

Coastal and Marine Laboratory Academic Diving Program Dive Plan Submittal Form All applicants must be familiar with the FSU Standards for Scientific Diving



| | | I | | | | | |
|--|------------|---------|-----------------------|------------------------|-------------|---------------------------|--|
| DSO Signature | | | | | | | |
| Dive Details | | | | | | | |
| Dive Plan Submitted by | | | | Date Submitted | | | |
| Principal Investigator | | | | Lead Diver | | | |
| Proposed Expedition Dates | Start | | | End | | | |
| Is this a Sponsored Project? | | | | Project No. | | | |
| Proposed Number of Dives | | | | Proposed No. of Divers | | | |
| General Dive Site Location | | | | Specific Div | e Sites | | |
| Will this Plan Involve (check a | all that a | pply) | - | | | | |
| Boats or larger vesse | ls | | Specialty Diving | | N | on-FSU personnel | |
| Multiple days of divin | ng | | Flying after Diving | | S | cience Divers in Training | |
| Decompression Divir | ng | | International Tra | vel | N | 1ixed Gases | |
| General Dive Plan Considerat | ions | | | | II | | |
| Any diver has the right to refuse to dive without rear of penalty in he of she regulations are unsafe of unfavorable. OR the dive violates the precepts of their training OR the regulations of the <i>Florida State University Standards for Scientific Diving & Operation of the Scientific Diving Program</i> (FSU Standards). It is the responsibility of each diver to terminate the dive, without fear of penalty, whenever he or she feels it is unsafe to continue the dive unless it compromises the safety of another diver already in the water. | | | | | | | |
| All Dive plans MUST be l | pased or | the co | mpetency of the l | east experien | iced diver. | | |
| All Divers-in-training mu | st be bu | ddied w | rith a Scientific Div | er. | | | |
| Absolutely No Solo Diving is allowed. | | | | | | | |
| • Depth certification levels may be extended only to the next deepest certification level and <i>only</i> if the diver with the limiting depth certification level is buddied with a diver certified to the deeper depth level. For all diving conducted under hazardous conditions a plan must be formulated to deal with such conditions. A Dive Profile MUST be completed for each proposed dive (copy forms as needed). If dives are to be conducted from vessels, a Float Plan must also be completed. | | | | | | | |
| • An Emergency Plan MUST be completed for each expedition including the following: emergency contact information (including name, relationship, and telephone number) for each diver, nearest recompression chamber, nearest accessible hospital and anticipated means of transportation. | | | | | | | |

| Dive Plan Diving Roster and Emergency Contacts | | | | | | | |
|--|------------------------|-----------------|-------------------|----------|---------|--|--|
| Diver Name | Depth Certification | Phone Number | Emergency Contact | | | | |
| | | | Name | Relation | Phone # | | |
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Purpose of Dives

| Operation Plan | | | | | | | | | |
|---|--|---------------------------|-------------------------|------------------|--------|--|--|--|--|
| Boat/Vessel Name | Site Emergency Communications (Cell Phone, Radio) | | | | | | | | |
| Maximum Depth (ft) | | Number of dives/diver/day | | | | | | | |
| Dive Tables Used | | Dive Con | nputers Used | | | | | | |
| Decompression schedules and repetitive dive plans (attach dive profile worksheet if necessary) | | | | | | | | | |
| | | | | | | | | | |
| Diving work plans (attach det | ailed explanation | if necess | ary) | | | | | | |
| | | | | | | | | | |
| Specialty dives if planned (| see FSU Standar | ds Sectio | ns 8.0 and 9.0) | | | | | | |
| | | | | | | | | | |
| Nitrox, or mixed gases (inclu | ude percentages) | | | | | | | | |
| | | | | | | | | | |
| Tools or specialized equipment (diving sleds, scooters, drills, surface supply, hookah, tethers, etc.) | | | | | | | | | |
| | | | | | | | | | |
| Hazardous Conditions Anticip | ated: (i.e., cold w | ater, nigh | t diving, extreme curre | ents, extreme de | epths) | | | | |
| | | | | | | | | | |
| Safety Equipment: (check all that apply) | First Aid Kit | d Kit Emergency Dive Flag | | | | | | | |
| Others: | Others: | | | | | | | | |
| International Travels Attach a copy of all itineraries, including flight times and a ccommodations with contact information. | | | | | | | | | |
| Contacts in Country | | | Vame | Phone Number | | | | | |
| | | | | | | | | | |
| U.S. Consulate or Embassy | | ١ | Name | Phone number | | | | | |
| | | | | | | | | | |

Dive Plan Approval

| I certify that this dive plan has been completed in compliance with the Florida State University |
|--|
| Diving Control Board policies and procedures. I further certify that all information provided in |
| this plan is true and correct to the best of my knowledge. |

All dive logs related to this plan should be returned to the Diving Safety Officer or designee within one week following completion of the planned dives(s). Individuals, within the same period, should enter their dives onto the AAUS website.

| Principal Investigator | | | | | | | | |
|---|--|---------------|--|--|--|--|--|--|
| Print Name | | Signature | | | | | | |
| Dive Team Leader | | | | | | | | |
| Print Name | | Signature | | | | | | |
| SPACE BELOW FOR FLORIDA STATE UNIVERSITY ACADEMIC DIVING PROGRAM ONLY | | | | | | | | |
| Dive Plan Reviewed By | | | | | | | | |
| Name & Title | | Signature | | | | | | |
| Approved (Y or N) | | Date approved | | | | | | |

The Florida State University Academic Diving Program Emergency Management Plan

The following procedures provide guidance for dealing with emergencies that arise in the course of compressed-gas diving. They do not substitute for project supervisors and participants using good judgment. Further, they do not cover all possible injuries. Proper emergency actions rely upon sound training, sound judgment, and rapid response. Divers must report all injuries, however slight, to the Diving Supervisor or Divemaster immediately.

Prior to the start of any diving operation, the Diving Supervisor of Divemaster establishes and verifies the following:

- 1. The nearest Medical Treatment Facility (Location, Phone Number, Point of Contact)
- 2. Contact information for the Divers Alert Network (DAN) and Nearest Operational Recompression Chamber (Location, Phone Number, Point of Contact)
- 3. Emergency Transportation Options ---vehicles, boats, aircraft, etc. (Location, Phone Number, Point of Contact)
- 4. Nearest Coast Guard Operations Base (Location, Phone Number, Radio Channels, Point of Contact)
- 5. Communication options (e.g., cell phone, telephone, radio) from the site of Diving Operations to all of the above
- 6. Copy of the Communications Plan available on the dive site.
- 7. FSU Standards for Scientific Diving and a copy of the appropriate diving tables available on the dive site.

Mechanical Injury

In the event of a Mechanical Injury, the following procedures apply:

- 1. Remove the affected diver from the water as soon as practicable, keeping in mind any decompression obligations
- 2. Recall all divers, if necessary
- 3. The Diving Supervisor or Divemaster evaluates the severity of the injury and recommends necessary First Aid.
- 4. Inform the FSU Diving Safety Officer
- 5. If the injury is severe, the Diving Supervisor or his/her designee should contact the Emergency Medical System (EMS). If EMS is unable to respond, transport the affected diver as rapidly as possible to the nearest hospital. Contact the hospital immediately by whatever means are available, providing the medical staff with all pertinent information regarding the victim and the injury.
- 6. The Diving Supervisor designates someone in the group to accompany the victim to the treatment facility with any required administrative forms.
- 7. If the injured person is an employee or volunteer of FSU, the FSU Diving Safety Officer initiates appropriate Worker's Compensation procedures.
- 8. As soon as possible, the FSU Diving Safety Officer prepares a diving incident report, including facts of the injury and treatment rendered, and statements from pertinent witnesses. A copy of this report shall be forwarded to the FSU Diving Control Board, the FSU Department of Environmental Health & Safety, the FSU Coastal and Marine Laboratory's Human Resources personnel, and to AAUS or the National Institute for Occupational Safety and Health (NIOSH), depending on the nature of the operation.

Diving-Hyperbaric Injury

In the event of a diving emergency that requires recompression treatment, the following procedure is implemented:

- Remove the affected diver from the water as soon as practicable, keeping in mind any decompression obligations. Note the condition of the victim's diving buddy, because the buddy may be affected as well and develop symptoms. If practical, the victim and the victim's buddy should be treated simultaneously.
- 2. Cease all diving operations and recall all diver
- 3. The Diving Supervisor should evaluate the severity of the injury and recommend any necessary First Aid including the administration of 100% Oxygen.
- 4. The Emergency Management System (EMS) should be contacted by calling 911 or other local emergency telephone number. Offshore operations should call the Coast Guard on VHF Ch. 16 and the Divers Alert Network at (919) 684-8111 to arrange for evacuation and management of the incident. Note that a marine telephone call can be made over VHF; marine operators monitor Ch. 16 and will advise on local procedure. If EMS cannot respond, transport the affected diver as rapidly as possible to the nearest emergency care facility. Contact the facility immediately and provide medical staff with all pertinent information regarding the diving injury, including the following:
 - o Victim's Name/Emergency Contact Information
 - o Dive profile
 - o Type of injury (if known)
 - o Any treatment(s) provided (e.g., oxygen)

If possible, the victim's dive buddy and the Diving Supervisor or designee should accompany the victim to the emergency facility so that they can provide the medical staff with additional information, if required.

The victim should have a neurological exam administered as soon as possible to obtain baseline information and to evaluate the severity and progression of the injury. Neurological exams should be administered regularly.

- 5. The Diving Supervisor or designee should secure the injured person's dive gear (turning off the air) for subsequent examination by accident investigators.
- 6. If the injured person is an employee or volunteer of FSU, the FSU Diving Safety Officer initiates appropriate Worker's Compensation procedures.
- 7. Inform the FSU Diving Safety Officer as soon as possible. Follow reporting procedure as above.
- 8. If anyone acting in an official capacity for the Florida State University is asked for a statement, it is important that they follow these procedures:
 - *Law Enforcement* when speaking with law enforcement personnel, provide necessary facts only, not conjecture as to how the incident occurred. Offer no hypotheses.
 - *The Press* do not offer information to anyone or discuss the events with anyone. In particular, do not speak to the press. Forward their questions to the Vice President of University Communications (850.644.8343).
 - Contact University counsel in the Office of Research and contact the FSU Department of Environmental Health and Safety as soon as is possible following incident.
- 9. As soon as possible, the FSU Diving Safety Officer prepares a **diving incident report**, including facts about the injury and treatment rendered, statements from pertinent witnesses, and any police reports. The DSO submits the incident report to the FSU Diving Control Board, the FSU Department of Environmental Health & Safety, the FSU Coastal and Marine Laboratory's Human Resources personnel, and to AAUS or the National Institute for Occupational Safety and Health (NIOSH), depending on the nature of the operation.

Omitted Decompression

Should a situation occur that causes a diver to omit any required decompression obligations, including uncontrolled rapid ascent from any depth, the diver must follow these procedures:

Any diver who experiences omitted decompression shall remain on the surface and be closely observed for symptoms of AGE and DCS for a period of at least 4 hours and will refrain from any further diving for a period of at least 12 hours.

- 1. Dive Emergency Plan: Conscious, Alert, Diving Accident Victim
 - a) Evaluate Victim's Airway, Breathing and Circulation
 - b) Call 911 and Diver's Alert Network 24-hour Emergency line (919) 684-9111
 - c) Obtain permission from the diver. Put the victim on 100% oxygen using a demand valve mask or a non-rebreather mask at 15 Liters per minute (15 LM)
 - d) Evaluate the victim for the type of diving injury
 - i. Perform a rapid field neurological examination to assess problem areas
 - ii. Gather as much information as possible
 - iii. Keep the dive computer with victim, if he/she has one
 - iv. Secure the divers gear for examination, BUT do not disassemble gear
 - v. Interview the diver's buddy for information
 - e) If you suspect decompression Illness or any other type of compressed gas injury (e.g., arterial gas embolism, pneumothorax) keep the victim flat on his/her back do not raise victim's feet. Place the victim on his/her side if nauseated or vomiting keep airway clear.
 - f) The victim should be transported to
 - i. Nearest hospital with a chamber:

ii. Nearest Hospital:

- g) If not nauseated and not experiencing altered levels of consciousness, give the victim fluids during transportation to the nearest hospital.
 - i. Continue oxygen administration
 - ii. Send the victim's dive computer with him/her to the hospital with any other records, such as results of the rapid neurological examination
 - iii. Keep victim out of sun and watch for shock
- h) Based on the evaluation by the doctor at the hospital, the victim may have to enter decompression chamber for treatment.

- 2. Dive Emergency Plan: Unconscious, Non-Responsive, Diving Accident Victim
 - a) Evaluate victim's Airway, Breathing, Circulation
 - b) Call 911 and Diver's Alert Network 24-hour Emergency line (919)684-9111
 - c) Put the victim on 100% oxygen at 15 liters per minute (15 LM) using a demand valve mask or a non-rebreather mask. When administering 100% oxygen 15LM, use a bag valve mask (BVM) if it is available and the rescuer is trained in proper administration of oxygen with the BVM.
 - d) Perform Cardio-Pulmonary Resuscitation, or rescue breathing if necessary.
 - e) Evaluate the victim for the type of diving injury
 - i. Gather as much information about the dive as possible
 - ii. Keep dive computer with victim, if he/she has one
 - iii. Secure victim's other dive gear for examination, DO NOT disassemble gear
 - iv. Interview the victim's buddy for information about the dive

Send the victim's dive computer (if available) with him/her to the hospital with any other records

Hospitals with Recompression Chambers for Dive Incidents

- Capital Regional Hyperbaric Medicine 2626 capital Medical Blvd Tallahassee, Fl. 32308 Phone: 850-325-5000 Phone: 850-325-4542 Chamber
- South Miami Hospital
 6200 SW 73rd St.
 South Miami, FL 33143
 Phone: 786-662-4000
 Phone: 786-662-5558 Chamber

- Baptist Hospital Hyperbaric Medicine Unit 1000 West Moreno Street Pensacola, Fl. 32501 Phone: 850-434-4080 Phone: 850-434-4479 Chamber
- 4. Springhill Memorial
 3719 Dauphin Street
 Mobile, AL 36608
 Phone: 251-344-9630
 Phone: 251-460-5259 Chamber
 8AM-4PM, Mon-Fri
 Has an emergency call team for after hours

For further information on recompression chambers or diving emergencies contact Diver's Alert Network

- 24-hour Emergency Hotline: 919-684-9111
- Non-Emergencies: 800-446-267



The Florida State University Academic Diving Program

Dive Log



| SUPERVISOR: | | |
|--------------------------|---|----|
| DIVE DATE: | | |
| LOCATION: | | E |
| DIVE SITE: | - | D |
| SURFACE CONDITIONS: | - | |
| UNDERWATER CONDITIONS: | | _ |
| PURPOSE: | | D |
| SPECIALIZED ENVIRONMENT: | | FS |

| EMERGENCY CONTACTS | | | | | | |
|---------------------|----------------|--|--|--|--|--|
| EMERGENCY SERVICES | 911 | | | | | |
| DAN HOTLINE | (919) 684-9111 | | | | | |
| U.S. COAST GUARD | (850) 234-2475 | | | | | |
| DIVE SAFETY OFFICER | (850) 559-8107 | | | | | |
| FSU MARINE LAB | (850) 697-4120 | | | | | |

| DIVER NAME | SURFACE | CYLINDER | | | START TOTAL TIME TIME | | MAX. DEPTH | NOTES | |
|------------|--------------------|----------|----------------|-------------------|--------------------------|---------|---------------|-------|--|
| | $(E_{x} > 24 hrs)$ | Tank # | Air or EAN% | Starting (PSI) | Ending (PSI) | (hh:mm) | (Surface to | (FT) | |
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