

OPERATIONAL CHECKLIST

- PRE-DEPLOYMENT CONSIDERATIONS
[] MINIMAL EXCLUSION ZONE (200M)
[] WIND DIRECTION
[] MINIMAL DOWNWIND HAZARD (2000M)
[] MEDICAL SCREENING CAPABILITY (WHO:)
[] SECONDARY DEVICE SWEEP?
[] REPORT TO?
[] ECP/HAZMAT OPERATIONS LOCATION
MISSION PREPARATION
[] IC'S PRIORITIES:
1.
2.
3.
4.
5.
[] RESOURCES ON SCENE:
[] DECON
[] BACK-UP SUPPORT (HAZMAT?)
[] HAZARD MODELING (READINESS/BEE)
[] MEDICAL
[] RESEARCH/REACHBACK CAPABILITY
[] RE-SUPPLY (AIR, PPE, FOOD?)
[] PUBLIC WORK
[] LIGHTING
[] REHAB ESTABLISHED
[] AIR MONITORING / SAMPLING
[] EQUIPMENT PREPARATION:
[] OPS CHECKS
[] CALIBRATION
[] BUMP TESTS
[] PRE-START/WARM-UP
[] PPE DETERMINATION
[] KNOWN HAZARD
[] VAPOR HAZARD/VOLATILITY
[] CORROSIVITY
[] SPLASH HAZARD
[] PERCUTANEOUS
[] TOXICITY
[] REACTIVITY
[] THERMAL LEVEL:
[] DECON TYPE/LEVEL DETERMINATION
[] DRY
[] WET
[] GROSS
[] TECHNICAL

ACTION PLAN

- ISOLATION
[] DENY ENTRY / REMOVE PEOPLE
[] ESTABLISH / VERIFY ZONES
[] PROVIDE PUBLIC PROTECTION GUIDANCE
[] PROVIDE PPE DETERMINATION
[] PROVIDE RISK ASSESSMENT
NOTIFICATION
[] IDENTIFY / REQUEST ADDITIONAL ASSISTANCE (MOA/MOU)
[] COMMUNICATE WITH APPROPRIATE AGENCIES
[] COORDINATE FOR RELIEF / RESUPPLY
[] NOTIFY SUPPORT AGENCIES / ASSETS
[] PROVIDE SITUATION REPORTS (SITREPS) (IC/EOC)
[] REVIEW SITE PLANS
IDENTIFICATION
[] USE DOCUMENTATION/INCIDENT INFORMATION
[] PLACARDS, LABELS, BILL OF LADEN, NOTES
[] INTERVIEW WITNESSES / CASUALTIES
[] ENTRY/RECONSTRUCTIVE
[] LOCATE / DETECT / MONITOR
[] IDENTIFY / SCREEN
[] MARK / PHOTOGRAPH / VIDEO LOCATIONS OF MATERIALS/SAMPLES
[] REPORT STATUS (SITREP / LOC)
[] COLLECT / TRANSFER SAMPLES
[] SAMPLING
[] SAFETY
[] PACKAGE
[] LABEL
[] COLLECT
[] OVERPACK
[] CHAIN OF CUSTODY
[] SCREEN
[] SEAL
[] PASS-ON/MAINTAIN

PROTECTION

- [] CONDUCT REHEARSALS
[] ESTABLISH / ASSUME / MAINTAIN DECON
[] VERIFY PPE LEVELS
[] VERIFY / UPDATE SAFETY ASSESSMENT/RISK ASSESSMENT
[] PRE / [] POST ENTRY BRIEF
[] PRE / [] POST ENTRY MEDICAL SCREENING
HAZARD CONTROL (ALARA)
[] GAS / AIR
[] VENTILATE
[] DISPERSER
[] DILUTION
[] BLANKET
[] OTHER:
[] LIQUID / SURFACE / WATER / LEAK CONTROL
[] ABSORB
[] ADSORB
[] RETAIN
[] DAM
[] DIKE
[] PLUG
[] PATCH
[] TIGHTEN
[] CRIMP
[] TRANSFER
[] OVERPACK
[] SHUT-OFF
[] NEUTRALIZE
[] DISSOLVE
[] DISPLACE
[] REMOTE / EMERGENCY SHUT-OFFS
[] OTHER:
[] SOLID - BLANKET
[] OTHER:
[] FIRE CONTROL (CEF)
[] EXTINGUISH
[] CONTROLLED BURN
[] EXPOSURE PROTECTION, SPECIFY:
[] WITHDRAWAL
[] OTHER:

RECOVERY

- [] CLEAN-UP OVERSIGHT
[] CONSOLIDATE DECON LINE & OVERPACK
[] ITEMIZE EXPENDABLES / LEAVE BEHINDS
[] OVERSEE PACKAGING / SHIPMENT OF EQUIPMENT
[] HAZARD / SAMPLE TRANSFER OVERSIGHT
[] CONSOLIDATE REPORTS
[] RESTOCK / RESUPPLY
[] INVENTORY EQUIPMENT
[] DEBRIEF COMMANDER / IC AND SUBMIT CLOSE-OUT PACKAGE
[] CONDUCT AAR & CLOSE-OUT BRIEF
[] DEVELOP RE-DEPLOYMENT PLAN AND TIMELINE

Tactical CBRN Operations Sheet
DATE: LOCATION:
TIME: INCIDENT NAME: TYPE:
PERSONNEL: Tech: T, Ops: O
PRE-DEPLOYMENT INFORMATION: Physical State, Routes, Disposition, Source, Concentrations, Geographical Location, Indicators, Threat Characteristics, Toxicity, Volatility, Vapor Hazard, Route of Exposure/Entry, Transmissibility, Communicability, Weather, Staging Area Location, Critical Times / ICS, IC, OPS CHIEF, HazMat, MED, INCIDENT OCCURRED, 1ST RESPONDER ON SCENE, NOTES, NOTIFIED, ADVON ON SCENE, MAIN BODY ON SCENE, 1st SECTION BRIEF, 2nd SECTION BRIEF, 3rd SECTION BRIEF, 1st IC BRIEF, 2nd IC BRIEF, 3rd IC BRIEF, 1st ENTRY TIME PROJECTED / ACTUAL, 2nd ENTRY TIME PROJECTED / ACTUAL, 3rd ENTRY TIME PROJECTED / ACTUAL, 4th ENTRY TIME PROJECTED / ACTUAL, NOTES

TRUE NORTH WIND DIRECTION

ISOLATION
[] DENY ENTRY / REMOVE PEOPLE
[] ESTABLISH / VERIFY ZONES
[] PROVIDE PUBLIC PROTECTION GUIDANCE
[] PROVIDE PPE DETERMINATION
[] PROVIDE RISK ASSESSMENT
NOTIFICATION
[] IDENTIFY / REQUEST ADDITIONAL ASSISTANCE (MOA/MOU)
[] COMMUNICATE WITH APPROPRIATE AGENCIES
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[] PROVIDE SITUATION REPORTS (SITREPS) (IC/EOC)
[] REVIEW SITE PLANS
IDENTIFICATION
[] USE DOCUMENTATION/INCIDENT INFORMATION
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[] INTERVIEW WITNESSES / CASUALTIES
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[] LOCATE / DETECT / MONITOR
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PROTECTION
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[] TRANSFER
[] OVERPACK
[] SHUT-OFF
[] NEUTRALIZE
[] DISSOLVE
[] DISPLACE
[] REMOTE / EMERGENCY SHUT-OFFS
[] OTHER:
[] SOLID - BLANKET
[] OTHER:
[] FIRE CONTROL (CEF)
[] EXTINGUISH
[] CONTROLLED BURN
[] EXPOSURE PROTECTION, SPECIFY:
[] WITHDRAWAL
[] OTHER:
[] BRIEF UNIT
[] REVIEW PLANS
[] BRIEF IC/CC
RECOVERY
[] CLEAN-UP OVERSIGHT
[] CONSOLIDATE DECON LINE & OVERPACK
[] ITEMIZE EXPENDABLES / LEAVE BEHINDS
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CURRENT WEATHER CONDITIONS
Temp: Wind Dir: Speed: Humidity: Visibility:
Celling: Sunrise: Sunset:
Forecast:
Clear: Dry: Cloudy: Rain: Snow: Ice:
Next 6 hrs:
Next 12 hrs:
Next 24 hrs:
Updated:
Notes:

MEDICAL SCREENER:
Medical Monitoring:
Pre-Entry: Post Entry:
Deficiencies:
Medical Support Available:
Treatment Facility Address/Distance:
1.
2.
3.
NOTES:

PRELIMINARY AGENT ID EQUIPMENT SAMPLE 1 SAMPLE 2 SAMPLE 3 SAMPLE 4 SAMPLE 5
HAZMAT FT-IR
CD KIT (TUBES)
HazMat ID
SAM935/GR135

CASUALTY INFORMATION: AGES Health
Signs & Symptoms:
LAB PROTOCOLS:
SAMPLING EQUIPMENT:
PROCEDURES:
PACKAGING:
SCREENING:

Table with 5 columns: VEHICLE DESCRIPTION, MAXIMUM EXPLOSIVES CAPACITY, LETHAL AIR BLAST RANGE, MINIMUM EVACUATION DISTANCE, FALLING GLASS HAZARD. Rows include COMPACT SEDAN, FULL SIZE SEDAN, PASSENGER VAN OR CARGO VAN, SMALL BOX VAN, BOX VAN OR WATER/URIL TRUCK, SEMI-TRAILER.

PLACARD COLOR CODING
ORANGE - Explosive
GREEN - Non Flam. Gases
RED - Flam. Gases & Liq.
RED & WHITE - Flam. Solids
YELLOW - Oxid. & Org. Perox.
WHITE - Poisons & Infectious
BLACK & YELLOW - Radioactive
BLACK & WHITE - Corrosives

UN CLASS
9 - Miscellaneous
NFA 704 (HAZARDS)
BLUE: Health (0-4)
RED: Fire (0-4)
YELLOW: Reactivity (0-4)
WHITE: Additional Info
HAZARD INDEX
4 = SEVERE HAZARD
3 = SERIOUS HAZARD
2 = MODERATE HAZARD
1 = SLIGHT HAZARD
0 = MINIMAL HAZARD

PHONE NUMBERS
DTRA 1-703-325-2102
AFRRAT 1-210-393-6968
FBI OPCEN 1-202-324-6700
CBIRF 1-301-744-2035
CBRRF 1-410-436-6200
TEU 1-410-436-4384
CHEMTREC 1-800-424-9300
USCG RESP CENTER 1-800-424-8802
Local CST NMCC 1-703-697-6430

Incident Readings (OVERVIEW)
BACKGROUND, PFI, PF2, PF3, PF4, PF5, PF6, PF7, PF8, PF9, PF10, OTHER
LAB PROTOCOLS:
SAMPLING EQUIPMENT:
PROCEDURES:
PACKAGING:
SCREENING:

MATERIAL INFORMATION
NAME, UN, CAS, IDLH, LEL/UEL, Vapor Press, Container, Quantity

SAMPLE INFORMATION
SAMPLE NUMBER, DESCRIPTION, LOCATION, SAMPLE COLLECTOR
1. NOTES:
2. NOTES:
3. NOTES:
4. NOTES:
5. NOTES:
6. NOTES:
7. NOTES:
8. NOTES:
9. NOTES:
10. NOTES:

PERSONNEL ASSIGNMENTS
ICS REPRESENTATIVE
C2 / OPS
C2 / OPS
EQUIPMENT PREP TEAM
EQUIPMENT PREP TEAM
RESEARCH TEAM
RESEARCH TEAM
OTHER
OTHER

EMERGENCY MEDIC
POSITION, NAME, PPE, EQUIPMENT, TIME ON AIR, TIME CHECK IN, TIME OFF AIR, TIME IN REF, TIME OUT REF

EMERGENCY MEDIC
POSITION, NAME, PPE, EQUIPMENT, TIME ON AIR, TIME CHECK IN, TIME OFF AIR, SOLUTION

EMERGENCY MEDIC
POSITION, NAME, PPE, EQUIPMENT, TIME ON AIR, TIME CHECK IN, TIME OFF AIR, SOLUTION

STATUS / TIME:
[] INMARSAT: [] KU SATELLITE: [] TDIS:
[] FM: [] UNSECURE / [] SECURE [] LAN / WAN:
[] VHF / UHF: [] OTHER: [] OTHER: