 edition.

NFPA 1561, *Standard on Emergency Services Incident Management System*, 2002 edition.

2.3 Other Publications. (Reserved)

Chapter 3 Definitions

3.1 General. The definitions contained in this chapter apply to the terms used in this recommended practice. Where terms are not included, common usage of the terms applies.

3.2 NFPA Official Definitions.

3.2.1* Approved. Acceptable to the authority having jurisdiction.

3.2.2* Authority Having Jurisdiction (AHJ). The organization, office, or individual responsible for approving equipment, materials, an installation, or a procedure.

3.2.3 Recommended Practice. A document that is similar in content and structure to a code or standard but that contains only nonmandatory provisions using the word “should” to indicate recommendations in the body of the text.

3.2.4 Should. Indicates a recommendation or that which is advised but not required.

3.3 General Definitions.

3.3.1 Advanced Life Support (ALS). Emergency medical treatment beyond basic life support level as defined by the medical authority having jurisdiction. [1500:3.1]

3.3.2* Company. A group of members having the following characteristics: (1) under the direct supervision of an officer or leader; (2) trained and equipped to perform assigned tasks; (3) usually organized and identified as engine companies, ladder companies, rescue companies, or squad companies; (4) usually operating with one piece of fire apparatus (e.g., quint, pumper, ladder truck, elevating platform, rescue, squad, or ambulance); (5) arriving at the incident scene on fire apparatus or assembling at the scene prior to assignment; (6) company configurations shall be permitted to allow for multiple apparatus that are dispatched and arrive together and continuously operate together and are managed by a single company officer.

3.3.3 Crew. A two-person team of fire fighters.

3.3.4 Emergency Incident. A specific emergency operation. [1500:3.3]

3.3.5 Emergency Medical Services. The provision of treatment — such as first aid, cardiopulmonary resuscitation, basic life support, advanced life support, and other pre-hospital procedures including ambulance transportation — to patients.

3.3.6 Emergency Operations. Activities of the fire department relating to rescue, fire suppression, emergency medical care, and special operations, including response to the scene of the incident and all functions performed at the scene. [1500:3.3]

3.3.7 Health and Safety Officer. The member of the fire department assigned and authorized by the fire chief as the manager of the safety and health program and who performs the duties and responsibilities specified in this recommended practice.

3.3.8 Hydration. A fluid balance between water lost by normal functioning and oral intake of fluids in the form of liquid and foods that contain water.

3.3.9 Incident Commander. The fire department member in overall command of an emergency incident.