
Standard Administrative Policies / Standard Operating Guidelines

Initials	Date	<i>Please Review Online and Initial Each of The Following</i>
_____	___/___/___	ADM 01-001 (Chain of Command)
_____	___/___/___	ADM 01-002 (Standard of Conduct)
_____	___/___/___	ADM 01-003 (Career Call-Back)
_____	___/___/___	ADM 01-004 (E-Mail)
_____	___/___/___	ADM 01-005 (Attendance/Tardy)
_____	___/___/___	ADM 01-006 (Moonlighting)
_____	___/___/___	ADM 01-007 (Staffing)
_____	___/___/___	ADM 01-008 (Career Staff at the Station)
_____	___/___/___	ADM 01-009 (Equipment and Uniform)
_____	___/___/___	ADM 01-010 (Volunteer Training)
_____	___/___/___	ADM 01-011 (Grooming Standards)
_____	___/___/___	ADM 01-012 (Conflict of Interest)
_____	___/___/___	ADM 01-013 (Junior Firefighter)
_____	___/___/___	ADM 01-014 (COVID-19 Return to Work)
_____	___/___/___	ADM 02-001 (Tobacco Use Policy)
_____	___/___/___	ADM 02-002 (Telephones and Usage)
_____	___/___/___	ADM 02-003 (Sleeping Facilities)
_____	___/___/___	ADM 02-004 (Apparatus Bay Doors)
_____	___/___/___	ADM 02-005 (Public Access Policy)
_____	___/___/___	ADM 02-006 (Drug Use Policy)
_____	___/___/___	ADM 02-007 (Computer Use)
_____	___/___/___	ADM 03-001 (Career Schedule)
_____	___/___/___	ADM 03-002 (Vacation)
_____	___/___/___	ADM 03-003 (Shift Trades)
_____	___/___/___	ADM 03-004 (Mandatory Overtime)
_____	___/___/___	ADM 03-005 (Employee Time Log)
_____	___/___/___	ADM 03-006 (Sick Time)
_____	___/___/___	ADM 04-001 (Fueling of Vehicles)
_____	___/___/___	ADM 04-002 (Inspection of Vehicles)
_____	___/___/___	ADM 04-003 (Out-Of-Service Vehicles)
_____	___/___/___	ADM 04-004 (Care of Apparatus)
_____	___/___/___	ADM 04-005 (Truck 1)
_____	___/___/___	ADM 04-006 (ATV 1 & 2)
_____	___/___/___	ADM 04-007 (Seatbelt Use)
_____	___/___/___	ADM 04-008 (Squad 1)
_____	___/___/___	ADM 04-009 (Tire Chains)
_____	___/___/___	ADM 05-001 (Establishing SAPs & SOGs)
_____	___/___/___	ADM 05-002 (Drug Free Workplace)
_____	___/___/___	ADM 05-003 (End of Shift Report)
_____	___/___/___	ADM 05-004 (Daily Check Sheet)
_____	___/___/___	ADM 05-005 (Non-Department Observers)
_____	___/___/___	ADM 05-006 (Structural Helmets)

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_____	___/___/___	ADM 05-007 (Unmanned Station)
_____	___/___/___	ADM 05-008 (QM Reporting)
_____	___/___/___	ADM 05-009 (Requests for Training)
_____	___/___/___	ADM 05-010 (Patient Care Reports)
_____	___/___/___	ADM 05-011 (Placing Equipment in Service)
_____	___/___/___	ADM 05-012 (Fire Quality Assurance)
_____	___/___/___	ADM 05-013 (Augusta County Mutual Aid)
_____	___/___/___	ADM 05-014 (Health Record Disclosure)
_____	___/___/___	ADM 05-015 (Response Area)
_____	___/___/___	ADM 05-016 (Nelson County Mutual Aid)
_____	___/___/___	ADM 05-017 (Transferring Quarters)
_____	___/___/___	ADM 05-018 (HIPAA Training)
_____	___/___/___	ADM 05-019 (News Media Interaction)
_____	___/___/___	ADM 05-020 (PHI to Law Enforcement)
_____	___/___/___	OPER 01-001 (Driver Eligibility)
_____	___/___/___	OPER 01-002 (Ski Season Transfer)
_____	___/___/___	OPER 01-003 (Vehicle Operations)
_____	___/___/___	OPER 01-004 (Warning Devices)
_____	___/___/___	OPER 01-005 (Backing Procedures)
_____	___/___/___	OPER 01-006 (Incident Management)
_____	___/___/___	OPER 01-007 (Incident Command Procedures)
_____	___/___/___	OPER 01-008 (Transfer of Command)
_____	___/___/___	OPER 01-009 (Vehicle Incidents)
_____	___/___/___	OPER 01-010 (EMS Response Plan)
_____	___/___/___	OPER 01-011 (Search and Rescue)
_____	___/___/___	FIRE 02-001 (Sprinkler Systems)
_____	___/___/___	FIRE 02-002 (LP Gas Leaks)
_____	___/___/___	FIRE 02-003 (PPE)
_____	___/___/___	FIRE 02-004 (Two In / Two Out)
_____	___/___/___	FIRE 02-005 (Hose Packing)
_____	___/___/___	FIRE 02-006 (Vehicle Fires)
_____	___/___/___	FIRE 02-007 (Alarm Activations)
_____	___/___/___	FIRE 02-008 (Structure Calls)
_____	___/___/___	FIRE 02-009 (Air Packs/SCBA)
_____	___/___/___	FIRE 02-010 (Mutual Aid Requests)
_____	___/___/___	FIRE 02-011 (Automatic Aid)
_____	___/___/___	FIRE 02-013 (Service Hose Testing)
_____	___/___/___	FIRE 02-014 (Hazardous Material)
_____	___/___/___	FIRE 02-015 (Filling Air Bottles)
_____	___/___/___	FIRE 02-016 (CO Detectors)
_____	___/___/___	FIRE 02-017 (Accountability)
_____	___/___/___	FIRE 02-018 (Compressed Air Foam)
_____	___/___/___	FIRE 02-019 (Privately Owned Vehicles)
_____	___/___/___	FIRE 02-020 (Fire Investigator Notification)

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Initials **Date** *Please Review Online and Initial Each of The Following*

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|-------|-------------|--|
| _____ | ___/___/___ | FIRE 02-021 (On-Scene Fire Operations) |
| _____ | ___/___/___ | EMS 03-001 (Aeromedical Services) |
| _____ | ___/___/___ | EMS 03-002 (Patient Care Protocols) |
| _____ | ___/___/___ | EMS 03-003 (ALS Transport Compliance) |
| _____ | ___/___/___ | EMS 03-004 (Patient Restraint) |
| _____ | ___/___/___ | EMS 03-005 (Drug Box Exchange) |
| _____ | ___/___/___ | EMS 03-006 (Status Checks) |
| _____ | ___/___/___ | EMS 03-007 (RSI Program) |
| _____ | ___/___/___ | EMS 03-008 (Infection Control) |
| _____ | ___/___/___ | EMS 03-009 (Medical Waste) |
| _____ | ___/___/___ | EMS 03-010 (Distress Call) |
| _____ | ___/___/___ | EMS 03-011 (Medication Administration) |
| _____ | ___/___/___ | EMS 03-012 (MCI Trailer Response) |
| _____ | ___/___/___ | EMS 03-013 (MCI Response – ICS) |
| _____ | ___/___/___ | EMS 03-014 (Transport Deceased) |
| _____ | ___/___/___ | EMS 03-015 (Continuing Education) |
| _____ | ___/___/___ | EMS 03-016 (AutoPulse Usage) |
| _____ | ___/___/___ | EMS 03-017 (Zoll X-Series) |
| _____ | ___/___/___ | EMS 03-018 (IV Warmers) |
| _____ | ___/___/___ | EMS 03-019 (Med Security & Storage) |
| _____ | ___/___/___ | COM 04-001 (Radio Procedures) |
| _____ | ___/___/___ | COM 04-002 (Radio Decorum) |
| _____ | ___/___/___ | COM 04-003 (Primary Frequency) |

By signing below you are acknowledging that you have read and understand all Administrative and Operational guidelines set forth by the administration of Wintergreen Fire & Rescue. Please submit a signed copy to the Chief of EMS Operations to be placed in your file.

Name (Print): _____

Signature: _____ Date: ___/___/___