

# ROCO RESCUE FROM FALL PROTECTION PREPLAN

Area Designation:	Location:
-------------------	-----------

**Staging Area:**

<b>Category:</b> <input type="checkbox"/> Non-IDLH <input type="checkbox"/> IDLH (Pre-Rigging for Rescue is Recommended)	<b>Type:</b> Elevated <input type="checkbox"/> YES <input type="checkbox"/> NO Congested <input type="checkbox"/> YES <input type="checkbox"/> NO	<b>Means to Summon Rescue Team:</b> <input type="checkbox"/> Phone <input type="checkbox"/> Intercom <input type="checkbox"/> Audible Signal <input type="checkbox"/> Pager <input type="checkbox"/> Radio <input type="checkbox"/> Other (Please Specify) _____
--	---	---

**Method of Rescue:**

<input type="checkbox"/> Confirm that rescue equipment is inventoried and secured	Pre-rigging required? <input type="checkbox"/> YES <input type="checkbox"/> NO
---	--

Hauling System required? <input type="checkbox"/> YES <input type="checkbox"/> NO	Lowering System required? <input type="checkbox"/> YES <input type="checkbox"/> NO
Lowering Area (describe) _____	

**Anchorage:**     Beam     Truss     Tripod     Stairwell     Anchored Steel Pipe     Support Column  
 Other (describe) \_\_\_\_\_

**GOAL:** To ensure a timely rescue (6 minutes or less for verbal or physical contact) of worker that is suspended by PFA, or has fallen to an inaccessible level that requires vertical rescue.

- Hierarchy of Rescue:**
1. Self-Rescue
  2. Assisted Non-technical Rescue
  3. Assisted Rescue using pre-built rescue systems
  4. Technical Rescue

Rescue Equipment Requirements (Indicate Quantity Needed)			
	Anchor Connector(s)	Carabiners	Pulleys
	Manual Rope Grab(s)	Gotcha Pole/First-up Pole	Rescuer's PPE <i>(See Fall Hazard Survey Report)</i>
	Pre-engineered Rescue System	SRL Rescue Device	
	Vertical Lifeline (Rescuer A/R)	Edge Roller	

Rescue Equipment Requirements (Indicate Quantity Needed)	
Spinal Immobilization:	Stretcher: <input type="checkbox"/> SKED <input type="checkbox"/> STOKES
Cervical Collar	Medical Kit

ADDITIONAL PPE: (See Fall Hazard Survey)

**Rescue Personnel (Last name, first initial)**  
*NOTE: If more than one name listed, list in order of primary responsibility.*

First Rescuer(s): \_\_\_\_\_

Rigger:	Team Leader:	Top Watch:
Back-Up Rescuer:	Safety Officer:	Bottom Watch:
Competent Person:		Phone #:
Report Completed By:		Date:



# ROCO RESCUE FROM FALL PROTECTION PREPLAN

Description / Plan of Action:

Sketch or Diagram: