



PHEC

for outdoor professionals

Autumn 2011

Scenario: Beech Branch – Hump Ridge Track

The Story:

A 40 year old woman is tramping on the remote Humpridge track in Southland in March. She is part of a guided group, consisting of 12 clients and 2 guides. It was a cold, wet, windy day.

The group were 7 hours from the start of their tramp and 3 hours from the lodge where they were to stay for the night.

At about 4 pm a heavy branch from a silver beech tree fell on her as she walked beneath it. She heard the tree breaking and started to run. However, she must have slipped over, as the branch landed on her thigh.

It is isolated country with no mobile coverage. One of the guides carried a HF radio.

On hearing the woman's shouts, one of the guides, one very experienced local and two visiting tourists came back to help..

Initially the patient presented with:

Severe pain in hip. The patient was unable to move her left leg, obvious deformity in left hip area, left leg was rotated inwards and seemed shortened. She was happy to move her feet.

She was unwilling to move from the position she was in.

Skin: Cool and clammy.

Pulse: Slightly raised

LOC: Conscious and alert.

Spine examination showed no tenderness, deformity or neural deficit.

What are your initial concerns for this patient?

Noting the time, distance from the road end, group size and conditions, what are your patient management and evacuation options?

As time went on the patient remained conscious but became anxious and then drowsy. She became thirsty, the pain remained and was exacerbated if they tried to move her..

What do you suspect is happening to the patient now?

What actually happened next?

The rest of the group, who were ahead, carried on, unaware of what had happened.

The impact of the tree branch and fall had forced the patient's femur through the pelvis, shattering the left socket of her pelvis, and dislocating her hip.

The local man was also an advanced paramedic.

The guide used the HF radio to call for help. A rescue was coordinated through the local police station in Tuatapere.

While they were waiting for help the first aiders covered the patient with an emergency blanket, coats and hats.

She was given panadol and sips of water from a 'camel back' and lots of reassurance.

After 1 ½ hours a rescue helicopter arrived. Due to the rough terrain she was winched up from where she lay, after being given morphine and put in a cradle by the helicopter's doctor. She was then taken to Kew Hospital in Invercargill, where she was treated for 10 days before being air ambulated up to Auckland where and operated upon.

A year later the patient is active again, can go on short bush walks and carry a light pack.

Key Lessons

A satellite phone, radio, or PLB is essential for rescue in an area without mobile coverage, the time taken to alert rescue authorities could be life-threateningly long.

Hug a Tree! The best action when hearing a falling branch is to have one's body flush against the trunk of another tree, as branches tend to fall away from the base of a tree. This would be valuable advice to give at briefing stage.

Camelback - very good for hydrating a semi conscious, injured, or prone person – this patient could not sit up to drink. Be aware of not over hydrating or feeding an injured person who may need surgery.