



# Swiftwater Rescue Emergency Action Plan

Location \_\_\_\_\_

## Checklist

- On Site Communications (REQUIRED)
  - Department Radio / Channel \_\_\_\_\_
  - Cell Phone / Dispatch # \_\_\_\_\_
  - Marine VHF Radio (Channel 16)
  
- Ambulance for Transport?
  - On Site
  - By Radio or Telephone
  
- Emergency Equipment in Vicinity
  - AED or other Cardiac Defibrillator (REQUIRED)
  - Oxygen Delivery Unit (REQUIRED)
  - First Aid Kit (REQUIRED)
  - Advanced Life Support Equipment
  
- Identify Trained EMS Providers in the Class
  - Paramedics \_\_\_\_\_
  - EMTs \_\_\_\_\_
  - Other \_\_\_\_\_

## Other Items Recommended On Site

- Program Training Manual
- Department Training Standards
- Agency's SOPs/SOGs for Water Operations

## Action Plan

- Recall all personnel, conduct head count (as needed)
- Notify dispatch
- Time of Accident
- River Velocity
- Establish Last Seen Point (if necessary)

- Request additional resources (as needed)
- Stabilize the patient/incident
- Conserve property (as appropriate)
- Turn patient/scene over to the authority having jurisdiction
- Pass on information (as needed)
- Document the incident
- Obtain statements from witnesses (as needed)
- Notify Supervisor
- Contact Dive Team if needed

## Emergency Phone Numbers

Dispatch \_\_\_\_\_

Local Emergency Transport \_\_\_\_\_

Air Transport \_\_\_\_\_

USCG \_\_\_\_\_

Dive Team \_\_\_\_\_

Divers Alert Network 1-919-684-9111

Dive Rescue International 1-800-248-3483

IADRS 1-800-IADRS-911



# Swiftwater Rescue Emergency Action Plan

A written Emergency Action Plan (EAP) is an important component in mitigating an emergency. In an effort to make certain that a water rescue team is prepared Dive Rescue International requires all trainers to complete the following form and keep a printed copy in their instructor / trainer manual. A completed EAP form needs to be on file at the Dive Rescue International office prior to instructor / trainer certification and recertification. These forms should be updated as needed and resubmitted to Dive Rescue International at a minimum of every three years during the recertification process.

After filling in the necessary blanks on the previous page, complete the information on this page:

Date

Instructor Name \_\_\_\_\_

Name of Agency \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Work Phone Number \_\_\_\_\_ Ext. \_\_\_\_\_

Alternate Phone Number \_\_\_\_\_ Type \_\_\_\_\_

Work Email \_\_\_\_\_

Home Email \_\_\_\_\_

Remember to keep a printed copy in your trainer manual and on your apparatus. Should an accident happen, all members of your team should be familiar with this plan. NIOSH investigators may likely ask to see a copy of your written Emergency Action Plan. You may also consider adding the Emergency Action Plan to your **SOPs/SOGs**.

Additional copies of this form are available online at [DiveRescueIntl.com](http://DiveRescueIntl.com)

**Please note: The *Email to Dive Rescue International* button works with email applications such as Microsoft Outlook Express, Microsoft Outlook, Eudora or Mail. If you currently use an Internet email service such as Yahoo or Hotmail, you will need to save the form and return it manually to [swatson@diverescueintl.com](mailto:swatson@diverescueintl.com) using your Internet email service.**