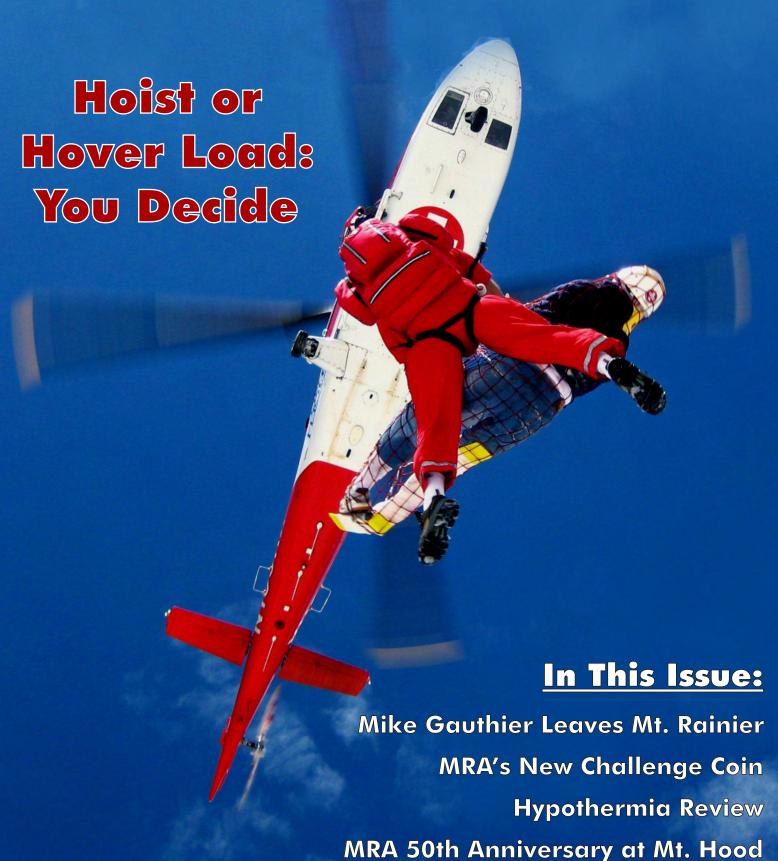
MERIDIAN



April 2009

The Quarterly Publication of the Mountain Rescue Association





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COVER PHOTO: Salt Lake City's LifeFlight program performing a hoist rescue. Photo courtesy of LifeFlight

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Photo by LifeFlight; Salt Lake City, UT

HOIST OR HOVER LOAD: YOU DECIDE

Story by Tim Hagel Ventura County Sheriff's Office

All categories of helicopter operations allow for pilot discretion on how best to complete the mission. But what happens when a helicopter aircrew has two viable and safe flight options for a rescue mission?

Each helicopter rescue is different, even if it occurs over and over at the same location. Safety is paramount to success of the mission. The U.S. Forest Service is chartered with administering aviation safety protocols and training for a variety of government and private helicopter operators. It defines safety as "transforming the severity and likelihood of risk, which is inherent in all human activity, to lower, acceptable levels."

Cliff rescues are a perfect example of a mission that often requires the use of helicopters for support and or technical rescue by air. Let's face it. Cliff rescues fall on the high side of a risk continuum. Lowering the risk of mishap is everyone's responsibility.

Understanding the flight options and asking oneself a few key safety questions can make the difference. Many helicopter safety programs use Socratic questions as prompts for rescue decision-making. Important in all decision trees are two basic questions: Is there a safer way to complete the rescue? Is the perceived urgency I feel as a pilot the same as the realistic urgency determined by others?

Remember, nearly all flight techniques have alternative maneuvers that we can use when facing tough helicopter rescues on cliffs or steep terrain. They include short haul (ropes), hoisting, hover loads (toe in, one skid), and skids down.

As a crewmember on a Ventura County, Calif. Sheriff's Dept. Bell 212HP hoist-equipped rescue helicopter, I was recently working a shift as a rescue specialist when the 911 call came in for four lost hikers in the Santa Monica Mountains. We launched moments later and soon began searching the Boney Mountain area.

This popular area is known for its spectacular sandstone and volcanic cliffs. After a lengthy search, our pilot in command, Ken Williams, located the lost hikers, who were isolated on a remote cliff with a 500-ft exposure. During mission debrief, we discussed the safety aspects. Our helicopter crew talked about a variety of issues regarding the rescue. A main one was the fact that the victims were so camouflaged by the natural terrain that we must have flown over them three or four times during the search phase. In addition, we collectively determined (Williams and the three rescue specialists) in less than 2 min after we located the victims to complete the rescue as a hover load versus hoist evolution. We later completed a pinnacle hover load of the stranded hikers.

But why a hover load? Would a hoist have been an acceptable option? The luxury of the pilot in command and rescue crew having the ability to pick any of the appropriate technical-rescue maneuvers immediately lowered the risk and artificial sense of urgency that can often develop.

Risk and urgency! Jim Hall, former chairman of the U.S. National Transportation Safety Board, was often called upon as a pundit of helicopter safety. In a speech at Heli-Expo in 1997, he discussed the rescue helicopter's unique capabilities and emphasized to pilots that "helicopter operations-so susceptible to pressures to push the limits of the envelope-should, in fact, always incorporate a large margin of safety."

Our cliff rescue was no different. There was almost no intercom chatter as we made our typical clockwise recon pattern around the victims. During the assessment passes, each crewmember had a different function. The tasks were divided by rescue specialty as the crewmembers intensely evaluated their responsibilities.

The pilot in command was busy flying, gauging winds, escape routes, power and performance issues. The hoist operator, Glenn Grossman, and paramedic Chris Rosa were methodically assessing the location of the victims, visual signs of casualties, and terrain factors. Through my position on the hoist side of the open deck, I established visual communications with the victims and gave them the universal "extended right-hand closed fist" that most victims understand as, "Stay put."

One by one, each of us gave an intercom synopsis of our concerns and planned course of action. We quickly developed a verbal Incident Action Plan, complete with communications failure procedures specific to the incident. The pilot asked the final rescue question:

"What do you guys think, hoist or hover load?" Like a three-man choir, the response came back. "Hover load."

Short haul is most commonly used when a hoist is not available or when a hoisted dynamic load (victims) during a swiftwater rescue may create a center-of-gravity issue between the hoist and the helicopter.

In our case, a skids-down maneuver was out of the question. Surely a tail strike would have occurred. The Mediterranean climate of the Santa Monica Mountains covers the rugged mountains with dense, impenetrable brush and trees.

There was no need to short haul our victims and we knew that there was not a center of gravity issue with a potential hoist evolution. Our two best options were then focused on a hover load or hoist scenario.

Hoisting is common both in military and public rescue operations. We complete about 450 hoist evolutions a year, rescuing more than 70 stranded and injured citizens. Hover loads account for about 20 percent of all our technical rescues.

After our safety power check, we decided to that I, as the rescue specialist, would hover-jump the cliff on a pinnacle separating the helicopter from the victims by about 100 ft of nearly impenetrable chaparral. The reason

for the safety separation between copter and victims was based on crew experience. We had all seen victims try to self-rescue at the very last minute. We wanted to avoid that scenario.

Typically, in latent self-rescue, unattended victims will try to jump on a skid while the pilot is still maneuvering into position. During the final approach into a hover maneuver, crewmembers are focused on tail- and main-rotor clearance. In our case, hovering on their pinnacle would have led them into a sense of security and they might have prematurely climbed out on the cliff face and fallen 500 ft to their deaths.

The hover jump went smoothly. Using my portable radio, I contacted the 212 crew. They were maintaining the helicopter in a 500-ft agl pattern for safety, observation and noise abatement. The aerial crew used their recon pattern to direct me from the pinnacle to the victims through the dense brush. The four victims were uninjured.

Our urgency continuum was then lowered dramatically. Time was now on our side. As rehearsed in training time and time again, I gave the group a safety briefing. Remember, the briefing is required and makes sense.

You have an obligation to reduce the risk factors. Our victims were located, uninjured and stable. The first victim was assisted through the brush, navigating steep cliff faces. The other victims were kept back at the isolated pinnacle, a safe distance from the arête used for the hover load. Keeping those young victims isolated from the hover zone ensured their safety had a total mishap occurred.

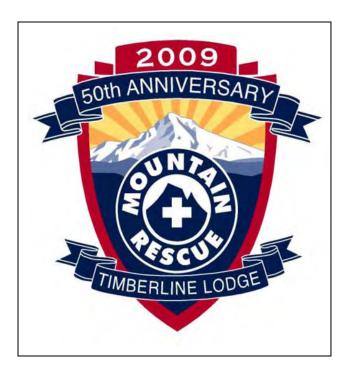
I gave the first victim a final safety and "expectation" briefing just prior to our final approach to the helicopter. Skid management and assistance by both me and the hoist operator was paramount to avoid a mishap while the victim stepped on the skid. I always remember my training officer telling me to have the victims visualize that they are walking barefoot on glass when they step onto a hovering skid. That pearl of rescue wisdom has worked well in quickly educating victims in hundreds of rescues. Once again, it worked this time.

All four victims were flown to awaiting National Park Service rescue personnel and another safe mission was completed. Remember to always balance your sense of mission urgency and risk with that of actual conditions.



About the Author: Captain Tm Hagel is a 21-year veteran of the Ventura County Sheriff's Department. He has worked as a full time helicopter specialist for 15 years, and is an EMT, Rescue Diver, ropes specialists and swiftwater rescue instructor. He has been on nearly a thousand mountain helicopter rescues using their fleet of four 205 and 212 Hueys.

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MRA 50TH ANNIVERSARY

By Rocky Henderson

Timberline MRA 2009 is fast approaching. We have over 150 already registered. If you are planning on attending and haven't yet registered, you should do it soon.

We hope that we will not have to limit registration but there is a limit of 300 for the banquet Saturday night.

Lodging at Timberline may be all gone by the time you read this but there will still be options in Government Camp and the Mazama's Lodge.

Thanks to a lot of hard work by a lot a people this promises to be an historic event. Thanks to our corporate partners and sponsors you will get your money's worth and then some. We will have free beer and wine (until it runs out).

One of the highlights of the week end will be what we are calling the *Old-Timers Story Hour* Friday afternoon/evening. We'll be treated to tales from the early days of the MRA told the men and women who lived them. Some our folklore will get passed on that night for sure.

The history video is in its final editing stage and will be premiered Saturday night.

The deadline for submitting videos is May 15 - more information on the video contest can be found at: http://www.pmru.org/mra2009/video_night.php

One final item... Although it is not really part of the conference we have arranged with *Ropes that Rescue* to offer a 7 day mountain rescue course at Smith Rocks June 16 -22. If that fits your schedule check it out at from our website under "future training events"

http://www.mra.org/training/events.php

CONFERENCE AGENDA

June 23-25, Tuesday-Thursday

Pre-conference at Historic Cloud Cap Inn – *SOLD OUT!*

Limited to 20 attendees and instructed by **Timberline Mountain Guides**. This is an intensive session covering **glacier travel and self rescue techniques**. Food and lodging will be provided by the **Crag Rats** at Cloud Cap Inn located on the remote north side of Mt Hood. Field exercises will be held on the Eliot Glacier in the Mt Hood Wilderness.

June 25, Thursday

Thursday afternoon and evening - Registration

Registration at the Ravens Nest in the historic <u>Timberline Lodge</u>. There will be vendor displays and beverages available. Plan to stay and socialize, and regale us with stories from your day's climb.

<u>June 26, Friday</u>

Classroom and Field Sessions

Our theme is ice and snow, and we'll have a variety of topics to choose from. The field sessions will be in close proximity to the lodge so you'll be able to mix and match classroom and field venues.

Current sessions include:

- Ice Climbing Anchor Strength: An In-Depth Analysis
- Integrating GIS with Search Management
- Rescue in Australia, changing from Single Rope to Twin Rope Technique
- Failure Modes of Snow Anchors
- Medical aspects of rope rescue
- Avalanche Hazard Evaluation for Rescuers
- High Altitude Illness
- Sidecountry Rescue: who should respond to out of bounds rescue?

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Barbeque and "Old-Timers Story Hour"

Friday evening we'll have a BBQ at the newly restored outdoor amphitheater at the Lodge, and either before or after the dinner, we'll hold an Old Timers Story Hour featuring some of our founding members and other long time MRA members as they recollect the early days of the MRA.

<u>June 27, Saturday</u>

Rescue Rendezvous

The Rescue Rendezvous is a multi-station, outdoor rescue skills event. We'll create mixed teams of attendees from all over and send you off to meet the challenges. You'll have a chance to solve problems, teach, learn and share experiences with fellow rescuers.

Banquet

Saturday evening is the banquet, and along with major awards and VIP introductions we'll have the world premier of the new MRA sponsored video about the formation of the MRA. Rounding out Saturday's activities will be a new event, "Rockin' with Rocky". Beginning after the banquet presentations, we hope you'll stay at the Lodge for some dancing, socializing and free beer.

June 28, Sunday

Business Meeting

For more on the Conference, go to http://www.pmru.org/mra2009/

Priority Phone Access During Disasters

By William Laxson, MRA Communications Committee Chair

The National Communication System (NCS) was formed in 1963 to correct communication deficiencies uncovered during the Cuban missile crisis. In 2003 it became part of Homeland Security with a mission to provide priority telecommunication services.

Two of the many programs administered by the NCS may be of interest to some MRA teams who have a general disaster response role with their authorizing agency that goes beyond their mountain rescue mission.

GETS (Government Emergency Telecommunication Service) gives authorized subscribers a tool to complete phone calls over telephone networks that are congested with public traffic during emergencies. Preferential telephone network access is achieved by calling a universal access number using a calling card and PIN. A unique non-geographic area-code reserved for NCS use, plus special classmarks that travel with and identify the call for priority treatment greatly improve the probability of successful call completion. GETS calls can be automatically routed on both commercial and government trunks. They are billed to the subscriber at seven to ten cents a minute including LD charges for calls within the US and its territories. There are no monthly fees.

WPS (Wireless Priority Service) is similar in function to the GETS service but designed for priority access to congested wireless networks. Cellular carrier participation in the WPS program is voluntary, although most major carriers have signed up (except those in Alaska). Priority network access is invoked by dialing *272 ahead of the destination number. Cost varies by cellular carrier, but is limited to a maximum \$10 setup fee, a \$4.50/month service fee, plus \$0.75/minute of air time.

Eligibility criteria for the GETS and WPS programs have been established by the NCS. Access is managed by a POC (Point of Contact) within each individual law enforcement agency.

Quoting from NCS literature:

"Eligibility Criteria: 3. Public Health, Safety, and Law Enforcement Command Search and rescue team leaders."

If your SAR team has a secondary disaster response role with your authorizing agency, you may wish to look into getting authorization from your local POC for one or more GETS access cards, or in having select SAR manager cell phones authorized for the WPS program.

More information on these programs can be found at wps.nps.gov or gets.nps.gov

A link at these sites leads to a form you can submit to locate your local POC.



Former Mt. Rainier Chief Climbing Ranger Mike Gauthier on Alaska's Mt. Foraker

GAUTHIER LEAVES MT. RAINIER

Mike "Gator" Gauthier, whose work as a ranger made him a revered member of the local search and rescue community, has said "goodbye" to Mount Rainier National Park after more than 18 years.

Gauthier left his post as the head of the park's climbing program for a two-year fellowship in Washington, D.C. with the United States Senate and the Department of the Interior.

"It's a huge change and opportunity for me," Gauthier said recently, "and one that I'm really excited about." The 39-year-old got the nickname "Gator" from a youth football coach who couldn't pronounce his last name (say "GO-tee-ay").

Gauthier, who has been involved in numerous rescues on Mount Rainier, is trading his ranger uniform for a suit and will be assigned to the U.S. Senate's subcommittee on National Parks.

While D.C. might seem different than Longmire, where Gauthier lived, he'll have something in common with at least a couple of people on Capitol Hill. Senators Hillary Rodham Clinton and John McCain and Gauthier all earned places on the Men's Journal 2004 list of the "25 Toughest Guys in America."

Gauthier, who grew up in Olalla, Kitsap County, Washington made the list for one of his most famous rescues, which actually came on his day off in 1998. Gauthier was on Rainier's 14,411-foot summit when he heard a distress call on his radio. He hopped on his snowboard and zipped down the mountain to Disappointment Cleaver to help guides rescue nine climbers.

But what Gauthier might be most proud of is his last three years at Rainier. After several high-profile rescues and deaths on Rainier's upper slopes, there has not been a major incident above Camp Muir in three seasons.

"A lot of the credit for that goes to Mike," park superintendent Dave Uberuaga said. "He has been very instrumental in making the program what it is today."

Gauthier started a blog – mountrainierclimbing.blogspot.com – that updates climbers on route conditions.

"The more info you have to work with, the more likely you are to have a successful trip," Gauthier said, explaining the need for the site.

Gauthier helped coordinate the transition from one Rainier guiding service to three in 2007. Gauthier said that having three guide services on the mountain has made the mountain safer.

In his years on Rainier, Gauthier has dangled out of helicopters, rescued climbers and recovered bodies. He's also helped train park staff members and formulated their avalanche safety plan.

Along the way, Gauthier climbed Rainier more than 180 times, including eight times in one week in 1998. He set a record by summiting the mountain 36 times that summer. He wrote a Rainier climbing guide in 1999 that's widely considered the best on the subject. The Mountaineers Books republished the guide in 2005.

"What he has done for the park is remarkable," Uberuaga said. "He will not be an easy guy to replace."

While Gauthier could theoretically return to Rainier after the fellowship, he says it's unlikely.

Most participants in the Bevinetto Fellowship are assigned to a management position, such as a park superintendent post, after they finish, Chuck Young, Rainier's chief ranger, explained in an e-mail. "I care greatly about this place," Gauthier said. "My DNA cares about this place. I'm going to miss it, but I'm looking forward to this new opportunity."

HYPOTHERMIA REVIEW

By Dr. Skeet Glatterer; Medical Committee Chair

Although Winter is now giving way to Spring in many areas, plenty of it still remains farther north and at altitude. Regardless of the season, enough cool weather is present year round to make hypothermia a real concern for most SAR situations, both for subject and rescuer. Most hypothermia cases still tend to occur over 40F, and are a frequent cause of backcountry morbidity and mortality. Due to the insidious onset, and the fact that all team members are somewhat equally exposed, an increased awareness is important. The effect of "mild stupidity "induced with hypothermia can have serious consequences when those affected are in a command or technically important position.

Detailed charts exist that compare core temperature and patient signs that help determine the severity of hypothermia. Most teams don't have hypothermia thermometers, and even fewer have the desire to place it where it needs to be to get an accurate reading. However, it is relatively straightforward to assess these levels clinically and put them in 2 groups: mild <95F (35c) and severe <90F (32c). This works well in the field since mildly hypothermic patients are generally "walky-talkies" and able to both ambulate and converse and can generate body heat to assist with their rewarming. Severely hypothermic patients are no longer easily ambulatory, if at all, and are not able to adequately converse. They have entered a "metabolic icebox"



Severely hypothermic subjects present a larger challenge. They will not be able to assist with heat generation and will need active rewarming. Photo by Howard Paul

and will depend only on external rewarming as they are no longer capable of generating enough heat to rewarm themselves.

As the body begins to lose more heat that it can generate, multiple preventive mechanisms come into play. One is shivering- the presence of which does not indicate hypothermia, but rather is a "cold response "mediated mostly by skin temperature. This early response to a cold insult consists of an involuntary series of muscle contractions that can generate about the same amount of heat as a brisk walk and depletes energy stores at about the same rate. Also stimulated is the shell-core effect that causes peripheral vaso constriction of the shell (extremities) to decrease heat loss by keeping blood and heat in the core to protect the brain, heart and lungs. Good for the core, but not so good in that the extremities are now not heated well and are predisposed to frostbite. These cold and poorly perfused muscles in the extremities become progressively less functional, leading to poor coordination and inability to perform finer motor movements (zip up coat, light camp stove) and eventually to ambulate. The neurologic system is the most sensitive and early on problems exist as "mild stupidity" (perhaps not a large change from baseline for some of us) manifesting as poor judgment, problem solving, denial of any problem and eventual progressive loss of consciousness.

Treatment for mild hypothermia is based on the subject's ability to assist with his rewarming by shivering and ambulating, and most anything that assists them with creating and maintaining body heat will be effective. First remove any damp or wet clothing and replace with a dry layer of thin clothing. If the subject has only mild to moderate and somewhat controllable shivering and no significant mental status changes- he can be bundled up and allowed to ambulate to assist with heat generation. However, if more severe, uncontrollable shivering is present and mental status changes are worrisome, this exercise may precipitate a drop in core temperature (after drop) as the colder and more toxic extremity blood returns to the core. These patients should initially be rewarmed in an insulated environment.

The usual hypothermia (or burrito) wrap, (best with a normothermic companion rescuer with a thin, dry outer layer) can be used. After about an hour the subject can be bundled up and allowed to ambulate. In all these subjects fuel is needed to replace depleted calories from shivering. Those with minimal mental status changes and the ability to swallow-can take oral fluids and calorie replacement.

Simple carbohydrates are best initially. Warm liquids, though not really effective at core rewarming, certainly feel good subjectively and are a good vehicle for calories (think hot chocolate). External heat sources can be used such as hot water bottles, chemical packs or charcoal heat packs. These are best applied to the chest directly over the heart, and to the neck, armpits and groin areas.

If possible, a protected and warm environment is best (whether a cabin, vehicle or just a snow cave or tent to block wind and conserve heat). The "tropical rain forest" approach can be used with multiple stoves and boiling liquids to increase heat and humidity (careful with carbon monoxide issues). Remember the adage that it's impossible to treat a burn victim in a burning building (or a hypothermic one in a freezer). Once rewarmed, and with normal mental status these subjects usually can assist with their own evacuation.

Severely hypothermic subjects present a larger challenge. They will not be able to assist with heat generation and will need active rewarming. In years past it has been thought that this active field rewarming could be dangerous due to metabolic and physiologic changes. The good news is that this is no longer thought to be a valid concern and the bad news is that it is because active field rewarming is so poorly effective. Treatment consists of all the above measures for mild hypothermia. Do not give oral fluids with impaired consciousness. These patients must be treated very gently (movement and packaging can precipitate fatal cardiac rhythms) and kept horizontal (they no longer have adequate vascular autoregulatory functions). Though still time critical, severely hypothermic subjects are not a crash emergency. It has taken them hours to get cold, and will intentioned, though ill advised, rapid and rough handling, packaging and transport can have tragic results. Packaging should be done in a manner that allows periodic patient examination to monitor vital signs, mental status and guard against any skin burning with external heat sources.

The search for vital signs in severely hypothermic subjects should be deliberate (remember this not a crash emergency). The exam for respirations and pulse should be at least one minute for each and once found may be vary abnormally slow (think Beck Weathers in Into Thin Air). Any findings of respirations or pulse, no matter how slow, are enough to preclude CPR efforts. Although there is some protective effect from hypothermia, a larger reason for no CPR is the risk of inducing fatal cardiac arrhythmias. If CPR does need to be started, it can be at half speed. Be aware that the

effectiveness of BLS level CPR is dismal unless more advanced care is available within an hour or so.

MRA MEDICAL COMMITTEE

The MRA has a new Medical Committee Chair. Dr. Skeet Glatterer is a Cardiothoracic and Vascular surgeon living in Golden, Colorado. He also has a dedicated interest in wilderness medicine, and to that end is active with the Wilderness Medical Society (WMS), and the Colorado Mountain Clubinstructing in multiple classes and founding the Mountain Medicine Section. He also is an Advanced Wilderness Life Support (AWLS) Instructor, as well as an OEC (Outdoor Emergency Care) Instructor Trainer.

Rounding this out is participation as a Ski Patroller at Copper Mountain Resort in Colorado, and as a member of the Alpine Rescue Team in Evergreen, Colorado. His summer vacation was spent as a VIP (Volunteer in the Park) at Denali National Park and as a Climbing Ranger and member of the Denali Rescue Team, which included responsibility for the Ranger Camp medical facilities on the mountain, especially at the 14,000 ft camp.

As we welcome Skeet, we thank Dr. Ken Zafren who served as the Medical Committee Chair for more than ten years. Ken will continue as the MRA's representative to IKAR, and will serve as the IKAR Medical Commission Vice Chair. Thanks, Ken, for all you do for MRA.



Dr. Skeet Glatterer, MRA Medical Committee Chairman, on Mt. McKinley during a recent stint as a Volunteers in Park on the mountain.

A Note from Skeet

As I assume the Chair position of the Medical Committee I would like to ask everyone, from a **MERIDIAN** 10 **April 2009**

medical standpoint, "What can the MRA do for YOU?" Short and long term plans from the Medical Committee include establishing a bank of medical information- from already prepared presentations on various medical topics to more detailed and current medical research papers. As new information appears these links will be posted, and reports given on recent wilderness medically related meetings.

Be on the lookout for a short List Serv questionnaire, directed to medical personnel on the team, asking what needs you would like addressed during the upcoming year and suggestions you have. Now is your chance to help us chart our course for the future track. We can only do this with your inputso; we look forward to hearing back from you. I hope to see some of you at the 50th Anniversary meeting in Oregon.

SUGGESTED READINGS

Hypothermia, Frostbite and other **Cold Injuries**

Giesbrecht and Wilkerson

The Mountaineers Books 137 pages

This is a short book that is packed with good and

interesting information. It is as entertaining as the presentations that Gordon Giesbrecht gives. If you have an interest in cold weather injury, you should look at this book.

Other good sources:

Medicine for the Backcountry

Tilton and Hubbell **ICS Books** 185 pages

A quick and easy read that has much practical information at a non-technical level. Buck Tilton always presents material in an easy to read and understandable format.

Wilderness Medical Society: Practice Guidelines for Wilderness Emergency Care

Editor: Forgey The Globe Pequot Press 107 pages Concise guidelines.

Medicine for Mountaineering

Editor: Wilkerson The Mountaineers Books 350 pages A standby and more in depth reference text.

New Papers:

Here are some recent links to papers from Canada that look at avalanche and cold related injuries and current thoughts on treatment.

Also, there are links to current IKAR positions on treatment. Great if you have an interest on up-todate data.

http://www.cmaj.ca/

http://www.cmaj.ca/cgi/content/full/180/5/507 http://www.cmaj.ca/cgi/content/full/180/5/491

MRA STORES

Stores inventory is expanding. We have recently added MRA T-shirts as well as women's cut polo shirts. Additionally, we are proud to add the MRA challenge coin to our 2009 inventory (please refer to "the coin" article in this addition of the newsletter for details).



Products like this MRA logo T-Shirt are available through MRA Stores.

As always, we continue to offer MRA patches, stickers, travel mugs, ceramic coffee mugs, hats, polo shirts and other logo-items at our store. Ordering is simple: type in username and password (available from your team's MRA representative)

Let's continue to support our association by wearing the MRA emblem!

FEDERAL COORDINATION UPDATE

By Mike Vorachek; MRA Member-At-Large

Counties across the U.S. are being requested to begin population of their respective state resource availability databases. Teams should be assessing if they want to be included in local and state resource databases and determining which Resource Typing classification is appropriate for their team. We recommend that you coordinate with your county or state Emergency Management organization for local guidance. Copies of the SAR Resource Typing definitions can be found at:

http://www.fema.gov/pdf/emergency/nims/ 508-8 search and rescue resources.pdf

I recently completed the FEMA ICS-300 Intermediate All-Hazards NIMS ICS Review for Expanding Incidents course. This is a 20 hour course that provides an excellent overview of how the NIMS concepts can be applied to various events. Teams that might be called upon for supporting large scale events should strongly consider having your Operations Leaders and other key members complete this training.

MRA NOMINATIONS

The following MRA members are nominated for the MRA Board Positions that will be voted upon at the Business Meeting in June at Mt. Hood: For more information see the email that was sent to the MRA Administrative ListServ.

Nominees for Secretary/Treasurer

- John Chang Bay Area Mountain Rescue Unit
- Scott Sutton Vail Mountain Rescue

(Note: Current Secretary/Treasurer Dan Land is term-limited and must step down)

Nominees for Member At Large

- Steve Chappell, Rocky Mountain Rescue
- Jim Frank, Santa Barbara County Search & Rescue
- Roger Yensen, Central Arizona Mountain Rescue

(Note: Current Member-At-Large Mike Vorachek has chosen to not run again, in favor of a possible nomination for Vice President in 2010 when that position becomes available.)



SAR 2009 CONFERENCE - WASHINGTON, DC

By Harry Patz; Operations Leader -Bellingham Mountain Rescue

I had the honor and pleasure of attending the SAR 2009 Conference in Washington, DC in late March, as one of the delegates for MRA. The event was put on by the Shephard Group, a well respected UK company active in aerospace and defense markets (http://www.shephard.co.uk/about/).

MRA was one of the sponsors at this event and I believe it was worth the effort.

This international conference included representatives from 15 countries, and focused primarily on helicopters in SAR so our own President Charley Shimanski fit right in with his presentation on helicopters in inland SAR.

The networking opportunities at this event were unique and I met people from Portugal, Italy, China, Israel, Canada, Columbia and the UK. One of the most interesting subjects was improved techniques in aerial search patterns. Often SAR helicopters come from government resources and are equipped with sensors that aid in locating the subject. If planned and executed properly, these aircraft can eliminate many of the gaps normally found in traditional aerial search.

This was MRA's first time at this event and I believe it was an opportunity to help us broaden our professional and cultural ties with other countries. Next year the event will be in the UK and I expect it will also be a great networking event.

If you have any questions about the conference, feel free to contact me at **hpatz@alertcorp.com**.

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International Technical Rescue Symposium

The 2009 International Technical Rescue Symposium (ITRS) will be held on November 5-8th in Pueblo, Colorado. Co-sponsored by the MRA, ITRS is the leading forum for up to date, state-of-the-art, technical rescue information. Rescuers representing mountain, cave, fire, industrial, and swiftwater gather to discuss ways to improve safety and performance, and answer questions such as:

- What's been tested lately?
- Is that belay system reliable?
- Two-rope system or main and belay?
- Will that "xxx" hurt my rope?
- How will that new standard affect me?
- What's new in air operations?

The format consists of 2 $\frac{1}{2}$ days of peer presentations, including plenty of opportunity for you to talk to other rescuers to exchange ideas, find out what others are doing, and how they are solving problems.

ITRS encourages a free flow of information among participants, and allows a maximum number of 150 attendees to keep the setting small which permits better audience participation.

To encourage quality presentations, ITRS features the Best of Show awards ballot. Have you done a presentation at ITRS? If not, you might want to think about it. You might be the next presenter to be awarded the Best Overall Presentation, Most Practical Presentation, or Best New Research!

<u>Click here to download the registration form</u> or for more, go to <u>www.itrsonline.org</u>.



NASAR '09 CONFERENCE

The National Association of Search and Rescue (NASAR) will hold its 2009 conference May 28-30, 2009 in Little Rock Arkansas.

One of the most popular and affordable SAR conferences in North American, the NASAR conference will include pre-conference workshops, a General Membership Meeting, and the popular annual photo contest.

Click on these links for information on the seven tracks...

NASAR Certification Track
General/Management/Medical Track
Government/HLS/USAR Track
SAR Dog Track
Public Safety Dive Track
Technical Track
Swiftwater Flood Track

For more information, go to the NASAR web site at http://www.nasar.org/nasar/conferences.ph
p?id=157

For a conference registration form, to go http://www.nasar.org/nasar/downloads/200
9 NASAR registration Final.pdf

The Double Tree Hotel in Little Rock, AK is holding a block of rooms for NASAR. When booking your room, be sure to use group code "NASAR". The room rate is \$118 plus tax. Call (800) 222-TREE or the hotel directly at (501) 372-4371.

For further information, contact the NASAR Staff: 703-222-6277 voice/fax 877-893-0702 toll free

<u>conference@nasar.org</u> exhibits@nasar.org

Dan Hourihan Elected as NASAR President

Dan Hourihan, former MRA President and longtime member of Anchorage Mountain Rescue Group, has been elected to serve as the new President of the National Association of Search and Rescue (NASAR).

Other veteran mountain rescue leaders were elected to serve in leadership roles as well. The new Secretary: George Rice and Treasurer: Monty Bell.

In addition, Robert Brewer was appointed to fill a NASAR board vacancy. Brewer has been a search and rescue volunteer in Spokane County for more than 10 years, after first "tagging along with a friend just to see what it's all about." He has served as the training officer for Spokane Mountaineers Search and Rescue Team as well as responding with Spokane County Mobile Emergency Operations Center. He is currently the chairman of the Spokane City/County Search and Rescue Council and is leading the effort to revitalize Spokane County Explorer Search and Rescue.



MRA CHALLENGE COIN

By Mike Vorachek; MRA Member-At-Large

A challenge coin is a small coin or medallion bearing an organization's insignia or emblem and is carried by the organization's members. They are given to prove membership when challenged and to enhance morale. (Wikipedia)

History has it that during World War 1, American volunteers from all parts of the country filled the newly formed flying squadrons. Some were wealthy scions attending colleges such as Yale and Harvard who quit in mid-term to join the war. In one squadron, a wealthy lieutenant ordered medallions struck in solid bronze and presented them to his

unit. One young pilot placed the medallion in a small leather pouch that he wore about his neck.

Shortly after acquiring the medallions, the pilots' aircraft was severely damaged by ground fire. He was forced to land behind enemy lines and was immediately captured by a German patrol. In order to discourage his escape, the Germans took all of his personal identification except for the small leather pouch around his neck. In the meantime, he was taken to a small French town near the front. Taking advantage of a bombardment that night, he escaped. However, he was without personal identification

He succeeded in avoiding German patrols by donning civilian attire and reached the front lines. With great difficulty, he crossed no-man's land. Eventually, he stumbled onto a French outpost. Unfortunately, saboteurs had plagued the French in the sector. They sometimes masqueraded as civilians and wore civilian clothes. Not recognizing the young pilot's American accent, the French thought him to be a saboteur and made ready to execute him. He had no identification to prove his allegiance, but he did have his leather pouch containing the medallion. He showed the medallion to his would-be executioners and one of his French captors recognized the squadron insignia on the medallion. They delayed his execution long enough for him to confirm his identity. Instead of shooting him they gave him a bottle of wine.

Back at his squadron, it became tradition to ensure that all members carried their medallion or coin at all times. This was accomplished through challenge in the following manner - a challenger would ask to see the medallion. If the challenged could not produce a medallion, they were required to buy a drink of choice for the member who challenged them. If the challenged member produced a medallion, then the challenging member was required to pay for the drink. This tradition continued on throughout the war and for many years after the war while surviving members of the squadron were still alive.

Since that time, the challenge coin has become a traditional symbol of camaraderie and friendship amongst military and public safety organizations. The MRA challenge coin was created for members who wish to own or present some type of symbol of their pride in serving others in mountain rescue. Our coin was created with our trademark logo, our motto of *Courage, Compassion, and Commitment*, and symbols representing the tools we carry with our heritage. We have created a small space for engraving for presentation or gift purposes.



The Mountain Rescue Association is an organization dedicated to saving lives through rescue and mountain safety education www.mra.org