CARVER FIRE DEPARTMENT

Standard Operating Guidelines

Section 4.09 – Carbon Monoxide Response **June 15, 2013**

1.0 PURPOSE

The purpose of this guideline is to establish a process of determining readings of carbon monoxide with our current meters

1.1 SCOPE

All responses for CO meter sounding or suspicion of high levels of carbon monoxide.

1.2 CO METER PROCEDURE

CARBON MONOXIDE IS COLORLESS, ODORLESS, AND SLIGHTLY LIGHTER THAN AIR

01. Zero CO meter outside of the suspect environment, in fresh air.

02. Question the occupants regarding sickness of family members, animals, etc.

03. Initiate a survey of the premises with meter(s) to determine if CO is present. Levels above 0 - PPM warrant a detailed analysis and isolation of the source.

04. Levels of 35-PPM and above warrant evacuation of the occupants as well as full SCBA use for all Fire Department personnel operating within the IDLH atmosphere.

05. Observe all fuel burning appliances while in operation to determine the source of the CO problem. Examples: gas/propane stove, dryer, furnace, hot water heater, vented/non-vented fire place, wood stoves, coal stoves, pellet stoves, etc. Also consider attached garages, automobile exhaust, barbecue grilles, etc.

06. Upon determining the source, and if not working properly, shut it down. Isolate power and fuel to the appliance. Inform the owner as to what has been done and advise them not to use the defective appliance until it has been repaired/replaced by a qualified person.

07. Ventilate the building to zero readings and confirm that CO detectors are operational before terminating the incident.

08. DOCUMENT THE ENTIRE INCIDENT ON THE CO CHECKLIST AND ATTACH IT TO THE INCIDENT REPORT.

Carbon Monoxide Checklist

Location of Incident: _____ Date: _____

Quick Checklist

Headache	Yes_____	No_____
Fatigue	Yes_____	No_____
Nausea	Yes_____	No_____
Dizziness	Yes_____	No_____
Confusion	Yes_____	No_____
Are any members of the household feeling ill?	Yes_____	No_____
Do you feel better when away from the house?	Yes_____	No_____

Since the detector's alarm went off, what have you done?_____

Shut off carbon monoxide sources? Yes_____ No_____

If Yes, which ones? _____

Let in fresh air? Yes_____ No_____

If Yes, how and for how long? _____

PPM Acceptable Yes_____ No_____ PPM Reading_____

Source Checklist	Location	PPM Reading
Chimney: Clogged flue, Blocked opening	_____	_____
Fireplace: Gas or Wood	_____	_____
Portable Heater: Missions	_____	_____
Gas Refrigerator:	_____	_____
Kitchen Stove:	_____	_____
Cook Top Vent:	_____	_____
Gas Dryer:	_____	_____
Water Heater: Chimney Pipe	_____	_____
Furnace: Oil/Gas: Leaking flue pipe	_____	_____
Barbeque Grill: In enclosed area?	_____	_____
Car Garage: Running/Started recently	_____	_____
Operating Fireplace: HVAC on, Possible backflow	_____	_____

Name of individual handling CO Monitor: _____

Officer Completing Checklist: _____

On Call Professionals Serving Carver with Pride