

# Carroll County Fire & EMS

## MAYDAY TACTICAL WORKSHEET

Incident # \_\_\_\_\_  
 Date \_\_\_\_\_  
 Time \_\_\_\_\_  
 Incident Commander \_\_\_\_\_

**MAYDAY**  
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### SECTION 1 – INCIDENT COMMANDER      INITIAL ACTIONS

|  |   |
|--|---|
| <input type="checkbox"/> Confirm Mayday                            | Time: _____   |
| <b>Make fireground announcements:</b>                              |   |
| 1  | <b>"Command to all units, A MAYDAY has been declared on the fireground. All units must maintain radio silence unless you have a life saving message."</b> |
| 2  | <b>(Unit#) Go ahead with your Who, What, Where</b>  |
| 3  | <b>Direct the member to activate their Pass Alarm and Emergency Button</b>  |
| 4  | <b>"Command to Carroll - this talkgroup is now Command Restricted"</b>  |
| <input type="checkbox"/> Confirm w/ ECC (Additional Alarm & Medic) | _____   |
| <input type="checkbox"/> Deploy RIT w/ hoseline when needed        | _____   |
| <input type="checkbox"/> Ascertain other units in close proximity  | _____   |
| <input type="checkbox"/> Consider PAR check                        | _____   |

### SECTION 2 – INFORMATION GATHERING (FROM DISTRESSED MEMBERS)

|  | Member #1 | Member #2 | Member #3 |
|--|-----------|-----------|-----------|
| <input type="checkbox"/> WHO (Name, Unit)            | _____     | _____     | _____     |
| <input type="checkbox"/> WHAT (Nature of emergency)  | _____     | _____     | _____     |
| <input type="checkbox"/> WHERE (Last known location) | _____     | _____     | _____     |
| <input type="checkbox"/> AIR Status (EB/PASS use)    | _____     | _____     | _____     |
| <input type="checkbox"/> PROBLEMS / NEEDS            | _____     | _____     | _____     |

### SECTION 3 – COMMAND & CONTROL

### NOTES:

|  |
|--|
| <input type="checkbox"/> Assign Rescue Group Supervisor      |
| <input type="checkbox"/> Assign RIC Officer                  |
| <input type="checkbox"/> Establish Rescue Plan               |
| <input type="checkbox"/> Ensure Fire Attack Maintained       |
| <input type="checkbox"/> Request Additional Alarms/Resources |
| <input type="checkbox"/> Establish Medical Group             |
| <input type="checkbox"/> Staging Area for next alarm         |

### SECTION 4 – TRACKING

|   |       |
|---|-------|
| <input type="checkbox"/> MAYDAY Time Declared:              | _____ |
| <input type="checkbox"/> Air Supply / Status Updates Logged | _____ |
| <input type="checkbox"/> Benchmark - RIT deployed at:       | _____ |
| <input type="checkbox"/> Benchmark - Victim located at:     | _____ |
| <input type="checkbox"/> Benchmark - Victim extricated at:  | _____ |