

IAATO Emergency and Medical Evacuation Response (EMER), 2006

(Updated April 2014)

The following is IAATO's emergency contingency outline which can be used by its members as a checklist and, if needed, incorporated into their emergency procedures. Each company is responsible for establishing its own air rescue service if required.

IAATO Vessel Medical Emergency Contingency Plan

1. The Antarctic Treaty Consultative Meeting ("ATCM") Recommendation XVIII-1 obligates organizers and operators going to the Antarctic to be self-sufficient. Procedures to assist IAATO- member passenger vessels in the Antarctic in the event of critically sick or injured passengers are designed to facilitate self-sufficiency.
2. IAATO Members are encouraged to strongly recommend that its passengers provide the company and or medical doctor on board the vessel with a medical evaluation form as reference during the voyage. In addition IAATO Members are encouraged to strongly recommend that their passengers take out comprehensive medical and evacuation insurance, which will reimburse passengers for the cost of medical evacuation in the event of an emergency.

Medical Emergency Contingency Plan

In the event of serious accident or life-threatening situation, requiring medical attention beyond the ship's medical capabilities/facilities, the following procedure should be implemented.

Assessment

Consider the alternatives. A decision is made onboard that the best option for the critically sick or injured individual is emergency evacuation. This decision, by the shipboard physician and patient or family, is to be made in concert with the expedition leader and captain of the vessel.

Initial Action

Prior to contacting an appropriate or agreed medevac agency, confirm the following information is available:

1. Name of the staff member on board who will coordinate the situation.
2. Current position, route and speed of the vessel.
3. Current weather and recent forecasts available.
4. Information on any other vessels in the local area, and the contact details.
5. Name and precise details of the injured/sick person and their condition, with a complete medical evaluation by the ship's physician in writing. Include the time of the incident, abstract from the ship's log, chronology of intervention and any medical history. Provide the name of the patient's consulting physician at home and emergency contact information for the patient.
6. How many other persons will accompany the injured party from the vessel and the approximate weight and volume of their luggage?
7. What medical facilities/anticipated treatment will be required at the destination, and any drugs needed for the patient or to restock the vessel.
8. The anticipated final destination of the injured/sick person.



Secondary Action

1. Contact the 24-hour emergency number in the home office and be prepared to provide the above information – and anything else that may be relevant to the situation.
2. The emergency station is to contact all known means of evacuation and research the availability of aircraft, cost and best available option for the passenger and vessel.
3. The emergency station is to advise the contact person aboard the vessel and await a decision regarding the injured party.
4. Once a decision is made for action, the emergency station is to contact the transportation company and arrange for evacuation at a specified time and place. A suitable landing site is to be agreed and a suggested time, pending weather conditions. Details of how the passenger will be moved is to be given to the emergency station.
5. Medical facilities at the destination are to be alerted and an ambulance or other requested form of transport should be at the airport upon arrival of the patient.
6. The emergency station is to advise the cruise company's home office or 24-hour contact of the situation and provide the patient's emergency contact information.
7. Two copies of a detailed medical report completed by the attending ship's physician is to be transferred with the patient for the attention of the emergency station. A copy is to be given to the doctor at the destination.
8. Advise the emergency station of any anticipated additional forms or paperwork that may be required by a medical insurance company.
9. Advise the emergency station of any vessels, stations or organizations you have contacted regarding the situation.
10. The vessel is to maintain regular contact with the emergency station until the passenger is uplifted from the agreed point and a schedule established with the ship's captain for the preferred means of communication (telephone, fax or radio).

Final Action

1. Once the evacuation of the passenger is completed, the vessel is to be informed of the arrival of the vessel or aircraft and passenger at the destination.
2. From this point, the emergency station is to coordinate directly with the cruise company's home office regarding the ongoing condition of the passenger, providing regular updates.
3. The emergency station is to remain in regular contact with the passenger until the situation is normalized or responsibility is transferred to another party.
4. A full report is to be submitted by the emergency station to the cruise company regarding the pick-up and services of the station, including an invoice for expenses incurred.
5. The cruise company is to send a brief report to Operations@iaato.org providing the date and reason for the medical evacuation. The report should include what, happened when it happened, where it happened and the follow up.