



DEPARTMENT OF THE ARMY
HEADQUARTERS, UNITED STATES ARMY FIRES CENTER OF EXCELLENCE AND FORT SILL
455 NW MCNAIR AVENUE, SUITE 100
FORT SILL, OKLAHOMA 73503

REPLY TO
ATTENTION OF

ATZR-C

15 August 2016

MEMORANDUM FOR SEE DISTRIBUTION

SUBJECT: Heat Illness Investigation and Reporting, CG Policy Memo 16-03

1. References:

- a. TB MED 507, Heat Stress Control and Heat Casualty Management, 7 March 03.
- b. TRADOC REG 350-29, Prevention of Heat and Cold Casualties, 6 July 2012.
- c. Army Regulation 385-10, Army Safety Program, 27 November 2013.
- d. Memorandum, HQ TRADOC, ATBO-M, 3 February 14, Subject: Heat Illness Prevention Program 2014.
- e. ALARACT 175/2014, 011622Z JUL 13, Subject: Heat Illness Prevention for 2014 Heat Season.

2. Purpose. To provide guidance for the investigation and reporting of heat illness to all Fires Center of Excellence, Fort Sill organizations, and tenant organizations on Fort Sill.

3. General. Heat illness is a serious medical condition that requires immediate action and treatment for the life, safety, and health of personnel. Equally important is the immediate investigation and reporting of any occurrence to provide insight and lessons learned for future mitigation strategies.

4. Policy. All cases of heat illness will be thoroughly investigated and promptly reported by the experiencing organization. The organization's senior leader, in the grade of O6, will personally review each case of military or civilian heat illness experienced. Within 24 hours the senior leader will provide an incident report to the Commanding General describing the category of heat illness, prevention taken prior to incident, root cause, corrective action, and current disposition. All cases of heat illness will be reported to the Fort Sill Safety Office via the on-line accident reporting system ReportIt. Non-TRADOC organizations will provide the safety office a courtesy copy of their accident report. To ensure accurate reporting and collaboration between medical and safety personnel, Reynolds Army Community Hospital and associated clinics will provide a weekly listing of military/civilian recorded heat illness to the Fort Sill Safety

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Office. This listing will include name, rank, organization, date treated, and category of heat illness.

5. Additional guidance for heat illness reporting is contained in ALARACT 175/2014 para 3.B.2.

6. I expect all Soldiers, leaders, and Department of the Army Civilians to stay engaged and plan accordingly to prevent heat illness in your organization.

7. Expiration. This Fort Sill Policy Memorandum supersedes CG Policy Memorandum 14-03 Heat Illness Investigation and Reporting dated 17 September 2014. This policy will remain in effect until superseded or rescinded.

8. Safety office point of contact is Mr. John Cordes at 442-4701 or john.e.cordes.civ@mail.mil.



BRIAN J. MCKIERNAN
Major General, USA
Commanding

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