8 Steps To Setting Up A Helicopter Landing Zone

1. Assign ONE PERSON to communicate with the pilot.
2. Clear the landing zone of debris, people, vehicles, animals etc.
3. Whenever possible avoid loose dirt, dust, sand, powdered snow, etc.
4. Clearly mark the landing zone using cones, smoke, beacons or vehicle lights. Be very careful if using flares.

Know Your Local Air Medical Dispatch Protocols

Wind Direction
5. Report wind direction to pilot.
Position landing area so helicopter approaches into the wind.

APPROACH AREA
WAIT FOR
CREW SIGNAL

DANGER ZONE!
DO NOT ENTER UNDER ANY
CIRCUMSTANCES

CAUTION AREA
ENTER ONLY IF ACCOMPANIED
BY A CREW MEMBER

Helicopter Approach
Helicopters land and take off into the wind.

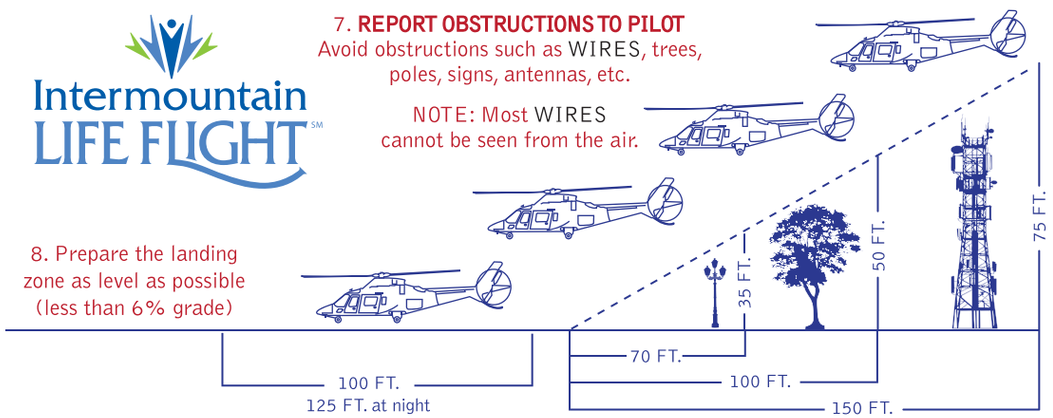
6. Landing Zone should be 100 feet x 100 feet, or 125 feet x 125 feet at night.

Intermountain LIFE FLIGHT℠

7. **REPORT OBSTRUCTIONS TO PILOT**
Avoid obstructions such as WIRES, trees, poles, signs, antennas, etc.

NOTE: Most WIRES cannot be seen from the air.

8. Prepare the landing zone as level as possible (less than 6% grade)



LIFE FLIGHT Safety & Security

Guidelines for Requesting and Landing a Helicopter

When time counts, count on LIFE FLIGHT 24/7

General Safety Rules

NEVER

- Never approach a helicopter from the rear.
- NEVER APPROACH A HELICOPTER WITH THE BLADES TURNING unless directed to do so by a flight crew member.

ALWAYS

- Approach and depart the aircraft forward of the cabin in full view of the pilot.
- Wait for instructions from the flight crew before putting equipment in the helicopter or taking equipment away from the helicopter.
- Let a flight crew member open and close doors or compartments on the aircraft.
- Be aware of the tail rotor and always follow the flight crew's directions for your safety.

REMEMBER

- Before moving away from the aircraft please check for loose or forgotten equipment.
- Keep your head down and NEVER LIFT ANYTHING ABOVE YOUR HEAD!
- If the helicopter has landed on a slope, approach and depart from the down slope side only.
- When moving a vehicle past a helicopter on the ground, have pilot stand outside the tip of the main rotor blade closest to the vehicle to safely guide the driver past the helicopter.

COMMUNICATE

- Select ONE PERSON for ground to air communication with the helicopter.
- If this is a hazmat incident advise dispatch and the flight crew immediately!
- Let the pilot know the direction the wind is coming from - helicopters land and take off into the wind.
- Advise the pilot of the location of the landing zone, and include any hazards such as wires, poles or trees.
- Let the pilot know when you have the helicopter in sight and provide directions to your location.

NIGHT OPERATIONS

- Secure a larger landing zone - 125 x 125 feet if possible.
- Turn off all non-essential lights. The flight crew will be using Night Vision Goggles, less light is better.
- Red revolving lights can be blinding when using Night Vision Goggles.
- Night landings require more attention to detail, double check for over head wires, trees, signs and poles.
- Lasers can be used to mark the landing zone and hazards, do not point lasers at the aircraft!

SECURITY

- Do not allow spectators within 200 feet of the landing zone.
- Keep EMS personnel at least 100 feet away from the helicopter.
- CRITICAL: Do not permit vehicle movement within the landing zone during helicopter landing or take off.
- After landing a helicopter on a roadway, place a vehicle no closer than 75 feet in front of and to the rear of the aircraft for security and protection.
- Have one person at the landing zone to provide security for the aircraft.

LANDING MORE THAN ONE HELICOPTER

- Each helicopter will need 100' x 100 feet to land.
- Land the first helicopter closest to the scene, the next further away.
- Always keep the left side of the helicopter clear, patients are usually loaded from the left.
- If possible, load the closest helicopter first, avoid walking past one helicopter to get to another.
- The landing zone officer should let incoming aircraft know when helicopters are departing the scene by transmitting their departure and direction on the radio.

Life Flight is based 24/7 at McKay-Dee Hospital, Intermountain Medical Center, Utah Valley Regional Medical Center, Primary Children's Medical Center, Dixie Regional Medical Center and Salt Lake International Airport. Pediatric and Neonatal specialty teams are available day or night for scene or inter-hospital transport. The Hoist/Rescue Team can provide victim extraction from difficult terrain and conduct Search and Rescue Missions when requested.

Guidelines For Calling Life Flight

Request Information:

- Name of referring agency
- Number of patients
- Adult or child & severity
- Call back number & contact
- Local weather conditions
- Patient weight
- Latitude & longitude, landmarks
- Coordinates of command post
- Has another helicopter been called?
- Is this a hoist?

Special Considerations:

- ALS care is needed
- High risk conditions for patient
- Patient experiencing neurological deterioration
- AMI/chest pain
- Ventilator support required
- Unstable cardiac rhythms
- Neonatal specialty team
- Symptomatic hyper/hypotension
- Private MD deems transport necessary
- Need for specialty care

Transport to Primary Children's Medical Center:

- 14 years of age and under
- Asthma
- Hemodynamic instability
- Respiratory distress
- Head injury

Difficult Access Situations:

- Transport time delay to tertiary care >15 min
- Patient extrication time >20 min
- Ground transport stresses resources for area
- Hoist/rescue
- SAR: Remote area search & rescue
- Shuttle SAR/Dog teams
- Long range receiver for Avalanche Rescue

GUIDELINES SHOULD NOT REPLACE DECISIONS MADE ON SOUND MEDICAL JUDGMENT.

Mechanism of Injury:

- Pelvic fracture
- Multiple victims
- Vehicle rollover
- Falls from >15 feet
- Trauma score <12
- Auto-pedestrian >10 mph
- Glasgow Coma Score <11
- Major burns of the body surface areas
- Motorcycle victim ejected at >20 mph
- Major crush injury
- Two or more long bone fractures
- Spinal cord/column injury
- Near drowning injury
- Partial or total amputation
- Penetrating trauma