

PARARESCUE MISSION REPORT

PART ONE: OPERATIONAL

1. ORGANIZATION LOCATION 33 ARRS/APO SF 96239		2. MISSION NO. WESTPAC 079A		3. AIRCRAFT HC-130/AF RESCUE 95821			
4. NOTIFICATION		5. RESPONSE		DATE	TIME	6. MISSION ACCOMPLISHMENT	
TIME	1730 L	DEPARTURE	24	0405	PATIENT/SURVIVOR CONTACT		24 11
DATE	23 Oct 78	ARRIVAL AT SCENE	24	0520	EXTRACTION OF PATIENT/SURVIVOR		24 15
METHOD	Telephone	DEPLOYMENT	24	1032	DELIVERY OF PT. TO DEFINITIVE CARE		24 19

7. SPECIAL ACTIVITIES PRIOR TO DEPLOYMENT

Review of ARRSR 160-34 Ch. 2 and Part II; Preparation of mast trousers, laerdol, back-up medical supplies for deployment.

8. DEPLOYMENT		9. PROBLEMS ENCOUNTERED IN DEPLOYMENT		10. EQUIPMENT			
ACFT LANDING		Site of deployment was open sea adjacent to the M/V Hera, with pickup by motorized launch from the ship. The area was clear of floatsam/logs from the sunken ship, "Apollo I". Seas were estimated after deployment to be 18-20 foot swells, with winds at 10-15 knots.		Avail	Used		Avail
PARACHUTE							
HOIST							
OTHER:							

11. SUMMARY OF POST DEPLOYMENT ACTIVITIES

Communications on the launch were coordinated through a portable HF radio via the "Hera" to the C-130. Although the URC-64 radios were wrapped in plastic, all three deployed with the PJ's got wet and would not work. A fourth radio was deployed with the backup meds, and was recovered in working condition. The launch proceeded to the M/V Stoic after recovering our equipment to transfer one other survivor to the "Hera". After pickup of that survivor, initial eval and treatment of life-threatening injuries, the "Hera" recovered the launch. Contact was made with the C-130 on UHF radio after recovery the backup meds and after initial triage had been started on board the "Hera". ECHO Codes

12. SUMMARY OF MEANS OF EVACUATION

Stokes litter and penetrator pickup by HH-53/AF Rescue 10358.

13. REMARKS AND RECOMMENDATIONS

#11(Cont.) were also passed at that time. During treatment of the survivors, numerous radio calls from the Rescue aircraft hampered patient care. After treatment of three of the survivors had been all but completed, an HH-53 arrived on scene to evac the most serious patients. After hoisting two on board, the aircraft commander notified the PJ's to either evac the remaining survivors or gather what equipment we could in 10 minutes, and prepare for pickup. The on-scene commander was advised that treatment had no

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	Situation reported on board the M/V Hera after arrival on scene: Two unconscious; one with a cut on his stomach; two with amputated and fractured fingers; four with multiple burns and abrasions; one deceased (total of ten).	
Richardson, John T	SSgt	Training NCO		
Christopher, Jeff	A1C	Scuba Section		

16. MEDICAL HISTORY: All survivors on board the "Hera" had received numerous blows to their bodies while disembarking the sinking ship and while clinging to logs in the water. All but one survivor also received deep 2° chemical burns in small patches on various parts of their anatomy. The burns were believed to be from salt water mixing with the fuel they had on board. All survivors swallowed large amounts of salt water prior to being recovered (cont).

7. PHYSICAL EXAM FINDINGS

#1.T 98.4 BP 82/60 P 120 R 32

t#1. Major findings: Left hand trauma. Thumb amputated 1cm distal to distal joint with compound fracture of distal metacarpal and closed fracture of medial metacarpal. Neurologic function lost distal to mid-shaft of medial metacarpal. Second finger-Transverse lacerations at 2cm distal to proximal joint(anterior) and 1/2cm distal to medial joint(posterior). Closed fracture of medial metacarpal. Fourth finger-amputated 2-2-1/2cm distal to medial joint; compound fracture of medial metacarpal. Posterior feeling lost about 1cm proximal to amputation. Anterior sensation not impaired. Third finger-amputated at distal joint with compound fracture of medial metacarpal. Fifth finger-transverse laceration(anterior) at (cont)

8. PROGRESS NOTES

DAY/TIME	T	BP	P	R	CONDITION OF PATIENT/TREATMENT PERFORMED
4 Oct/1315	98.4	82/60	120	32	Pt#1: IV of Ringers' Lactate started at wide open with infusor bag. Mast trousers not used due to active bleeding in hand. Complete eval and treatment. Unwrapped hand and checked for sensation/circulation. Debridement and Betadine scrub started on hand injuries.
4 Oct/1330	-	102/66	108	26	1000cc RL administered. Second bottle(RL) started at 25 dpm(Maxi)
4 Oct/1350	-	118/60	72	24	10 mg Demarol(fractional dosage) given IV. Debridement and scrub completed.
4 Oct/1440	-	122/74	72	22	10 mg Demarol(fx dosage) given IV. Wrapped fingers individually with Betadine-soaked dressing. Used padded wire ladder splint from fingers to elbow, with fingers in position of function.
4 Oct/1530	-	122/76	108	24	10 mg Demarol(fx dose) given IV. 2000cc RL in patient. 3rd bottle started at 20 dpm.
4 Oct/1600	-	100(P)	98	26	Patient on helicopter.
4 Oct/1650	-	100(P)	90	24	10 mg Demarol(fx) given IV.
4 Oct/1805	-	96(P)	86	22	10 mg Demarol(fx) given IV.
4 Oct/1900	-	-	-	-	Patient delivered to hospital in Manila, RPI.
4 Oct/1340	97.9	92/62	88	18	Pt#2: Complete eval and treatment. Start IV RL at wide open. Unwrapped hand and checked for sensation/circulation. Debridement and Betadine scrub started on hand injuries.
4 Oct/1400	-	102/74	90	22	IV changed to D5W and slowed to 30 dpm(Maxi). Applied sterile dressing soaked with Betadine to burns and calculated Burn Formula. 10 mg Demarol(fx dosage) given IV. No other injuries or symptoms (cont)

9. MEDICAL SUPPLIES UTILIZED

POUCH/KIT	ITEMS
Jump Kits A(both)	Stethoscope; penlight; scissors(bandage); 4-1/2" elastic gauze bandage; adhesive tape; 18 ga. needle.
B(both)	4-1/2" elastic gauze bandage; Sphygmomanometer; Betadine Solution(4);
C(both)	Thermometer; Ear and ulcer syringe; Betadine sol'n(4); 4x4's(5).
D(both)	Tenotomy scissors; Adson Forceps; 4x8's(10); gloves; knife handle; #15 blade; Betadine sol'n(4).
F(both)	Elastic gauze, 3" bandage(1); 4x4's(10).
G(both)	RL 1000cc; 80# tape; Povidone iodine pad(2); IV injection set. (cont)

10. REMARKS AND RECOMMENDATIONS #16(cont). Patient #1: 38 year old male Asian(no Known allergies)

with amputations of the ends of two fingers and thumb; lacerations on other fingers, same hand; minor abrasions on all extremities. Complains of dryness in mouth and throat; pain in left hand; "body aches".

Patient #2: 25 year old male Asian(no Known allergies), with amputations of the ends of two fingers and lacerations to the other fingers, same hand. Complains of dryness of mouth and throat; pain at point of mandible, both TMJ's, ribs, abdomen and right hand. He also has abrasions on right elbow and both lower legs; burns on left lower leg and left upper arm. (cont)

NAME
JOHN T. RICHARDSONRANK
SSGT

SIGNATURE

John T. Richardson

CONTINUATION SHEET

#3(Cont). been carried out on the remaining six patients, and that the PJ's were requesting additional time on the ship to treat the other survivors. The request was acknowledged and denied.

#17(Cont). mid-shaft of medial metacarpal, with bone exposed. Evaluation: Orthopedic Emergency.

Pt#2. Major findings: T-97.9 BP-92/62 P-88 R-18 Right hand trauma. Thumb-transverse laceration 1-2cm long on pad of distal metacarpal. Second finger-amputation proximal to distal joint with compound fracture of medial metacarpal. Loss of sensation noted within 1 cm proximal to amputation. Third finger-amputation proximal to distal joint with compound fracture of medial metacarpal; transverse laceration 1 cm proximal to amputation(anterior). Fourth finger-transverse laceration completely around digit proximal to medial joint. Loss of sensation and partial loss of circulation distal to laceration. Fifth finger-2cm transverse laceration over anterior side of distal joint. Abrasions on right lateral elbow and both distal anterior legs. Deep 2° burns on left posterior distal leg and left posterior upper arm. Tenderness at both TMJ's without obvious fracture. Evaluation: Orthopedic Emergency.

Pt#3. Major findings: T-98.4 BP 84/64 P-104 R-20 Deep 2° chemical burns (less than 9%) on left lateral mandible, left lateral neck. Minor abrasions on left lateral chest, left posterior elbow; contusion left forehead. Evaluation: minimal injuries.

#18(Cont). noted.

24 Oct/1510	-	100/74	84	18	Finished Betadine scrub/debridement of right hand injuries. Fingers wrapped individually with Betadine-soaked dressing. Padded wire ladder splint used same as Pt#1.
24 Oct/1547	-	108/84	96	24	Extraction by helo. 10 mg Demarol(fx dosage)given IV.
24 Oct/1605	-	96(P)	90	16	1000cc RL and 1000cc D ₅ W administered. 2nd bottle D ₅ W started at 20 dpm.
24 Oct/1645	-	104(P)	76	20	10 mg Demarol(fx dosage)given IV.
24 Oct/1730	-	106(P)	86	22	10 mg Demarol(fx dosage)given IV.
24 Oct/1800	-	98(P)	90	20	10 mg Demarol(fx dosage)given IV.
24 Oct/1825	-	100(P)	80	24	10 mg Demarol(fx dosage)given IV.
24 Oct/1845	-	102(P)	84	22	10 mg Demarol(fx dosage)given IV.
24 Oct/ 1900	-	-	-	-	Patient delivered to hospital in Manila, RPI.

24 Oct/1500	98.4	84/64	104	20	Pt#3. Patient ambulatory, conscious. Forcing fluids by mouth from this point; IV RL wide open with infusor bag. flushed burns with fresh water.
24 Oct/1530	-	104/68	88	24	Discontinued treatment due to helo arrival to evacuate patients, and subsequent departure. Patient #3's condition had increased sufficiently as not to be in immediate need of air evac. Pt promised to continue forcing fluids by mouth after we left.

#19(Cont). H(both) RL 1000cc; infusor bag.

I(both) 18ga catheter and needle unit.

Medications Boxes: Thumbrest cartridge syringe; demarol(1 tubex); Povidone-(both) Iodine pads(5).

CONTINUATION SHEET-PAGE TWO

Backup med kit: 1000cc D₅W(2 bottles); Wire ladder splint(2).

#20(cont). Patient #3: 35 year old male Asian(no known allergies), with deep second degree chemical burns(less than 9%) on mandible, neck and elbow; contusion on forehead; abrasions on chest and elbow. Complains of dryness in mouth and throat, mild headache.

Patients #4-9 received initial Triage sorting, but were not treated.

Prior to PJ contact: Injured hands-injuries were covered with an undetermined granular medication and wrapped with roller gauze. All burns were cleansed with soap and water. Dehydration of survivors was initially treated with "as much water and liquid as they wanted."

The PJ's could have been used to a greater capacity if the On-Scene Commander had contacted the other survivor-bearing ships in the area to coordinate with the M/V Hera for medical evaluation of their survivors prior to helicopter pickup.