OPS DEP/C - JDH-B3-HDS-HR-MBR

SFD - OPERATIONS

April 9, 2017

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FR: S. R. Lynch (1932) Engine 16, B-08

TO: Chief of the Fire Department

RE: ELECTRICAL / TBI INCIDENT

On December 15, 2016, I suffered an electrical injury/TBI while fighting a fire at the Woodland Park Zoo. The following is a timeline of what occurred, to the best of my knowledge, as well as my personal notes and suggestions.

While cooling the overhead to the left with a 1 ¾ hose line, an electrical panel that was approximately 6 to 10 feet away on my right side arced and hit me, sending me back off my feet approximately 15 feet. I managed to shut the bale while flying backwards. I then requested over the radio that the building be de energized and exited the building. After this point, my memory is heavily fragmented and some of what follows is supplemented by those who were present. I recall exchanging my air cylinder and, apparently, I went back into the fire building, I have no idea what I was doing, but I have been told I was repeating questions over and over and acting differently enough that medics pulled me aside to be evaluated.

While being evaluated, the medics discovered that I had an abnormal heart rhythm, which prompted them to transport me to HMC. Upon arrival to HMC there was no safety chief or any other liaison from the fire dept. there to meet me, this was later confirmed by HMC's records and personnel. I remember meeting Dr. Sayer and then being seen by a resident. After about 1 to 2 hours apparently, I was released back to full duty. I remember fragments wandering around the hospital unsupervised with an IV tube hanging from my arm bleeding on the floor. Somehow, I ended up in the medic one shack ready to go back to full duty. At which point I was instead transported to my home by the MSO.

Upon arriving home, my wife was very concerned, I remember just being hungry and wanting to go to the restaurant downstairs. When sitting down to eat, a person using their cellphone flashlight shined the light in my eyes. I told him to turn it off, including some profanity, ready to pummel him; this was way out of character for me and my wife was very concerned.

I remained home for almost the entirety of the next 2 days, progressively feeling worse until I was scheduled to go back to work. On Dec 18, 2016, I woke up, fell out of bed and had to crawl to the bathroom. The next memory I have is driving on 520 to drop my wife off at work on my way to station 16 to report for duty. I remember barely being able to stay in the lane I was driving in. I don't remember

dropping my wife off or reporting to station 16. The next memory I recall, is standing over a patient having no idea what I was supposed to be doing.

After returning to the station, I remember Lt. Carter telling me I was repeating myself. He then asked me what I remembered about the incident at the Woodland Park Zoo fire from 3 days earlier. Realizing that I had huge gaps in my memory and something was wrong, I was transported to HMC again. On arrival, there was a safety chief there to meet us. One of the staff began to ask me questions, I remember not understanding what they were saying and asking the chief if he could explain what the staff member said. At this point the chief told me "I'm just an observer". After the HMC staff left the room, the chief said I was going to be there for a while waiting for a CT scan. He began to give me instructions on what to do at which point I said I probably wasn't going to remember any of what he said so I asked him to write it down. He wrote some instructions on a piece of paper and then left. The next thing I remember after that is being in the intersection outside of the HMC ED. After that I remember calling Lt. Carter and him telling me I as still repeating myself. I hung up and called my wife who came and eventually found me at a nearby coffeeshop.

On a personal note, the fact I was discharged unsupervised twice, wandered into traffic, almost assaulted someone, drove my vehicle with my wife in the car, and treated a patient, all the while with severe cognitive deficits, I consider all these near misses. The position that this event put my wife, and those around me, in is simply unacceptable.

As a suggestion, we as a dept. need a TBI protocol. In addition to a TBI protocol, our Dept. liaisons at the ED need to know and follow the best practices for taking care of our members at all times, especially when we have members who have compromised cognitive abilities or who are in a diminished capacity to represent themselves fully.

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April 11, 2017

FR: LT C. A. Carter (2196)

Engine 34, D-3

I agree with FF Lynch's recommendation that the department develop and institute a concussion/Traumatic Brain Injury protocol. In my experience, it is difficult to self-diagnose concussions/TBI's at the time they occur. A department protocol would help us to protect our members after concussive events.

LT C. A. Carter

April 17, 2017

FR:

BC D.R. Windle (1303)

Battalion 6, B9

I would concur with the above recommendations for the development of a TBI protocol for the department. I would also recommend training and education regarding concussive/traumatic brain injuries to include the significance, identification and documentation of incidents which involve our members with potential for causing traumatic brain injuries.

72 Wil # 1303

DATE April 17, 2017

FR:

Deputy Chief Phil Jose, (1206)

Deputy One, C-1

FF Lynch recognized a deficiency in his care and that provided to other Seattle Firefighters. This same type of evaluation should probably have been completed on the members impacted by the Greenwood Natural Gas Explosion and the collision between E16 and Ladder 9. Greater awareness and a solid procedure should help improve future patient care and taking care of our own.