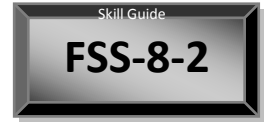




# Kitsap County Training & Safety Officers

## Skill Guide



### Transfilling an SCBA

Name: \_\_\_\_\_  
Date: \_\_\_\_\_

**Description:** This Skill Guide is intended to instruct and/or evaluate a RIT, who has located, assessed, and determined the needs of a downed firefighter.

Related Instructor Guide:

Performance Standards:

<b>Transfilling</b>					
Objectives		P	F		
1.	Locate and assess downed firefighter. Perform a 360 around firefighter if partner's location is unknown.				
2.	Shut off PASS device. Communicate to IC.				
3.	<table border="1" style="width: 100%; border-collapse: collapse; margin: 0;"> <tr> <td style="width: 50%; padding: 2px;">Firefighter Conscious</td> <td style="width: 50%; padding: 2px;">Firefighter Un-conscious</td> </tr> </table>	Firefighter Conscious	Firefighter Un-conscious		
Firefighter Conscious	Firefighter Un-conscious				
4.	Determine need for air.				
4a	If unconscious open Emergency Bypass on downed firefighters regulator.				
5	Open RIT air pack, unpack age transfill line				
5a	Locate transfill nipple near main cylinder valve on downed firefighters SCBA. Note: Nipple will be within 4" of main cylinder valve per WAC 296-305				
6.	Open RIT pack air bottle Main cylinder valve				
7.	Push transfill line onto nipple and "counterpull" once on				
8.	Once transfill complete –when both RIT pack and downed firefighters bottles read the same amount of air- remove transfill line.				
9.	Package patient, convert SCBA to harness, and prepare to move.				
10	Note: if suspected prolonged extrication time keep RIT pack transfill line attached to downed firefighters transfill nipple. If extrication is not prolonged disconnect transfill line and leave RIT air pack. Determine appropriateness of rapid removal				
<b>Performance Outcome;</b> Working in a simulated IDLH atmosphere with varying degrees of visibility a RIT will be able to locate, assess, and transfill air form a RIT air pack to a downed firefighters SCBA. Maintain Accountability and Intergrity					

Evaluator Comments: \_\_\_\_\_

Evaluator Signature: \_\_\_\_\_



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