



CHAPTER 12

CASEVAC/MEDEVAC PROCEDURES

12.1 CASEVAC/MEDEVAC PROCEDURES

- 12.1.1 Medical evacuations of patients, from one facility to another, that do not constitute an emergency are MEDEVAC. The use of dedicated air resources assigned for emergencies is not required. Essentially the transportation is provided for a patient under stable conditions, and may or may not be accompanied by a doctor.
- 12.1.2 MEDEVACs are normally requested by a doctor and do not require aircraft on 24 hours standby.
- 12.1.3 Aerial casualty evacuations involving injured military or civilian personnel where a threat to life or limb exists, is a CASEVAC. This entails the movement of an injured or seriously ill person, usually involve the use of dedicated air resources available on a continuous 24 hours basis. Verification by a doctor or qualified medical officer is required.
- 12.1.4 A MEDEVAC is normally requested by a doctor or by a medical facility for available space on regularly scheduled flights or as a request for a charter flight if the condition of the patient requires unique medical care during the transportation, or if the destination of the patient is not served by normally scheduled flights. A CASEVAC may be requested by anyone and is deemed to be of extreme urgency.
- 12.1.5 All CASEVAC/MEDEVAC missions must be documented and kept as a record for at least three months.
- 12.1.6 Once it has been decided that an evacuation is to be conducted, a risk assessment must be accomplished by the Flight Dispatcher and the PIC to insure that the risks involved are understood and the level of risk is within acceptable safety parameters.
- 12.1.7 The details of the requests for such evacuations should consist of at least the following information:
- a) Identification of the requesting party
 - b) Patient information (name, blood group, nationality, age, sex)
 - c) Location of the patient(s)
 - d) Time of injury or accident
 - e) Number of injured or sick persons



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- f) Description of injuries or illness
- g) Personnel who must accompany the patient(s)
- h) Landing site
- i) Security of landing site available or not

12.2 TRANSPORT OF HUMAN REMAINS

- 12.2.1 For the transport of human remains, the air operator shall comply with the following requirements.
- 12.2.2 Operators should comply with the Standards of Annex 18 and the Technical Instructions for the safe transport of Dangerous Goods by air (Doc 9284) as far as practicable.
- 12.2.3 The operator should ensure that all required documents issued by the relevant authorities are in hand prior to accepting the corpse or human remains. The corpse must be registered on the Cargo Manifest or the General Declaration form. The documents may be carried by the crew or the delegated person.
- 12.2.4 A designated person or escort must accompany the human remains. No other passenger besides the escort shall be onboard such aircraft if the human remains are carried in the passenger cabin.
- 12.2.5 Instructions concerning medical procedures:
 - 12.2.5.1 Autopsy should be performed to determine the cause of the death. A Death Certificate should be issued.
 - 12.2.5.2 Embalming should be performed in order to stop the corpse from bleeding, leaking and smelling.
 - 12.2.5.3 Ensure proper preparation and place the remains in a body bag or coffin before loading onto the aircraft.
- 12.2.6 In the case of salvaging human remains from accident sites in difficult locations, it may not always be possible or practicable to comply with the procedures mentioned above. Operators should develop as part of their Operations Manual, a standard procedure for the transport of human remains.