



# Medical and Evacuation Procedures Transylvania 2019

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# 1. Introduction

## Medical screening

### Medical questionnaire

All participants will be required to enter their medical details onto the Operation Wallacea data portal. Details of how to log on are sent out upon receiving the booking from the participant. The data is stored securely and is initially only available to certain Operation Wallacea staff members, and, for groups of school students, the teacher leading the group.

### Screening

All medical forms are assessed by Operation Wallacea. The country manager may seek to contact the participant to gather further information, which they would then enter on to the portal.

Following initial screening by the country manager, the details are then passed to the on-site medic. He or she can ask for further information, and will have an opportunity to discuss any issues of concern at a medical meeting (between the expedition medics and Operation Wallacea staff) held approximately 3 months prior to the expedition. The team of medics will discuss any potential medical issues, advise anyone if a further consultation with a medic is required and will also suggest additions to the medical kits in light of any pre-existing health problems highlighted.

### Insurance

Operation Wallacea has purchased a comprehensive travel insurance policy on behalf of all of its participants which includes personal property, cancellation, curtailment and rearrangement cover as well as unlimited overseas medical and repatriation expenses. This ensures that Operation Wallacea can agree evacuation routes with the insurers prior to the expedition, thus expediting the administrative processes behind organising an evacuation.

### Levels of priority of incidents (Medium, High, Emergency)

Carefully planned evacuation protocols are in place for the site in Transylvania (Romania). All staff will have training on the evacuation procedures and protocols.

Because of the high variability of influential factors such as the nature of potential injuries, a number of different evacuation scenarios must be prepared for prior to the season. All staff are fully briefed in these scenarios, and this report describes the most commonly used and available evacuation options.

Once a major incident or emergency is identified the site manager responsible at the village site will advise Fundatia ADEPT. The specific site manager will take overall control as Incident Coordinator in conjunction with senior staff if they are in a position to assist. The Site Manager will communicate with the Medical Officer in order to determine the level of emergency evacuation required for the patient. These should be classified as Medium Priority, High Priority or Emergency.

### Medium Priority

Cases in which the patient is in no immediate danger but the onsite facilities are unable to cope were their condition to deteriorate. An example of this would be falling over on a trek causing a cut requiring stitching.

This requires the patient to be moved as quickly as possible without the need to hire special vehicles to the nearest appropriate suitable facilities normally to the hospital in Sighisoara.

### **High Priority**

Cases where the patient's health is at risk if immediate action is not taken. An example of this is a broken bone. This requires a 112 phone call to the emergency services in Romania who will send an ambulance to transport the patient to Sighisoara Hospital or the A&E department, at the University Hospital in Targu Mures.

### **Emergency**

Cases where the patients' life is at risk if immediate action is not taken. This requires a 112 phone call and the fastest possible transfer usually by ambulance to Sighisoara Hospital. There is also a helicopter emergency evacuation service based in Targu Mures known as SMURD – this is described more fully under emergency evacuations.

In all evacuation cases where a patient is being transferred to medical facilities they should be accompanied by the relevant Medical Officer or someone appointed by the Medical Officer as fit to accompany the patient. Most ambulance teams in Romania speak English and this can be requested when phoning 112 (961 specifically for an ambulance).

It is the responsibility of the Medical Officer and site manager at the relevant site to determine if an emergency scenario exists and to ensure the patient is stabilized ready for evacuation.

### **Insurance**

Opwall expedition costs include a comprehensive travel insurance policy including unlimited Overseas Medical and Travel Expenses, cover for Personal Property and Cancellation, Curtailment and Rearrangement cover for all participants. This is provided by Zurich Insurance Group, one of the world's largest insurance groups, with about 55,000 employees serving customers in more than 170 countries. Details of this can be found by the website at <https://www.opwall.com/resource/insurance/>

The incident coordinator is also responsible for ensuring that all relevant staff are aware of the ongoing emergency and follow up actions. All staff involved in the major accident or emergency procedure should keep detailed notes of times, actions taken, contacts made, costs incurred etc. After the incident has been closed it is the responsibility of the Incident Coordinator to compile a detailed report and submit this to the relevant insurance company.

## **2. Medical facilities in country**

This information has been checked prior to the 2019 season by senior Operation Wallacea staff.

### **Facilities within the Natura 2000 site**

Sighisoara hospital can cope with the majority of medical incidences.

<http://www.spitalsighisoara.ro/>

Spitalul Municipal Sighisoara  
Strada Zaharia Boiu 40  
Sighisoara  
Romania  
Tel: 0265 771 656  
Tel: 0265 774 006  
Fax: 0265 774 006

E-mail: [manager@spitalsighisoara.ro](mailto:manager@spitalsighisoara.ro)

### Facilities in Targu Mures

The University Hospital in Targu Mures (The Mures County Clinical Hospital) is very well equipped and will be able to cope with most emergencies. If there is an emergency requiring evacuation to the UK, the International Airport of Targu Mures is close by.

<http://chirurgiemures.ro/en/index.html>

County Clinical Hospital  
Tg.-Mures 540103  
Str.Gh.Marinescu Nr.1  
Tel: 00-40-365-88.25.88,  
int 295, 211, 200  
Fax: 00-40-365-430.385  
Email: [chirurgie.mures@gmail.com](mailto:chirurgie.mures@gmail.com)

A UK citizen will be covered by their EHIC (European Health Insurance Card) Card which they should have with them on the expedition.

### 3. Medical cover at each site

Operation Wallacea has a number of first-aid qualified staff on-site as well as a comprehensive medkit. Each survey team is also issued a medkit to take into the field. These kits are designed to deal with as many non-emergency medical eventualities as reasonably possible onsite, and also to support emergency incidents and stabilize a casualty for transfer to more extensive medical facilities where needed.

### 4. Evacuation from the Natura 2000 Sighisoara-Tarnava Mare site

#### Overview

The Natura 2000 site is approximately 25 x 10km and composed of deep valleys that run from North to South. The hill tops are heavily wooded with villages and pastures in the valleys. Good roads tend to run from the north to the south but vehicle access between the valleys is more difficult. There is a network of roads and paths between all of the villages although many are only passable on foot or by 4 wheel drive cars. Access by normal road cars has to be an approach from Sighisoara which is located at the top of the site in the middle.

Despite the complexity of the road and path system most villages in the area can be reached by ambulance from Sighisoara within 40 minutes or much less although some of the more remote villages such as Daia may take slightly longer. Access to paths and the more remote tracks by 4 wheel drive is relatively easy as mobile phones work in most areas and tracks and un-surfaced roads are good.

## **Medium and High priority evacuations**

All team leaders, Opwall and ADEPT staff will be equipped with mobile phones and in the case of an emergency, will phone the Operation Wallacea site manager. They will then communicate with the expedition medic in Bunesti. The situation will be assessed and a decision made whether to call an ambulance (112 or 961).

If the emergency occurs in the field out on a survey site a decision will need to be made to see if the casualty can be moved by an ADEPT vehicle and then take them to the nearest road point for an ambulance pick-up or if the casualty cannot be moved, the ambulance crew will need to be notified and guided to the off-road site. In the case of a medium priority evacuation, the casualty could be transported to the local surgery. The ambulance would then proceed either to the clinic in Bunesti or to the University Hospital in Targu Mures.

## **Emergency evacuations**

This would follow a similar procedure as above although it would involve the ambulance service at the outset. It might also involve the use of the helicopter rescue service based in Targu Mures known as SMURD.

SMURD is an emergency rescue service based in Romania. SMURD is the Romanian acronym for "Serviciul Mobil de Urgență, Reanimare și Descarcerare", that means Mobile Emergency Service for Resuscitation and Extrication.

SMURD services the worst emergency cases in collaboration with the traditional Ambulance (Serviciul de Ambulanță) service. Also HEMS (helicopter emergency medical system) has been implemented in three cities (Târgu Mureș, Bucharest and Lași).

The emergency system is based on the 112 emergency number; which is now used in Romania for all the emergencies (police, firefighters, ambulance).

## **Evacuation times from each village**

The overland emergency and high priority evacuation times from the villages will be a maximum time of 2 hours (40 minutes from the point of incident to the village camp and 1 hour 20 minutes to Targu Mures) depending on how far the village is located from Targu Mures.

If the patient can be suitably treated in the Sighisoara hospital then this will reduce the evacuation time by about 30 minutes.

## 5. Reporting and logging

During evacuations it is crucial that a log is kept by the expedition medic detailing times, personnel involved and all relevant details of each step of the evacuation process.

All medium priority evacuations must be logged by the Opwall Leader and included in the post-season report. For high priority and emergency evacuations the Opwall venture leader or ADEPT senior staff member and any other staff involved in the incident must make a report immediately following the incident. A full safety assessment must be carried out after all evacuations and if a similar incident is likely all activities must be stopped until the situation has been rectified.

The Transylvanian venture leader will collate the reports of all high priority and emergency evacuations and will submit the final report to the UK office. The venture leader will also submit the costs and report to the insurance company for re-imburement of costs.

## 6. Mass evacuations and disaster management

There is the possibility, albeit incredibly small, that a large scale incident could occur which would require a large number of Operation Wallacea volunteers and staff being repatriated. Such incidents could include political unrest, natural disaster and terrorist attacks. These incidents can be broken into two types, those with prior warning and those without.

### Major incident with prior warning

Some major incidents come with a degree of prior warning. A good example of this is political unrest resulting in violence, which would have a build-up period. We constantly monitor the political situation of the area we work in and if our experienced field operatives decide that the political situation has become unsafe they would order a full evacuation.

In such an incident the venture leader would liaise with the insurance company and relevant embassies to agree the best route for repatriation.

### Major incident with no prior warning

Some incidents, such as a terrorist attack or natural disaster, would have no prior warning. In cases such as these the field staff would get all volunteers and staff to a place they deemed safe by which ever means they decide best. From here the venture leader would contact the volunteers' embassies to coordinate an evacuation strategy. The details of such an evacuation would vary dramatically depending on the situation and as such it is impossible to produce more detailed plans.

## 7. Useful numbers

<i>Name</i>	<i>Number</i>
Wizz Air	UK 0330 365 0123 (existing bookings only)
Targu Mures Airport	<a href="http://targumuresairport.ro/">http://targumuresairport.ro/</a>
Cluj-Napoca airport	<a href="http://airportcluj.ro/">http://airportcluj.ro/</a>
British Embassy	00 40 21 201 7200
US Embassy	00 40 21 200 3300

Canadian Embassy	00 40 21 307 5000
Irish Embassy	00 40 21 310 2131/141
Australian Embassy	00 40 21 206 2200
Hospital Targu Mures	00 40 365 88 2588
Hospital Sighisoara	00 40 265 77 1656
Bunesti Surgery	00 40 757 706807
Fundatia Adept	00 40 265 711635
Police	955
Ambulance	961
Emergencies	112
Opwall	00 44 1790 763194