

STATE FIRE MARSHAL'S OFFICE

Firefighter Fatality Investigation



Investigation Number 05-265-03

Brandon Scott Phillips

Keller Fire Department
March 30, 2005

Texas Department of Insurance
Austin, Texas

TABLE OF CONTENTS

Executive Summary

Executive Summary	3
-------------------------	---

The Investigation

Introduction	3
Origin and Cause Investigation.....	4
Building Structure and Systems	4
Death Investigation	4
Personal Protective Equipment Evaluation.....	4
Medical Background of Firefighter	4

Findings and Recommendations

Findings and Recommendations	5
------------------------------------	---

TEXAS DEPARTMENT OF INSURANCE STATE FIRE MARSHAL'S OFFICE AUSTIN, TEXAS

Brandon Scott Phillips Firefighter Fatality Investigation

Keller Fire Department
Investigation Number 05-265-03
March 30, 2005

Executive Summary

On March 29, 2005, 26-year-old Keller Fire Department Firefighter Brandon Scott Phillips was assigned to the Mobile Intensive Care Unit (MICU) at Keller Fire Department Station #3. Mr. Phillips got off duty at approximately 4:30 PM on the same date. Mr. Phillips went to his residence, changed clothing to go jogging, and collapsed at approximately 6:18 PM while running. Mr. Phillips was transported to Baylor Medical Center in Grapevine and, subsequently flown to Baylor Medical Center in Dallas where he died during surgery to repair a dissecting aortic aneurysm on March 30, 2005.

Introduction

The Texas State Fire Marshal's Office (SFMO) was notified of the death on March 31, 2005. Investigator Clinton Williams was assigned the firefighter fatality investigation of Keller Fire Department Firefighter Brandon Scott Phillips. Investigator Williams traveled to Keller on April 1, 2005 and completed the investigation.

The SFMO commenced this Firefighter fatality investigation under the authority of Texas Government Code Section 417.0075. The statute requires SFMO to investigate the circumstances surrounding the death of the firefighter, including the cause and origin of the fire, the condition of the structure, and the suppression operation, to determine the factors that may have contributed to the death of Firefighter Phillips. The State Fire Marshal is required to coordinate the investigative efforts of local government officials and may enlist established fire service organizations and private entities to assist in the investigation.

Origin and Cause Investigation

This was not a firefighting incident investigation.

Building Structure and Systems

No buildings or structures were involved in the fatality.

Investigation of the Death of the Firefighter

On March 29, 2005, 26-year-old Firefighter/Paramedic Brandon Scott Phillips was working an extra (overtime) shift for the Keller Fire Department on the Mobile Intensive Care Unit (MICU) (ambulance) as a paramedic. Mr. Phillips worked a 24-hour shift on March 24, 2005 and returned to duty on March 29 for this overtime shift. His assigned shift is the "C" shift and the overtime shift he was working was on the B shift. The normal work schedule for Keller firefighters is 24 hours on and 48 hours off.

On March 29, 2005, Firefighter/Paramedic Phillips was assigned as the driver of the MICU unit. Phillips was working with Firefighter/Paramedic Kevin Lindsey. The MICU unit worked three calls during this shift.

Prior to leaving his shift, Mr. Phillips was asked to assist with picking up a new clothes dryer for his station, Station #2. Mr. Phillips and Mr. Lindsey went to the store and purchased the dryer, weighing approximately 80 lbs, for Station #2. According to Mr. Lindsey, he and Mr. Phillips loaded the dryer into the back of Mr. Lindsey's ¾ ton pickup and took the dryer to Station #2. Mr. Lindsey stated that he and Mr. Phillips unloaded the dryer at the station. Mr. Phillips then changed clothes and departed the station at approximately 4:30 PM.

On March 29, 2005, after arriving at his residence, Mr. Phillips went for a jog and collapsed. An ambulance was notified and transported Mr. Phillips to Baylor Medical Center Grapevine. After initial observation it was determined that Mr. Phillips required immediate surgery to repair a dissecting aortic aneurysm and he was flown by helicopter ambulance to Baylor Medical Center Dallas. Phillips died during surgery to repair the aneurysm on March 30, 2005.

Personal Protective Equipment Evaluation

Personal protective equipment was not involved in this incident.

Medical Background of Victim

On April 1, 2005, Investigator Williams met with Firefighter/Paramedic Kevin Lindsey. Mr. Lindsey was Mr. Phillips' partner on the last shift that he worked on March 29, 2005.

Mr. Lindsey stated that Mr. Phillips did not complain of any problems during the shift or state that anything was bothering him.

On April 5, 2005, Investigator Williams obtained the Hugley Hospital medical records for Mr. Phillips. The records contain information on his last exercise stress test taken in February 2005. According to the documents that Phillips filled out, the only medical condition that he had was asthma. (According to Mr. Phillips' wife, it was only during childhood). Mr. Phillips reported a family medical history of hypertension and aneurysm. No other medical history was indicated.

On April 7, 2005, Investigator Williams spoke with Mr. Phillips' wife, Denise Phillips. Ms. Phillips stated that Mr. Phillips had not complained of any problems or pains prior to his collapse. Ms. Phillips stated that on the day he collapsed he had come home from work, played in the yard with his children and then decided to take a jog. Ms. Phillips stated that she was notified by someone of his need of assistance. Ms. Phillips went to his location. Ms. Phillips stated that she spoke with Mr. Phillips who told her that, as he was jogging, he felt a "pop" but did not state where and that his legs started tingling and got warm. Mr. Phillips told Ms. Phillips that his legs hurt and that he could barely move. Ms. Phillips stated that Brandon had told her that when he felt the "pop" he fell to the ground and had to crawl from behind the alley to the street where he was able to flag someone down to call for help. Ms. Phillips stated that Mr. Phillips was an avid jogger and rode a mountain bike regularly.

Findings and Recommendations

The following findings of fact and recommendations are based upon nationally recognized consensus standards for the fire service and are excerpted from published investigation reports provided by the Centers for Disease Control's National Institute for Occupational Safety and Health. While it is unlikely that the following recommendations could have prevented the Firefighter's death, the State Fire Marshal's Office offers these recommendations to reduce the risk of on-the-job heart attacks and sudden cardiac arrest among fire fighters.

All fire departments should be aware of the content of the standards and may choose to develop programs based on them to increase the level of safety for fire department personnel.

- *Provide mandatory pre-placement and annual medical evaluations to all fire fighters consistent with NFPA 1582, Standard on Comprehensive Occupational Medical Program for Fire Departments to determine their medical ability to perform duties without presenting a significant risk to the safety and health of themselves or others.*

- *Perform an annual physical performance (physical ability) evaluation to ensure fire fighters are physically capable of performing the essential job tasks of structural fire fighting.*
- *Ensure that fire fighters are cleared for duty by a physician knowledgeable about the physical demands of fire fighting, the personal protective equipment used by fire fighters, and the various components of NFPA 1582, Standard on Comprehensive Occupational Medicine Program for Fire Departments.*