

AMA 200-01

AVIATION PHYSIOLOGY TECHNICIAN HIGH ALTITUDE AIRDROP MISSION SUPPORT (AV PHYS TECH HAAMS)

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References:

- A. 4730-1 Letter of Agreement for High Altitude Airdrop Mission Support Specialty Specification
- B. Service Level Agreement (SLA) between CANSOFCOM/RCAF/HSG
- C. AM-D-214-000/PT-001 Aeromedical Training for the Canadian Armed Forces
- D. [AMA 100-01](#) Medical Standards for CF Aircrew
- E. [CFP 154](#) Canadian Forces Medical Standards
- F. STANAG 7056 Functional Requirements for Physiological Protection during High Altitude Parachuting Operations
- G. AAMedP-1.18, Edition A, Version 1, Functional Requirements for Physiological Protection during High Altitude Parachuting Operations **Record of**

Amendments:

Date (DD/MM/YY)	Reason for Change	OPI/SME	Fully Reviewed (Y/N)
28/07/22	Ratio of 1 Av Phys Tech for 18 jumpers has been modified to 1: 22. This reflects the efficiency of the AV Phys Tech HAAMS and O2 equipment that are being employed for these tasks.	WO Garneau	

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GENERAL INFORMATION

1. Aviation Physiology Technicians (Av Phys Techs) MOSID 00373 has a Specialty Specification (SS) of High Altitude Airdrop Mission Support (HAAMS) as per Ref A. Av Phys Techs qualified as HAAMS Techs provide operational support to the Canadian Special Operations Forces Command (CANSOFCOM) and the Royal Canadian Air Force (RCAF) by delivering in-flight physiological support to aircrew and parachutists performing unpressurized airdrop operations above 18,000 feet. Av Phys Techs HAAMS are also required onboard the aircraft for Special Operations High Altitude Low Opening (HALO) / High Altitude High Opening (HAHO) personnel and equipment drops. Unpressurized equipment testing/research and humanitarian aid operations above 18,000 feet require consultation with the 1 Canadian Air Division (CAD) Surgeon to determine if Av Phys Tech HAAMS are required onboard the aircraft.

AIM

2. This document serves to provide an overview of the rules and guidelines for Aviation Physiology Technician High Altitude Airdrop Mission Support (Av Phys Tech HAAMS) Specialty Specification.

DEFINITIONS

3. The following definitions are provided for the purpose of this directive.
 - a. Av Phys Tech HAAMS (CANSOFCOM) – individuals posted to CANSOFCOM and deploy as needed for any immediate response. They are the subject matter experts (SME) for aviation physiology as it pertains to high altitude operations.
 - b. Av Phys Tech HAAMS (Dislocated) – individuals can be posted to the Canadian Forces School of Survival and Aeromedical Training (CFSSAT) or Canadian Forces Environmental Medicine Establishment (CFEME). They are tasked to provide operational support to CANSOFCOM for unpressurized airdrop operations above 18,000 feet. This is in accordance with the current Service Level Agreement (SLA) between CANSOFCOM/RCAF/Health Services Group (HSG) (Ref B).

ROLES AND RESPONSIBILITIES

4. Support to CANSOFCOM missions and unpressurized high altitude operations is to be performed by Av Phys Tech HAAMS (CANSOFCOM) and/or Av Phys Tech HAAMS (Dislocated):

NOT CONTROLLED WHEN PRINTED

a. Av Phys Tech HAAMS (CANSOFCOM):

- i. Provide front end analysis for CANSOFCOM training and missions in regards to HAAMS support.
- ii. Develop Decompression Sickness (DCS) Evacuation Plan
- iii. Conduct all incident tracking and incident reporting to CANSOFCOM and 1 CAD Surgeon.
- iv. Maintain the lessons learned database for HAAMS.
- v. Responsible for all Av Phys Tech HAAMS training with respect to lesson development and maintenance of competency.
- vi. Conducting and coordinating all second and third line maintenance to High Altitude Parachutist (HAP) equipment.
- vii. Responsible for the development of all future capability concerning HAAMS support to CANSOFCOM missions and unpressurized high altitude operations.
- viii. Execute any of the tasks outlined in subparagraph b below for Av Phys Tech HAAMS (Dislocated).

b. Av Phys Tech HAAMS (Dislocated):

- i. Brief aircrew and additional personal on the physiological considerations of altitude, the importance of proper oxygen discipline, pre-breathing, the use of oxygen equipment, depressurization schedules and pre-flight supplemental oxygen requirements.
- ii. Monitor aircrew, parachutists and additional personnel during unpressurized high altitude operations.
- iii. Monitor oxygen equipment during unpressurized high altitude operations.
- iv. Monitor and record pre-breathing times and exposures at or above 16,000 feet to the maximum target altitude and back down to 10,000 feet.
- v. Advise the Aircraft Commander and/or Jump Master of any in-flight or post-flight physiological incident and manage the disposition until relieved by an appropriate higher medical authority.

- vi. Responsible for all first line maintenance to parachutist high altitude oxygen equipment.

RULES AND REGULATIONS

Employment of Av Phys Tech HAAMS

5. One Av Phys Tech HAAMS is required for any CANSOFCOM airdrop mission, and for missions when a pre-breathing console is to be used. The ratio for Av Phys Tech HAAMS to personnel connected to the pre-breathing console is 1:22, aircrew are not included in this ratio. A second Av Phys Tech HAAMS is obligated to be onboard the aircraft when 19 or more personnel are connected to the pre-breathing consoles. For all sorties above 13,000 feet, it is recommended that an Av Phys Tech HAAMS be onboard the aircraft to allow for training and to further mitigate risks, such as oxygen failures and physiological incidents. When supporting aircrew personnel only (no support to parachutists), one Av Phys Tech HAAMS can provide onboard physiological support using the aircraft's Narrow Panel Regulator (NPR). Av Phys Tech HAAMS are qualified to adjust aircrew life support equipment (ALSE) and may do so in order to obtain a mask seal for aircrew. An Av Phys Tech HAAMS may be onboard the aircraft for aircrew exposures above 18,000 feet at the discretion of the 1 CAD Surgeon.

Oxygen Requirements

6. All aircrew are required to have supplemental oxygen at or above 10,000 feet as per the aircraft Standard Maneuver Manual (SMM). Parachutists are required to have supplemental oxygen at 13,000 feet and above. For these jumps parachutists may ascent to altitudes on a bailout system, discretion resides with the Av Phys Tech HAAMS (CANSOFCOM). At 18,000 feet both aircrew and parachutists must have supply to 100% oxygen (Annex A). This means for parachutists; a pre-breathing console must be utilized to maintain oxygen discipline. For civilian candidates, the reviewing authority is the Recruiting Medical Officer (RMO).

Pre-Breathing

7. The Av Phys Tech HAAMS is responsible to brief, monitor and record all pre-breathing for both aircrew and parachutists in accordance with Annex A. The Av Phys Tech HAAMS in charge will record all physiological incidents and altitude exposure times using the aircrew/parachutist exposure checklist in Annex B.

UNPRESSURIZED HIGH ALTITUDE AIRDROP PROCEDURES

Pre-Flight Procedures

8. Prior to the mission the Av Phys Tech HAAMS will perform the following tasks:

- a. Crew Briefings: Av Phys Tech HAAMS will brief the Aircraft Commander on the specific pre-breathing schedule for that mission, physiological emergency procedures, re-pressurization schedules and post flight procedures, and obtain the aircraft ascent and descent rates in order to calculate the maximum exposure time. The lead Av Phys Tech HAAMS will brief the Jump Master on their maximum exposure time as per Annex B. Lead Av Phys Tech HAAMS will acquire information from Jump Master on parachutist seating and mission specific aircraft configuration in order to equip the aircraft as required.
- b. Daily Briefing: Av Phys Tech HAAMS will provide a daily briefing to all personnel on mission specific pre-breathing schedules, maximum exposure times, parachutists' physiological readiness, in-flight emergencies and postflight procedures. The lead Av Phys Tech HAAMS will review aviation physiology, hypoxia, DCS symptoms, and function of oxygen equipment with all parachutists prior to each training evolution or mission.
- c. DCS Evacuation Plan: The Av Phys Tech HAAMS (CANSOFCOM) will research and provide a DCS plan to all Av Phys Tech HAAMS during training/mission preparation. They will liaise with the nearest hyperbaric facility, identify facility requirements and define the window for their support. The Av Phys Tech HAAMS (CANSOFCOM) will liaise with the necessary health services support personnel to ensure a ground evacuation plan has been established.
- d. Oxygen Refilling: The Av Phys Tech HAAMS (CANSOFCOM) will liaise with contracted support entities and ensure there is adequate gas supply for refilling bailout bottles and pre-breathing consoles. Av Phys Tech HAAMS (CANSOFCOM) will provide an updated briefing to Aircraft Commander and Jump Master if any oxygen details have changed.
- e. Oxygen Equipment Setup/Issue: The lead Av Phys Tech HAAMS is responsible to configure the aircraft with the pre-breathing console, oxygen hoses and emergency equipment in coordination with the loadmaster and Jump Master's instructions.

In-flight Procedures

9. The Av Phys Tech HAAMS will provide in-flight support to all parachutists, aircrew and equipment as follows:
 - a. Connection to Pre-Breathing Console: Av Phys Tech HAAMS will connect the parachutists to the pre-breathing console, ensure the bailout bottle is on, and verify oxygen flow. The Av Phys Tech HAAMS is to direct mask donning and verify mask seal/connection.

NOT CONTROLLED WHEN PRINTED

- b. Aircrew Oxygen Equipment: The lead Av Phys Tech HAAMS will confirm that all aircrew have donned their ALSE, conducted a mask seal check and have their regulators set at 100% oxygen.
- c. Pre-Breathing: Av Phys Tech HAAMS in charge will inform the Aircraft Commander when oxygen pre-breathing has begun and when it is complete. They will record this information on the aircrew/parachutist exposure checklist in Annex B. They will monitor all parachutists and aircrew for physiological conditions during the pre-breathing schedule.
- d. In-Flight Emergencies: Av Phys Tech HAAMS will monitor all parachutists, aircrew and oxygen equipment. They will provide support to parachutists and aircrew for any physiological incidents as per Annex C and D. The Av Phys Tech HAAMS in charge is responsible to update both the Jump Master and Aircraft Commander on disposition of any casualties.
- e. Disconnection from the Pre-Breathing Console: Prior to disconnection, the Av Phys Tech HAAMS will visually inspect all bailout bottles to identify their status. They will disconnect the parachutists from the pre-breathing console and provide hose management to ensure safe egress from the aircraft.
- f. Recording Exposure Times: The lead Av Phys Tech HAAMS will record jumper exposure times in accordance with HALO/HAHO descent rates/profiles and record aircrew exposure times once the aircraft has descended below 10,000 feet on Annex B.

Post-Flight Procedures

10. The Av Phys Tech HAAMS will perform the following post-flight procedures:
 - a. Rigging the Aircraft: Av Phys Tech HAAMS will rig the aircraft for the next mission, remove any quarantined equipment and refill all pre-breathing consoles and bailout bottles.
 - b. Post Flight Briefing: The lead Av Phys Tech HAAMS will provide a post-flight brief to all parachutists and aircrew regarding their current exposure times, next allowable profiles, post-flight physiological incidents and procedures. The lead Av Phys Tech HAAMS will record all physiological incidents on aircrew/parachutist exposure checklist in Annex B, and report all information to the Av Phys Tech HAAMS (CANSOFCOM).

Incidents

11. Av Phys Tech HAAMS will manage and coordinate incidents in the following ways;
 - a. Av Phys Tech HAAMS (CANSOFCOM): will ensure all parachutist physiological incidents are briefed to CANSOFCOM and promulgated to the 1 CAD Surg. They will liaise with outside agencies for the testing of all

equipment to include mask/bottle calibration and air samples. The Av Phys Tech HAAMS (CANSOFCOM) will provide immediate feedback to CANSOFCOM for continuation or cessation of training, and manage a lessons learned database for all parachutist physiological incidents.

- b. Av Phys Tech HAAMS (Dislocated): will ensure that all parachutist physiological incidents are reported to the Av Phys Tech HAAMS (CANSOFCOM) as soon as possible. They will ensure that all CANSOFCOM equipment involved in the physiological incident is quarantined and shipped back to CANSOFCOM as soon as possible. Av Phys Tech HAAMS (Dislocated) will instruct the cessation of all training until the Av Phys Tech HAAMS (CANSOFCOM) has been notified of the incident.
- c. The lead Av Phys Tech HAAMS will cooperate with any RCAF Flight Safety investigation. The lead Av Phys Tech HAAMS is to ensure that all information concerning unpressurized high altitude incidents are communicated.
- d. All aircrew physiological incidents will be reported to the 1 CAD Surg office, in consultation with CANSOFCOM, through normal channels.

Personnel and Training

12.

- a. Training Authority: CANSOFCOM is the training authority for all Av Phys Techs in respect to HAAMS (Ref A). CANSOFCOM will maintain tracking for currencies and conduct all continuation training for qualified Av Phys Tech HAAMS.
- b. Senior Av Phys Tech HAAMS (CANSOFCOM): Position requirements; Minimum Av Phys Tech RQ-Sgt with HAAMS Specialty Specification, Sgt/WO posted to CANSOFCOM.
- c. Av Phys Tech HAAMS (CANSOFCOM): Position requirements; Minimum Av Phys Tech RQ-MCpl with HAAMS Specialty Specification, MCpl/Sgt posted to CANSOFCOM.
- d. Av Phys Tech HAAMS (Dislocated): Position requirements; Minimum Av Phys Tech RQ-MCpl. Members will maintain a Canadian Sport Parachuting Association United States Parachuting Association (CSPA/USPA) Class 'A' freefall parachutist rating funded by CANSOFCOM.

Currency Requirements

13.

- a. CANSOFCOM will conduct and track personal readiness verifications bi-annually in conjunction with continuation training (Ref B).
- b. Av Phys Tech HAAMS must complete personal readiness verifications and continuation training within two months of supporting any forecasted task.
- c. Av Phys Tech HAAMS who have not conducted duties for a maximum of two years must undergo re-currency training at CANS

ANNEX A: PRE-BREATHING TABLES**Table 1: Table 1 below is the only pre-breathing table to be used by CAF personnel.**

FL ¹	Pre-breathe (min) ^{3,4}	Time/exposure (min) ²	Max accumulated time at altitude/24h (min) ⁵
FL 100 to 179	Supplemental oxygen	240	Unlimited
FL 180 to 249	30	60	110
FL 250 to 299	60	45	60
FL 300 to 349	90	30	30

Pressure Altitude are given in Flight Level (FL) and refer to cabin altitude.

- a. Exposure times refer to the time between the start of decompression, and the end of recompression. Decompression starts when cabin altitude passes through FL160 and recompression is completed when altitude passes through FL100
- b. Pre-Breathing must be completed prior to reaching FL160.
- c. Pre-Breathing is not required for drops below FL180 but oxygen supplementation is required above FL 100 for aircrew and above FL130 for all jumpers (no supplemental oxygen for jumpers is required between FL100 – FL130 as long as the duration does not exceed 30 minutes). d.

Personnel are only permitted one exposure between FL180-FL250 in a 24hr period. Personnel may conduct another 2 exposures below FL180 within the

- e. 24hr period.

Personnel are only permitted one exposure between FL250-FL349 in a 72hr period. Personnel may conduct another 2 exposures below FL180 within the 72hr period.

- f. An Av Phys Tech is mandatory for FL180 and above, recommended for FL130 180 to further mitigate risks.
- g. There must be 1 Av Phys Tech for every 22 parachutists.
- h. The Av Phys Tech HAAMS must provide the Canadian High Altitude Oxygen Support briefing to all personnel prior to commencing any jump above FL180.

ANNEX A

ANNEX C

ANNEX C: AIRCREW BRIEFING GUIDE Mission Profile

1. Confirm the following with the Jump Master/Aircraft Commander:
 - a. Aircraft ascent pressurized/unpressurized?
 - b. If pressurized wings/cabin attitudes?
 - c. Ascent/Depressurization rate calculations of 1500 fpm.
 - d. Cabin to be re-pressurized to below 10,000 ft MSL immediately post ramp closure.
 - e. Mask up after in-flight dressing/Mask up on the ground?
2. Explain Profile Chart to include the following regulations:
 - a. All Pre-Breathing to be conducted on 100% oxygen with oro-facial mask.
 - b. All Pre-Breathing must be complete prior to ascending through FL160.
 - c. Exposure time begins at FL160 and ends when descending through FL100 for both aircrew and jumpers.
 - d. Maximum exposure time for mission profile.
 - e. All aircrew will conduct a mask seal check every time that the mask is donned and mask will not be removed once seal check has been completed. Ensure all members know how to conduct a mask seal check.
 - f. Explain jump profile for how many pods/highest pod/descent time.
3. Explain Mission Profile to include the following critical events:
 - a. Av Phys Tech HAAMS will notify the Senior Load Master/Aircraft Commander when all jumpers are prepared to begin pre-breathing.
 - b. Senior Load Master/Aircraft Commander will notify the Av Phys Tech HAAMS when all Aircrew are ready to begin pre-breathing.
 - c. Av Phys Tech will notify Senior Load Master/Aircraft Commander when prebreathing has commenced.
 - d. Av Phys Tech HAAMS will notify the Senior Load Master/Aircraft Commander when pre-breathing is complete.
 - e. Senior Load Master/Aircraft Commander will notify the Av Phys Tech HAAMS when A/C decompression has begun.

ANNEX C

- f. Senior Load Master/Aircraft Commander will notify the Av Phys Tech HAAMS when A/C decompression is complete.
- g. Senior Load Master/Aircraft commander will notify the Av Phys Tech HAAMS aircraft altitude crosses through FL160 (MSL) and Av Phys Tech HAAMS will begin exposure timer.
- h. Av Phys Tech HAAMS will inform the Aircraft Commander/Senior Jump Master when exposure time has reached the decision point.
- i. Senior Load Master/Aircraft Commander will notify the Av Phys Tech HAAMS when re-pressurization has commenced.
- j. Senior Load Master/Aircraft Commander will notify the Av Phys Tech HAAMS when aircraft altitude/cabin pressure is FL100 (MSL) Use the following 0-3 scale to rate how likely you are to doze off or fall asleep in the following situations, in contrast to just feeling tired.
- k. Av Phys Tech HAAMS will inform the Aircraft Commander/Senior Jump Master when exposure time has reached the decision point.
- l. Senior Load Master/Aircraft Commander will notify the Av Phys Tech HAAMS when re-pressurization has commenced.
- m. Senior Load Master/Aircraft Commander will notify the Av Phys Tech HAAMS when aircraft altitude/cabin pressure is FL100 (MSL).

Physiological Incidents

- 4. Ear/Sinus Issues (Aircrew/Jumper): The Av Phys Tech HAAMS is to be notified of all ear/sinus issues and will treat with corrective measure (slowed ascent/descent) or with medication. Av Phys Tech HAAMS will notify the Senior Jump Master/Aircraft Commander as per the disposition of jumper/aircrew member.
- 5. Hypoxia (Jumper): If a jumper has an issue with hypoxia, they will extend their arm with "thumbs down" The Av Phys Tech HAAMS will attend to the jumper, assess for signs and symptoms and treat with emergency oxygen. If hypoxia is resolved with 5 mins of onset, the jumper is clear to continue; if not then the Av Phys Tech HAAMS will treat for DCS. All hypoxic incidents will be reported to the Aircraft Commander through the Senior Jump Master.
- 6. Hypoxia (Aircrew): Review signs and symptoms of Hypoxia. If an aircrew member suspects hypoxia they immediately place their NPR to EMERGENCY/100% OXYGEN and inform all crew of a physiological incident, the Aircraft Commander will follow AOI for Hypoxic Incidents.

ANNEX C

7. DCS (Jumper): If the Av Phys Tech HAAMS suspects DCS, they will immediately inform the Aircraft Commander. The Jumper will be placed on emergency 100% oxygen via oro-facial mask and moved forward of the aircraft. DCS Plan as follows: (DCS Plan is to be created with a primary/secondary chamber for the mission area, as well as a location for the staging area and major city centers en-route to target location).
8. DCS (Aircrew): Review signs and symptoms of 4 types of DCS. Emergency procedures as per jumper SOP's.

Post Flight

- a. Exchange phone numbers to ensure that aircrew have a POC for any physiological incidents.
- b. Signs and Symptoms of DCS may arise 12-24 hours after exposure, all signs and symptoms are to be reported to the Aircraft Commander/Av Phys Tech HAAMS who will refer them to Health Services.
- c. Barotrauma is to be reported to the Aircraft Commander/Av Phys Tech HAAMS who will refer them to Health Services.
- d. Review S/S of Oxygen Ear, symptoms may last up to 24 hours after extended exposure to 100% oxygen, report any issues to the Aircraft Commander/Av Phys Tech HAAMS who will refer them to Health Services.

Incident Reporting

- a. All physiological incidents regarding aircrew will be reported by Aircraft Commander through the normal flight safety chain.
- b. All jumper physiological incidents inside the aircraft will be reported by the Av Phys Tech HAAMS via the normal flight safety chain and CANSOFCOM.
- c. All jumper physiological incidents post flight will be reported to CANSOFCOM.

ANNEX D

ANNEX D: IN-FLIGHT EMERGENCY PROCEDURES

Emergency	Protocol	Result
<p style="text-align: center;">Hypoxia (Altitude)</p>	<ol style="list-style-type: none"> 1. Indicated by thumbs down 2. Press mask against face to ensure a seal (Universal sign of Hypoxia) 3. Phys Tech to apply 100% emergency oxygen via portable system. 4. Assess for jumper relayed systematic relief (SpO2 can be used as a tool) 	<ol style="list-style-type: none"> 1. If Sx are resolved < 5 mins, O2 equipment is replaced and cleared to jump 2. > 5 mins jumper is moved forward in A/C, Phys tech will follow DCS protocol 3. Any case of unconscious results in a cease in jumping 4. FC and AC are informed as per jumper disposition
<p style="text-align: center;">Hypoxia (Stagnant) <i>(Will occur post A/C exit, to be followed by medical support)</i></p>	<ol style="list-style-type: none"> 1. Loosen straps 2. Apply HF O2 via NRB 3. Place in semi-prone position 4. Assess for recovery and perform neurological exam as LOC allows 	<ol style="list-style-type: none"> 1. Consult Higher medical authority for further jumper disposition
<p style="text-align: center;">Hyperventilation</p>	<ol style="list-style-type: none"> 1. Follow Hypoxia protocol 2. Assist in slowing ventilation 	<ol style="list-style-type: none"> 1. Follow Hypoxia Protocol
<p style="text-align: center;">Decompression Sickness (DCS)</p>	<ol style="list-style-type: none"> 1. Indicated by thumbs down 2. Write down issue on whiteboard 3. Move Jumper or Aircrew member forward in the A/C 4. Remove mask and apply 100% emergency oxygen via portable system 5. Assess vital signs and conduct neuro exam q 15-20 min. 6. Place patient in a comfortable 7. Patient to remain on 100% O2 and be provided continuing care until handover to high medical authority 	<ol style="list-style-type: none"> 1. Provide patient disposition updates to AFC and AC 2. AC to follow Phys Tech briefed guidelines for that specific mission plan 3. Phys Tech to contact ADMO and conduct hyperbaric treatment as/if directed 4. Phys Tech to provide patient handover with exposure times to high medical authority 5. Phys Tech to assist with hyperbaric treatment coordination/evacuation as required
<p style="text-align: center;">Unconscious NYD</p>	<ol style="list-style-type: none"> 1. Move the jumper/aircrew forward of the A/C if possible and apply 100% emergency oxygen via portable system 2. Assess vitals and utilize basic airways as required (CPA/NPA/LMA/BVM) 3. In the case of cardiac arrest Phys Tech will conduct CPR as AED is not carried on the A/C 4. Any case of unconsciousness results in a cease of jumping 	<ol style="list-style-type: none"> 1. Phys Tech to communicate patient disposition to FC/AC 2. AC to follow Phys Tech briefed guidelines for that specific mission plan 3. Phys Tech to provide patient handover with exposure times to high medical authority 4. Phys Tech to assist with hyperbaric treatment coordination

LIST OF ACRYNOMS

1 CAD	1 Canadian Air Division
ALSE	Aircrew Life Support Equipment
Av Phys Tech	Aviation Physiology Technician
CFEME	Canadian Forces Environmental Medicine Establishment
CFSSAT	Canadian Forces School of Survival and Aeromedical Training
CANSOFCOM	Canadian Special Forces Command
DCS	Decompression Sickness
EP	Emergency Procedure
FL	Flight Level
HAAMS	High Altitude Airdrop Mission Support
HAP	High Altitude Parachutist
JM	Jump Master
LM	Load Master
NPR	Narrow Panel Regulator
OXCON	Oxygen Console
RCAF	Royal Canadian Air Force
SOP	Standard Operating Procedure
SOF	Special Operations Force