

PARARESCUE MISSION REPORT

PART ONE: OPERATIONAL

1. ORGANIZATION/LOCATION 71ARRS/ELMENDORF AFB		2. MISSION NO. 175		3. AIRCRAFT HH-3 /95-809	
4. NOTIFICATION		5. RESPONSE	DATE	TIME	6. MISSION ACCOMPLISHMENT
TIME	1710L	DEPARTURE	28 AUG	1810	PATIENT/SURVIVOR CONTACT
DATE	28 AUG 76	ARRIVAL AT SCENE	28 AUG	1929	EXTRACTION OF PATIENT/SURVIVOR
METHOD	Phone	DEPLOYMENT	28 AUG	1929	DELIVERY OF PT. TO DEFINITIVE CARE
					28 AUG 2108

7. SPECIAL ACTIVITIES PRIOR TO DEPLOYMENT

Sign out narcotics, and weapons. Pick-up air evac kit. Configured aircraft to receive patient.

8. DEPLOYMENT		9. PROBLEMS ENCOUNTERED IN DEPLOYMENT		10. EQUIPMENT		Avail	Used		Avail	Used
X	ACFT LANDING	None		RADIO		X		MOUNTAIN		
	PARACHUTE			STROBE/FLARE		X		HOUSEKEEPING		
	HOIST			JUMP KIT		X		LITTER(TYPE)	X	
	OTHER:			BACKUP KIT		X	X	OTHER:		
				OXYGEN		X	X			
				MA-1						

11. SUMMARY OF POST DEPLOYMENT ACTIVITIES

PJ exited aircraft VIA Crew Entrance Door with air Evac Kit, litter, blankets, and patient restraint straps. Pilot then shut down rotors and the FE lowered the AFT ramp. Survivor was laying on some seat cushions about 30 yards from our touch down point. After identifying myself to the patient, I did my initial PE and Treatment. Patient was then loaded on the aircraft.

12. SUMMARY OF MEANS OF EVACUATION

Litter to Aircraft. H-3 to hospital.

13. REMARKS AND RECOMMENDATIONS

PART TWO: MEDICAL (Attach separate ARRS Form 2, Part 2, for each individual patient)

14. TEAM			15. MEDICAL SITUATION ORIGINALLY REPORTED	
NAME	RANK	DUTY TITLE	One Survivor, Male, Gunshot Wound to Foot	
LaPointe, Robert L.	SSGT	PARARESCUEMAN		

16. MEDICAL HISTORY

Survivor shot himself with a large caliber rifle in left foot. This happened at 1200L, seven hours prior to our arrival. No first aid was given to patient by friends on scene. He had a large exit wound which tore off the heel of his foot. This wound had been hemorrhaging for several hours without any attempt to control it.

T

BP 90/50

P 110

R.

Male, 23 yrs. Patient

had lost a considerable amount of blood and was in shock. [redacted] was conscious and complained of severe pain. He was still hemorrhaging from the exit wound and obviously had several broken bones in the affected area. Patient was very weak, pale, and cold. I questioned him if he was on any medication or if he was allergic to any medication. He answered negative to both questions. PE and initial treatment was completed prior to loading patient on H-3.

18. PROGRESS NOTES

[illegible]

19. MEDICAL SUPPLIES UTILIZED

POUCH/KIT	ITEMS	Air	Evac	Kit
	2.	1000 ML Bags	Ringer	
	1.	250 ML Bottle	Plasma	
	100	MGM	Demerol	
	2.	Infusion Sets		
	2.	Extension Tubes		
	2.	18ga Catheters		
	4.	Alchol Swabs		
	1.	IV Infusor		
				Angular scissors
				Stethoscope
				3 Patient Straps
				Bip Cuff
				3 Kerlex
				12. 4X4's
				1 exam light
				Robert Shaw O2 Unit
				1 Pole Litter
				2 Blankets

20. REMARKS AND RECOMMENDATIONS Pilot and FE assisted PJ in initial treatment of survivor and loading on aircraft. A means of monitoring B/P on aircraft is necessary. Also taking a patients pulse is difficult while the aircraft is bouncing around. Inexpensive automatic pulse monitoring equipment is commercially available (i.e. dynamed Pulse Vital 1). Recommend that consideration be given to purchase of this item.

NAME ROBERT L. LAPOINTE

RANK
SSGT

SIGNATURE

SIGNATURE Robert L. Hunt