



TWENTY-FIRST ANNUAL

# HAZ MAT SEMINAR



**FEBRUARY 21-23, 2014**  
**ACADEMY OF FIRE SCIENCE**  
**MONTOUR FALLS, NY**

TWENTY-FIRST ANNUAL

# HAZMAT

SEMINAR

FEB. 21-23  
2014

## AGENDA

COMMENCING FRIDAY AT 1PM

### Workshop Topics & Presenters:

- Saint Mary's Hospital – Unknown Substance Event (Keynote) – Tim Miller, Montgomery County Hazmat
- CAMEO – Tim Wixom, EPA Certified Instructor
- Campus Hazmat Response Considerations – Paul Otenti, Paul Smiths College
- Chemical Protective Clothing Selection, Gimmies and Gotcha's – Dan Bowen, DuPont
- Real World Hazmat Lessons Learned – Barry Lindley, DuPont
- 'So You Really Think You're Prepared...?' – Fred Cowie
- Compressed Modular Emergency Response Radiological Transportation Training – Department of Energy
- Technician Modular Emergency Response Radiological Transportation Training - Department of Energy
- Effective Chemical Risk Management Project - Chris Jimenez, Environmental Protection Agency
- Railroad Realities – Glen Rudner, Instructor - Association of American Railroads
- Chlorine C Kit Review and Practical Skills – Ron Dunn, Bureau Chief – NY State Hazmat Bureau (Retired)
- Civil Support Team Hands-on Workshop – Civil Support Team Members
- 'What's Changed?' (Closing) – LTC Tom Benton, 2nd CST and LTC Jody Lupo, 24th CST

## HAZMAT

### COMMEMORATIVE T-SHIRTS FOR SALE!\*

Send an email to:

[KArsenault@dhses.ny.gov](mailto:KArsenault@dhses.ny.gov)

to place an order. Indicate in the email your name, phone number, size, and quantity of shirts you wish to order.

Shirts can be picked up and paid for at the Academy Bookstore during the Training Program weekend.

Deadline for ordering T-shirts is January 31, 2014



FRONT



BACK

**\* Note: These shirts are pre-order only! Extra shirts will not be printed, so order now!**



# REGISTRATION FORM

## FIRE ACADEMY AND REGIONAL TECHNICAL RESCUE



New York State Academy of Fire Science  
600 College Ave., Montour Falls, NY 14865-9634  
(607) 535-7136; Fax: (607) 535-4841

### PERSONAL INFORMATION

### SPONSORING ORGANIZATION

NAME (Last, first, MI) \_\_\_\_\_

TRAINING IDENTIFICATION NUMBER \_\_\_\_\_

HOME ADDRESS (Street, PO Box) \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

CHECK IF NEW ADDRESS     MALE     FEMALE

DAYTIME PHONE \_\_\_\_\_ EVENING PHONE \_\_\_\_\_

FAX # \_\_\_\_\_ E-MAIL ADDRESS \_\_\_\_\_

FIRE DEPARTMENT ID # \_\_\_\_\_ COUNTY \_\_\_\_\_

SPONSORING ORGANIZATION \_\_\_\_\_

STREET ADDRESS, PO BOX \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

FD PHONE# \_\_\_\_\_ FD E-MAIL or FAX \_\_\_\_\_

NAME/TITLE - HEAD OF THE SPONSORING AGENCY \_\_\_\_\_

SIGNATURE - HEAD OF THE SPONSORING AGENCY \_\_\_\_\_

Date \_\_\_\_\_

**FIRE ACADEMY**    COURSE CODE # \_\_\_\_\_    COURSE TITLE \_\_\_\_\_    DATES: \_\_\_\_\_

01-09-0036                      Hazardous Materials Seminar                      Feb 21-23, 2014

#### COURSE REGISTRATION - PAYMENT DUE WITH REGISTRATION FORM

*Registration Fee is MANDATORY AND NONREFUNDABLE*

NYS Resident - \$25     Out-of State - \$50

Materials Fee - \$5

#### ACADEMY ACCOMMODATIONS - PAYABLE UPON ARRIVAL

Resident – includes Meals & Lodging - \$84.00

Commuter – includes breakfast & lunch - \$20.00

Commuter dinner - \$9/day (optional)

#### REGISTRATION, MATERIAL AND ACCOMMODATIONS FEES:

Registration Fee (include w/registration)                      \$ \_\_\_\_\_

Materials Fee (if applicable – payable upon arrival)                      \$ 5.00

Accommodations Fee (payable upon arrival)                      \$ \_\_\_\_\_

Optional commuter dinner(s)                      \$ \_\_\_\_\_

**Total enclosed:** \$ \_\_\_\_\_

**Balance due upon arrival:** \$ \_\_\_\_\_

Reasonable accommodation request: \_\_\_\_\_

Share room with: \_\_\_\_\_

#### PAYMENT METHOD

Make checks, money orders & vouchers payable to:  
*Academy of Fire Science*

Check                       Money Order

Signed Voucher                       Signed Purchase Order

Other (specify) \_\_\_\_\_

VISA     MasterCard    Total Charge: \$ \_\_\_\_\_

Card #   

Expiration Date   /

Signature \_\_\_\_\_

Please review the application to make certain it is complete and the required payment and prerequisite proof are enclosed.  
This form is on the web at [www.dhSES.ny.gov/ofpc](http://www.dhSES.ny.gov/ofpc) • MAIL OR FAX APPLICATION TO FIRE ACADEMY ONLY

## SPECIAL OFFERINGS

The following two special offerings will be presented by the Department of Energy as FULL DAY offerings.

### REGISTRATION FOR CMERRTT OR TMERRTT:

1. Send in completed REGISTRATION FORM directly to the Academy to secure your registration to the Seminar, lodging, meals, and payment.
2. Send completed TRAINING AUTHORIZATION LETTER (attached) by February 14th to fax # 518-474-3240 c/o Special Operations FPS Bruce Oliphant. Please note CMERRTT or TMERRTT in Course Title box.
3. Prerequisites for C/TMERRTT will be checked and confirmations will be sent to the registrant prior to the Seminar.
4. Questions can be fielded via [boliphant@dhses.ny.gov](mailto:boliphant@dhses.ny.gov) or 518-380-0624.

**CMERRTT** will commence **pre-conference commencing at 0800hrs on Friday, 2/21/14** and last all day. Participants will miss opening speakers on that day. Prerequisite will be checked and affirmed with all confirmed requests.

**TMERRTT** will commence 0800hrs on Saturday, 2/21/14 and last all day. Prerequisites will be checked and affirmed with all confirmed requests.

### 1. Compressed Modular Emergency Response Radiological Transportation Training (CMERRTT)

This 8-hour training program is offered to audiences who have completed previous radiological response training. The course consists of seven 30-minute modules and five hands-on practical exercises. Students will receive a comprehensive review ensuring their understanding of radioactive material, radiological survey instruments and decontamination techniques for handling radiologically contaminated victims.

Hands-on practical exercises verify the student understanding and knowledge of radiological principles, instrument operation, decontamination techniques and employing radiologically contaminated patient treatment practices is solid. The course includes use of “live” radiation sources in the practical exercises to reinforce learning. Upon successful completion of this course students will receive a certificate from the

Department of Energy’s Transportation Emergency Preparedness Program, including up to 5.5 hours of continuing education hours (CEH) for medical response personnel.

**Prerequisites** – Students must have previously completed Hazardous Materials First Responder Operations training program.

**Target Audiences** – Emergency responders assigned the responsibility to respond and support first responder activities at radiological transportation accidents.

**Equipment** – **No PPE Necessary for CMERRTT**

### 2. Technician Modular Emergency Response Radiological Transportation Training (TMERRTT)

This 8-hour technician training program is aligned with the specific radiological competencies listed in NFPA 472 for a Technician Level and Agent Specific responder. The training includes a pre-test to verify responder knowledge and understanding of the actions necessary for radiological accident response. The course content includes advanced level training on instrument operation, radiological detector selection and limitations. In addition to the classroom training, students using their incident command system will participate in three field drills. In preparation for the exercises the students will establish an incident command staff, assign positions, and develop objectives for each of the three field drills. Upon completion of the incident command structure, students will discuss the field drill radiation safety plan, addressing protective clothing considerations, process for mapping the scene, using radiological instruments demonstrate how to conduct both radiation and contamination surveys, identify various types of “live” radiation sources, establishing control zone boundaries, explain and demonstrate decontamination methods and contamination controls. Upon successful completion of this course students will receive a certificate from the Department of Energy’s Transportation Emergency Preparedness Program.

**Prerequisites** – Hazardous Materials Technician Level and a member of a Hazmat Team.

**Target Audiences** – Emergency responders assigned the responsibility to enter the hot zone, measure and map radiation levels, conduct contamination swipes, perform decontamination, and execute mitigation activities.

**Equipment** – **FULL PPE, SCBA, and Training Authorization Letter REQUIRED TO PARTICIPATE IN TMERRTT**



**Division of Homeland Security and Emergency Services  
Office of Fire Prevention and Control  
Training Authorization Letter**

To the Office of Fire Prevention and Control:

The firefighter listed below is an active member of \_\_\_\_\_ Fire Department, is at least 16 years of age, and is authorized to attend the course indicated below. I understand this training course may contain certain evolutions that simulate and/or create actual firefighting or rescue conditions. The Office of Fire Prevention and Control is not responsible and/or liable for any malfunction or damage to any equipment used during this training program.

**PLEASE PRINT ALL INFORMATION**

**Fire Chief Authorization**

Fire Department	FDID #	Date
<b>Fill in YES or NO</b>		<b>YES</b>
The firefighter listed below has medical clearance to use Self Contained Breathing Apparatus, (SCBA), in accordance with 29 C.F.R. part 1910. 134.		
The firefighter listed below is authorized to use SCBA and participate in interior /exterior firefighting evolutions.		
If you cannot answer the questions above because you do not know the requirements of 29 C.F.R. Part 1910 or do not know whether the firefighter listed below is authorized to use SCBA, please contact your County Fire Coordinator or OFPC.		
Print Chief's Name	Chief's Signature	

**Course Information**

Course Record #	Course Title
-----------------	--------------

**Student Information**

Last Name	First	MI
Address	City	State
Home Phone ( )	Work Phone ( )	Zip

I, \_\_\_\_\_, have read, fully understand and agree with above information. I understand and acknowledge the importance of safety during the training course and further acknowledge that if an instructor believes that my behavior or abilities may cause a safety risk to myself or another, the instructor has the authority to remove me from the simulation or course.

\_\_\_\_\_  
SIGNATURE OF FIREFIGHTER DATE

And, if firefighter is 16 or 17 years old, the following consent must be provided:

I, \_\_\_\_\_, parent or legal guardian of \_\_\_\_\_ consent to his/her participation in the training listed above. I have read, fully understand, and agree with the above information. I understand and acknowledge that safety is important during the training course and further authorize the instructor to remove \_\_\_\_\_ from the simulation or course if the instructor believes that his/her behavior or abilities may cause a safety risk to himself/herself or another.

\_\_\_\_\_  
SIGNATURE OF AUTHORIZED LEGAL GUARDIAN DATE

\_\_\_\_\_  
PRINTED NAME RELATIONSHIP TO FIREFIGHTER

**Please Note:** No persons under the age of 16 may attend or participate in any training course delivered by the Office of Fire Prevention and Control. Additional copies of this form are available at <http://www.dhSES.ny.gov/ofpc>



Registration for the Hazmat Challenge 2014 will ensure your team will receive a pre-competition packet including events in the challenge, rules of the competition and a penalty schedule for nonconformance with completion rules.

The registration is free. Personal protective clothing (level A suits, boots, inner and outer gloves) will be provided for competition use. Each team should bring their own SCBA's and masks.

The competition will consist of two (2) person teams performing various hazmat entry related activities while wearing Level A PPE. 1 additional person may be utilized to assist with dressing.

The competition will be limited to the first 10 teams to respond. Each county may submit more than 1 team.

This event allows your Hazardous Materials Team to practice some typical response drills while competing against your colleagues from across the State of New York.

Please complete all information below:

Number of 2 person teams: \_\_\_\_\_ (2 people constitute "1" team)

Contact Name: \_\_\_\_\_

Department/Team Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Contact Phone Number: \_\_\_\_\_

Contact Fax Number: \_\_\_\_\_

Contact Email Address: \_\_\_\_\_

**Please return the registration forms by January 31, 2014 to ensure you receive the pre-competition packet**

***Please email the completed registration or any questions to Deputy Chief Jake Oreshan at:***

**[JOreshan@dhses.ny.gov](mailto:JOreshan@dhses.ny.gov)**