

# Hurricane Fire & Rescue Hurricane, WV

## Operation Guidelines

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Air Operations
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4

**Purpose:** The use of a helicopter for transport of a patient requires absolute control of all factors on the scene to insure maximum safety. To accomplish this, the Incident Command System may be instituted and in place prior to any Medivac operations. Requesting the helicopter will be in accordance with medical protocols.

**Scope:** All Personnel

**Responsibility:** It is the responsibility of all personnel to adhere to these guidelines.

### **A. AUTHORITY AND RESPONSIBILITY AT AN INCIDENT INVOLVING HELICOPTER LANDINGS:**

1. Incident Commander - Insures that an adequate number of personnel are available to set up and control the Landing Zone (LZ). Coordinates law enforcement assistance with the landing zone control. Will designate an individual to command the Landing Zone (LZ) Sector.
2. Landing Zone (LZ) Sector - An individual who is responsible for the LZ. He/she will be the person in contact with the aircraft during landing, while on the ground and during take off.
3. Rotor Safety - The pilot will normally be responsible for the safe operations around the tail rotor. If the pilot does not assume the position, the Landing Zone (LZ) Sector should be responsible for tail rotor safety. Contact with the pilot must be made and permission received, to approach the aircraft at all time.

## B. LANDING ZONE (LZ) SECTOR

1. The Incident Commander will designate a Landing Zone (LZ) Sector Officer.
2. The Landing Zone (LZ) Sector Officer will accomplish the following:
  - a. Select a safe Landing Zone (LZ) as close to the scene as possible.
  - b. Prepare the Landing Zone (LZ) for use
  - c. Insure that the Landing Zone (LZ) crew is wearing PPE.
  - d. Helmet and proper eye protection will be worn
  - e. Communicate LZ information to the aircraft. VHF Frequency 155.400 no PL
  - f. Coordinate with pilot via radio during landing and take off
  - g. Establish a safety zone around LZ
  - h. Terminate LZ operations and return all LZ support equipment (lights, vest, etc.)
3. Select a safe Landing Zone (LZ)
  - a. Once the helicopter has been dispatched, Landing Zone (LZ) personnel need to prepare the largest unobstructed LZ possible as close to the patient as possible. Good sites include grassy fields, playgrounds, parking lots, or wide roadways, avoiding residential areas if at all possible.
  - b. The LZ should be a **minimum** of 60' x 60' during daylight hours and good weather. A **minimum** of 100' x 100' during night landings or diminished weather conditions.
  - c. Maximum acceptable ground slope of 10-12 degrees
  - d. No overhead obstructions
  - e. No vehicles, signs or poles in the LZ
  - f. The LZ should be 75-100 yards away from patient care activities. Keep in mind rotor wash and noise when selecting a LZ.
  - g. If there is no acceptable LZ with safe access, select a remote LZ and transport the patient to the LZ by fire rescue or ambulance.
  - h. Prior to landing, the pilot may pass over the landing site to visualize the LZ and identify, from the air, potential hazards.
  - i. If the pilot has concerns or sees an unsafe situation, he should immediately notify the Landing Zone (LZ) Officer so appropriate action can be taken or a new LZ set up.

4. Prepared the Landing Zone
  - a. Clear the LZ of any loose debris. Items caught in the rotor wash are dangerous for ground personnel as well as the aircraft.
  - b. Mark the site with four (4) white strobe lights placed at each corner of the LZ.
  - c. The helicopter will not land if the Landing Zone Sector has not been established and the LZ properly marked.
  - d. Utilize SFFR, Hurricane Department of Public Safety and or Police vehicles wherever necessary.
  - e. **The Landing Zone Officer should be the only ground unit in radio contact with the aircraft during the final approach and landing.**
  - f. The Landing Zone Officer should point out landmarks and obstacles, especially wires and inform the pilot of any unusual situations. (Example: A second helicopter has been requested.)
  - g. The word "**ABORT**" will be used to halt any unsafe landing conditions.

#### C. LIFTOFF PROCEDURE

1. Once the patient is loaded, all personnel should immediately retreat beyond the LZ perimeter.
2. Advise all onlookers to shield their eyes and hold down loose equipment. (Example: stretcher, blanket, etc.)
3. The Landing Zone Sector Officer will re-establish radio contact with the pilot and keep all vehicles and personnel off the LZ until the pilot has indicated he is clear of the LZ and will not be returning. (In case of mechanical problems.)
4. The Landing Zone Sector should observe the aircraft for open compartments of hatches, smoke or fire from the engine exhaust system, or loose engine coverings under the main rotor blade.
5. Hand signals will be used only when radio communications are inadequate or out of service.

#### **D. SAFETY PRECAUTIONS**

1. Always approach the helicopter from the front.
2. Never go near the tail rotor of the aircraft.
3. No smoking on the LZ.
4. No running of the LZ.
5. No vehicles within the LZ, including emergency vehicles.
6. No civilians or non-essential personnel near the LZ.
7. Protect your eyes from debris, which may be thrown up by the rotor wash.
8. Always approach a slope landing from the downhill side.
9. Carry long objects or equipment parallel to ground and below the waist.
10. The flight crew will be responsible for opening and closing all helicopter doors, compartment, or hatches.
11. The flight crew and pilot are responsible for the loading and unloading of patients and equipment. They will direct these operations.