Contents

1. Introduction .......................................................................................................................... 2
   Medical screening .................................................................................................................. 2
   Roles in the event of an emergency ....................................................................................... 2

2. Medical facilities in country ............................................................................................... 3

3. Medical cover at each site .................................................................................................... 3

4. Evacuation ............................................................................................................................ 4
   Evacuation times from site .................................................................................................... 4

5. Reporting and logging ......................................................................................................... 5

6. Mass evacuations and disaster management ..................................................................... 5
   Major incident with prior warning ....................................................................................... 5
   Major incident with no prior warning .................................................................................. 5

7. Useful numbers ..................................................................................................................... 5
1. Introduction

Medical screening

As with all expeditions careful planning is essential to ensure that all individuals enjoy a safe successful trip. Some members of the expedition team (including all volunteers and staff) may have significant pre-existing health problems or disabilities, which in the field, could potentially lead to problems.

All participants are required to complete a medical questionnaire online prior to their departure. In addition all those diving or snorkelling are required to complete PADI medical form which is provided for online completion.

All medical and PADI forms are assessed and discussed at a pre-expedition medical meeting of the participating medical staff. 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.

Roles in the event of an emergency

Carefully planned evacuation protocols are in place for the sites in Croatia. 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 Camp Manager responsible at the site will advise National Part Krka or Mljet. The Camp Manager for the Krka and Mjlet sites respectively will take overall control as Incident Coordinator in conjunction with senior staff and in consultation with the UK emergency response office which is manned 24/7 throughout the expeditions and which has access to specialist medical advice as well. The Camp Manager will 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 a local English speaking doctor based in Drniš Medical Center for Krka incidents or to Pomena Medical Centre for Mljet incidents.

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 may require a call to the ambulance service and then transportation to the General Hospital of Split/(contact number 00385 21 556 111) in Split Town (approximately 1 hour from Krka research centre). Emergency transportation from the Mljet island to Dubrovnik will be in place if a High Priority situation arises during the second week of an expedition (contact number 00385 20 431 777).
Emergency
Cases where the patients’ life is at risk if immediate action is not taken. This requires the fastest possible transfer usually by ambulance or helicopter to Split Hospital or ambulance speedboat or helicopter to Dubrovnik General Hospital, depending on week of expedition.

In all evacuation cases where a patient is being transferred to medical facilities they should be accompanied by the relevant member of staff who was at the scene of the incident or someone appointed by the Camp Manager as fit to accompany the patient. Most ambulance teams in Croatia speak English and this can be requested when phoning 112 (194 specifically for an ambulance). In addition, there will be a member of Croatian Institute for Biodiversity with the ability to speak both Croatian and English if medical evacuations are needed.

Operation Wallacea has purchased Medical and Repatriation cover for all expedition participants and information on evacuation routes and medical facilities provide by Opwall in advance of the expeditions to the insurance company so they can agree costs and evacuations can be expedited quickly. In an extreme emergency where it is required to request Medivac, the Camp Manager will be responsible for contacting the Opwall office and informing them of the need for a Medivac plane from Split or Dubrovnik International Airport, depending on location of the incident. Once this is approved then the flight will be arranged using the appointed Medivac organization (Mayday Assistance).

The Camp Manager 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 2017 season by senior Operation Wallacea staff.

There is a well-equipped general hospital in Split town, which is around one hour drive from Krka research site that is going to be used during the first week. The hospital contains life support equipment, diagnostic equipment for all but the most severe incidents and is suitable for surgery and most medium, high priority and emergency incidents.

Whilst on Mljet island, there will be a local medical facility for minor injuries, Pomena Medical Centre, for Medium Priority cases. For High Priority and Emergency cases, individuals will be taken to Dubrovnik or even Split General Hospital.

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

3. Medical cover at each site
Staff trained to First Aid Responder or above, along with a first aid medical kit will be provided at each site, the content of which is agreed prior to the season in consultation with professional medics. 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

Krka National Park is located along the middle-lower course of the Krka River in central Dalmatia, in Šibenik-Knin county, and just a few kilometers northeast of the city of Šibenik. There are good well - surfaced road connections throughout the whole Krka area. There is a good phone signal in the research base but not on the research site. The hospital in Split is no more than one hour away from Krka research site.

Island of Mljet is the most southerly and easterly of the larger Adriatic islands of the Dalmatia region of Croatia. The National Park includes the western part of the island, with a sea belt 500 m wide from the most prominent cape of Mljet covering an area of 54 km². There is only one main road on the island of Mljet in good condition. Whole island has generally good phone signal coverage. The Pomena Medical Centre is only 5 minutes from Mljet research site.

All team leaders, Opwall and Croatian Institute for Biodiversity staff will be equipped with mobile phones/radios and in the case of an emergency, will contact the Operation Wallacea Camp Manager primarily. The situation will be assessed and a decision made whether to call an ambulance (112 or 194). If the emergency occurs in the field out on a survey site in Krka, a decision will need to be made to see if the casualty can be moved by a Croatian Institute for Biodiversity vehicle and then take them to the hospital or if the casualty cannot be moved, the ambulance crew will need to be notified and guided to the off-road site. The ambulance would then proceed to the General Hospital of Split town.

If the emergency occurs in the field during the second week, then the vehicle will transport them to ferry that will take accompanying person to the coast where an ambulance or vehicle (depending on severity) will be waiting to take them to Dubrovnik General Hospital.

Emergency evacuations 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 Split General Hospital in worst case scenarios. Another option is to call Croatian mountain rescue service who is on standby with a helicopter.

The emergency system is based on the 112 emergency number; which is now used in Croatia for all the emergencies (police, firefighters, ambulance). There are also specific numbers for the hospitals and E.R services listed at the bottom of this document.

Evacuation times from site

The overland emergency and high priority evacuation times from the Krka research site will be a maximum time of one hour.

For evacuation procedures from Mljet research site, the duration will vary: ranging from 1.5 to 3 hours. In the case that recompression is needed, a low flying helicopter will be chartered for Split General Hospital (1 hour flight and always on standby).
5. Reporting and logging

During evacuations it is crucial that a log is kept by the Camp Manager 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 Camp Manager or Croatian Institute for Biodiversity 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 Camp Manager will collate the reports of all high priority and emergency evacuations and will submit the final report to the UK office. The country manager will also submit the costs and report to the insurance company for re-imbursement 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 country manager 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 Country manager 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

<table>
<thead>
<tr>
<th>Name</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Croatian Airlines</td>
<td>00385 1 66 76 555</td>
</tr>
<tr>
<td>Split International Airport</td>
<td>00385 21 203 555</td>
</tr>
<tr>
<td>Dubrovnik International Airport</td>
<td>00385 20 773 233</td>
</tr>
<tr>
<td>British Embassy</td>
<td>00385 6009 100</td>
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<tr>
<td>US Embassy</td>
<td>00385 1 6612 200</td>
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<td>Embassy</td>
<td>Phone Number</td>
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<td>-----------------------</td>
<td>-----------------------</td>
</tr>
<tr>
<td>Canadian Embassy</td>
<td>00385 1 4881 200</td>
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<tr>
<td>Portugal Embassy</td>
<td>00385 1 4882 210</td>
</tr>
<tr>
<td>China Embassy</td>
<td>00385 1 4637 011</td>
</tr>
<tr>
<td>South Africa Embassy</td>
<td>00385 1 4680 981</td>
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<tr>
<td>Medical Centre Pomena</td>
<td>00385 98344827 or 994488448</td>
</tr>
<tr>
<td>Medical Centre Drniš</td>
<td>00385 22 888 999</td>
</tr>
<tr>
<td>Split Hospital</td>
<td>00385 21 556 111/ 21 557 111</td>
</tr>
<tr>
<td>Dubrovnik Hospital</td>
<td>00385 20 431 777</td>
</tr>
<tr>
<td>Split Hospital (recompression chamber)</td>
<td>00385 21 354 511</td>
</tr>
<tr>
<td>Police</td>
<td>112/192</td>
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