

2005 MEDICAL UNIT DAILY SUMMARIES

11/15/05

FIRE NAME, DATE, AND NUMBER OF VISITS / FIRE / ILLNESS

Fire Name	Blossom	Burnt River Complex	Dry Cabin	Fly	Granite Complex	Hurricane Rita	School	Turner Creek				Totals
Date	8/13-8/29	7/30-8/5	7/30-8/5	8/24-8/28	8/30-9/8	9/27-10/7	8/7-8/23	9/20-9/24				
HEAD												
Head ache	60	32	12	12	15	80	114	4				329
Common Cold	49	9	3	4	17	62	67	6				217
Head Trauma	0	0	0	0	0	0	0	0				0
Allergies, sinus	77	24	2	16	17	53	72	0				261
EAR												
External Otitis	1	0	0	0	0	1	0	0				2
Impacted Cerumen	0	0	0	1	0	0	0	0				1
Insects in ear	0	0	0	0	0	0	0	0				0
Otitis Media	1	0	0	0	0	0	0	0				1
EYE												
Superficial Injury	1	0	0	0	0	0	0	0				1
Red Eye	0	0	1	0	3	9	1	0				14
Smoke Irritation	14	4	4	0	3	0	75	0				100
Dust Irritation				3								3
Foreign Object	0	3	0	0	0	6	1	0				10
Caustic/alkali Splash	0	0	0	0	0	0	0	0				0
Penetrating Injury	0	0	0	0	0	0	0	0				0
Blunt Trauma	0	0	0	0	0	0	0	0				0
Burns	0	0	0	0	0	0	2	0				2
NOSE												
Bloody nose	0	0	0	0	0	0	2	0				2
Dry nose	0	1	0	3	2	0	25	0				31
Impact to nose	0	0	0	0	0	0	0	0				0
MOUTH												
Toothaches	15	3	0	2	0	14	12	0				46
Tooth temp repair	3	0	0	1	0	0	0	0				4
Dry socket	0	0	0	0	0	0	0	0				0
Avulsed Teeth	0	0	0	0	0	0	0	0				0
Cold Sores	0	0	0	0	0	4	5	0				9
THROAT												
Sore throat	14	6	10	2	14	40	62	2				150
Laryngitis	0	0	0	0	0	0	0	0				0
Swollen tonsils	0	0	1	0	0	0	0	0				1
LUNGS												
Acute bronchitis	0	0	0	0	0	0	0	0				0
Possible pneumonia	0	0	0	0	0	0	0	0				0
Smoke inhalation	0	0	0	0	0	0	1	0				1
CHEST												
Chest Pain	2	0	0	0	0	0	1	0				3
Shortness of breath	0	0	0	0	0	0	0	0				0
Pain on breathing	0	0	0	0	0	0	0	0				0
Trauma	0	0	0	0	0	0	0	0				0
GASTROINTESTINAL												
Upset stomach	7	7	1	1	1	22	9	1				49
Indigestion	25	6	0	0	2	10	50	2				95
Abdominal pain	2	0	0	0	0		0	0				2
Nausea/Vomit/Flu	1	1	0	0	1	10	0	0				13
Acid reflex	0	0	0	1	0	0	2	0				3
Constipation	3	0	0	0	1	0	3	0				7
Diarrhea	1	3	1	2	0	8	0	1				16
Gastroenteritis	0	0	0	1	0	0	0	0				1
Hemorrhoids	0	0	1	0	0	2	1	0				4

GENTOURINARY

Cramps	0	1	0	0	0	0	1	1			3
Jock Itch	7	3	1	2	0	0	14	0			27
Painful menstruation	0	0	0	0	0	14	0	0			14
Urinary tract infection	0	0	0	0	0	0	0	0			0
Vaginal bleeding	0	0	0	0	0	0	0	0			0
Vaginitis	0	0	0	0	0	0	0	0			0
Yeast infection	0	0	0	0	0	0	0	0			0

FEET

Athletes foot	40	18	14	9	8	30	61	0			180
Ingrown Toenail	3	0	1	0	0	0	3	0			7
Corns, warts, callous	0	0	0	0	0	0	1	0			1
Hot Feet				8	0	0					8
Trauma	0	0	0	0	0	0	0	0			0

BURNS

Chemical	0	0	0	0	0	0	0	0			0
Electrical	0	0	0	0	0	0	0	0			0
Inhalation	0	0	0	0	0	0	0	0			0
Thermal	0	0	3	0	2	11	8	1			25

SKIN

Blisters	176	104	18	6	6	79	179	1			569
Lacerations	36	14	6	1	9	48	37	4			155
Avulsion				1							1
Abrasions/contusions	7	3	3	1	1	4	6	3			28
Rashes	19	16	14	3	2	63	18	1			136
Scabies and Lice	0	0	0	0	0	0	3	0			3

MUSCULOSKELETAL

Ankle	8	8	0	0	6	3	8	1			34
Knee	32	9	0	2	2	9	15	1			70
Sore Muscles/Joints	101	15	5	5	5	44	53	6			234
Back Pain	23	12	0	6	6	13	16	6			82
Sprains/Strains	9	3	1	0	2	2	3	0			20
Neck/Shoulder	0	0	0	0	4	12	6	0			22
Spinal Trauma	0	0	0	0	0	0	0	0			0
Fractures/Dislocations	0	0	0	0	0	1	0	0			1

POISONS

Ingested	0	0	0	0	0	0	0	0			0
Inhaled	0	0	0	0	0	0	3	0			3
Plant	88	0	0	1	1	16	6	0			112

STINGS and BITES

Bug Bites	15	6	3	0	0	61	1	0			86
Bee Stings	13	2	0	12	10	0	26	2			65
Snake	0	0	0	0	0	0	0	0			0
Spider	2	0	0	0	0	1	0	1			4

MISCELLANEOUS

Diabetic						1					1
Dizziness	0	0	0	1	0		0	0			1
Seizures	0	0	0	0	0		0	0			0
Heat /Dehydration	0	0	0	2	0	3	1	0			6
Hypertensive Emer.	1	0	0	0	0	1	0	0			2
Sliver Removal	4	3	3	2	0	4	0	1			17
Suture Removal	0	0	0	0	0	0	0	0			0
Tick Removal	0	0	3	0	0	0	0	0			3
Insomnia	7	0	0	7	0	22	0	0			36
Infected Hang Nail			1		0	0					1
Ear Abcess			3		0	0					3
Abcess (butt)			1		0	0					1
Carple Tunnel Prevent			1		0	0					1
Wound care						1					1
Preventative	37		11	293		25	1397	0			1763

Daily Totals	904	316	128	411	140	789	2371	45	0	0	5104
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