

# RISK MANAGEMENT NOTEBOOK



Faced with uncertainty and the multitude of information to process, making decisions in the mountains often proves complex.

This notebook is an aid for the mountain soldier, both novice and experienced, in winter or summer conditions, whether as leader of a detachment or moving on a rope.





It allows him, based on factual elements, to make structured decisions with a view to increasing his security and that of the group.

It helps them to choose, prepare and carry out mountain-related activities in the field by moving away from the reductive scheme: "I see this, so I do that" in favor of a more pragmatic approach "I see this, so I adapt my level of vigilance and I do the best I can, taking into account the context, and... without a ready-made recipe! ".


# Basis of reasoning

3x3



	<b>HUMAN</b>  <b>HUMAIN</b>	<b>WEATHER</b>  <b>CONDITIONS</b>	<b>LAND</b>  <b>TERRAIN</b>
<b>avant</b>  <b>ahead</b>	<ul style="list-style-type: none"> <li>• Workforce/Equipment</li> <li>• Physical state/ Psychic</li> <li>• Experience/Training ment</li> </ul>	<ul style="list-style-type: none"> <li>• BRA &amp; weather forecasts</li> <li>• Local information</li> <li>• Identification of observables</li> </ul>	<ul style="list-style-type: none"> <li>• Map, topo</li> <li>• Location of key passages, objective risks</li> <li>• Plan B, variant</li> </ul>

Maintaining the project? Alternative solution ? Cancellation/postponement?

 <b>au</b> <b>départ</b> <b>departing</b>	<ul style="list-style-type: none"> <li>• Equipment control/ Schedules</li> <li>• Effective point</li> <li>• Status of the detachment</li> <li>• Briefing</li> </ul>	<ul style="list-style-type: none"> <li>• Observable research : Snow depth, Visibility, Wind, Temperature</li> </ul>	<ul style="list-style-type: none"> <li>• Map/terrain ratio</li> <li>• State of the land</li> </ul>
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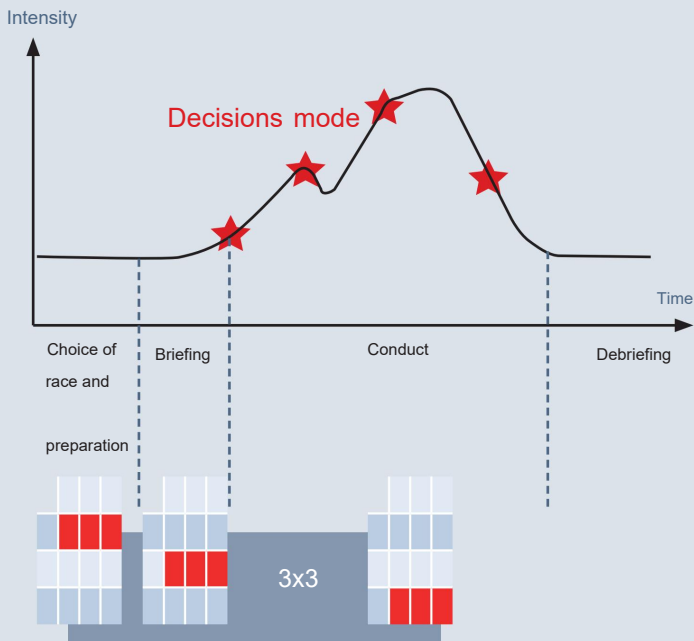
Maintaining the project? Variation/Plan B? Renunciation?

<b>passage</b> <b>clé</b>  <b>key passage</b>	<ul style="list-style-type: none"> <li>• Group Policy (vigilance mode)</li> <li>• Timing</li> <li>• Status of the detachment</li> <li>• Traps of the unconscious</li> </ul>	<ul style="list-style-type: none"> <li>• Local risk assessment</li> <li>• Use of tools (6 snow parameters)</li> </ul>	<ul style="list-style-type: none"> <li>• Risk and location</li> <li>• Magnitude and consequences</li> <li>• Safety islands</li> <li>• Retirement possible</li> </ul>
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Maintaining commitment? Variantly? Renunciation?

# Unrolled

## of a mountain activity



\*TECAP : Timing, State, Conditions,  
Adaptation, Practicability (see sheet)

# Basis of reasoning

## Decision-making and pitfalls of the unconscious

Zzz...



- I'm doing like last time on this race, I've already done it.
- I plan to go here and that's what I will do.
- I'm going to impress them by doing this race.

- He is more experienced than me, I rely on him.
- This is the only slot available, I absolutely have to do this race.
- People look at me, I have to live up to it even if I don't feel it not.

2. Analysis



3. Decision



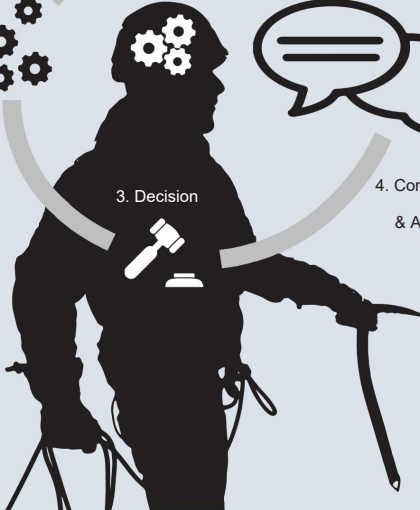
1. Information gathering



5. Reassessment



4. Communication & Application





## Human factors



### Goals)

(educational, instruction,  
learning, etc.)

#### Leader

What is my physical and moral state?  
Am I up to date on my technical skills?  
Am I subject to the traps of the unconscious?

#### Group

Effective :....  
What is the physical and moral state of the participants?  
What is the level of skills and experience of the participants?  
Is the group homogeneous?  
How many technical supervisors do I have and what are their real qualifications and skills?  
What equipment is available (collective/individual)?

#### Organization

Do I have to take into account logistical or time constraints?  
Is the leader clearly identified?  
What support can I benefit from (money, package, vehicle, accommodation, etc.)?



# Choose

avant



## Conditional factors



### Problems

What dangers will I face?



Fresh snow



Windy snow



Fragile underlay



Wet snow



Slip



Fog



Thunderstorm



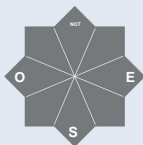
ISO 0°C high



Strong wind

### Sectors

Where are located dangers ?



### Observables

When reading the forecast, what should I encounter on the ground?

?





## Terrain factors

### TERRAIN

Massif/Sector envisaged?

#### Plan A

Objective danger, overall  
schedule, maximum  
altitude, positive  
altitude difference, profile...

• Is the route I am considering in good condition  
and feasible?

#### Variation(s)

At the start and for  
each  
decision-making node

#### Plan B

From another start



Maintenance  
of the project

Alternative  
solution

Postponement  
or cancellation



## Preparatory order

Summarize the project and allow your subordinates to start preparing the mission.

<b>Goals)</b>	
<b>Location</b>	
<b>Timing</b> When am I leaving? When am I coming back?	
<b>Elevation gain</b> <b>positive ?</b>	
<b>Weather forecast</b> What weather conditions will I encounter ?	
<b>Logistics</b> Is there any coordination necessary (VHL, other detachment, support, etc.)?	

Then: In-depth cartographic preparation +FACM





## PATRACDR

Exit of :	
<b>Personal</b> Numbers, responsibilities and organization of the detachment	
<b>Armament</b>	
<b>Outfits,</b> individual and collective material, distribution	At the beginning
	For the race
<b>Radio,</b> local emergency numbers, relay, place de l'icom	
<b>Food</b>	
<b>Camouflage</b>	
<b>Various</b> Miscellaneous, VHL/pilot coordination	
<b>Gathering</b> Times, locations	

# Individual checklist

## GENERAL

- Goretex set
- Warm down jacket type effect
- Cap
- Buff type move
- Thin gloves
- Big gloves
- Cap
- Sunglasses
- Bad weather mask
- Map/map holder/compass
- Altimeter
- Charged phone/radio
- Racing food
- Thermos/bottle 1L
- Identity papers
- Package

## BOTTOM OF BAG

- Large warm safety gloves
- Safety down jacket
- Small first aid kit
- Frontal
- Blanket
- Samsplit type cervical collar
- Compression dressing
- Spare t-shirt
- Replacement socks
- Solar cream
- External phone battery

## TECHNICAL

- Harness/helmet
- Crampons/ice ax
- Sticks
- Lanyard+2 safety carabiner
- Descd+musqtn security
- Autoblqt + security musqtn
- Straps+carabiner ...
- DVA/probe/shovel
- Skins/knives
- Touring skis/boots
- Mechanical autoblqt
- with safety
- carabiner 2 ice
- pins 2 straps/self-locking
- Safety carabiner
- Unidirectional musqtn

### RESCUE KIT IN

#### CREVASS :

## Rescue

- First aid kit
- Cervical collar
- Blanket
- Electric blanket
- UT 2000/4 carabiners/1 rope
- Light sled
- Radio lcom
- Satellite phone
- Down
- Ground sheet
- Emergency glasses
- Collective thermos
- Light stove/bowl/cartridge

## Repair

- strand X ...
- Joker ...
- Gray team rope X...
- Lanyards X ...
- Safety carabiners ...
- X Carabiners ...
- X Straps ...
- ... + Hammer
- Cable to twist
- Escape
- Dead body ...
- Friends/Corners ...
- Lunula hook/  
unblocker
- Replacement poles
- Replacement skins
- Spare ski
- Repair kit
- Multifunction pliers

## BIVOUAC

## Refuge

- Meat bag
- Hygiene kit (toothbrush, tissue, toothpaste, moisturizer)
- Means of payment (cash, check, credit card)

## Light

- Ground sheet
- Little down
- Sarcophagus survival blanket
- Bowl + cutlery
- Gas stove+cartridge
- Gasoline stove + maintenance kit
- Meals/Race food

## Heavy

- Ground sheet
- Down
- Goretex overbag
- Tent
- Candles
- Bowl + cutlery
- Gas stove+cartridge
- Gasoline stove + maintenance kit
- Meals/Race food

# Checklist

## NORDIC SKIING

### Classic

- DVA/probe/shovel
- Skins/knives

### Glacial

- Harness/helmet
- Crampons/ice ax
- 2
- safety carabiner lanyard

### Mixed

- Pair of +antibott crampons
- Classic ice ax
- Small varied set of 5 pin
- pitons including a large one
- Large route hardware 1 strap
- of 180 + carabiner
- Joker rope 50 m 1
- small set of friends/unblockers 1
- set of jammers
- Lunula/knife/rope hook

## ROCK

### Large route

#### adventure terrain 6

- 
- quickdraws 6
- 
- Climbing shoes
- Magnesia
- 1 strap of 180 1
- set of friends 1
- set of jammers
- Hammer/small set of pitons
- Unblocker
- Main track hardware

- Touring skis

- Sticks

- Shoes 1

- strand of rope

Joker+enkitage bag

- Crevasse rescue kit  
(individual sheet)

### Large route

#### equipped

- with 12
- quickdraws 2
- 2 x 50 m C
- Climbing shoes

- 

#### HARDWARE STORE

- 1 Reverso + 2 safety carabiners
- 3 safety carabiners 1 lanyard
- + 2 safety carabiners
- Self-locking + safety carabiner  
2 straps of
- 120 + carabiner
- 180 straps + carabiner

## Corridor/Steep slope

- Harness/helmet
- Crampons
- Ice ax with hammer
- 1 strand of Joker type rope
- Escaper/Cordasson/ Knife 1
- small set of pitons
- Lanyard+2 safety carabiners
- Descender + safety carabiner
- Self-locking + safety hook

## SNOW, ICE AND MIXED

### Gutter

- Pair of technical +  
antibott crampons
- Pair of technical ice axes  
with hammer and peen
- Leash
- Pin holder
- Lunula hook/knife/cordasson

- Small varied set of 8 pin
- pitons including a large one
- Large track hardware 1
- strap of 180 + snap hook
- Rope 2X60 m
- 1 set of friends
- Unblocker
- 1 set of jammers

### Icefall

- Pair of technical crampons
- Pair of technical ice axes
- Pin holder
- Lunule hook/knife/cordasson

- including a large one
- Main track hardware
- Rope 2X60 m
- DVA/shovel/probe

### Edge running

- Small varied game of pitons/hammer
- Large route hardware 1 strap
- of 180 + carabiner
- Joker rope 50 m 1
- small set of friends/unblockers 1
- set of jammers

## Briefing

### Objective

Itinerary,  
instruction,  
pedagogic

### Sequencing

Access, profile, altitude  
key passages and  
alternatively, timing, dead  
line

### Workforce

Volume,  
responsibilities,  
organization of the  
detachment

### Risks

Nivo, weather,  
ground conditions

### Equipment

Specific/distribution,  
connections, power supply,  
control

### Rules

Instructions,  
coordination

# To drive



## Decision node

Timing	<p>Is the timetable compliant (dead line, crossing point)?</p> <p>Is the estimate of the remaining race time favorable?</p>
State	<p>Does the physical/moral state of my detachment allow me to continue the project peacefully?</p> <p>Is the technical level of my detachment appropriate for the terrain encountered?</p> <p>How do I feel (physical, stress, concentration)?</p> <p>Am I under the influence of one of the traps of the unconscious?</p> <p>Are we in line with the target objective?</p>
Terms	<p>What factual elements can I observe on the ground (weather, snow conditions)?</p> <p>Do these observations match what I expected?</p> <p>Are they objectively in favor of continuing the exit?</p>
Adap-tation	<p>Am I able to safely vary the route if my next observation is unfavorable?</p>
Practi-cability	<p>Does the representation of the terrain conform to my cartographic preparation?</p> <p>What are the objective dangers?</p> <p>Are there any aggravating factors (rock bar, basin, etc.)?</p> <p>Can a favorable path be considered (avoidance, rump, etc.)?</p> <p>What can I put in place to limit the risk?</p>



Maintaining  
commitment

Variantly

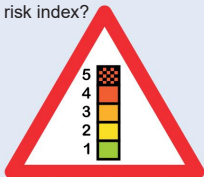
Renunciation



# To drive

# to monitor

BERA risk index?



Is the nivo problem on the ground consistent with that of BERA?

Slope

greater than  
30°?



Where are the slopes over 30° (above, in front, under my skis?)

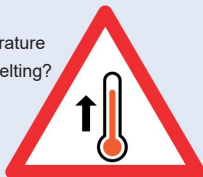
Recent  
avalanches  
observed?



Recent or old, accidental  
or natural?

What type (slab, melting, recent  
snow)?

Temperature  
rise, melting?



Signs of a strong warm spell (snails,  
C° elevation, etc.)?  
How thick is the coat being humidified?

New overloads  
(accumulation by  
wind, fresh snow,  
rain)?



Fragile  
buried  
layers?



Wind (smoking comb, sastrugi,  
cockscomb, furry comb, wavelets)?  
Recent snow (+30 cm without wind,  
+10 cm with wind)?  
Deep humidification?  
Sliding plane (grass, hard bottom)?

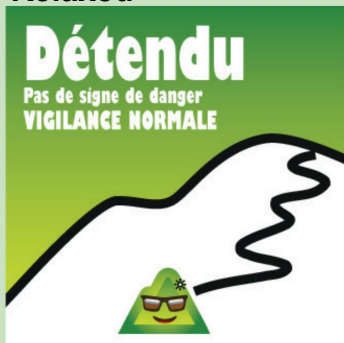
Presence of "WOUM"?  
Is the stick test meaningful?  
The hand test confirms the stick test?  
Fragile layers during the shovel test?  
Spread ?

# To drive



## Vigilance modes

Relaxed



Wary



On alert



Risky

According to [data-avalanche.org](http://data-avalanche.org)

# To drive

## Reaction to the unexpected

Choices	What is the nature of my unforeseen event? (Injury, delay, equipment damage, terrain difficulty, etc.)	
	Human	What effect does this unforeseen event have on my condition and that of the troop? Can I get support? Can I move around?
	Weather conditions- Nivo	Is there a change in conditions (favorable/unfavorable)? Do the conditions allow me to travel safely?
What is my new goal? (EVASAN, bivouac, passage equipment, escape route...)		
Ground	By what route can I achieve my goal? Are variations possible?	



CR CSM (cell phone, satellite phone, ICOM) DARE (p13)

SOS		..... Morse SOS	Or • 6 strokes per minute every minute (help needed) • 3 strokes/min (no need)
Rescue		 Yes No 17	Yes: Need help

# To drive

## Debriefing

- Were the objectives of the day met?
- Are there any injuries? Sick?
- Is there any breakage or loss of equipment?
- For the next outing, what should we collectively:
  - To change :.....
  - Improve • :.....
  - Keep :.....

**Collective**

What is my overall feeling about the release?



### Individual

Downbeat 1

Downbeat 2

Downbeat 3

On what observable elements did I make my decision?

What was I paying attention to at that moment?

On a scale of 1 to 10, what was my Personal Risk Rating?

How did I use the tools at my disposal?

What can I do to progress?



**I keep**

**I improve**

**I change**

## PROTECT, ALERT, RESCUE

### Alert message

<b>I am :</b>	Name
<b>of :</b>	Body, internship
<b>In :</b>	Name of the massif, station
<b>towards :</b>	Summit, pass, route, route
<b>on the front:</b>	North, east, south, west
<b>Contact details :</b>	Position, radio relay, telephone
<b>I face:</b>	Nature of the incident, avalanche, fall, discomfort
<b>involving:</b>	Number of victims
<b>I've undertaken :</b>	Search DVA, CPR, stretcher
<b>I ask :</b>	Helicopter, land caravan, doctor, what to do, ...

# Connections

Europe	112
Italy / Switzerland	118 / 144

## Haute-Savoie

PGHM Chamonix	04 50 53 16 89
PGHM Annecy	04 50 09 68 68

## Savoie

Maurienne Rescue	04 79 05 11 88
PGHM Modane	04 79 05 50 98
CRS Albertville	04 79 37 89 89
PGHM Bg St M.	04 79 07 01 10
Tarentaise Rescue	04 79 08 29 30

## Isère and Drome

Rescue Isère	04 76 22 22 22
PGHM Grenoble	04 76 77 57 70
CRS Grenoble	04 76 84 70 38

## High mountains

Rescue 04 92 22 22 22	
PGHM Briançon	04 92 21 58 58
CRS Briançon	04 92 21 16 51

## Alpes de Haute Provence

PGHM Jausiers	04 92 81 07 60
DZ Worthy	04 92 32 32 73

## Alpes-Maritimes

Rescue	04 97 22 22 22
PGHM	04 93 02 01 17
CRS	04 93 19 34 50

## Services

Security Station	
OP Fixed	
OP Portable	

CDC	

## Rescue trackers

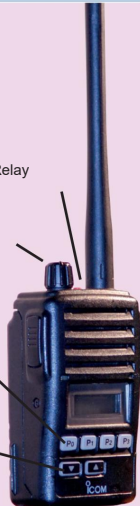
Mont Blanc	04 50 54 04 73
Rescue trackers.	

Call : Opening Relay

On/off, volume

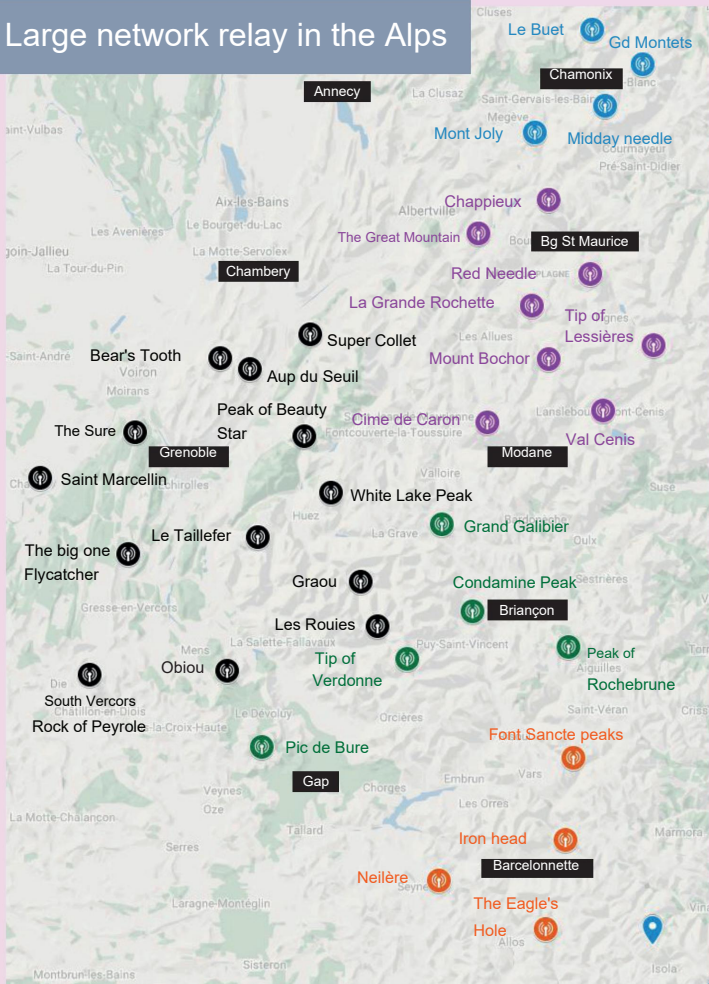
P0: long press to unlock

Frequencies



# Connections

## Large network relay in the Alps



The colors correspond to the positions on the "connections" sheet

# Avalanche



Search mode

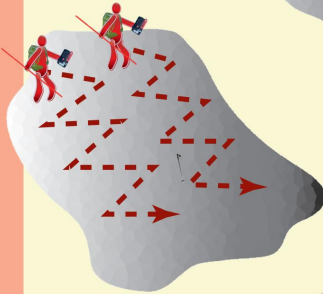
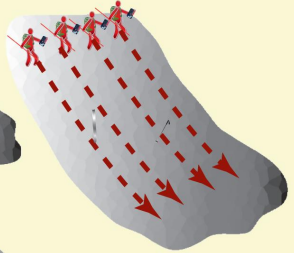


50m

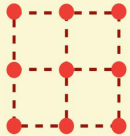
Emission



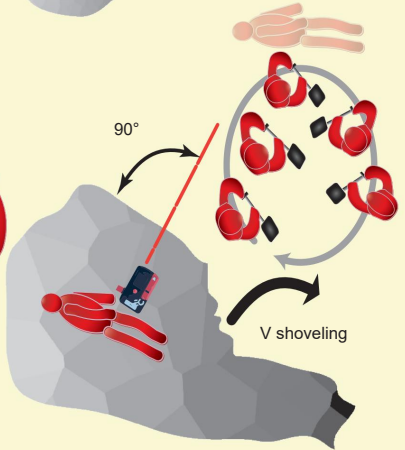
DVA Neo check  
group mode : Marking  
button when "CH" appears.  
Return broadcast: Button  
marking.



25cm



90°



# RIOTAFO strategy

## LEADER = LEADS!

### Simultaneously

#### Protect

- Take shelter if there is a risk of an avalanche

#### To alert

- Initial message
- Information gathering
- Additional message

#### To rescue

- DVA in Reception
- Clues
- First aid

DVA Reception (on or off depending on the risk of over-avalanche).

Surface Indices to check (do not remove them).

**Organize roles**  
Researchers, sounders, diggers, lookouts, radio, rescue...

Taking information if witnesses  
How many buried people, all with DVA, checked?

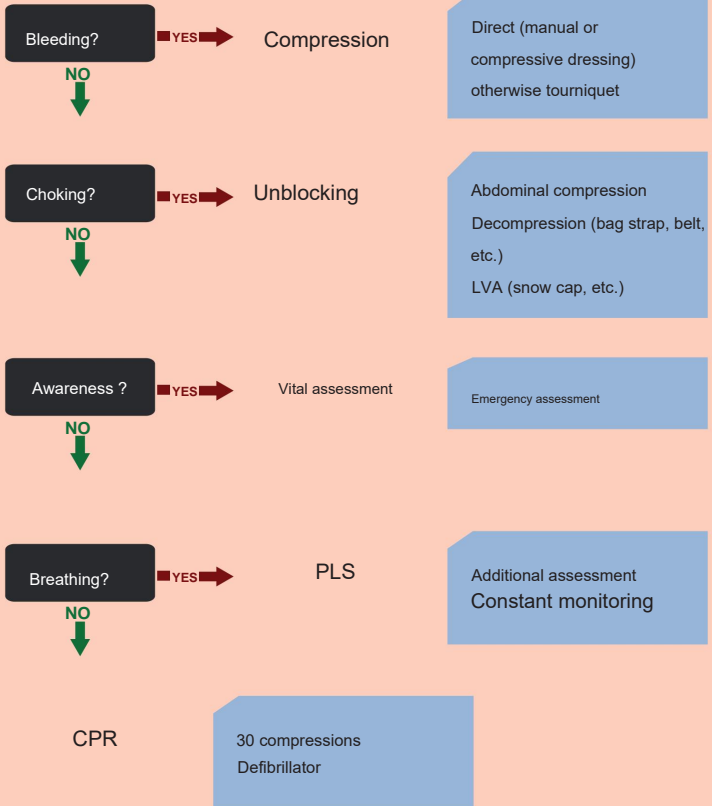
**Alert emergency services quickly!**

**First aid adapted for each victim.**

**Organize the arrival of help DZ, stretcher...**

# First aid

## What to do in life-threatening emergencies



# Altitude pathologies

## ACUTE MOUNTAIN SICKNESS

Headache	1	1 to 3 Light MAM	PARACETAMOL 1g
Nausea, anorexia	1		Slow down the pace
Insomnia	1		Hydration
Dizziness	1	4 to 6 Moderate AMS	PARACETAMOL 1g
Headaches resistant to analgesics	2		STOP until improvement
Vomiting	2		Downhill if no improvement
Rapid breathing at rest	3	>6 Severe AMS	Descent without delay
Abnormal fatigue	3		Box and oxygen if descent impossible
Low urine output	3		
HACKETT SCORE			

## PULMONARY EDEMA

Signs	Abnormal shortness of breath during exercise then at rest, cough, pink foamy sputum, +/- signs of AMS
Factors	History, young, dehydration, rapid rise
CAT	Descent, box/O2 , Nifedipine LP 20mg/4h

## CEREBRAL EDEMA

Signs	Signs of AMS, balance and behavior disorders, hallucinations, disturbances in consciousness, vomiting
Factors	Background, rapid rise, significant effort
CAT	Descent!!!, box/O2 , Betamethasone (CELESTENE) 8mg

## LOCALIZED EDEMA

Signs	Swelling of face, hand, ankle
CAT	Without gravity, adaptation of the pace of ascent, hydration

# Pathologies Symptoms

## FROSTBITE

Signs	Pain then loss of sensitivity (fingers, toes, cheeks, nose, etc.)
CAT	Passive warming (arm rolls, walking, removing wet clothes)
If recovery	Resumption of progress with precaution against the cold
otherwise	Rapid end of the race, helicopter evacuation, refuge
Sheltered, rapid warming protocol	Sanitized water bath at 38°C, ASPIRIN 250 mg (alternative: Ibuprofen 800mg, Nifedipine 10mg)

## DOSAGE (AFTER MEDICAL ADVICE)

Nausea	VOGALENE Lyoc one tablet 3x/day
Diarrhea	LOPERAMIDE 2 tabs then 1 tab with each liquid stool
Headache	PARACETAMOL 1g every 6 hours
Mild pain	PARACETAMOL 1g every 6 hours
Moderate pain	TRAMADOL 50mg every 6 hours
Severe pain	ACTIQ a lollipop to suck as long as pain (to be monitored by a third party)

## HYPOTHERMIA

Light $\geq 32^{\circ}\text{C}$ (aware/ chills)	Moderate 32 to $28^{\circ}\text{C}$ (breathe/no shivering/ disorder of consciousness)	Severe $\leq 28^{\circ}\text{C}$ (Unconscious/ not breathing)
Protect from the cold and reheat energetically. Hot beverage.	Protect from the cold but DO NOT WARM UP ENERGETICALLY. Extract from the environment + evacuation	Protect from the cold First aid gesture Evacuation request medicalized

# Victim report no.

Date hour :						Man Woman	
Last name First Name :						Unit :	
Shock		Sliding		Faintness		Burn	
Age :							
Avalanche:		Partial/total burial		Duration ?		Snow cap?	
				Air pocket ?		Fall :	
						Height	

## 1.1 IDENTIFY VITAL DISTRESS AND ACT

HAS	Airway obstruction? YES		YES	NO
	If yes I unclog the nose and mouth			
B	Hemorrhages? YES		YES	NO
	If yes, I stop the bleeding with a pressure bandage or tourniquet.			
VS	Conscious victim? YES		YES	NO
	Unconscious & not breathing:		Cardiac massage (30/2) + defibrillator	
	Unconscious & breathing:		PLS	
	Aware :		I question him to identify problems	

## 2.1 DO MY ASSESSMENT and I cover the victim

RESPIRATORY		
BREATHING YES NO	YES	NO
AMPLITUDE	YES	NO
REGULARITY	YES	NO
SYMMETRICAL	YES	NO
Normal FREQUENCY between 12 and 20		
Normal O2 SATURATION if >94%		
BREATHING SOUNDS		
DRAW		
CYANOSIS		
SWEAT		

NEUROLOGICAL		
A: conscious V: responds to orders P: responds to pain U: unconscious		
Time/space orientation	YES	NO
Initial loss of consciousness Duration	YES	NO
PUPILS	= <>	
MOTORITY Mbre SUP	YES	NO
MOTOR SKILLS Mbre INF	YES	NO
SENSITIVITY Mber SUP	YES	NO
SENSITIVITY Mbre INF	YES	NO

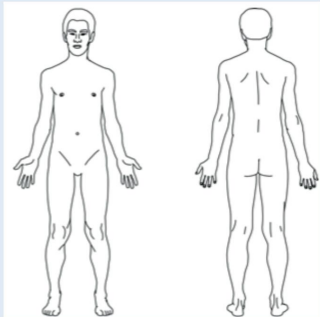
CIRCULATORY	
RADIAL PULSE	
YES	NO
REGULARITY	
YES	NO
QUALITY	
Struck	Spinning
Normal FREQUENCY 60/120	
Skin COLORING / mucous membrane	
Pink	Pale
Skin temperature	
Hot	Cold

# Additional assessment victim no.

3.1 ASSESS THE PAIN : 1 2 3 4 5 6 7 8 9 10

## 4.1 DO THE INJURY ASSESSMENT

Carry out a careful inspection and palpation  
Victim complains?



### ACTIONS CARRIED OUT

PLS	Immobilization
CPR	Cervical collar
Compression dressing	Splint: Location?
Garrot: Time?	Pelvic girdle

HISTORY (illnesses, hospitalizations, etc.)

### TREATMENTS

ALLERGIES

## 5.1 WATCH

	Hour	Hour	Hour	Hour	Hour
NEURO	AVPU	AVPU	AVPU	AVPU	AVPU
FC					
FR					
PAIN					
SP02					

# Victim report no.

Date hour :						Man Woman	
Last name First Name :						Unit :	
Shock		Sliding		Faintness		Burn	
Age :							
Avalanche:		Partial/total burial		Duration ?		Snow cap?	
				Air pocket ?		Fall :	
						Height	

## 1.1 IDENTIFY VITAL DISTRESS AND ACT

HAS	Airway obstruction? YES		NO
	If yes I unclog the nose and mouth		
B	Hemorrhages? YES		NO
	If yes, I stop the bleeding with a pressure bandage or tourniquet.		
VS	Conscious victim? YES		NO
	Unconscious & not breathing:		Cardiac massage (30/2) + defibrillator
	Unconscious & breathing:		PLS
	Aware :		I question him to identify problems

## 2.1 DO MY ASSESSMENT and I cover the victim

RESPIRATORY		
BREATHING	YES NO	
AMPLITUDE	YES NO	
REGULARITY	YES NO	
SYMMETRICAL	YES NO	
Normal FREQUENCY between 12 and 20		
Normal O2 SATURATION if >94%		
BREATHING SOUNDS		
DRAW		
CYANOSIS		
SWEAT		

NEUROLOGICAL		
A: conscious V : responds to orders P: responds to pain U: unconscious		
Time/space orientation	YES NO	
Initial loss of consciousness Duration	YES NO	
PUPILS	= <>	
MOTORITY Mbre SUP	YES NO	
MOTOR SKILLS Mbre INF	YES NO	
SENSITIVITY Mber SUP	YES NO	
SENSITIVITY Mbre INF	YES NO	

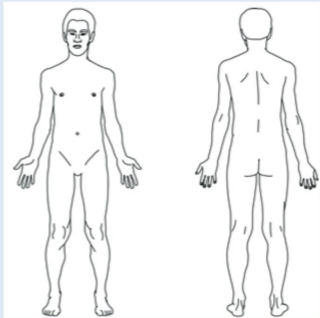
CIRCULATORY	
RADIAL PULSE	
YES	NO
REGULARITY	
YES	NO
QUALITY	
Struck	Spinning
Normal FREQUENCY 60/120	
Skin COLORING / mucous membrane	
Pink	Pale
Skin temperature	
Hot Cold	

# Additional assessment victim no.

3.1 ASSESS THE PAIN : 1 2 3 4 5 6 7 8 9 10

## 4.1 DO THE INJURY ASSESSMENT

Carry out a careful inspection and palpation  
Victim complains?



### ACTIONS CARRIED OUT

PLS	Immobilization
CPR	Cervical collar
Compression dressing	Splint: Location?
Garrot: Time?	Pelvic girdle

HISTORY (illnesses, hospitalizations, etc.)

### TREATMENTS

ALLERGIES

## 5.1 WATCH

	Hour	Hour	Hour	Hour	Hour
NEURO	AVPU	AVPU	AVPU	AVPU	AVPU
FC					
FR					
PAIN					
SP02					

# Avalanche balance sheet

 Patient ID \_\_\_\_\_

Secouriste

**AVALANCHE VICTIM RESUSCITATION CHECKLIST**  
© ICR MEDCOM, Oct. 2015, Kottmann A, Bloncher M, Pasquier M, Royd J, Brugger H

Heure de l'avalanche \_\_\_\_\_

Heure de dégagement de la tête \_\_\_\_\_

Durée d'ensevelissement a) \_\_\_\_\_ min

≤ 60 min (≥ 30°)

Si durée inconnue b) \_\_\_\_\_ min

> 60 min (< 30°)

Reporter la "Poche à air" ou cavité respiratoire au verso

Médecin

**STOP**  OUI  NON  
Traumatisme létal évident ou corps complètement gelé

**STOP**  OUI  NON  
ECG Asystolie

**STOP**  OUI  NON  
Liberté des Voies Aériennes

**STOP**  OUI  NON  
T° centrale lors du dégagement \_\_\_\_\_ °C

**STOP**  OUI  NON  
Long transport ou multivictime

**STOP**  OUI  NON  
SI RACS, Centre Hospitalier adapté à la gravité, sinon **STOP**

**Premiers secours**  OUI  NON  
Signes de vie

RCP <sup>d</sup>

**Premiers secours**  OUI  NON  
Signes de vie

**Liberté des Voies Aériennes**  OUI  NON

RCP <sup>e</sup>

**T° centrale** lors du dégagement \_\_\_\_\_ °C

**Protocoles standards de prise en charge** **STOP** ou évacuation vers un Centre adapté à la gravité

Nom du Médecin : \_\_\_\_\_

**Centre Hospitalier avec ECLS / ECMO**

Séronol  Serum K<sup>+</sup>  S8 mmol/L  d) **STOP**

## Poche à air

Oui, \_\_\_ x \_\_\_ x \_\_\_ (cm)

Non

Inconnu

SMUR:

Base hélicoptère :

Téléphone:

**H**

La check list doit rester avec le patient tout au long du parcours pré-hospitalier et intra hospitalier jusqu'à la destination finale.

**Secours  
en  
montagne**

A l'arrivée au centre hospitalier, faire une copie, une photographie ou scanner la présente fiche et garder un exemplaire dans le dossier de secours.

Abréviations:

RCP = Réanimation Cardio Pulmonaire

ALS = Advanced Life Support: réanimation spécialisée

ECLS= Extracorporeal Life Support (CEC / ECMO)

- Temps entre l'ensevelissement et le dégagement de la face.
- Si la durée d'ensevelissement est inconnue, la T° œsophagienne peut être utilisée en remplacement, pour les victimes en arrêt cardiaque.
- Il est licite de ne pas débiter une réanimation si le niveau de prise de risque est trop élevé pour l'équipe de secours, en cas de traumatisme fatal évident (section de la tête ou du tronc) ou si le corps est complètement gelé.
- Si [K+] à l'admission est > 8 mmolL-1 envisager l'arrêt de la réanimation (considérer l'impact d'un crush syndrome ou l'utilisation d'un curare dépolarisant sur la kaliémie).

En cas d'instabilité rythmique ou hémodynamique (arythmie ventriculaire, pression artérielle systolique < 90 mm Hg) ou si la T° centrale est < 30°C, la victime doit être transportée vers un centre hospitalier disposant des techniques de circulation extra corporelle (ECMO / CEC) .