

Mardi Gras party to benefit Austin's House

The fifth annual Mardi Gras fundraiser to benefit Austin's House has a new twist this year. The theme has been changed to a Cowboy Mardi Gras party.

This casual fundraiser will be Feb. 8 at the Carson Valley Inn.

Put on your jeans and celebrate the party atmosphere of Bourbon Street in New Orleans on Fat Tuesday with food, music, dancing, fun games, raffle prizes, and a silent auction.

The party starts at 6pm with a cocktail hour. Then party goers will feast on a BBQ buffet dinner featuring pulled pork and mesquite rubbed chicken with all the trimmings. Wine is included with dinner. Beer and cocktails are also available.

After dinner, the Cowboy Mardi Gras party hits full stride with music, dancing and fun games. Raffle prizes will be drawn every 15 minutes.

Tickets are \$50. Only 200 tickets will be sold. Call Austin's House at (775) 267.6711 to order tickets.

Austin's House is the only emergency children's shelter in rural Northern Nevada.

South Tahoe's Anderson giving

back to her hometown

On Dec. 21, the winter solstice, professional snowboarder Jamie Anderson will provide a surprise sponsorship for four lucky kids and have a winter clothing drive in South Lake Tahoe.

In partnership with Sierra-at-Tahoe Resort and the Lake Tahoe Unified School District, Anderson will sponsor four middle school students from her hometown this winter season with a “surprise sponsorship”.

Anderson will award Alondra Gomez, Megan Rose Aquino, Cesar Hernandez, and Guillermo Perez Morris with an unlimited Sierra Resort season pass, brand new Billabong outerwear, a GNU snowboard, boots and bindings, goggles, and Skullcandy headphones.

Anderson, 22, who was born and raised in South Lake Tahoe, created the Jamie Anderson Surprise Sponsorship to give back to the community and provide less fortunate kids with the opportunity to snowboard.

With the help of LTUSD Superintendent Jim Tarwater, Anderson worked to identify students who showed academic promise, strong work ethic, and moxie.

“I’m excited to provide these kids this opportunity for the second year in a row. I was so lucky to grow up snowboarding at Sierra Resort, and I want to give that opportunity to others. It’s always fun to spread holiday cheer and surprise four amazing kids with an entire set up and season pass so they can ride all season long and hopefully fall in love with snowboarding like I did,” Anderson said in a statement.

Tarwater and the four students will go to Sierra Resort on Friday where they will receive their snowboard gear and spend the afternoon with Anderson, a six time Winter X Games

medalist and recent Dew Tour champion. Anderson will share snowboarding tips, take runs with them, and introduce them to the sport of snowboarding.

Anderson will also extended her philanthropic efforts that day by supporting Live Violence Free by setting up a giving station where community members can deliver coats, other warm clothing items, and meet and greet with Anderson from 10am until noon.

DNA dilemma – a potentially life-changing test

By Bonnie Rochman, Time

Know your enemy, we tell ourselves; knowledge is power. Laurie Hunter wanted to know what disease was attacking her daughter Amanda, who by the age of 2 months was not developing normally. Her muscle tone was low. She wasn't lifting her head. She was slow to talk, and she didn't walk until she was 2.

"As a mother, you know that everything that happens to your child is not your fault, yet you still feel responsible," says Hunter, 42, a high school English teacher who lives in Jackson, N.J. "We turned to genetic testing because I wanted answers." The first tests, done at the Children's Hospital of Philadelphia (CHOP) when Amanda was 4, came back normal. So did another round when she was 9. Doctors could not figure out what was making Amanda weak—even as she got weaker and slower and stopped being able even to blow her nose. "It's like her muscles are getting tighter and not moving in the way they should," Hunter said. But the doctors held out hope. Genetic

testing grows more sophisticated every day, they said, allowing researchers to explore a child's health down to every last typo on a chromosome.

In March, a third round of tests found seven genes missing from Amanda's first chromosome. At last, Hunter thought, when the genetic counselor called and asked to see her. "It felt like finally I might have an answer." But it was not the answer she was looking for. The small deletion, the counselor said, did not explain Amanda's condition. That was still a mystery. And now a whole new threat appeared.

One of the seven deletions has been linked to very rare tumors. The geneticists wanted Amanda, who is 14, to be screened by an oncologist. "It was like, Oh, my God, now we are adding cancer to the mix," Hunter says. "Never in a million years did I think this would be an issue."

She was even more surprised when a counselor called after her own tests came back. "I know you're going to be upset," the counselor said, "but we found that you have the same deletion." And so might her other two children.

This is the world we are heading into: one with powerful new weapons against age-old diseases and a host of questions about how to use them wisely and not turn them on ourselves. Imperfect knowledge can make us crazy—or bankrupt—chasing down threats that may never materialize. The human genome is an exquisitely complex blueprint. Geneticists hunting for answers to mysterious symptoms invariably trip over incidental findings, genetic twists they were not even looking for that might signal a risk of cancer or Alzheimer's or Parkinson's in the near or distant future. But do doctors have to tell patients everything they learn, even about the risk of diseases for which there are not yet cures? Do parents have to tell their children what might await them as adults? And who will pay for all this? "Everyone at this point is flying by the seat of their pants," says Dr. James Evans, a medical

geneticist at the University of North Carolina School of Medicine. "The technology is outpacing us."

From labs to living rooms

The mapping of the human genome, completed in 2003, cost \$2.7 billion. Now the cost for an individual's whole-genome sequencing (WGS) is \$7,500 and falling fast. One day WGS could be as easy to get as a pregnancy test at the drugstore. To do the testing, lab technicians need less than a teaspoon of blood, which is chemically treated to burst open the cells so the DNA inside them can be collected. Those microscopic strands are then fed into sophisticated machines that read each of the 3 billion bits of information, called base pairs, that make up a person's genetic alphabet. Computers scan the data for the equivalent of spelling mistakes. Some mistakes cause disease; others don't. And in between is a vast gray area where scientists just don't know what the changes mean.

In an ideal world, genetic analysis could save money by catching diseases early, offering targeted treatments and identifying the most effective preventive measures. Dr. Katrina Armstrong, a professor at the University of Pennsylvania School of Medicine, notes that testing 21 genes could reveal which breast-cancer patients are unlikely to benefit from a particular chemotherapy—knowledge that could spare women the treatment and save \$400 million each year. "If genomics can help us understand who will get the most benefit and who will get little or no benefit from an intervention," Armstrong says, "it will take us a long way toward improving patient outcomes and saving money."

But a majority of doctors in a recent survey predicted that more testing will trigger higher costs, as patients with ambiguous results begin to seek frequent screenings—and potentially unnecessary procedures—for diseases they might never develop. "If we open the door to a test that has no clear, well-defined purpose, that is a recipe for unnecessary

medical care,” says Dr. Wylie Burke, a geneticist who chairs the department of bioethics and humanities at the University of Washington. “Instead, we could say, Here are the 1,000 mutations we should check in everyone.” The American College of Medical Genetics and Genomics is already working on that, painstakingly assembling a list of a few dozen conditions that it says should be routinely looked for during genome sequencing. The hope is that focusing on certain hot spots—contenders include several syndromes that increase the risk of various cancers—will lead to improved analysis and, with it, better patient outcomes.

Some genetic testing has already moved out of the lab and into the living room. Companies like 23andMe offer DNA analysis directly to consumers—no doctor required. Since 23andMe’s founding in 2006, more than 180,000 people have been tested as the price has fallen from \$999 for information on 14 specific traits and health risks to \$99 for more than 200. The promise boils down to “forewarned is forearmed.” If parents learn that their child carries a gene called ApoE4, indicating a higher risk of Alzheimer’s, they might discourage the child from playing youth hockey or football, since research has linked traumatic brain injuries with a greater likelihood of brain disease in people who test positive for ApoE4.

“I do believe at some point in time everyone will be genotyped at birth,” says 23andMe co-founder and CEO Anne Wojcicki. Her husband, Google co-founder Sergey Brin, has a genetic mutation that increases the risk of Parkinson’s disease up to 80 percent; she has already tested their two children. Wojcicki’s grandmother had macular degeneration; when testing revealed that some of Wojcicki’s nieces and nephews are at increased risk for it, she bought them high-quality sunglasses. If her kids were predisposed to developing diabetes, she says, she’d encourage healthier eating. “I want to do everything I can to potentially enable my children to be disease-free.”

But having more-detailed genetic information does not always

point to a clear path. Dr. Ian Krantz and Nancy Spinner, a husband-and-wife team at CHOP, are working with an \$8.8 million federal grant to understand what genomic information patients and parents want to know. Most parents go in looking for the cause of a mystery illness. "If you tell parents their child also has an increased risk for colon cancer or breast cancer," says Krantz, a pediatrician who oversees medical-genetics training at CHOP, "that's a whole different level of stress."

If you want to start an argument, ask doctors and patients what they think doctors should do when they discover genetic results they weren't looking for. It can be an emotional blow—and a lifelong burden—if a mom learns that her baby girl carries a mutation that increases her risk of ovarian cancer or a dad finds out that his aspiring linebacker is genetically predisposed to developing Alzheimer's. In focus groups that are part of Krantz and Spinner's study, nearly all the parents said they would want to know about every disease risk, even if there's no treatment available. But in groups of bioethicists, lab directors, geneticists, pediatricians and genetic counselors, the majority said only results that could be immediately acted on should be shared with families.

This year, the lab Spinner runs tested a baby with a mysterious illness and found a completely unrelated mutation that indicated that dementia would likely set in at around age 40. Endless discussions followed: Should they tell the baby's parents that their child would probably develop a progressive neurologic disease marked by incontinence, blurred vision and confusion? There is no current treatment or cure. Telling them would all but guarantee that their child would never be able to get disability or long-term-care insurance. "We came around to the realization that we could not divulge that information," says Spinner, who is a genetics professor at Penn's medical school. "One of the basic principles of medicine is to do no harm."

At about the same time, her lab discovered that a 2-year-old with kidney disease carried a genetic risk for a kind of colon cancer. In some cases, polyps have been known to develop as early as age 7. With this patient, withholding the information would have seemed unethical. "We feel good about that one," says Spinner. "Proper screening can make a huge difference."

Genome sequencing isn't the first medical development that has forced doctors to grapple with the question of how much to tell patients. There have been cases of physicians' choosing to keep quiet when a test revealed a child's father was not his or her biological father. In years past, doctors have agreed not to share news of a terminal illness with an elderly patient if the consensus was that the knowledge would cause too much anxiety.

But genomes are vastly more complicated. "If you fall off your bike and get an X-ray looking for a fractured rib, the radiologist scans the entire X-ray and automatically reports back to your doctor if something else is going on," says Dr. Robert Green, a geneticist at Harvard Medical School. "More than a few cancers have been picked up this way. The problem with genomics is that everyone could have incidental findings."

Perhaps nowhere is the risk of overreacting to murky results greater than in the field of prenatal testing. This year two groups of researchers announced that they had each sequenced a fetus' DNA from cells gathered from the mother's blood, leading to concerns that in the not-too-distant future, women might abort a pregnancy if they learn their unborn baby has an increased risk for cancer. "Great, we can sequence the genome of a fetus. What the hell does it tell us?" says bioethicist Tom Murray, a visiting scholar at Yale. "Much less than most people probably believe. Probabilities are not the same as guarantees."

Faced with a growing need for protocols, the medical community

is trying to hammer out some guidelines. This spring, the American College of Obstetricians and Gynecologists stated that though personalized gene profiles may be promising, they are “not ready for prime time” and should be discouraged. The American Academy of Pediatrics advises against genetic testing for children unless there is clear evidence of beneficial treatment or effective prevention strategies.

The challenge doctors face in determining how much to tell patients—or their parents—is complicated by a steady stream of new discoveries. Test results that are indecipherable today could be lifesaving in 2025. But waiting years to share sequencing information is a logistical nightmare, particularly considering that patients may not remain under that geneticist’s care and may change addresses many times over. Genomic transcripts are also so massive—labs typically FedEx a hard drive because there’s too much data to transmit digitally—that the information is often relegated to a hospital’s archives, if it’s saved at all.

One possible solution to the problem of what to do with the deluge of data is a new Web-based venture called My46. Named for the number of chromosomes in human DNA, the nonprofit will allow people to store their sequencing results online and choose what they want to know and when. For example, parents of a baby who gets sequenced could opt to learn right away any findings about childhood diseases and put everything else—from unclear results to increased risks of adult-onset diseases—in the digital equivalent of a locked drawer, where it can be stored forever and accessed whenever they want to open it.

“Right now, it’s not unusual for researchers to say that they’re not returning results because there’s no good way to do it,” says Dr. Michael Bamshad, chief of pediatric genetics at the University of Washington, who works with Burke and is helping develop My46. Eventually, he predicts, “everyone will have their genome stored in a cloud.”

Living with the results

For Laurie Hunter, the news of her own cancer risk was not actually a shock. The disease runs in her family. Her mother and aunt had breast cancer, and her brother died of testicular cancer when he was 27. "I'd resigned myself that it was part of my reality, but I didn't think about it being part of my kids' reality—not this young, anyway," she says. One of the genes she's missing increases her risk of extra-adrenal tumors, which can pop up in the head, neck, chest and abdomen. The average age of onset is 30. Hunter is 42. So she scheduled blood tests and a full-body MRI to see if any tumors had started growing. She was thinking not just of herself and Amanda but also of her son Ryan, 4, who has always been healthy, and of her youngest child Kailyn, who was born with a rare genetic disorder unrelated to Amanda's, called Wolf-Hirschhorn syndrome. At 2, she cannot talk and can barely sit up. "I have two girls, one of whom will never speak, and they need to be cared for by somebody," she says. "I worry about, if something happens to me, who will take care of them." And then there is Ryan. What if she had passed the cancer risk on to him?

"I have shed more than a few tears since I learned about this gene deletion," Hunter says. "I love all my children equally, but I have reconciled myself that neither daughter will ever drive, go to college, get married or live on her own. The hardest part is thinking about my son. I have this one child in whom all my hopes and dreams lie, and now he may have this deletion too."

She considered not testing him. Maybe ignorance would be better than knowing the worst. "But I thought, God forbid, what if he was one of the ones who develops tumors at 10 years old and I didn't know. I'd be consumed with guilt."

Ryan was tested in the last week of September. The waiting was a kind of torment. "We got the results back the other day,"

Hunter says. “He does not have the deletion. I feel like I can breathe again.”

But because of Amanda’s increased risk, she is being closely monitored. An MRI found a spot on her neck that turned out to be an enlarged lymph node. The doctors still don’t know what is causing her other health problems.

“If all three of my children were healthy and had no issues, I don’t know if I’d want to know about those seven missing genes,” says Hunter, whose own MRI detected a lesion above her diaphragm. She’s waiting to learn whether it’s a tumor. “Sometimes what you don’t know is easier. I feel completely overwhelmed with information. Now it just feels like a waiting game.”

This is often how medicine works. Our powers outpace our principles and protocols, so that we wake up one day to headlines that a sheep has been successfully cloned and have to figure out what that means for the future of reproduction. In the case of genetic testing, there is little doubt that greater knowledge will bring many blessings, but it comes with costs, literal and emotional, and patients entering this territory with imperfect maps need to reckon with the odds of getting lost.

LTCC looking for ‘Around the World in 80 Days’ cast

Auditions of Lake Tahoe Community College’s “Around the World in 80 Days” are Jan. 8.

It’s dubbed as Monty Python meets the Three Stooges.

Adventurer Phileas Fogg has agreed to an outrageous wager that puts his fortune and his life at risk. With his resourceful servant, Passepartout, Fogg sets out to circle the globe in an unheard-of 80 days, putting his fortune and his very life at risk. But, his every step is dogged by a detective who thinks he's a robber on the run.

Danger, romance, and comic surprises abound in this whirlwind of a show as a handful of actors portraying 39 characters traverse seven continents in this new adaptation of one of the great adventures of all time.

Auditions are at 7pm in the LTCC Duke Theatre.

Performances are March 15, 16, 21, 22, 23 at 7:30pm; and March 17 and 24 at 2pm.

Scripts are available on reserve at the LTCC library.

Audition scenes will be available at the theater department call board. Backstage opportunities are also available.

Casting:

Phileas Fogg – male, late 30s-40s, English, cool, calm, intelligent, stalwart, a true gentleman, unflappable and precise, he rarely cracks a smile or expresses frustration in the face of typhoons, wild Indians, or love. British dialect.

Passepartout – 30s, Fogg's comedic idealistic and enthusiastic manservant/sidekick, comic charm of Inspector Clouseau, French dialect; gymnastic ability or physical comedy ability highly desired.

Princess Aouda: female, mid-20s to mid-30s, Indian princess, docile and endearing damsel in distress, but with strength of character.

Detective Fix – 30s-50s, a comic and inept Sherlock Holmes type, British dialect.

Ensemble – Men and women of various ages to play more than 30 characters, comic ability, a variety of dialects required, able to change from one distinct character to another in seconds, with little-to-no help from costumes or make-up.

Squaw creating Last Chair Music Fest

Last Chair Music Festival will be the first two weekends of January at Squaw Valley.

Live music will be performed Friday and Saturday nights.

“Part of our Renaissance is bringing world-class music to the slopes of Squaw Valley,” said Andy Wirth, president and CEO of Squaw Valley, said in a press release. “As we work to improve every facet of the resort experience, music and entertainment are a huge part of our initiative. We hope people will join us for these four great shows.”

Tickets for each day of the festival will be available packaged with a daily lift ticket for \$99. The lift ticket purchased as part of the concert package will be valid for the day of or the day after the concert – meaning, a lift ticket packaged with a Friday show can be used on either Friday or Saturday, and a lift ticket packaged with a Saturday show can be used on either Saturday or Sunday.

More information is online.

Run like Santa – or faster – to raise money for Christmas Cheer

In cooperation with Himmel Haus, Blue Angel Café, and Rainbow Mountain, Heavenly Ski and Snowboard Foundation on Dec. 20 is hosting the inaugural Lake Tahoe Santa Run to benefit Christmas Cheer and the HSSF Scholarship Fund.

Catch Santa on the slopes at Heavenly that day and then join him for the Santa Run that evening.

Preregistration is available online or at the Himmel Haus, 3819 Saddle Road. Cost is \$20, plus an unwrapped new toy to be donated to Christmas Cheer. It includes two raffle tickets. Participation is limited.

Registration will take place the day of the race from 4-5pm at the loft in the Blue Angel Café and is \$30. All participants must be in Santa dress (or some form of holiday garb), at least black pants, red shirt and Santa hat. Prizes will be awarded for the top three finishers and best costume.

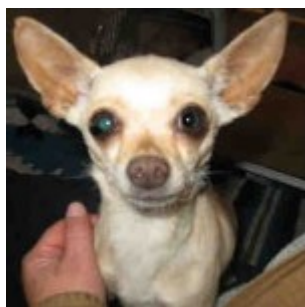
All Santas will need to be at the Blue Angel Café and checked-in by 5:15pm to participate. The race horn will blow at 5:30pm. Santas will run 1.3 miles up Ski Run Boulevard and turn left onto Saddle Road, leading them to the finish at the Himmel Haus. A decorated holiday Rainbow Mountain bus playing music and filled with toys will follow the Santas just in case any need a lift.

The festivities will kick-off at the Blue Angel Café with \$3 glasses of warm glühwein and will continue at the Himmel Haus

that evening at 6 with live music by the David Patrone Quartet jazz, \$4 pints of Wartsteiner Pilsner, raffle prizes, Santa costume dance-off and fun activities for all, children are welcome. Everyone is encouraged to bring an unwrapped toy to donate to Christmas Cheer. A "Giving Tree" for the Heavenly Ski & Snowboard Foundation will be displayed at the Himmel Haus throughout the holidays.

Tahoe Tails – Adoptable Pets in South Lake Tahoe

Punkin is a shy mini Chihuahua who is maybe 1 or 2 years old. He is very sweet, quiet, and a pretty cream color. He warms up to gentle attention, and would love to spend as much time as possible in someones lap.



And just look at those huge ears!

Punkin is neutered, microchipped, and vaccinated. He is at the El Dorado County Animal Services shelter in Meyers, along with many other dogs and cats who are waiting for their new homes. Go online to see photos and description of all pets at the shelter.

Call (530) 573.7925 for directions, hours, and other information on adopting a pet. The shelter will be open for

adoptions Monday-Saturday through the holidays except for Dec. 24, Dec. 25 and Jan. 1.

For spay-neuter assistance for South Tahoe residents, go online.

– Karen Kuentz

Vonn talks about her struggles with depression

By Elizabeth Leonard, *People*

Lindsey Vonn seems to have it all.

As the most decorated skier in U.S. history, Vonn's easy smile and record-decimating athletic career have made her a fixture on podiums, magazine covers and multi-million dollar endorsement deals. But life off the slopes wasn't always so rosy.

In an exclusive interview with *People*, the Olympic gold medalist, 28, discloses that she's quietly suffered from depression for many years and currently takes an anti-depressant to help manage her symptoms.

"Everything about my life seemed so perfect to people. But I struggle like everyone else," Vonn confesses.

At one point in 2008, she says, "I couldn't get out of bed anymore. I felt hopeless, empty, like a zombie."

But these days, Vonn is happier than she's been in a long time. "I feel like I just needed to get everything off my chest," says the ski racer, who filed for divorce late last year from her husband Thomas Vonn, also her longtime manager and coach.

With the winter race season under way – Vonn nabbed her 57th World Cup win on Dec. 8 in St. Moritz, Switzerland – she's hit a new groove.

"All the parts of my life are finally in sync," she says. "I accept who I am, and I'm moving forward."

Citizen heroism in Truckee crash recognized by CHP

By Barbara Barte Osborn, Sacramento Bee

Bill Nern and Bill Bartlett are two regular guys who were honored Wednesday for their extraordinary actions.

Calling Nern and Bartlett's rushing to the aid of the two drivers involved in a fiery Jan. 9 collision in the Truckee area "selfless, courageous and heroic," California Highway Patrol Capt. Timothy Malone presented the two men with framed award plaques from the CHP commissioner.

"I only did what I would hope anyone would do," Nern said.

"I'm honored to get it," Bartlett said, "but you just react and do it."

A third rescuer, Sam Keiper, 55, a visitor from Waterford, couldn't attend the awards ceremony and will be honored in

late January, Malone said.

"It's very rare the commissioner does this. It's the highest honor he presents to a citizen – the Commissioner's Resolution for Bravery and Heroism," said CHP Officer Pete Mann.

"If an officer had done this, he'd likely get the Medal of Valor – that's our highest honor," Mann said.

Nern, 46, a tugboat captain, had just returned to his home near Truckee from work in the Bay Area and was out in his yard near Cabin Creek and Highway 89 when he heard the crash about 7pm.

"It was almost in front of my yard," he said.

Bartlett, 51, a Truckee resident, was driving home from his job as a hardware store manager in Tahoe City. His was the only other vehicle on the road at the time and he pulled over immediately.

A pickup driven by a Las Vegas man living in the area for the winter had crossed a solid double line and struck a van head-on, causing the vehicles to become stuck together and the van to burst into flames.

CHP Officer Rich Morin arrived at the scene just as the burning van, driven by Jill Patrick, a longtime area day-care owner, exploded.

"The fire completely destroyed the van," Bartlett said.

But in the brief moments before that happened, Bartlett and another man had pulled Patrick from the van and gotten her to the side of the road, then rescued her dog.

Paramedics tried to save Patrick, who had received massive injuries, as they rushed her to Tahoe Forest Hospital in Truckee. From there, she was transferred to Renown Medical Center in Reno, where she died two days later.

“Her dog also died later,” Bartlett said.

Nern and another rescuer had attached a chain to the truck, which was stuck to the van, and pulled it away before it, too, could catch fire.

Seeing that the van’s driver had been removed, Nern, who is trained as a first medical responder, rushed to the pickup driver’s side.

“He had to be extricated and was at first out cold, then came to,” said Nern, who stayed by his side and kept him talking to prevent him from going into shock until firefighters and paramedics arrived.

Patrick’s death is the primary reason the awards ceremony was clouded for the two citizen heroes.

“None of us really like to remember that day,” Bartlett said. “I feel horrible the lady didn’t make it. And the other driver has to live with it.

“I have to drive by that spot every day,” he added.

The pickup driver was taken by Care Flight to a Reno hospital and later sent a thank-you note to Nern for pulling the two vehicles apart before his could catch fire.

Tahoe-Truckee firefighters rewarded for efforts in

Colorado

Three engine strike teams from the Eldorado/Lake Tahoe Basin Management Unit, Plumas and Tahoe national forests were recognized by the regional forester as Honor Award recipients for their response to the Waldo Canyon Fire near Colorado Springs, Colo.

Strike Teams 4601C, 3660C and 4660C arrived at the Waldo Canyon Fire on June 26. Driven by winds up to 65 mph and burning through historically parched fuels, the fire raged into the Mountain Shadows community, spotting extensively and displaying extreme fire behavior creating very challenging conditions. The strike teams, each composed of five engine crews, worked through the night to protect lives and property.

“Comments from Incident Management Team members who were directing the suppression efforts, local agency personnel, and Colorado Springs residents consistently praised the outstanding efforts of the engine strike teams. They emphasized that the strike teams were responsible for saving many homes on the night of June 26 and 27 with their decisive and aggressive actions and that their efforts directly contributed to the 80 percent survival rate of residences impacted by the fire,” Tahoe Forest Supervisor Tom Quinn, who was working on the fire as agency administrator, said in a press release. “I am very proud of these men and woman and their effectiveness in fighting this fire which eventually burned over 18,200 acres and has been described as one of the most destructive fires in Colorado State history.”

The strike teams were also specifically recognized for their efforts by the president when he toured the Waldo Canyon Fire on June 29.

TNF Strike Team participants:

Strike Team Leader: Robert Hilfer

Engine 333 – White Cloud Station east of Nevada City: Andy Achter, Lee Helgeson, Bill Bakker, Dana Salisbury, Dustin Friedman.

Engine 31 – Camptonville: James Prince, Matt Mullins, Daniel Sadlo, Christopher Buckbee, Danny Rasmussen.

Engine 42 –Foresthill: Mike Durocher, Eric Husmann, Tyler Bosworth, Daniel Manry, David Foster.

Engine 71 – Truckee: Jesse Green, Ryan Herrera, Wade Boan, Bryce Dana Boyer, Sabrina Retterer.

Engine 73 – Truckee: Matt Bradford, Adam Smith, Richard Herrera III, Gregory Lowdermilk, Jens Schneyder.