



**PRIMAL QUEST**  
**UTAH 2006**

**2006**  
**MEDICAL**  
**PLAN**

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## **I. PERSONNEL**

- A. **Medical Staff** – Primal Quest Medical Staff are the following personnel:
1. Bill Webster, MD – Primal Quest Medical Director
  2. David Townes, MD
  3. Tim Soyars, RN, NREMT-P - Medical Coordinator/SAR Director
- B. **Medical Volunteers** - Medical Volunteers are individuals who have submitted a Medical Volunteer Application and all other required documentation and have been approved by Primal Quest Medical Staff. They are the only personnel, other than the medical staff who may treat participants under the auspice of Primal Quest, LLC.
- C. **Primal Quest Staff** – Primal Quest Staff are personnel who are under the employment or auspice of Primal Quest, LLC. This includes race management & production.
- D. **Primal Quest Volunteers** – Primal Quest Volunteers are personnel who have applied and been accepted by Primal Quest, LLC as a race volunteer.

## **II. MEDICAL TREATMENT**

### **A. Patient Base-** The potential patient groups are:

1. Racers
2. Staff
3. Volunteers
4. Media
5. Contractors
6. VIPs

### **B. Pre-Race -**

1. Contacts - Racers may contact race headquarters or any member of the race staff and request medical services. They should be directed to a member of the medical staff.
2. Prior to the race, medical services may be limited in availability due to equipment and personnel arrival. Also, medical staff may be involved in other aspects of race organization and be unavailable.
3. Time & locations when medical services are available will be at headquarters.

### **C. During The Race -**

1. Medical Personnel Locations - Medical personnel will be at the race start, designated transition areas, selected check points, and at major hazards along the course.
2. Treatment Areas -
  - a. Non-Penalty Treatment Areas - A racer may request routine medical assistance at the start of the race, any designated transition area and at the finish of the race without penalty.
  - b. Penalty Treatment Area - Any routine medical assistance requested outside of the above area may incur a penalty as per the race management. This does not apply to a major or life threatening illness or injury.

### **D. Post Race -**

1. Contacts - Racers may contact race headquarters or any member of the race staff and request medical services. They should be directed to a member of the medical staff.
2. After the race, medical services will be available until medical depart the race. Also, medical staff may be involved in other aspects of race organization and be unavailable.
3. Time & locations when medical services are available will be at headquarters.

## **E. Local Healthcare -**

1. Emergency Medical Services –Emery, Grand, San Juan, and Wayne Counties have their own EMS agencies and Search and Rescue Teams. Each of these is dispatched through that counties' Emergency Operations Center (EOC). The EOCs can be contacted per the Communications section.
2. Hospitals - A number of hospitals servicing the race area. These include the nearest Level I & II Trauma Centers that a patient may be air med-evacuated to.
  - a. Allen Memorial Hospital, Moab, UT
  - b. San Juan Hospital, Monticello, UT
  - c. Castleview Hospital, Price, UT
  - d. St. Mary's Regional Medical Center, Grand Junction, CO (Level II Trauma Center)
  - e. University of Utah Health Sciences Center, Salt Lake City, UT (Level I Trauma Center)
  - f. LDS Hospital, Salt Lake City, UT (Level I Trauma Center)

## **F. Medical Cost -**

1. Primal Quest Medical - All medical care provided by the Medical Services at no charge.
2. Any prescription issued by a physician with the medical staff and filled at a local pharmacy are the responsibility of the individual.
3. Outside Medical Care & Rescue Services - Any cost incurred from the use of local medical services, search & rescue services, evacuation and/or transportation are solely the responsibility of the individual.

4. Some of these services may be covered by Primal Quest, LLC Insurance.

### **III. MEDICAL ISSUES**

#### **A. Immunizations -**

1. Recommend each person is up to date with Tetanus, Diphtheria, Polio and Hepatitis A and B vaccines.

#### **B. Heat Issues -**

2. Prevention
  - a. Insure all personnel hydrate properly. Be aware of alcohol consumption and related dehydration.
  - b. Insure all personnel wear and/or have available proper clothing for protection, i.e. long sleeves, long pants, hat, sunscreen, etc.
  - c. Insure support crews have adequate supplies of fluids, etc.
3. Treatment
  - a. Treatment for heat injury will be per protocol.
  - b. All heat injuries should be treated aggressively and as soon as possible.

#### **C. Poisonous Flora & Fauna**

1. Snakes: Utah is home to seven poisonous snakes. Snakebites are a relative common occurrence in this part of the country. Medical facilities in the area are prepared to deal with such injuries.
  - a. Speckled Rattlesnake
  - b. Mojave Rattlesnake
  - c. Western Rattlesnake
  - d. Hopi Rattlesnake

- e. Midget-faded (Pygmy) Rattlesnake
- f. Great Basin Rattlesnake
- 2. Spiders: While all spiders carry a level of toxicity and can make one ill, the primary two to be concerned about are:
  - a. Black Widow
  - b. Brown Recluse
- 3. Scorpions: There are several types of scorpions in Utah. While sightings are rare, they are within the course.

#### **D. Non-Event Related Injuries/Illness -**

- 1. Assault - If an individual is involved in an assault, treat if needed. It may be necessary to contact local authorities. This is the decision of the individual and/or Race Management.
- 2. Motor Vehicle Crashes - If an individual is involved in a motor vehicle crash, treat if needed. If the crash occurs while the individual is involved in the event, i.e. hit while on a bike, trekking, etc. Local authorities may need to be notified per Utah State Code and Race Management.
- 3. Sport/Tourist Related Injuries - While not involved in the race, races, staff, etc. may become injured while enjoying the area. Treatment should be given, with-in reason. Primal Quest Medical Services' primary goal is to insure the health and safety of the participants of the race. If the treatment of non-event related injuries taxes their resources, the individual may be referred to the local medical facilities.

## **IV. COMMUNICATION**

- A. Routine Communication** - Routine administrative communication should utilize the Sat phones and iPAC. A VHF Hi band frequency and channel assigned by Management for communication with the local EOCs, EMS, and SAR teams. Alternate communication can be made via standard mobile or land line telephone
- B. Emergency Communications** -
1. Medical Personnel - Medical Personnel requesting assistance from other Primal Quest staff should use the Sat phone system. A secondary method of contact is the use of VHF, standard mobile or landline telephone. Phone numbers are listed in the passport. If requesting assistance due to an acute situation, contact Primal Quest Medical staff by Sat phone. If need, contact Emergency Services responsible for that geographic area. If possible, clear all evacuation through Medical Staff.
  2. Racers - For medical emergencies, attempt to contact Primal Quest Headquarter by Emergency Signal and Sat phone. Request for medical emergencies can be relayed through any Primal Quest staff or volunteer. If Sat communications are not possible and a telephone is available, contact Primal Quest Headquarters or Medical by telephone.

3. Local Authorities -

- a. Local Emergency Services agencies (EMS, fire, law enforcement) vary throughout the course. Contact can be made via Primal Quest Headquarters or directly using the following numbers:

All counties in Utah- Emergency 911.

Radio via Med Channel TBA based on channel assignments on rental radios.

**Note:** If using a mobile phone, you may be connected to an Emergency Operation Center (EOC) in a county other than the one you are in. Confirm their location and yours. Ask them to relay the information to the appropriate EOC. Sat phones cannot be used to call 911. Contact ECOs by using the 10 digit phone number listed in the passport or the appendix of the Medical/SAR plan.

- b. Inter-Agency Communications-

Utah: Utilize Med Channel TBA based on channel assignments on rental radios.

**C. Telephone Numbers-** See phone listing in appendix or in the passport.

## **V. EVACUATION**

### **A. Evacuation by Primal Quest Staff-**

1. If a racer is ill or injured and is unable to complete the race, but does not require acute treatment at a medical facility, i.e. hospital, etc., Primal Quest will assist in evacuation that racer back to the Headquarters area.
2. If a staff member or volunteer is ill or injuries, but does not require acute treatment at a medical facility, i.e. hospital, etc., Primal Quest will evacuate the individual back to the Headquarters area.

### **B. Evacuation for Acute Illness/Injury -**

1. If an illness or injury that required acute treatment at a medical facility occurs, Primal Quest medical personnel will be contacted immediately. If this is a life threatening condition, notification and transportation by EMS shall not be delayed until Primal Quest Medical personnel's arrival.
2. All emergency radio will be monitored by Primal Quest Headquarters. Primal Quest Headquarters may contact local EMS agencies, if needed.
3. Always give location to the EOC by street addresses, road/route intersections or latitude and longitude, not UTM.
4. If a Primal Quest Medical provider has initiated advanced care to a patient, they may be requested to accompany the patient to the hospital. This may occur if there is not an equal or higher certified or licensed provider with the responding agency.

**C. Air Medical Evacuation-** If an individual is injured or ill and the acuity warrants air evacuation to the nearest tertiary care or trauma center, the following procedure shall be followed:

- a. Decision to evacuate shall be made by the senior medical personnel at the scene. This decision can be made by local EMS personnel, if on scene.
- b. Medical helicopter services can be contacted via the Emergency Operation Center (EOC) if the county the incident is in. Contact numbers and radio channels are listed in the Communications section.
- c. The primary medical helicopter service for the race area is St. Mary's Air Life. Other services may be utilized if Air Life is not available.
- d. Local EOC will determine which helicopter service will be called, based on location and availability.
- e. Give locations to EOC by street addresses, road/route intersections or latitude and longitude, not UTM.
- f. Refer to the Appendix section for landing zone information.

**D. Repatriation** - Any repatriation of an individual or their remains is the responsibility of that person, their next of kin or designated individual. It is not the responsibility of Primal Quest, LLC.

**E. Reimbursement** - Any cost of any evacuation by an organization other than Primal Quest, LLC is the responsibility of the ill/injured individual.

**F. Medical Insurance** – The hospitals servicing the area except or can make arrangements with most US insurance companies.

## **VI. TRANSPORTATION**

**Land Transportation** – PQ vehicles will be needed for movement of medical personnel. Some medical teams may be pre-positioned and may not have a vehicle available at their location. If transport is need, a request can be made to Headquarter. Vehicle or foot may be utilized to reach patients needing assistance on the trail. Arrangements will be made to move MedSAR team when the last racers have cleared their checkpoint of hazard area. TA medical teams will have dedicated vehicles available to move then and their equipment when the TA is closed. Mobile Medical Teams will have 4 wheel vehicles which will give them access to the majority of the course.

## **VII. SUPPLIES**

**Supply Movement to Utah** – Movement of supplies and equipment will be arranged by Primal Quest Staff. Supplies and equipment will be pre-positioned at the storage facility in Green River, transported by Bill Webster or Tim Soyars to Primal Quest race headquarters.

**Supply Distribution** – Each medical team will be equipped with supplies needed to treat patients at their given level of training. Field and MedSAR teams will be equipped with a medical pack. TA teams will be equipped with medical boxes and a rapid response kit. Mobile units, i.e. director, coordinators, etc. will

**Re-supply** – Medical personnel will resupplied on an as needed basis. Teams should inform the Medical Staff or headquarters of supply needs prior to exhausting items, if possible. They should also inform them of any needs prior to each team movement.

**Personal Equipment-** Any supplies, i.e. Band-Aids, gauze pads, tape, etc. that are used from medical staff or volunteers personal kits will be restocked, if possible. Any personal durable items, i.e. stethoscopes, scissors, etc. that are lost or damaged may not be replaced.

## VIII. SEARCH & RESCUE (SAR)

### **SAR Resources**

#### Internal SAR Resources

Med/SAR Teams- Two person Medical and Search & Rescue teams stationed throughout the course at check points and hazard area. These teams are trained in at least basic medical life support, i.e. EMT-B or Wilderness First Responder and/or non-technical SAR.

Mobile Medical Teams- One to two person teams mobile throughout the course in 4 wheel drive vehicles. These teams are trained in advance life support and are staffed by at least one physician or advanced practice paramedic. The second member will be at least an advanced life support provider, i.e. paramedic, EMT-I, or experienced RN.

Air Medical- There will be an advanced life support provider assigned to at least one helicopter that is airborne on the course. This helicopter will respond to any SAR situation and, if requested, any medical situation, weather permitting.

External SAR Resources- Emery, Grand, and San Juan Counties all have active volunteer SAR units. These units can be activated when extensive SAR operations are needed.

**SAR Activation** – In the event of SAR activation, the following protocol will be followed.

When an emergency signal is received by Primal Quest headquarters and, if possible, the nature of the emergency is determined, the SAR director or his designee will be alerted of the location and nature.

Primal Quest headquarters will alert the Headquarter Medical team to assist with resource coordination. The SAR director will determine the nearest MedSAR and/or Mobile Medical unit. The selected units will be contacted and dispatched. If Air Medical is available, it may be dispatched to assess or, if needed, access the patient and evaluate the situation and render care.

The SAR director may contact the race team or other personnel on scene via radio or sat phone for first hand information.

The first Medical or SAR personnel on scene will:

- Access the level of medical care needed
- Access the level of evacuation needed, i.e. self-evacuation after treatment, manpower to carry out, technical rescue, or air evacuation.

- Determine any need for additional resources.
- Report back to the SAR director.

All requests for local SAR or EMS resources will be coordinated through Primal Quest Headquarters Medical.

Requests for SAR teams in San Juan County are to be coordinated through Grand County EOC. This is per agreement with Grand County Department of EMS.

## **Coordination with Local SAR Units**

The SAR director or designee will coordinate with the local SAR commander.

By law, SAR operations are a law enforcement function and under the purview of the Sheriff's Office. Upon activation of local SAR teams, Primal Quest medical and SAR resources shall be under the coordination of the local SAR commander.

It is the responsibility of the SAR Director or designee to insure that Primal Quest medical and SAR personnel are not placed in any improperly dangerous situations by any local SAR commander.

**After Action Report-** A full documentation of any SAR activation, regardless of severity, will be made by the SAR director.

# APPENDIX

# PHONE NUMBERS

## PRIMAL QUEST

Headquarters:		XXX-XXX-XXXX
Emergency Line #1		XXX-XXX-XXXX
Emergency Line #2		XXX-XXX-XXXX
Bill Webster, MD	PQ Ph	XXX-XXX-XXXX
	Personal-	XXX-XXX-XXXX
Dave Towns, MD	PQ Ph	XXX-XXX-XXXX
Tim Soyars, RN NREMT-P	PQ Ph	XXX-XXX-XXXX
	Personal-	XXX-XXX-XXXX
Don Mann:	PQ Ph	XXX-XXX-XXXX
	Personal-	XXX-XXX-XXXX

## PUBLIC SAFETY

### **Emery County**

EOC (Emergency)	911
EOC (Non-emergency)	435-381-2404
Sheriff's Office (Non-emergency)	435-381-2404
Sheriff Lamar Gymon	

### **Grand County**

EOC (Emergency)	911
EOC (Non-emergency)	435-259-8115
Sheriff's Office (Non-emergency)	435-259-8115
Sheriff James Nyland	
Chief Dep. Curt Brewer	

## **San Juan County**

EOC (Emergency)	911
EOC (Non-emergency)	435-587-3225
EMS Coordinator: Linda Swenson	435-587-3225
San Juan County Emergency Services	435-587-3225
Sheriff's Office (Non-emergency)	435-587-2237

## **Wayne County**

EOC (Emergency)	911
EOC (Non-emergency)	435-836-2789
Sheriff's Office (Non-emergency)	435-836-2789

## **Utah Highway Patrol**

UHP Section 9 (Emery & Wayne Co)	435-637-0980
UHP Section 13 (San Juan & Grand)	435-259-5441

## **HOSPITALS**

### **Allen Memorial Hospital (Moab)**

719 West 400 North  
Moab, UT

Main Number	435-259-7191
Emergency Dept.	435-259-1653

### **San Juan Hospital (Monticello)**

364 West 100 North  
Monticello, UT

Main Number	435-587-2116
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**Saint Mary's Regional Medical Center (Level II Trauma Center) (Grand Junction, CO)**

Main Number	970-244-2273
	800-458-3888
Emergency Dept.	970-244-2273
Michael Herrick (Admin Contact)	XXX-XXX-XXX
St. Mary's Air Life (Air Ambulance) (Primary Air Medevac Service)	800-332-4923

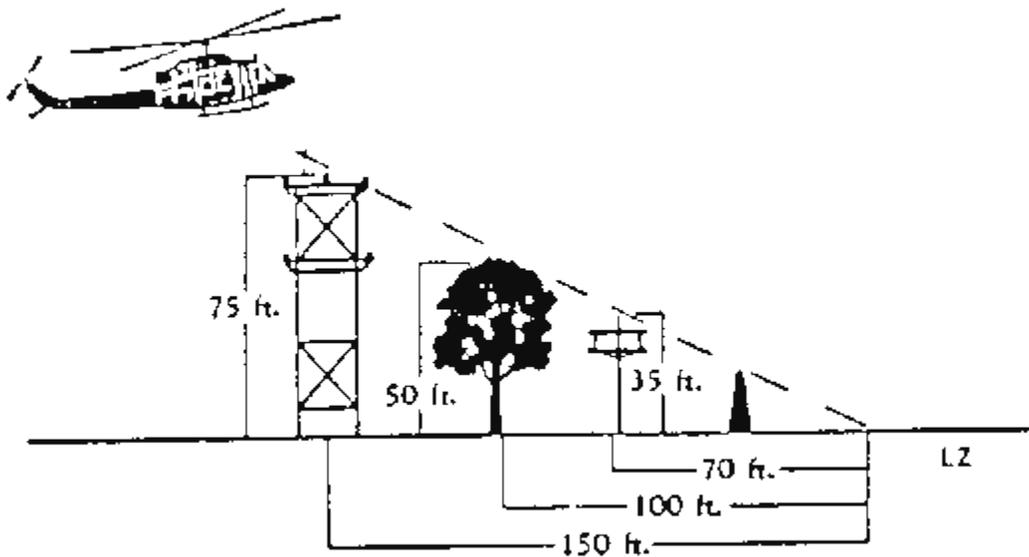
**San Juan Regional Medical Center (Level III Trauma Center) (Framington, NM)**

Main Number	505-327-5011
Emergency Dept.	505-599-6102
San Juan Regional AirCare (Secondary Air Medevac Service)	800-452-9990

# HELICOPTER LANDING ZONE OPERATIONS

## Landing Zone Information

Landing zone information should include the nearest road intersection or north/west coordinates. The helicopter requires an unobstructed flat area of approximately 100 square feet (40 paces by 40 paces). The area should be well marked with cones, chem-lights or other similar marking devices. White lights, e.g., flood lights, should be avoided at night. The helicopter will make radio contact with the landing zone coordinator while on approach. Information relayed to the flight crew should include; any overhead obstructions, wind direction and speed, and approximate size of area.



Additional room should be allowed for obstructions in the flight path.

## Landing Zone Safety

1. LZ personnel should wear eye and ear protection.
2. Ensure loose items are secure, including helmets and equipment.
3. **DO NOT APPROACH** the aircraft until directed by the flight crew.
4. No vehicles, bystanders, or smoking within 100 feet of aircraft.
5. **Avoid tail rotor**, no personnel should approach the rear of the aircraft.
6. Always approach and depart the aircraft area from a 90 degree angle of the nose of the aircraft.

## **MEDICAL TEAM STAGING AREAS**

1. Race Start- Mobile Med Team
2. CP 2 (Stove Gulch)- MedSAR Team
3. TA 1 (Humbug Flats)- TA Medical Team
4. CP 7 (Summerville Wash)- MedSAR Team
5. TA 2 (Summerville Flats)- TA Medical Team
6. CP 9 (Tidwell Draw)- MedSAR Team
7. SM 1 – MedSAR Team or Mobile Med Team
8. TA 3/4 (Swaseys Boat Ramp)- TA Medical Team
9. CP11 (Nefertiti Rock)- MedSAR Team
10. TA 5/6 (Ruby Ranch)- TA Medical Team
11. CP 15 (Tri Cove Climb Site)- MedSAR Team
12. CP 17- Med SAR Team
13. CP 22- MedSAR Team
14. TA 7 (Mineral Bottom)- TA Medical Team
15. CP 22 (Hell Roaring Canyon)- MedSAR Team
16. TA 8 (Horsethief Point)- TA Medical Team
17. CP 25 (Gemini Bridges)- MedSAR Team
18. CP 28 (Williams Bottom)- MedSAR or Mobile Med Team
19. TA 9 (Pack Creek)- TA Medical Team
20. CP 34 (Geyser Pass)- MedSAR or Mobile Med Team
21. TA 10 (Wilcox Flat)- TA Medical Team

22. CP 37 (Castle Creek)- MedSAR Team
23. TA 11 (Onion Creek)- TA Medical Team
24. CP 40 (Caste Rock)- MedSAR Team
25. CP 41 (Priests and Nuns)- MedSAR Team
26. CP 42 (Rocky Rapids)- MedSAR or Mobile Medical  
Team
27. Race Finish (Red Cliffs)- HQ Medical Team

# NOTES