MEDIVAC PROCEDURES

Initial medical treatment will be provided by the on-site nurse. In the event of a serious injury that requires further medical treatment, medivac services are available through the referral unit in Yellowknife.

If the nature of the injury is such that the patient does not require a nurse escort, the company aircraft (i.e.: twin otter/helicopter) is available to provide transportation to Yellowknife.

Procedures and responsibilities are outlined in this section.

EMERGENCY PROCEDURES - ULU

MEDIVAC PROCEDURE:

HEALTH SERVICES:

- Stabilize injured/ill person
- 2. Notify the Site Supervisor
- 3. Provide direction and supervision for assistants
- 4. Notify Stanton Regional Hospital at (403)920-4111 Yellowknife

When receiving report of injury/illness:

- 1. Fill out Surface/Underground Emergency checklist
- 2. Advise caller to stay with injured person until help arrives

Referral procedure:

- Contact MacKENZIE REGIONAL HEALTH, Patient Referral Unit at (403)920-6583 to arrange for a plane
- Inform Referral Personnel that transportation is required. Give the name of the person requesting the Medivac and receiving doctor at Stanton Hospital. Provide the following information: (included on emergency information sheet)

Client's name, birthdate, health care number

The medical problem and treatment initiated

Advise if stretcher or ambulatory

Equipment that will be required ie: IV. O2

- Notify weather station at Lupin (8764) to inform the of situation. Have them follow their notification procedures
- 4. Arrange for surface foreman at Ulu to meet plane
- Notify Richard or Cynthia at Echo Bay Yellowknife (403)920-2161 if during work hours and EBM plane used
- Arrange for a cash advance if necessary, through the Site Supervisor Cash advance policy is \$300.00 available for patient.
- 7. Contact (if required) to make further flight arrangements:

NWT Air 1-800-661-0789 or 403-920-2500 Canadian Air 1-800-661-1505 or 403-873-4484

Assistants:

- Assist with the patients as requested and directed
- 2. Meet the plane and escort to Health Services or site of injury
- 3. Assist with transportation as directed

EMERGENCY PROCEDURES - ULU

SURFACE/UNDERGROUND EMERGENCY CHECKLIST:

1.	Record caller's name:			
2.	Caller's location			
3.	Nature of emergency			
4.	Location of emergency			
5.	Name of Injured/ill			
6.	Number of injured/ill			
7.	Types of injuries/illness			
8.	Time 1 st call came in			
9.	Notify Nurse and Site Supervis	sor immediately		
10.	 If mobilization or evacuation is required, notify the Surface Supervisor to have equipment and vehicles readied 			

INSTRUCT THE CALLER TO STAY WITH THE INJURED/ILL UNTIL HELP ARRIVES

EMERGENCY PROCEDURES - ULU

EMERGENCY INFORMATION SHEET:

	DATE & TIME:		
	PATIENT NAME:		
	ADDRESS & PHONE #:		
	EMERGENCY NOTIFICATION:		
	BIRTHDATE:		
	HEALTH CARE NUMBER:		
	SOCIAL INSURANCE NUMBER:		
ILLNESS / INJURY:			
TREATMENT:			
MEDICAL HISTORY:			
REFERRAL:			