Operational Risk Management Plan

Revised- January 2019
Logan Talbott, Director of Operations
# Table of Contents

## Section 1  4
**General Guide Protocols**

## Section 2  6
**Incident Response Protocol**

- Lake Tahoe
- High Sierra
- Argentina
- Bolivia
- Ecuador
- Peru
- Mexico
- Tanzania
- Russia
- Nepal
- Tibet
Section 3 24
General Emergency procedures
Helicopter guidelines
Emergency Equipment

Section 4 27
Incident Documentation & Reporting protocol

Section 5 28
Incident Investigation protocol

Section 6 28
Critical Incidents

Section 7 30
Insurance Guidelines
Emergency Phone Numbers
Section 1
General Guide Protocols

The following is a set of guidelines for Alpenglow guides to follow, as appropriate to the situation, season, terrain and activity.

1) Prior to any program, guides will review and be familiar with the Operational Risk Management Plan.
   • Review and update emergency numbers and ensure all guides are familiar with local emergency resources and likely response protocols. Guides shall write important numbers in their field notebooks.
   • Review cell phone, satellite phone or radio coverage for areas of field activity.
   • Guides will carry a copy of the course roster with participant names, medical information and emergency contact information.
   • Each guide will carry a copy of the Emergency Action Plan, and the following documents:
     1) Accident Report Form – Patient Assessment*
     2) Accident Report Form – Site Description*  
        *chapters 5-9 thru 5-11, Technical Handbook for Professional Mountain Guides
     3) Avalanche Involvement Report: short form from AAA (conditions dependent)

   • Guides will obtain and carry a paper or digital copy of weather and avalanche forecast when available and/or useful.

2) Check Medical and Release Forms
   Alpenglow guides will check Course Roster to make sure all participants have filled out / provided the 1) Medical information and 2) Release Forms. If any documents are missing, guides must ask participant to fill out needed documents prior to taking part in the activity.
   • Ask all members of the group during orientation if they have any questions about risks or hazards that are mentioned in the Release Form. Avoid answering any questions pertaining to legal matters we are not qualified to answer.
   • Ask if anyone needs to discuss any medical issues with you in private.

3) Morning and Afternoon Guide Meetings
   Whether by oneself or with fellow guides will discuss the following topics. (season dependent)

   AM discussion
   • Review weather and avalanche forecast.
   • How are things different? What's changing?
   • What are the critical factors?
   • Gaps in knowledge?
   • In terms of terrain choices, where don’t we want to be?
   • What's the big issue?
   • What's forefront in our brains today?
   • What are lesser issues?
   • Target any Avalanche problems.
   • Complete AM stability analysis form
   • Lead guide draws Conversation to a Conclusion.
PM discussion
• Was it different than we forecast? Were we correct?
• Were there incidents or near misses to learn from?
• What do we do to make it better tomorrow? Risk reduction? Communication? Human factors
• Complete PM stability analysis.

4) Avalanche Transceiver and Rescue Practice
Alpenglow guides will provide transceiver and rescue practice with clients, appropriate to the situation and time allowances on every program when avalanche safety equipment is being carried. This opportunity benefits both the guide as he or she demonstrates technique as well as ongoing education for clients.

5) Operational Records
Daily operational stability and hazard forms, observations and field tests recorded in guide’s field notebooks will be summarized in the PM form during winter operation. These forms should be reviewed by all guides to become aware of the recent hazard and trend analysis.

The following topics will be considered when appropriate for backcountry programs away from the ski area or roadside climbing areas.
• Morning weather observations
• Weather forecast
• Stability rating
• Other hazards (increased rock fall, crowding, etc.)
• Other field observations
Section 2
Incident Response Protocol

Alpenglow Expeditions has mountain guiding operations in a number of different areas, both in California and internationally. Guides shall follow the general guidelines below and supplement them with venue card for the operational area.

Initial response (all programs)
Guide: Refer to the “Emergency Action Plan” field card for direction. Every Alpenglow Guide shall carry this “EAP” at all times in their field notebook.

Office Staff: Refer to the Emergency Action Plan for office staff for direction. This is located in the emergency binder on the Alpenglow office, in the Emergency folder in Dropbox and also in Base Camp on all large expeditions.

Guides shall utilize the information below for specific details on the area they are working in.
Lake Tahoe
This covers all disciplines in Lake Tahoe, including single and multi pitch rock climbing, Via Ferrata climbing, ice climbing and ski touring.

Initial response
Refer to the Emergency Action Plan (EAP).

Outside Resources
In the event that self rescue is not feasible, additional resources shall be requested by the Alpenglow emergency response team, in the following order:

#1) Placer County/Nevada County Search and Rescue/TT Regional Rescue Team call-out
If serious injury, 911 shall be utilized to initiate a Placer/Nevada County SAR/TT Regional Rescue Team response. This response primarily consists of the ground based rescuers and helicopters if deemed necessary. Resources are as follows:
• Backcountry skiers, with basic medical, search and rescue capabilities
• Backcountry snowmobilers, with basic medical, search and rescue capabilities
• Snowcat with additional supplies and evacuation capabilities
• Backcountry ground resources, including foot searchers, ATV’s and trucks
• The TTRRT has paramedics who are trained in backcountry skiing, tech rescue, etc.

Additionally, local Fire Departments will be involved in any “near the road” incidents. This includes Donner summit rock climbing and the Via Ferrata on Tram face. The fire Dept can provide paramedics, which are extremely useful to have on scene with a severe injury.

Please see Helicopter Considerations below for information regarding use of aircraft

#2) Squaw Valley / Alpine Meadows Ski Patrol call-out (for Squaw/Alpine winter program)
As a last resort, assistance from patrol may be requested. Patrol has no obligation to participate in rescues outside of ski area boundaries, and only do so on a voluntary basis. This assistance might prove extremely helpful, however it should never be relied upon. Patrol shall always play a backup role to SAR team response.

Helicopter Considerations
The two main types of helicopters that will assist if deemed necessary are either Medical or Rescue. While guides do not have control on which aircraft responds, it is helpful to know the basic aircraft in our area.

Falcon 30- (AStar B3) This is a Placer County Sheriff aircraft. Capabilities include SAR ops, hoist and night flying. They typically fly with BLS medical personnel only.

H20/ H24 (and others from around the state, AStar B3) These are California Highway Patrol aircraft. Capabilities include SAR ops, hoist, night flying and ALS medical care. They typically fly with 1 paramedic onboard.
**Care Flight and CalStar** (Astar B3’s, Eurocopter 135’s and 105’s) These are the main medical helicopters in our area. They have night flying capabilities and fly with a nurse and paramedic. If serious injury and a good LZ is located, then this is the preferred resource. (No hoist)

**Alpenglow Emergency #s:**
Alpenglow office: +1 877-873-5376  
Logan Talbott: (USA) +1 831-236-2821  
Adrian Ballinger: (USA) +1 970-309-8698  
Dr. Monica Piris: (Spain) +34 630039560  
Dr. Eric Stendell: (USA) +1-775-303-6474  
Dr. John Swanson: (USA) +1-775-240-7359

**Hospitals**
Tahoe Forest Hospital, 10121 Pine Ave, Truckee, CA 96161 530-587-6011  
Renown Regional Medical Center, 1155 Mill St, Reno, NV 89502 (trauma center) 775-982-4100  
Truckee Tahoe Medical Group (urgent care in Squaw), 1960 Squaw Valley Rd, Olympic Valley, CA 96146 530-581-8864

**Communication**
Communication is generally easy with cell service in most areas. One area in particular that does not have cell service is the bottom of the National Geographic bowl. All teams shall ensure they have AE UHF radios when traveling in this zone.
High Sierra
This covers all disciplines in the High Sierra, including single and multi pitch rock climbing, ice climbing and ski touring.

Initial response
Refer to the Emergency Action Plan (EAP).

Outside Resources
In the event that self rescue is not feasible, additional resources shall be requested by the Alpenglow emergency response team, in the following order:

#1) Inyo or Mono County Search and Rescue call-out
If serious injury, 911 shall be utilized to initiate a Inyo or Mono County SAR response. This response primarily consists of the ground resources and helicopters if deemed necessary. Resources of TNSAR are as follows:
• Backcountry personnel, with basic medical, search and rescue capabilities
• Backcountry ground resources, including foot searchers, ATV's and trucks

Please see Helicopter Considerations below for information regarding use of aircraft

Helicopter Considerations
The two main types of helicopters that will assist if deemed necessary are either Medical or Rescue. While guides do not have control on which aircraft responds, it is helpful to know the basic aircraft in our area.

H20/ H24 (and others from around the state, AStar B3) These are California Highway Patrol aircraft. Capabilities include SAR ops, hoist, night flying and ALS medical care. They typically fly with 1 paramedic onboard.

Care Flight and CalStar (Astar B3’s, Eurocopter 135’s and 105’s) These are the main medical helicopters in our area. They have night flying capabilities and fly with a nurse and paramedic. If serious injury and a good LZ is located, then this is the preferred resource. (No hoist)

H552 (AStar B3) This is SEKI National Park's aircraft. Capabilities include SAR ops, hoist, night flying and BLS medical care. While not a primary air resource for the east side, it has been known to assist with rescues outside of the Park.

Rescue Insurance #s:
Global Rescue: +1 617-507-1050
Travel Guard: +1 715-345-1300
AAC: +1 617-459-4200
Alpenglow Emergency #s:
Alpenglow office: +1 877-873-5376
Logan Talbott: (USA) +1 831-236-2821
Adrian Ballinger: (USA) +1 970-309-8698
Monica Piris: (Spain) +34 630039560
Dr. Eric Stendell: (USA) +1-775-303-6474
Dr. John Swanson: (USA) +1-775-240-7359

Hospitals
Mammoth:
Mammoth Hospital, 85 Sierra Park Rd, Mammoth Lakes, CA 93546, (760) 934-3311

Bishop:
Northern Inyo Healthcare District (Bishop Hospital)150 Pioneer Ln, Bishop, CA 93514, (760) 873-5811

Communication
Communication is generally easy on the road and up to trailheads, and generally non-existent in the backcountry. All teams shall carry an Inreach device or sat phone for all operations in the High Sierra. They should be checked out from the office.
Argentina
This covers mountaineering trips to Mt. Aconcagua based out of Mendoza.

_Initial response_
Refer to the Emergency Action Plan (EAP).

_Outside Resources_
In the event that self rescue is not feasible, additional resources shall be requested by the guides in the field, or the Alpenglow emergency response team. Global Rescue shall be utilized to arrange any significant rescue needs, and it is important to contact them early in the response timeline.

The primary method for requesting assistance is through our local operator, Aconcagua Vision. Contact can be made via radio call to either base camp, depending on which side of the mountain the team is on. Alternately, Mauricio Capitani can be reached via text, call or email.

Local operator- Aconcagua Vision/ Mauricio Capitani: +54 9 261 653 4405, info@aconcaguavision.com

For all serious injuries, the park rangers should be alerted via Mauricio. They will organize either a helicopter or ground evacuation. In the event that Mauricio cannot be contacted, guides may contact the park rangers directly via radio @ 142.800. Global Rescue shall be involved with any Helicopter rescue decisions.

_Helicopter Considerations_
The only helicopter that operates on the mountain is the contract park helicopter. It is an A-Star B-3 and has high altitude capabilities. Any evacuation above base camp is pushing the weight allowance of the ship, and guides should plan on only sending the injured client. Typical helicopter evacuations will transport patients to the trailhead only, but they might be able to transport to Upsallata or Mendoza, conditions dependent.

_Hospitals_

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Alpenglow Expeditions
The nearest definitive care is located in Mendoza, approximately 3 hours by car from Penitentes. The main Mendoza hospitals are:

- Hospital Central, Av. Alem, 5500 Mendoza, Argentina
- Hospital Español de Mendoza Calle Belgrano, Av. San Martín 965, 5501 Mendoza, Argentina
- Hospital Universitario, Paso de los Andes 3051, 5500 Mendoza, Argentina

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- Travel Guard: +1 715-345-1300
- AAC: +1 617-459-4200

**Alpenglow Emergency #s:**
- Alpenglow office: +1 877-873-5376
- Logan Talbott: (USA) +1 831-236-2821
- Adrian Ballinger: (USA) +1 970-309-8698
- Monica Piris: (Spain) +34 630039560

**Mountain Rescue**
- Aconcagua Park Rangers- 142.800 (VHF radio)

**Communication**

Communication is generally easy on the road and in towns, and generally non-existent in the backcountry. Because of this, all teams shall carry an Inreach device or sat phone at all times outside of towns.
Bolivia
This covers mountaineering courses on Huayana Potosi, Illimani and Pequeno Alpamayo.

**Initial response**
Refer to the Emergency Action Plan (EAP).

**Outside Resources**
In the event that self rescue is not feasible, additional resources shall be requested by the guides in the field, or the Alpenglow emergency response team. Global Rescue shall be utilized to arrange any significant rescue needs, and it is important to contact them early in the response timeline.

Local operator- Grisel Gomez- newhorizons20@hotmail.com, +591 (7) 065-1227

**Helicopter Considerations**
There is no specific helicopter rescue resource out of La Paz. Global Rescue should be utilized to arrange any Helicopter needs.

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Global Rescue: +1 617-507-1050
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AAC: +1 617-459-4200

**Alpenglow Emergency #s:**
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Logan Talbott: (USA) +1 831-236-2821
Adrian Ballinger: (USA) +1 970-309-8698
Monica Piris: (Spain) +34 630039560

**Hospitals**
Hospital Arco Iris, La Paz, Bolivia (+591 71585082)
Hospital de Clinicas, Av Saavedra, La Paz, Bolivia

**Communication**
Communication is generally easy on the road and in towns, and generally non-existent in the backcountry. Because of this, all teams shall carry an Inreach device or sat phone at all times outside of towns.
Ecuador
This covers mountaineering and ski mountaineering trips on Cayambe, Cotopaxi, Antisana, and Chimborazo, as well as the acclimatization climbs of Rucu Pinchincha and Fuya Fuya.

Initial response
Refer to the Emergency Action Plan (EAP).

Outside Resources
In the event that self rescue is not feasible, additional resources shall be requested by the guides in the field, or the Alpenglow emergency response team. Global Rescue shall be utilized to arrange any significant rescue needs, and it is important to contact them early in the response timeline.

Jaime Avila, lead guide in Ecuador- +593 99 814 7559
jaimeavila@hotmail.com

Helicopter Considerations
There is no specific helicopter rescue resource out of Quito. Global Rescue should be utilized to arrange any Helicopter needs.

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Global Rescue: +1 617-507-1050
Travel Guard: +1 715-345-1300
AAC: +1 617-459-4200

Alpenglow Emergency #s:
Alpenglow office: +1 877-873-5376
Logan Talbott: (USA) +1 831-236-2821
Adrian Ballinger: (USA) +1 970-309-8698
Monica Piris: (Spain) +34 630039560

Hospitals
Hospital Metropolitano, Avenue Mariana De Jesus, Quito EC170129, Ecuador
Hospital Vozandes Quito, Juan Jose Villalengua Oe2-37, 170521 Quito, Ecuador

Mountain Rescue
ASEGUISM Rescue services- Javier Herrera, Emergency coordinator+593 99-992-6078

Communication
Communication is generally easy on the road and in towns, and generally non-existent in the backcountry. Because of this, all teams shall carry an Inreach device or sat phone at all times outside of towns.
Peru
This covers mountaineering, ski mountaineering and trekking trips to the Cordillera Blanca and Cordillera Huayhuash.

Initial response
Refer to the Emergency Action Plan (EAP).

Outside Resources
In the event that self rescue is not feasible, additional resources shall be requested by the guides in the field, or the Alpenglow incident management team. Global Rescue shall be utilized to arrange any significant rescue needs, and it is important to contact them early in the response timeline.

Local operator- Alfredo Ibarra. +043- 948826285, b_ibarra59@yahoo.es (spanish only)
Other local help- Haren Montes +51 984 660 717 (whatsapp, some English)

Helicopter Considerations
Helicopters are very difficult to procure in Peru, and have limited altitude capabilities. Prepayment must be made before they will fly. Mostly flying in from Lima, plan on 24 hour response time.

UNISTAR- Both fixed wing and rotor wing air ambulance service, can fly to about 4,500 meters. Doctor and Nurse onboard. John Woodman, +51 988 334 200

HTS Peru- Large Heli provider, they have Bell 205 and 412 aircraft, non-medical. Long ferry time, limited use in mountains and prohibitively expensive. Bill de la Torre +51 1437 1750, delatorreb@htshelicopters.com

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Global Rescue: +1 617-507-1050
Travel Guard: +1 715-345-1300
AAC: +1 617-459-4200

Alpenglow Emergency #s:
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Logan Talbott: (USA) +1 831-236-2821
Adrian Ballinger: (USA) +1 970-309-8698
Monica Piris: (Spain) +34 630039560

Hospitals/Clinic
Victor Ramos Guardia Hospital, Avenue Mariscal Toribio de Luzuriaga, Huaraz, Peru
Clinica San Pablo, Jr. Huaylas N172, Huaraz, Peru +51 43 421698

Mountain Rescue
YUNGA HIGH-MOUNTAIN RESCUE SQUAD (Unidad de Salvamento de Alta Montaña USAM)
Telephone: (043) 39-3333, E-mail: usam@pnp.gob.pe
**Communication**
Communication is generally easy on the road and in towns, and generally non-existent in the backcountry. Because of this, all teams shall carry an Inreach device or sat phone at all times outside of towns.
Mexico
This covers mountaineering trips on Iztaccihuatl and Orizaba.

**Initial response**
Refer to the Emergency Action Plan (EAP).

**Outside Resources**
In the event that self rescue is not feasible, additional resources shall be requested by the guides in the field, or the Alpenglow emergency response team. Global Rescue shall be utilized to arrange any significant rescue needs, and it is important to contact them early in the response timeline.

Local operator- Armando Dattoli. +5215555011264, armandodattoli@yahoo.com

**Helicopter Considerations**
There is no specific helicopter rescue resource in Mexico. Global Rescue should be utilized to arrange any Helicopter needs.

**Rescue Insurance #s:**
Global Rescue: +1 617-507-1050
Travel Guard: +1 715-345-1300
AAC: +1 617-459-4200

**Alpenglow Emergency #s:**
Alpenglow office: +1 877-873-5376
Logan Talbott: (USA) +1 831-236-2821
Adrian Ballinger: (USA) +1 970-309-8698
Monica Piris: (Spain) +34 630039560

**Hospitals**
Hospital Puebla, Priv. De las Ramblas 4, Desarrollo Atlixcáyotl, 72197 Puebla, Pue., Mexico
Hospital Betania, 11 Oriente 1826, Azcarate, 72501 Puebla, Pue., Mexico

**Mountain Rescue**
Rescue Brigade Alpine Rescue of Mexico AC Emergency: (044) 3071 1105 55, (044) 55 2859 0317

**Communication**
Communication is generally easy on the road and in towns, and generally non-existent in the backcountry. Because of this, all teams shall carry an Inreach device or sat phone at all times outside of towns.
Tanzania
This covers trekking trips on Mt. Kilimanjaro.

Initial response
Refer to the Emergency Action Plan (EAP).

Outside Resources
In the event that self rescue is not feasible, additional resources shall be requested by the guides in the field, or the Alpenglow emergency response team. Global Rescue shall be utilized to arrange any significant rescue needs, and it is important to contact them early in the response timeline. Generally, a carry out by foot to the trailhead will be required.

Local operator- Florent Ipanaga- +255766657854, florentipananga@ymail.com

Helicopter Considerations
Global Rescue should be utilized to arrange any Helicopter needs, and it is important to contact them early in the response timeline.

Rescue Insurance #s:
Global Rescue: +1 617-507-1050
Travel Guard: +1 715-345-1300
AAC: +1 617-459-4200

Alpenglow Emergency #s:
Alpenglow office: +1 877-873-5376
Logan Talbott: (USA) +1 831-236-2821
Adrian Ballinger: (USA) +1 970-309-8698
Monica Piris: (Spain) +34 630039560

Hospitals
Arusha Lutheran Medical Centre, Makao Mapya Rd, Arusha, Tanzania
AICC Hospital, Old Moshi Road, Arusha, Tanzania
The Nairobi Hospital, Argwings Kodhek Rd, Nairobi, Kenya

Communication
Communication is generally easy on the road and in towns, and generally non-existent in the backcountry. Because of this, all teams shall carry an Inreach device or sat phone at all times outside of towns.
Russia
This covers mountaineering and ski mountaineering trips on Mt. Elbrus.

*Initial response*
Refer to the Emergency Action Plan (EAP).

*Outside Resources*
In the event that self rescue is not feasible, additional resources shall be requested by the guides in the field, or the Alpenglow emergency response team. Global Rescue shall be utilized to arrange any significant rescue needs, and it is important to contact them early in the response timeline.

Local operator- Viktor Nikolaev, +495 736 5937, ttravel@df.ru

*Helicopter Considerations*
Global Rescue should be utilized to arrange any Helicopter needs, and it is important to contact them early in the response timeline.

*Rescue Insurance #s:*
Global Rescue: +1 617-507-1050
Travel Guard: +1 715-345-1300
AAC: +1 617-459-4200

*Alpenglow Emergency #s:*
Alpenglow office: +1 877-873-5376
Logan Talbott: (USA) +1 831-236-2821
Adrian Ballinger: (USA) +1 970-309-8698
Monica Piris: (Spain) +34 630039560

*Hospitals*
Central Regional Hospital, Mineral Waters Street. Kislovodsk, 59 (Mineralnye Vody)

*Mountain Rescue*
Terskol Rescue Post- (tel. 86638-71489)
Rescue service Nalchik (head office): Tel: 86622 93-244 / 93-284.

*Communication*
Communication is generally easy everywhere, including summit day on Elbrus. Guides shall carry a cell phone at all times.
Nepal
This covers mountaineering and trekking trips in the Khumbu region of Nepal.

**Initial response**
Refer to the Emergency Action Plan (EAP).

**Outside Resources**
In the event that self rescue is not feasible, additional resources shall be requested by the guides in the field, or the Alpenglow emergency response team. Global Rescue shall be utilized to arrange any significant rescue needs, and it is important to contact them early in the response timeline.

Local operator: Himalayan Vision (Kari Kobler) +41 031 381 2333, Kari@kobler-partner.ch

**Helicopter Considerations**
Global Rescue should be utilized to arrange any Helicopter needs, and it is important to contact them early in the response timeline.

Fishtail Air: (Kathmandu office) +977 9751000119; (Ashish – mobile) +977 9751000100; (Thuraya) +8821687701373
Dynasty Helicopters: Pemba +977 1 4497418 or 977 9751006451
Mountain Helicopters: Pasang +977 1 4111032 or 977 9851050120

**Rescue Insurance #s:**
Global Rescue: +1 617-507-1050
Travel Guard: +1 715-345-1300
BMC: 0044 20 7173 7933
AAC: +1 617-459-4200

**Alpenglow Emergency #s:**
Alpenglow office: +1 877-873-5376
Logan Talbott: (USA) +1 831-236-2821
Adrian Ballinger: (USA) +1 970-309-8698
Monica Piris: (Spain) +34 630039560

**Nepal Emergency #s:**
Nepal Int’l Clinic: (977-1) 4434 642, 4435 357
CIWEC Clinic: 977-1-442-4111, 443-5232, 441-3163, 441-2590
Grand International Hospital: +977-1-4380223, +977-1-4381047

**Sherpa Emergency #s:**
Dorji 9803415976, Tashi 9841326187 or 9813457900, Pasang 9841845612 or 9808731145, Dan Nuru 9813010966

**Khumbu Lodges:**
MONJO - Monjo Guest House: 977 9803421764
NAMCHE - Alpine Lodge : (Tenzing & Tenzing):977 38540300/ 977 9803749365
KHUMJUNG - Tashi Friendship: (Phurba Tashi): 977 38540285/9779803457580
PHORTSE - Phortse Guesthouse: (Pan Nuru): 977 38540292
DINGBOCHE - Khumbu Resort: 993380063/9841787769

Other:
Hyatt Hotel: 977 14491234
Billi Bierling: (Nepal) +977 9803034526, (Satellite) +8821621360443
Meteotest: +41 313072626

Hospitals
Kathmandu Medical College Teaching Hospital, Clinical Science Complex, Sinamangal Rd, Kathmandu 44600, Nepal
CIWEC Hospital Private Limited, G.P.O. Box 12895, Kapurdhara Marg, Kathmandu 44600, Nepal
Civil Service Hospital, Min Bhawan, Kathmandu 44600, Nepal

Communication
Communication is generally easy on the road and in towns, and generally non-existent in the backcountry. Because of this, all teams shall carry an Inreach device or sat phone at all times outside of Kathmandu.
Tibet
This covers mountaineering and trekking trips on the North side of Mt. Everest and Mt. Cho Oyu.

Initial response
Refer to the Emergency Action Plan (EAP).

Outside Resources
In the event that self rescue is not feasible, additional resources shall be requested by the guides in the field, or the Alpenglow incident management team. For serious injuries requiring rapid evacuation to a hospital, ground transportation to the Nepali border will need to be arranged.

Local operator: Himalayan Vision (Kari Kobler) +41 031 381 2333, kari@kobler-partner.ch
CTMA: Tshedron email 2181201832@qq.com
Chengdu help: Cindy- +86 136 1811 5359 (Wechat)

Helicopter Considerations
As of Summer 2018, there is no helicopter service in Tibet. Patients must be brought to the Nepal boarder and then we can fly to Kathmandu.

Fishtail Air: (Kathmandu office) +977 9751000119; (Ashish – mobile) +977 9751000100; (Thuraya) +8821687701373
Dynasty Helicopters: Pemba +977 1 4497418 or 977 9751006451
Mountain Helicopters: Pasang +977 1 4111032 or 977 9851050120

Rescue Insurance #s:
Global Rescue: +1 617-507-1050
Travel Guard: +1 715-345-1300
BMC: 0044 20 7173 7933
AAC: +1 617-459-4200

Alpenglow Emergency #s:
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Logan Talbott: (USA) +1 831-236-2821
Adrian Ballinger: (USA) +1 970-309-8698
Monica Piris: (Spain) +34 630039560

Nepal Emergency #s:
Nepal Int’l Clinic: (977-1) 4434 642, 4435 357
CIWEC Clinic: 977-1-442-4111, 443-5232, 441-3163, 441-2590
Grand International Hospital: +977-1-4380223, +977-1-4381047

Tibet Emergency #’s
Tsering Tashi (CTMA) cell- 13618900681, tseringtashi34@yahoo.com
**Sherpa Emergency #s:**
Dorji 9803415976, Tashi 9841326187 or 9813457900, Pasang 9841845612 or 9808731145, Dan Nuru 9813010966

**Other:**
St. Regis Hotel: +86 891 680 8888
Billi Bierling: (Nepal) +977 9803034526, (Satellite) +8821621360443
Meteotest: +41 313072626

**Hospitals**
CIWEC Clinic: 977-1-442-4111, 443-5232, 441-3163, 441-2590 (BEST IN KTM)
Lhasa: Tibetan Medicine Hospital- 26 No. Niangre Road, Lhasa, 0891-6323231
Shigatse: Tibetan Medicine Hospital- No 03 Middle Jiefang Road, Shigatse, 0892-8822858
Tingri: Tingri Peoples Hospital- 2 Zhufeng N Rd, Tringri, +86 892 826 2289

**Communication**
Communication is generally easy on the road and in towns, and generally non-existent in the backcountry. Because of this, all teams shall carry an Inreach device or sat phone at all times outside of towns.
Section 3

General Emergency procedures

- 24-hour contact person will be available to help coordinate and facilitate rescue response.
- The 24-hour contact person shall be a member of the Alpenglow IMT unless another person is assigned in their absence (eg- office staff during regular hours).
- Communication via UHF or VHF radio, cell phone or satellite will be ensured to help coordinate rescue.
- At the base area or trailhead, prior to course, guides inform participants of immediate emergency plan to include radio communications, emergency contacts, first aid kit, directions and bearings of locations and landscape features, as part of morning briefing.
- Self-rescue is the guide's primary goal. Outside rescue is only a backup. Each guide is responsible to organize group emergency gear for backcountry skiing.
- Incident/accident forms to be filled out after each incident where an injury has occurred. These forms are available at the end of this document, and from the Technical Handbook for Professional Mountain Guides.
- Non-injury Incidents or near misses must be recorded in guide’s field notebooks.
- Guides must keep copies of full guide’s field notebooks in a safe place for future reference.
- Post serious incident/accident debriefs are to take place with ALL guides and participants regardless of whether or not they were involved in the accident.
- A record must be kept of the discussion.
- Close calls (no injuries or actual avalanche involvements) will be debriefed in the same fashion. The group as a whole should be involved in this discussion to avoid changes in the facts in people’s minds. Explain what happened and why.

Basic Emergency Action Plan

**Scene Assessment**

- Slow down, gather yourself and remain calm
- Take charge of the situation
- ID Risks to rescuers, patients, clients & public
- Mitigate or avoid risks to rescuers and others
- ID number of patients and mechanism of injury
- Note the time of incident
- Notify Alpenglow Base/911/emergency contact of event, location, and “sound alarm”

**Rescue / Emergency Medical Care / Stabilization of Patients**

- Avalanche rescue / high angle rescue?
- Rapid Primary assessment
- Treat life + limb threatening injuries
- Thorough secondary assessment
- ID patient needs (life, limb OR significant rescue- Request Heli)
- Contact AE Base with equipment & recourse request- Be clear and concise.
- Contact AE medical advisor if medical advise is needed
- Ongoing treatment and monitoring of patient(s)
Evacuation
- ID evacuation options
- Consult AE Base to choose plan
- Helicopter involvement?
- Communications options - Radio, cell, Satellite, battery strength?

Fatality
- Resuscitation efforts shall always be initiated unless there are obvious signs inconsistent with life (major full body trauma, decapitation etc)
- Do not remove or disturb the body unless instructed to do so by Sheriff’s Dept.
- Maintain calm leadership over guided group.
- Rendezvous at AE base or with a member of IMT as soon as possible upon leaving the field.

Helicopter guidelines
1. Limitations:
   - Should only be used in extreme circumstances
   - Only fly in good weather; high cloud ceilings and appropriate winds
   - Pilots do not like to wait on the ground in case weather deteriorates
   - Mountain flying is dangerous; only use when absolutely necessary

2. Site Specifics:
   - Use a bright colored flagging for wind direction
   - Choose a site less than 10 degrees in steepness
   - Have the sites long axis point into the wind
   - Select a 100’ x 100’ hard surface with NO OVERHEAD HAZARDS.
   - Consider hoist if no suitable LZ
   - If hoist/short-haul, ID all threats to heli (trees, LIFT CABLES) and ensure pilot is aware
   - Establish a perimeter of 150’ around the LZ. No equipment, loose items or personnel shall be within this perimeter, until instructed by the crew
   - Only approach aircraft when the pilot or crew motions you to do so; keep your head down, no loose clothing or hats
   - NEVER approach helicopter from the uphill side
   - NEVER approach helicopter from the tail

3. Information to relay to dispatch
   - Location: Use latitude & longitude whenever possible. Include any prominent geological features or identifiable (from the air) structures close to your location. Ski areas should identify which lift, run, or pre-determined LZ they should plan to use. Include any other information that may help them determine the need for special resources, such as backcountry location, need for SAR or multiple helicopters. If you are in a residential or suburban area, please include the street name with cross streets.
   - Patient Information: Patient complaint or problem, age, sex, and estimated weight. If you have more than one patient needing evac, communicate this ASAP along with each patient’s estimated weight.
Emergency Equipment

Basic items for all categories include:

- Guide’s Field notebook with EAP & emergency contact numbers
- Course Roster with participant names and emergency contacts
- First aid kit
- Emergency bivouac sack (for backcountry days)
- Communications device
- Watch
- Accident Report form - Patient Assessment
- Accident Report form Site Description
- Operational Stability Analysis and Forecast (AM&PM) (when appropriate)
- Digital Camera or smart phone (photos/videos)
- Water, food and warm clothing

In addition to basic items previously listed, consider the following for:

**Rock Climbing**
- Additional rope, protection, carabiners, sling and cordage for rescue

**Alpine Climbing**
- Additional protection, carabiners, sling and cordage for rescue
- Map, compass, altimeter, GPS (when appropriate)
- Snow/weather study kit (when appropriate)
- Repair kit
- Transceiver, probe and shovel (when conditions warrant)
- Fire starter or mini stove and fuel

**Ice Climbing**
- Additional protection, carabiners, sling and cordage for rescue
- Hot-drink vacuum bottle
- Fire starter or mini stove and fuel

**Ski and Snowboard Touring and Mountaineering**
- Emergency rope, carabiners, sling and cordage
- Transceivers, probes and shovels
- Spare transceiver, probe and shovel in vehicle at trailhead
- Map, compass, altimeter, GPS (when appropriate)
- Snow/weather study kit
- Rescue sled components
- Fire starter or mini stove and fuel
- Repair kit
- Spare food, water and extra clothing

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Alpenglow Expeditions
Section 4

Incident Documentation & Reporting protocol

Although the seriousness of the accident will dictate the intensity of the documentation to some extent, it is imperative that guides and staff complete the following basic steps, in parallel with Rescue.

- Upon receiving notification that an incident has occurred, write down as much information as possible. (who, what, when, where, how, etc).
- Keep detailed notes from beginning to end of incident, with times of all significant events.
- Find and print out the waiver of any involved client (AE and SV).
- Guide or staff shall obtain a witness statement either during or immediately after the incident. For simple and minor incidents, this could just be the guest involved. For more serious events, all guests, guides and any members of the public that witnessed the incident shall be asked to give witness statements.
- Complete the Accident Report Form – Patient Assessment
- Complete the Accident Report Form – Site Description
- Complete the Avalanche Involvement Report: short form (If applicable)
- Immediately after debriefing event with the Alpenglow IMT, guide shall write a detailed report of the event. The more serious the incident, the more detailed this document should be.
- Obtain photographs and video of accident site. Again, the more serious the incident, the more numerous and detailed these photos/video should be.
- Pull any equipment directly involved with the event from circulation (if applicable). This equipment shall be delivered to and inspected by the Alpenglow IMT before it is placed back into service, destroyed or submitted to authorities.
- Refrain from discussing incident with anyone not directly involved, especially the media and refer all questions to the Alpenglow IMT.
- Throughout and after the event, guides and staff shall maintain a caring and supportive approach to the involved guest and all members of the group.
Section 5
Incident Investigation protocol
The Alpenglow IMT shall review and confirm that all documentation per the protocol on page 27 has been collected. If there is more information/statements needed, The IMT shall complete the information gathering process. If the seriousness warrants, contact with the insurance company shall be made within 72 hours of the incident, and the investigation shall be carried out in cooperation with insurance, medical, Fire/Rescue and law enforcement authorities.

This documentation packet shall be permanently and securely filed with Alpenglow Expeditions. Completing this process early ensures that all information is accurate and detailed, and can be easily accessed years later in the event of litigation or other needs.

Section 6
Critical Incidents
A critical incident can be any situation faced by staff that could be considered disturbing or causes them to experience unusually strong emotional reactions either at the scene or following the incident. The following are examples of incidents that may generate unusually strong emotional reactions and could indicate a need for a CISM process and a Team response:
- Major disaster/mass casualty incident
- Serious injury, line of duty death or suicide of guide staff
- Serious injury or death of civilian
- Death or serious injury of a child
- Multiple fatality incidents
- Any incident which attracts large-scale media coverage
- Loss of life following extraordinary or prolonged effort by guides and emergency services personnel
- An unusual incident in which the potential for an immediate or delayed emotional response is high
- Accumulating stress reactions over a long period of time after involvement in multiple critical incidents
- Injury or death of a family member, friend or acquaintance during emergency services operations

In the event of a serious incident that might qualify for CISM, the Alpenglow IMT shall contact the “East Side CISM team” via the below information sheet.
East Side Critical Incident Stress Management Team

Purpose of Critical Incident Stress Management (CISM)
CISM enables and accelerates recovery for people having normal, predictable reactions to abnormal or extraordinary events. This can often be achieved through a post-critical incident diffusion/debriefing. The diffusion/debriefing is a psychological and educational process designed to reduce and control the impact of critical incidents. It encourages communication and explores the emotional and personal stress responses to critical incidents and provides information and resources to cope with and reduce those responses.

Critical Incidents that might result in a CISM Team response
A critical incident can be any situation faced by emergency service personnel that could be considered disturbing or causes them to experience unusually strong emotional reactions either at the scene or following the incident. The following are examples of incidents that may generate unusually strong emotional reactions and could indicate a need for a CISM process and a Team response:
- Major disaster/mass casualty incident
- Serious injury, line of duty death or suicide of emergency services personnel
- Serious injury or death of civilian
- Death or serious injury of a child
- Multiple fatality incidents
- Any incident which attracts large-scale media coverage
- Loss of life following extraordinary or prolonged effort by emergency services personnel
- An unusual incident in which the potential for an immediate or delayed emotional response is high
- Accumulating stress reactions over a long period of time after involvement in multiple critical incidents
- Injury or death of a family member, friend or acquaintance during emergency services operations

Accessing the East Side CISM Team
The East Side CISM Team is available to respond locally to requests made through the Grass Valley Emergency Command Center (ECC). An agency can request CISM support for its personnel by calling the Grass Valley ECC at (530) 477-0641, Ext. 7. An East Side Team member will contact you. Please be prepared to provide the following information (or as much as you have available):
- Nature of the critical incident
- Desired date and time the expected diffusion/debriefing would take place
- Location of the diffusion/debriefing
- Expected number of participants
- Name and phone number of the person requesting CISM

Your East Side CISM Team
The East Side CISM Team is composed of members from Northstar Fire Department, CAL FIRE, Squaw Valley Fire Department, Truckee Fire Protection District, Truckee Police Department and the North Tahoe Fire Protection District. Each team member has received specialized training to lead or assist in a CISM debriefing/diffusion. If you have any questions about the East Side CISM Team, please contact Jerry Fowler or Brandon Anderson at Truckee Fire 530-582-7850.
Section 7
Insurance Guidelines
General do's and don’ts after accident or incident, per Alpenglow’s Insurance Carrier
Once the situation is under control, A member of the IMT shall contact insurance.

Don Pachner-Cell - 914-234-2228
Email- claims@pachner.info

• Cooperate with medical, rescue and law enforcement authorities
• Send narrative with who, what, why, where, when and all available details
• Include name and contact information for guide, any witnesses, claimants (or injured persons) and point of contact at Alpenglow
• Include known status and location of any injured persons or property
• Include any available official reports available from land managers or others
• Do not admit fault or provide reasons for accident to any third parties at this point
• You can state you are sorry it happened

Emergency Phone Numbers
Prioritize order as is appropriate to the situation.

<table>
<thead>
<tr>
<th>ALPENGLOW INCIDENT MANAGEMENT TEAM</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name</td>
</tr>
<tr>
<td>Logan Talbott</td>
</tr>
<tr>
<td>Dr. Monica Piris</td>
</tr>
<tr>
<td>Dr. Eric Stendell</td>
</tr>
<tr>
<td>Dr. John Swanson</td>
</tr>
<tr>
<td>Adrian Ballinger</td>
</tr>
</tbody>
</table>

ADDITIONAL RESOURCES

<table>
<thead>
<tr>
<th>Name</th>
<th>Title</th>
<th>#</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alpenglow Base</td>
<td>877-873-5376</td>
<td></td>
</tr>
<tr>
<td>Squaw Dispatch</td>
<td>530-452-7145</td>
<td></td>
</tr>
<tr>
<td>Alpine Dispatch</td>
<td>530-581-8238</td>
<td></td>
</tr>
<tr>
<td>Squaw Security</td>
<td>530-452-7180</td>
<td></td>
</tr>
<tr>
<td>Placer Sheriff</td>
<td>530-581-6310</td>
<td></td>
</tr>
<tr>
<td>CHP Air Ops</td>
<td>530-823-4535</td>
<td></td>
</tr>
<tr>
<td>Care Flight Dispatch</td>
<td>800-648-4888</td>
<td></td>
</tr>
<tr>
<td>AMGA OFFICE</td>
<td>303-271-0984</td>
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</tbody>
</table>
Guides are encouraged to review Risk Management chapters 5-1 to 5-14 in the Technical Handbook for Professional Mountain Guides. Guides will note additional important phone numbers or radio frequencies of local resources that may offer assistance, such as local Search & Rescue groups, ski resort ski patrol near your area of operation, etc. Carry phone numbers of other Alpenglow guides who may offer insight for emergency management.

**Trip end call-in by Guides**

Immediately after the course closes after a backcountry trip, guides are required to make contact with the designated 24-hour contact and leave word with how the trip went. This is an important time to describe any incidents, near misses or any other important information the office should know about prior to speaking with any of the participants. For regular day guiding, the call most often is made to the Alpenglow office.