

FIJI DIVE EMERGENCY NOTES

***IF YOU HAVE A SUSPECTED
DIVE INJURY/ ACCIDENT
CALL***

331 3444

THE SWITCHBOARD OPERATOR WOULD KNOW WHICH
HYPERBARIC DOCTOR IS ON DUTY (CWM, SUVA)

Once retrieval for treatment is authorised, OCEANIA HOSPITALS should also be notified of an admission, if necessary:

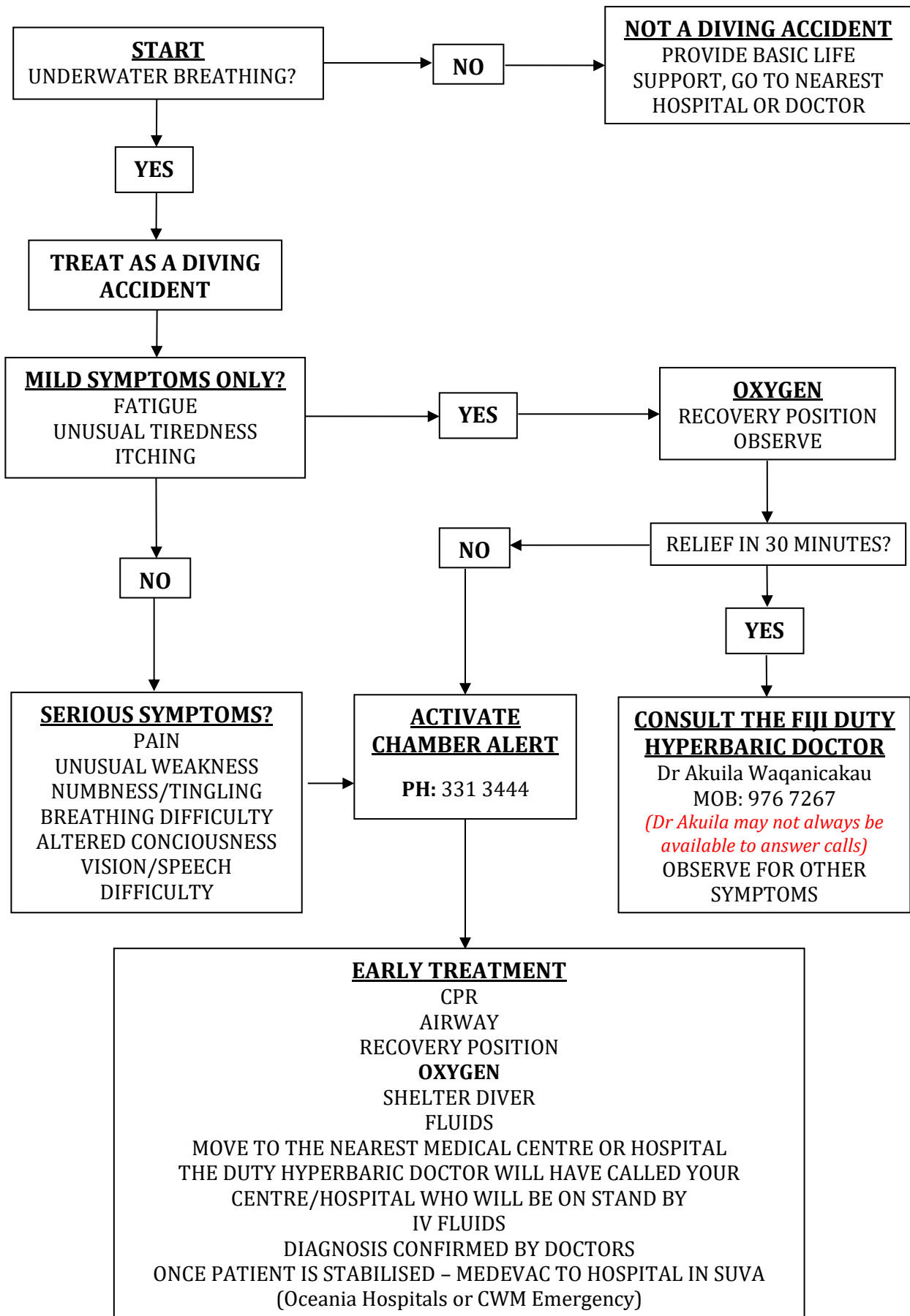
Call Dr John Alfred

992 9541

***IMPORTANT – YOU MUST PLACE THE
PATIENT ON OXYGEN!***

IF CONSTANT FLOW, MINIMUM 15 LITRES/MINUTE

ACCIDENT MANAGEMENT FLOW CHART - FIJI



IMMEDIATE CARE

In a suspected diving accident, the first question is 'Did the victim take a breath underwater?' from a SCUBA tank, hose, bucket, submerged car, or any compressed air source, regardless of depth.

If the answer is no, give CPR and oxygen if needed and evaluate at the nearest medical facility as the casualty is unlikely to require treatment by a diving medicine specialist.

If the injured diver did breathe underwater and only mild symptoms are present (fatigue and itching only), place the patient in the Recovery position if possible and administer oxygen and oral fluids while maintaining close observation for 30 minutes. **DO NOT GIVE ORAL FLUIDS TO PATIENTS SUFFERING DIZZINESS OR NAUSEA DUE TO POSSIBILITY OF VOMITING.**

If these symptoms do not clear, **"ACTIVATE THE HYPERBARIC CHAMBER ALERT"**. (see flowchart)

If the injured diver did breathe underwater and has serious symptoms (see flowchart), the Dive Operator must accompany the patient and do the following:

- 1) Administer CPR if required with the victim lying flat on his/her back.
- 2) Keep airway open and prevent aspiration of vomit. An unconscious diver should be intubated by trained personnel if possible.
- 3) Administer oxygen by tight-fitting transparent double seal mask at the highest possible oxygen concentration. Do not remove oxygen except to re-open the airway or if the victim shows signs of convulsions.
- 4) Keep victim in the Recovery position if symptoms occurred within 10 minutes of surfacing and steps 1-3 have been completed.
- 5) If convulsion occurs do not forcefully restrain. Turn victim on side (supporting head and neck), maintain airway, sweep away any vomit. Hold victim loosely to prevent self injury and do not forcefully insert any airway or tongue blade, resume oxygen administration.
- 6) Protect the injured diver from excessive heat, cold, wetness, or noxious fumes.
- 7) For conscious patients only, give conscious patients non-alcoholic liquids such as water or fruit juices.
- 8) Call the CWMH - 3313444 and initiate Chamber Alert (**see page 8**). *Hyperbaric Doctor: Dr Akuila Waqanicakau - 976 7267 may not always be available to take calls on the spot.*
- 9) If necessary, the Hyperbaric Doctor will advise Transport, then Evaluate and stabilize patient at the nearest Medical Centre/Hospital emergency room prior to transfer to the Hyperbaric Chamber Facility. **ENSURE OXYGEN LEVELS ARE AT 15LITRES/MINUTE AND NOT DROPPED TO HOSPITAL NORMS FOR NON-DIVERS**
- 10) **For Doctors or Paramedics only:**
Intravenous fluid replacement with electrolyte solutions is preferred for unconscious or seriously injured victims. Ringers lactate, normal saline, or 5% dextrose in saline may be used. Do not use 5% dextrose in water. Intravenous fluid treatment requires professional care. Do not attempt unless you have proper training.
- 11) Should the patient be moved to a Medical Centre the Fiji Government Doctor will stabilize the

patient, the Dive Operator must ensure communications are frequent to the Hyperbaric Doctor at the Hyperbaric Unit.

- 12) When you initiated the Hyperbaric Chamber Alert, the Hyperbaric Unit will have put all personnel on a state of readiness i.e. The Chamber, Ambulances and the quickest method for MEDEVAC will be on standby readiness to depart. The Ministry of Health Doctor and Hyperbaric Chamber Doctor must authorize all patients (Fiji Citizens, Beche-de-mer Divers, Tourist/Recreational divers, staff, salvage and commercial dive companies) Medevacs, and treatment at the Hyperbaric Unit.
- 13) The patient should remain on oxygen during transport to Hyperbaric Unit.
- 14) If air evacuation is used, IT MUST BE ARRANGED BY THE HYPERBARIC UNIT. It is critical that the patient not be exposed to decreased barometric pressure at altitude. Flight crews must fly at the lowest safe altitude in un-pressurised aircraft. CAAF have agreed 500 feet weather permitting. It is essential that you the Operator personally ask the pilot to confirm he has been briefed on this critically important aspect.

Dive Emergency Telephone Numbers

Colonial War Memorial (CWM) Hospital Hyperbaric Unit

General (24Hrs)	Tel	331 3444
Dr Akuila Waqanicakau – Hyperbaric Doctor	Mob	976 7267
Dr Luke Nasedra	Mob	973 0854
CWM Hyperbaric Unit (<i>only manned if the chamber is in use</i>)	Tel	321 5525

Medical evacuation direct to Suva will land at the Suva foreshore grounds (next to the Suva Bowling Club) and Treatment will then be done at the Hyperbaric Unit at CWM. An ambulance will need to be organised for pick up (discuss with the Hyperbaric Doctor)

On arrival at the hospital, please report to the emergency room, where a hyperbaric staff member will meet and assist you. Call one of the mobiles on arrival if there is no hyperbaric staff there. Staff would normally take you to the Post Anaesthetic Recovery Unit (PARU).

Fiji Air/Sea Rescue

Police Sea Rescue (Water police)	Tel	8932888
Thomas Chand	Mob	8914818
Fiji Navy (Maritime Search & Rescue)	Tel	331 5380
Or	Tel	331 6204 / 331 6205 / 331 6206
Toll Free	Call:	1539
Island Hoppers	Tel	672 0410 / 672 3343
Pacific Island Air & Seaplanes	Tel	672 5644 / 672 5642
HELiPRO – Emergency Hot Line (24 hrs)	Mob	770 7700

District Hospitals

Lautoka Hospital	Tel	666 0399
Nadi Hospital	Tel	670 1128
Dr Vukivukiseru	Mob	769 2219
Sigatoka Hospital	Tel	650 0455
Savusavu Hospital	Tel	885 0444
Taveuni Hospital.....	Tel	888 0444
Labasa Hospital	Tel	881 1444
Navua Hospital	Tel	346 0181

Incident Management Team, National & Divisional Contact Details: <https://fhta.com.fj/wp-content/uploads/2020/11/SDMOs-Contact-Details.pdf>

Oceania Hospitals

Nursing Supervisor (after hours)	Tel	330 3404
Dr John Alfred – Clinical Coordinator/Practice Manager	Mob	992 9541
Dr Penuel Anav – Ward Manager	Mob	992 4683

Zens Medical Centre (Nadi)

Nadi Town	Tel	670 3533
Namaka	Tel	672 2288
Denarau	Tel	675 0211
Lautoka	Tel	666 3058
Dr Zen	Mob	979 7872
Dr Tupou	Mob	939 3590

Fiji Hotel and Tourism Association Dive Committee (FHTA DiveComm)

Allan Gortan, Chair Mob 999 0125 / 778 0125
Mike Agnew Mob 999 8305
Stuart Gow Mob 997 5416
Fantasha Lockington, FHTA CEO Mob 992 6980

Insurance Companies

BSP Life Tel 331 7000
 Health Help Desk Tel 326 1787
 Health Help Line (A/H) Mob 702 4507
Marsh Ltd - Suva Tel 322 7300
 Daniel Yee – Director (A/H) Mob 999 0798
 Lautoka Tel 665 3300
 Samu Tunidau – Branch Manager (A/H) Mob 999 0797
Aon (Fiji) Ltd - Suva Tel 773 3374
 Sahreena Mohammed – General Manager (A/H) Mob 707 7263
 Nadi Tel 776 3599
 Peni Bolatui – Branch Manager (A/H) Mob 707 7254
 Lautoka Tel 776 3598
 Vinod Patel – Branch Manager (A/H) Mob 707 7257
V Insurance (PADI) Tel +61 2 9285 4111
Divers Alert Network (DAN) Tel +61 3 9886 9166
Michelle Brunton Tel +61 2 9454 2845 / +64 27 237 7705
 PADI QA/Incident Report Manager Michelle.Brunton@padi.com.au
DiveAssure (SSI recommended Broker) Tel +49 (0) 322 2109 5966
Sam Jupe Tel +64 21 747 838
 Scuba School International (SSI) Account Manager sam.jupe@divessi.com

Fiji Department of Immigration¹

Certificate of Identity (CI)

Shalini Devi, Tel 990 6833
 MANAGER PASSPORTS shalini.devi@govnet.gov.fj

All travel expenses for immigration officers to be dispatched to your location have to be covered by the respective organization.

High Commissions/Embassies/Consular Services

British Tel 322 9108 / Mob 990 7591 / 707 7681
United States of America Tel 331 4466 / Mob 772 8049
Australia Tel 338 2211 / Mob 707 1222
New Zealand Tel 331 1422 / Mob 779 1956
Japan Tel 330 4633 / 330 2122
China Tel 330 0215
Canada Tel 327 5160
France (Delegation of the European Union for the Pacific) Tel 331 3633

¹ Information correct as received on 16 July 2020 from the Fiji Department of Immigration

Local Area Dive Contacts

Taveuni

Allan Gortan, PARADISE TAVEUNI Tel 778 0125 / 999 0125
Carl & Muriel Fox, TAVEUNI DIVE RESORT Tel 828 1063
Zoe Trickett, THE REMOTE RESORT Mob 992 4011
Phillip Morais, GARDEN ISLAND RESORT Tel 888 0286
Julie Kelly, NAKIA RESORT & DIVE Tel 888 1111

Savusavu

Bart Simpson, JEAN-MICHEL COUSTEAU (L'AVENTURE) Tel 885 0188
Bill Keefe, NAMALE RESORT Tel 885 0435

Yasawas

Val & Ivan Parker, NANUYA ISLAND RESORT Tel 666 1462 / 666 7633
Gareth Van Eyssen, BAREFOOT KUATA/MANTA RESORTS Tel 675 0566
Tina Axelson, MANTARAY ISLAND RESORT Tel 776 6202
James McCann, YAWASAWA ISLAND RESORT Tel 666 3364

Mamanucas

Mike Agnew, VITI WATER SPORTS..... Tel 670 2413 / 999 8305
Bob Speed, CAPTAIN COOK CRUISES Tel 999 1089
Steven Andrews, CASTAWAY FIJI Tel 666 1233
Justin King, VOMO ISLAND RESORT (OCEANPLAY) Tel 666 7955

Suncoast/Rakiraki

Simon Doughty, VOLIVOLI BEACH RESORT & RA DIVERS.....Tel 992 0942 / 992 0897

Coral Coast

Ashwin Pal, DIVEAWAY Tel 931 6883
Boris Kaz, WAIDROKA BAY RESORT Tel 992 4944

Kadavu

Conny Treloar, DIVE KADAVU Tel 368 3502

Pacific Harbour/Beqa

Andrew Cumming, BEQA ADVENTURE DIVERS Tel 345 0911 / 777 1081
Jona Baro, AQUATREK BEQA Tel 702 9898 / 773 0324
Rusiate Naulivou, UPRISING BEACH RESORT Tel 345 2200
Natalie Marletta, THE PEARL RESORT Tel 773 0022

Suva

Stuart Gow, RESORT SUPPORT Mob 997 5416

FIJI CHAMBER ALERT FOR SERIOUS SYMPTOMS
PROCEDURE AND RECORD SHEET

1. DIVER HAS SERIOUS SYMPTOMS

- CPR
- AIRWAY
- RECOVERY POSITION
- OXYGEN
- SHELTER DIVER
- ORAL FLUIDS

DATE: _____
 TIME: _____
 TIME: _____
 TIME: _____
 TIME: _____
 TIME: _____

2. INITIATE FIJI CHAMBER ALERT BY CALLING THE CWM HOSPITAL

SWITCHBOARD 331 3444

WHO WILL ALERT THE ON-CALL HYPERBARIC DOCTOR (CWM)

TIME: _____

SAY: A) WE HAVE A SERIOUS DIVER EMERGENCY

B) THIS IS A CHAMBER ALERT

C) MY NAME IS _____

D) OUR DIVE OPERATION IS _____

E) WE ARE MOVING PATIENT TO _____

(Name of Hospital / Medical Centre)

F) OUR ESTIMATED TIME OF ARRIVAL IS _____

G) THE PATIENT'S SYMPTOMS ARE AS FOLLOWS:

I	Unusual fatigue or weakness	Yes / No
ii	Skin itch	Yes / No
iii	Pain on arms, legs or torso	Yes / No
iv	Dizziness	Yes / No
v	Numbness, tingling or paralysis	Yes / No
vi	Shortness of breath	Yes / No
vii	Visual blurring	Yes / No
viii	Chest pain	Yes / No
ix	Disorientation	Yes / No
x	Personality change	Yes / No
xi	Blood froth from mouth / nose	Yes / No
xii	Other symptoms (list)	

3. **INITIATE AND COMPLETE THE TREATMENT / RECORD SHEET WHICH MUST ACCOMPANY THE PATIENT**
4. **MOVE PATIENT TO NEAREST GOVERNMENT MEDICAL CENTRE / HOSPITAL, ENSURING TREATMENT / **OXYGEN**² IS PROVIDED AND OBSERVATION EN ROUTE. TAKE ALL DOCUMENTATION I.E. CHECK IN FORM / PREVIOUS DIVES / LOG BOOK / LATEST DIVE PROFILES AND ALL DIVE EQUIPMENT USED BY PATIENT.**
5. **ON ARRIVAL AT THE MEDICAL CENTRE / HOSPITAL ADMIT THE PATIENT AND STANDBY TO ASSIST IF NECESSARY**
6. **ASSIST HOSPITAL / MEDICAL CENTRE STAFF WITH ANY INSTRUCTIONS FOR MEDEVAC**
7. **MEDEVAC WILL BE ARRANGED BY THE HYPERBARIC UNIT AND THE ON-CALL DOCTOR**
8. **A CERTIFICATE OF IDENTITY (CI) MUST BE OBTAINED FROM THE FIJI DEPARTMENT OF IMMIGRATION IN CASES WHERE A LOCAL DIVER, WHO DOES NOT HAVE A PASSPORT, IS IN URGENT NEED OF MEDICAL TREATMENT OVERSEAS. IMMIGRATION PERSONNEL WILL HAVE MOBILE ENROLMENT KITS AVAILABLE UPON CONTACT TO CARRY OUT MANDATORY ELECTRONIC ENROLLMENT PROCESSES WHICH INCLUDES BIOMETRICS. (see page 6 for contact details)**

² ENSURE OXYGEN LEVELS ARE MAINTAINED AT 15 LITRES/MINUTE

SYMPTOMS / TREATMENT RECORD SHEET

TO BE COMPLETED BY THE PATIENT'S DIVE OPERATOR
AND TO BE SENT WITH THE PATIENT

DIVER PATIENT:

NAME: _____ AGE: _____

ADDRESS: _____

CONTACT: _____ PHONE: _____
() RELATIVE () FRIEND

SIGNIFICANT MEDICAL HISTORY: (Allergies, medications, diseases, injuries, etc.)

SIGNS/ SYMPTOMS: (note time of each as it arises)

FIRST AID PROCEDURES INITIATED: (note time of each)

FIRST DIVE
TIME IN / OUT
DEPTH

SECOND DIVE
TIME IN / OUT
DEPTH

THIRD DIVE
TIME IN / OUT
DEPTH

COMMENTS:

PREVIOUS DIVES IN FIJI:
RESORTS: _____

DIVE OPERATORS: _____

DATES OF DIVING: _____

PROFILES IF KNOWN:

1. TIME IN /OUT _____ / _____ DEPTH _____
2. TIME IN /OUT _____ / _____ DEPTH _____
3. TIME IN /OUT _____ / _____ DEPTH _____

COMMENTS:

GENERAL REMARKS:
