

German - Austrian - Swiss

Guidelines for Diving Accidents

Wilhelm Welslau

Development created 10/2002 update 10/2005 update 4/2008 update 3/2011 next update 2014

Guideline versions

- GTÜM (Germany) - german
- GTÜM (Germany) - english
- ÖGTH (Austria) - german
- SUHMS (Switzerland) - german
- SUHMS (Switzerland)
- SUHMS (Switzerland) - italian
- french

Development of guidelines

"Guideline for guidelines"

Levels of evidence

Level 1 Group of experts (representative, independant)

Level 2 Consensus process

- Delphi conference
- Consensus conference
 - representative audience
 - independant steering committee (jury)

Level 3 Revision according to EBM standards (definition of study quality...)

Group of experts

FrankHARTIG(ÖGTH)WolfgangFÖRSTER(BG Bau)WolfgangHÜHN(VDD)PeterKNESSL(SUHMS)KonradMEYNE(VDST)VolkerWARNINGHOFF(German Navy)WilhelmWELSLAU(GTÜM)

Jury

Ulrich VAN LAAK Alf O. BRUBAKK Claudio CAMPONOVO Andreas KOCH Peter MÜLLER Roswitha PROHASKA Rob VAN HULST Wilhelm WELSLAU

(DAN Europe)
(DMAC, Norway)
(SUHMS, Switzerland)
(German Navy)
(GTÜM, Germany)
(EDTC, Austria)
(Nederlands Navy)
(Group of Experts)

Content

- First Aid
- Transport
- Hyperbaric treatment
- Transport to treatment center
- Further hyperbaric treatments
- Fitness to dive



Mild symptoms

- Unusual tiredness
- Skin itching

Severe symptoms

- Discoloration and alteration of skin
- Pain
- Tingling
- Physical weakness
- Numbness
- Paralysis

- Breathing troubles
- Vision, hearing or speech troubles
- ► Vertigo
- Nausea
- Impaired consciousness
- Unconsciousness

Dr. Wilhelm Welslau

Mild symptoms

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First aid for mild symptoms (unusual tiredness / skin itching)

Oxygen (100%, for every breathing gas of divers)
 Fluids (0.5-1.0 ltr / h, no alcohol, no caffeine)
 Examination (,5 minutes neurocheck', DAN)

,5 minutes neurocheck' (DAN Europe)

| Check No. 1 Time: | | 1. Orientation | | Check No. 2 Time: | |
|-------------------------|----|--|-----|-------------------------|--|
| Yes | No | | Yes | No | |
| | | Is the diver orientated to person (name, age)? | | | |
| | | Is the diver orientated to place (present location)? | | | |
| | | Is the diver orientated to time (present time, date)? | | | |
| Yes | No | 2. Eyes | Yes | No | |
| | | Is the diver able to recognize the number of fingers held in front of his face (2-3 tries)? First, test each eye separately, then both eyes together. | | | |
| | | Is the diver able to identify an object in the distance? | | | |
| | | Is the diver able to follow a finger moving in front of his face with his eyes while holding his head still? The finger should be moved from the right to the left and from the top to the bottom in a distance of approx. 50 cm. Look for a uniform movement of both eyes and for possible jerky movements in the extreme positions. | | | |
| | | Are the diver's pupils equally wide and round and do they become narrower in the light? Look for left-right differences. | | | |

,5 minutes neurocheck' (DAN Europe)

| Check No. 1 | ĸ | 1. Orientation | Yes | No | 6. Tongue | |
|----------------|---------|---|-----|----|--|--|
| Time Yes | : No | | | | Ask the diver to stick out the tongue. Observe if it is located exactly in the centre or somewhat to the right or to the left. | |
| | | Is the diver orientated to person (name, age)? | Yes | No | 7. Muscle strength | |
| | | Is the diver orientated to place (present location)? | | | Ask the diver to lift both shoulders, while applying a gentle pressure onto them with the nalm of your hands. By doing this, it should be easy to determine if the | |
| | | Is the diver orientated to time (present time, date)? | | | diver is able to generate the same force on both sites or if there are left-right differences. | |
| Yes | No | 2. Eyes | | | Ask the diver to hand both arms at the albow in a 00° angle. Then ask him to | |
| | | Is the diver able to recognize the number of fingers held in front of his face (2-3 tries)? First, test each eye separately, then both eyes together. | | | Ask the diverto bend both ands at the erbow in a 90° angle. Then ask thin to move his hands up, down and sideways, while you provide resistance to his movements with your hands. Assess potential left-right differences in strength. | |
| | | Is the diver able to identify an object in the distance? | | | Ask the diver to lie down flat on his back. Then ask him to lift his knees against | |
| | | Is the diver able to follow a finger moving in front of his face with his eyes while holding his hard still? | | | your resistance. | |
| | | The finger should be moved from the right to the left and from the top to the betterning a discussion of emergy 50 cm. Look for a writer measurement of betternes | | No | 8. Sensory perception | |
| | | and for possible jerky movements in the extreme positions. | | | Ask the diver to close his eyes. Then touch the left and right halves of his torso | |
| | | Are the diver's pupils equally wide and round and do they become narrower in the light? Look for left-right differences. | | | in turn, then the outer and inner sites of his limbs and ask the diver, whether th sensation is the same on both sites. Assess and document the result of this test separately for each body part. | |
| Yes | No | 3. Face | Yes | No | 9. Balance and motor coordination | |
| | | Ask the diver to whistle. Look for a symmetric movement of both halves of the face and equal muscle tension on both sides. | | | Ask the diver to stand with his feet together and parallel, extend his arms in front | |
| | | Ask the diver to "bare his teeth". Look for a symmetric movement of both halves of the face and equal muscle tension on both sides. | | | Caution: During this test the diver might loose his balance and fall, you have t be prepared to catch him! Ask the diver to close his eyes. Then ask him to extend his arms in front of hir and try to touch the tip of his nose alternately with his left and right inde | |
| | | Ask the diver to close his eyes. Then touch the left and the right halves of his forehead and his face and ask the diver if the sensation is the same on both sites. | | | | |
| Yes | No | 4. Hearing | | | | |
| | | Ask the diver to close his eyes. Then rub your index finger against your thumb ca. | | | fingers. Assess potential left-right differences. | |
| | | 50 cm away from the diver's right ear, then next to his left ear and ask the diver whether he perceives the sound in the same way on both sites. Repeat this check several times on both sites. In a noisy environment, the distance may be reduced and the source of noise should be blocked (ask those present for silence, turn off | | | Ask the diver to lie down flat on his back. Ask him to alternately move his left and right heels over the shin of the opposite leg. Assess potential left-right differences. | |
| Vac | No | running engines). | | | 10. Additional remarks and observations: | |
| Tes | 110 | 5. Swanowing renex | | | | |
| | | Ask the diver to swallow. Observe if his Adam's apple is moving up and down smoothly. | | | | |

First aid for mild symptoms (unusual tiredness / skin itching)

- Oxygen (100%, for every breathing gas of divers)
- Fluids (0.5-1.0 ltr/h, no alcohol, no caffeine)
- Examination (,5 minutes neurocheck', DAN)
- Observation (24 hrs.)

if not free of symptoms within 30 min.: treat like severe symptoms

First aid for severe symptoms

Cardio pulmonary resuscitation following recommendations of European Resuscitation Council (ERC or AHA)

First aid for severe symptoms

- Supine position (if unconscious: recovery position)
- Fluids (0.5-1.0 ltr/h, no alcohol, no caffeine)
 - If fully conscious: give fluids orally
 - Impaired consciousness: fluids only i.v.
- Oxygen (for every breathing gas of divers)
 - ► as soon as possible, 100%
 - no breaks until hyperbaric treatment
 - Demand valve or oxygen rebreather Only if not available: 15-25 ltr/min constant flow









Constant flow pressure regulator with simple mask O2 concentration 30-50%

suitable

Constant flow pressure regulator with "high concentration" mask - with reservoir bag - with expiration valves O2 concentration 60-70%

PROVISOR Suitable

Pressure regulator with demand valve tight fitting mask O₂ concentration 90-100%

SUITABL

suitable for suitificial respiration artificial **Pressure regulator with demand** valve and Ambu/Laerdal bag O₂ concentration 90-100%

First aid for severe symptoms

- Supine position (if unconscious: recovery position)
- Fluids (0.5-1.0 ltr/h, no alcohol, no Caffeine)
 - ► If fully conscious: give fluids orally
 - Impaired consciousness: fluids only i.v.
- Oxygen (for every breathing gas of divers)
 - as soon as possible, 100%
 - no breaks until hyperbaric treatment
 - Demand valve or closed circuit system Only if not available: 15-25 ltr/min constant flow

Flow chart modified from DAN Europe



Flow chart modified from DAN Europe



Flow chart modified from DAN Europe

IMMEDIATE TREATMENT

(CPR according to ERC- or AHA-Standards, if needed)

- 1. **POSITION**: if unconscious: lateral position, otherwise: supine position
- 2. **OXYGEN**: start soonest, irrespective of divers breathing gas
 - no air breaks, until arrival at hyperbaric chamber
 - give highest possible oxygen concentration
 - at best: via demand valve or closed circuit system with CO₂ absorber
 - if not available: constant flow (15 25 litre/min) via mask with reservoir
- 3. **FLUID**: 0.5 1 litre/hour), no alcohol, no caffeine, if fully conscious
- 4. Alarm emergency operations center: "suspected diving accident"
- 5. 5 min Neurocheck, documentation, repeat regularly
- 6. Protect diver from hypothermia and hyperthermia
- 7. No in-water recompression
- 8. Organize transport to emergency unit, preferably near hyperbaric chamber:
 - no specific means of transport, transport fast and gently
 - Helicopter: flying as low as possible
- 9. Documentation: dives, symptoms, treatment
- 10. Dive buddies: do supervise as well
- 11. Secure diving gear (e.g. decompression computer)
- 12. Diving accident hotline

(Hotline phone numbers: www.gtuem.org / www.oegth.at / www.suhms.org)

Further measures

- Examination (,5 minutes neurocheck', DAN)
- Organization of transport
 - Emercency control centre
 (Emergency unit ,close to a HBOT chamber')
- Diving physician hotline

Important:

► **NO** in-water recompression

► NO direct alerting of hyperbaric chamber

NO recommendation for specific infusions

NO recommendation of specific medications

NO specific medical measures besides emergency medicine SOPs

Photo © DAN Europe

Chamber treatment

Thoracic X-ray or thoracic CT scan

before hyperbaric chamber treatment

- if pulmonary barotrauma is suspected
- if feasible within reasonable time frame

US Navy Treatment Table 6

Table 6 is standard for first treatments - **irrespective** of divers breathing gas







Further treatment

- Transport to hyperbaric treatment centre
 - soonest after completion of first hyperbaric treatment
 - always case by case decision

Physiotherapy

- max. 3 days after diving accident
- Termination of hyperbaric treatments
 soonest after standstill of symptoms for 3 to 5 days
- ► Fitness to dive certificate after diving accident
 - only by qualified <u>and</u> experienced physician (list of diving physicians at www.gtuem.org)

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