



*Flying Operations*

**AEROMEDICAL EVACUATION CREW (AEC)  
CHECKLIST**

This checklist establishes procedures for Aeromedical Evacuation on mobility aircraft employed by Mobility Air Forces (MAF) to accomplish their worldwide missions. This checklist complements AFI 11-2AE-V3, *Operations Procedures*, and is printed on standard 8 1/2" x 11" bond paper, and trimmed to size, to fit the standard plastic aircrew checklist binders. This checklist is intended to provide quick and reliable references to aid the AEC while mission planning and for use in-flight. All AE crews will carry this annex. Section IV and V will be carried as applicable to crew position.

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**SECTION II**

**TERMS AND ABBREVIATIONS**

AECM	Aeromedical Evacuation Crew Member
AC	Aircraft Commander
LM	Loadmaster
BO	Boom Operator
PIC	Pilot in Command
CCATT	Critical Care Air Transport Team
MTF	Medical Treatment Facility
FA	Flight Attendant
AEC	Aeromedical Evacuation Crew <i>(Applies to entire AEC listed below)</i>
MCD	Medical Crew Director
FN	Flight Nurse
CMT	Charge Medical Technician
AET	Aeromedical Evacuation Technician
2AET	Second Aeromedical Evacuation Technician
3AET	Third Aeromedical Evacuation Technician

**MEDICAL CREW DIRECTOR**

MCD ensures the aircraft is acceptable and configured for the assigned mission. The MCD supervises the nursing care and management of patients and is responsible for managing the AEC assigned to the mission. The MCD will advise and/or coordinate all pertinent aspects of the mission with the pilot. The MCD will immediately notify C2 agency of patient or mission status changes as required.

**FLIGHT NURSE**

FN will assist the MCD as required. The FN provides professional nursing care during all aspects of AE missions, reviews and coordinates in-flight patient care requirements as required with origination and destination MTF personnel, completes appropriate forms, and performs additional duties as assigned by the MCD. The FN is accountable for collection and storage of medications (including narcotics).

**CHARGE MEDICAL TECHNICIAN**

CMT is responsible for the supervision and management of AETs assigned to perform duties on the mission. It will be the responsibility of the CMT to ensure that medical supplies and equipment are on the aircraft and installed equipment is operable. CMT will normally receive directions from and be responsible to the MCD or (assistant) and also assists the flight crew, if required.

**AEROMEDICAL EVACUATION TECHNICIAN.**

AET (2AET and 3AET) will assist the CMT as required. AETs provide in-flight patient care under supervision of a qualified FN, complete the appropriate forms, and perform duties as assigned by the CMT. 3AET is responsible for all patient baggage procedures.

SECTION III

MISSION PREPARATION: AEC

**MISSION PREPARATION**

1. Administrative Duties - Complete prior to start of AEC Crew Briefing. (AEC)
  - a. Read and annotate FCIF/Special Interest Items/SPINS/NOTAMS.
  - b. Obtain mission paperwork and documentation.
    - (1). Verify flight authorization information.
    - (2). Calculate ORM Factors.
    - (3). Obtain aircraft tail number and parking spot.
    - (4). Obtain passport (as required).
    - (5). Complete personal customs declaration forms (as required).
    - (6). Review patient manifest.
  - c. Identify patient requirements and prepare nursing care plan.
    - (1). Verify receipt of approved A3VM waiver instructions (if required).
  - d. Collect all AEC customs forms. (3AET)
2. AEC Crew Briefing Attend/Complete. (AEC)
  - a. Discuss/Review ORM/CRM. (MCD)

**NOTE:** Review assertive statement procedures (“Time Out” & “Knock it Off”)

- b. Address Personal Requirements and special interest items. (MCD)
  - c. Brief known mission information (i.e., U, P, 1A, 1B, prisoners, security police and armed attendants, etc.) and airlift considerations. (MCD)
  - d. Review CCATT/special patient requirements/equipment, crew responsibilities, and infection control procedures. (MCD)
  - e. Discuss medical emergency procedures. (MCD)
    - (1). Identify ACLS/PALS, ITLS, etc. trained crewmembers.
    - (2). Make cardiac arrest assignments.
    - (3). Discuss emergency patient placement.
  - f. Review/discuss aircraft emergencies and egress plan. (MCD)
  - g. Release 3AET for baggage procedures (as required).
  - h. Receive patient report from Nurse of the Day (if available) or MCD, including patient positioning plan, patient records, and patient medications.
    - (1). Verify patient passports and appropriate papers for non- US citizens are available (as required).
    - (2). Received hard copy of approved A3VM equipment waiver instructions (if required).
  - i. Create/discuss patient positioning plan and assign patient care responsibilities. (MCD/FN)
    - (1). Identify patient or equipment requirements that may require extended ground time/use of aircraft systems.
  - j. Assign specific equipment, supplies, and configuration duties, (CMT)
    - (1). Stanchion/straps/stanchion arms/brackets/seat set-up.
    - (2). Oxygen set up/O2 calculation.
    - (3). Electrical set up/ampereage calculation/function checks (All medical equip).
    - (4). In-flight kit set up/placement.
  - k. Discuss enplaning/deplaning, safety procedures, cabin coverage, and assign crew position areas of security. (MCD/CMT)
    - l. Review/discuss updates to aircraft emergencies and egress plan. (MCD)
  - m. Coordinate tentative meal plan/fluid distribution for patients/crew. (MCD)
  - n. Coordinate refueling stop requirements. (MCD)
  - o. Review aircraft security, theater terrorist threat/anti-hijacking procedures.
  - p. If medical ACM is present, brief on duties and responsibility. Collect copy of orders. (MCD)
  - q. Identify primary AWIS channel used during mission. (MCD)
3. In-Flight Kit Preflight/Loaded. (AEC)
    - a. Obtain medication kits/supplies.
    - b. Perform operational preflight on medical equipment. (accomplished within

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24 hours prior to mission launch or assuming alert posture by qualified Aeromedical Evacuation personnel)

c. Load medical supplies and equipment and transport to the aircraft.

4. Pilot/LM/BO Briefing - Attended/Completed. (AEC)

**NOTE:** This step may be accomplished on the aircraft.

- a. Verify mission itinerary, threats, flight profile, etc.
- b. Brief pilot on non-US citizens, altitude restrictions, unique patient requirements, and electrical and oxygen requirements in-flight or on the ground, only if it limits aircraft operation. Notify pilot of medical equipment requiring waivers. (MCD)
- c. Obtain escape and evasion (E & E) briefing (as required). Identify armed crewmembers (as required).
- d. Obtain briefing on weather, en route times, total number of crew, flight/cabin altitudes, refueling stops and possible delays.
- e. Identify emergency and communication signals/methods with pilot and LM/BO.
- f. Discuss enplaning/ERO requirements (time constraints, loading requirements, i.e., ramps, AMBUS, safety observer, etc.).
- g. Identify Aeromedical Readiness Mission (ARM) requirement (as required).
- h. Discuss emergency requirements (radio transmissions/use of headsets). (MCD)
- i. Brief LM/BO on anticipated patient load, number of AEC, souls on board verification, and cabin secure prior to take-off. (MCD)
- j. Coordinates egress plan, meal times, special diets, and mission unique items with LM/BO. (MCD)

## SECTION IV

## CREW DUTIES: AECM

AECMs are required to use and refer directly to this publication when accomplishing their abbreviated flight crew checklist duties. The abbreviated flight crew checklist will be used during all phases of the mission. If the checklist is accomplished by one or more AECMs, accomplish all AEC duties. When aircraft preparation and loading are accomplished by a ground support crew, checklist items denoted by “\*” WILL be briefed by ground support personnel (qualified AECM) prior to the flight crew assuming responsibility. Interior inspection/enplaning duties and procedures may have to be modified as the situation dictates. **Items with an “!” WILL be accomplished prior to take-off for contingency & combat missions.** Resume the applicable section of the checklist, once in-flight.

**PREFLIGHT INSPECTION.**

- !1. Loadmaster/BO Coordination. (CMT)
2. Rollers stowed (as required).
- !3. Oxygen Mask/MA-1 Bottle/Goggles/LPU/EPOS/PBE – Checked. (AEC)
- !4. Headset and Extension – Connected. (MCD)
- \*!5. Cabin Preparation - Checked/completed. (AEC)
- \*!6. Therapeutic Oxygen System - Checked/Secured. (AEC)
  - a. Total pre-mission PTLOX/NPTLOX/therapeutic oxygen level-Checked. (CMT)
  - b. Check aircraft oxygen quantity and ensure system is — ON. (C-17)

**WARNING:** Do not position PTLOX/NPTLOX near hydraulic reservoirs.

**NOTE:** Place the ON/OFF levers to ON one at a time and lift the levers slowly from OFF to ON to ensure stable output pressure. Coordinate with LM for use of HALO (as required).

- !7. Electrical System(s) - Connected/Secured. (AEC)

**WARNING:** Estimate total equipment draw from electrical system prior to connecting any electrical equipment to prevent overload of the aircraft electrical system and the frequency converter(s).

**CAUTION:** Assess aircraft amperage capacity. Ensure electrical equipment is not plugged in until aircraft electrical power is on. Coordinate with LM/BO (as required)

- \*! 8. Suction/Bag-Valve-Mask (BVM) - Operable/Secured. (AEC)
- \*! 9. Medical Supplies/Equipment - Checked/Secured. (AEC)
- \*!0. Meals/Service Items - Available/Received. (CMT/3AEC)
  - !1. Aircraft Acceptability/Discrepancies – Reported. (AEC)
  - !2. Emergency Egress Passageways – Clear. (CMT)

**LOADING.**

- !1. (ERO) Preparations (as required) – Completed. (AEC)
2. Coord with LM for Aux Ground Loading Ramps (as required)-Installed. (CMT)
3. Vehicle positioning – Completed (as required). (CMT)
4. Coordinate enplaning procedures with ground support. (CMT)
- !5. Confirm anti-hijacking procedures are completed. (CMT)
6. Identify patients requiring assistance. (CMT)
7. Distribute hearing protection. (CMT)
- !8. Check psychiatric litter patients for sharp objects. (CMT)
- !9. Check litter patients for security, approved litters, strap placement, and backrest placement. (CMT)

**NOTE:** If any patient condition is questionable or exceeds the capabilities of the AEC, notify the MCD.

**NOTE:** Enplaning during patient report is highly encouraged but final approval is at the discretion of the MCD.

**NOTE:** CMT may check prior to onload or after enplaning during contingency operations.

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10. Aircraft Ready for Enplaning – Coordinated. (AEC)
11. Patient Report/Records- Paper or Electronic/Medications/Supplies/Anti-hijacking Statement/ Equipment waivers (hard copy preferred) – Received. (MCD/FN)
12. Anti-hijacking procedures. (as required)
13. Patients Enplaned. (AEC)
14. Patient Baggage Procedures – Completed/Secured. (3AET)

#### **BEFORE TAXI.**

- Patient/Passenger Briefing – Completed. (AEC)
12. Patients/Equipment/Computers/Cabin Secured – Completed. (AEC)
  13. Souls on Board Received and Reported to MCD/AEC. (FN)
  14. Souls on Board - Reported to LM/BO. (MCD)

**WARNING:** As a minimum, outside litter brackets will be secured before taxi.

**WARNING:** If the AEC is not ready for taxi, the MCD will immediately notify the PIC.

#### **BEFORE TAKE-OFF.**

11. Patient Care – Completed. (AEC)
12. Cabin Secure – Completed. (AEC)
13. Before Take-Off Checklist Complete. ( MCD, FN, CMT, 2AET, 3AET)

**WARNING:** Ensure all litter stanchion brackets/patients are secured prior to takeoff. MCD will immediately notify PIC if the cabin is not secure for take-off.

**NOTE:** MCD will notify PIC/LM/BO if AECMs or medical attendants must stand during take-off.

#### **ASCENT.**

1. Observe for unusual occurrences/emergency situations. (AEC)
2. Observe patients during ascent. (AEC)
3. Review patient records and develop patient care plan. (AEC)
4. Communicate patient assignments and start EHR encounters. (AEC)

**NOTE:** MCD will notify LM/BO if AECMs must attend to patient during ascent.

#### **CRUISE (When safe to move about the cabin).**

1. Patient Check – Completed. (AEC)
2. Patient Care – Administered. (AEC)
3. Total mid-mission PTLOX/NPTLOX/therapeutic oxygen level - Checked. (CMT)
4. In-Flight Meal Service – Completed. (AEC)

**NOTE:** MCD will notify the PIC and supporting C2 agencies (TACC/AOC/PMRC) of all in-flight emergencies or changes in patient status.

**NOTE:** Recommend meal service in the following order: special diets, litter patients, ambulatory patients.

5. Administrative Duties. (AEC)
6. Cabin Cleanliness – Maintained. (AEC)
7. Medical/Supply Inventory – Tracked. (AEC)

#### **DESCENT.**

1. Enplaning/Deplaning - Coordinated /Briefed to AEC. (CMT)
2. Prepare patients for Landing. (AEC)
3. Patients and Equipment – Secured. (AEC)
4. Take assigned seat and report cabin secure to MCD/CMT. (AEC)
5. Observe patients during descent.
6. Descent Checklist Complete. ( MCD, FN, CMT, 2AET, 3AET)

**WARNING:** MCD will immediately notify LM/BO if the cabin is not secure for landing.

**NOTE:** MCD will notify LM/BO if AECMs or medical attendants must stand during landing.

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### OFFLOADING.

1. (ERO) Preparations (as required) - Completed. (AEC)
2. Auxiliary Ground Loading Ramps (as required) – Installed. (CMT)
3. Vehicle positioning – Completed. (CMT)
4. Coordinate deplaning procedures with ground support. (CMT)
5. Check litter patients for security, strap placement, backrest placement, and secure IV/Oxygen lines prior to removal from litter tier. (AEC)
6. Provide ground support personnel with required paperwork and conduct PCA/Epidural hand off with staging personnel (as required). (MCD/FN)
7. Ensure patients have supplies/equipment/personal belongings. (AEC)
8. Remove EPOS/LPUs from patient litters. (AEC)
9. Identify patients requiring assistance. (AEC)
10. Patients – Deplaned. (AEC)
11. Contaminated waste/Lines - Offloaded. (AEC)
12. Provide clinical update to staging personnel. (MCD/FN)
13. Obtain signature for patient records-paper/electronic, X-rays, medications, supplies, and equipment being offloaded. (MCD/FN)
14. Baggage Procedures – Completed. (3AET)
15. Update C2 agency on mission status. (MCD)
16. Offload Checklist Complete. ( MCD, FN, CMT, 2AET, 3AET)

**NOTE:** Deplaning during patient report is highly encouraged but final approval is at the discretion of the MCD.

**NOTE:** Medical equipment remains on board and operationally ready for use until all patients have deplaned. Individual oxygen masks will not be disconnected until all patients and attendants have been deplaned.

### BEFORE LEAVING AIRCRAFT.

1. Discrepancies – Reported. (AEC)
2. Aircraft Flying Time Forms – Obtained. (MCD)
3. Equipment/Computers/Supplies - Removed/Stowed. (AEC)
4. Deconfigure aircraft (as required). (AEC)
5. Total post-mission PTLOX/NPTLOX/therapeutic oxygen level-Checked. (CMT)
6. Cargo Compartment in order. (CMT)

### POST MISSION.

1. Post Flight Debriefings – Attended. (AEC)
2. Discuss mission discrepancies, positive mission outcomes, etc. (AEC)
3. Properly store all medical equipment/computer equipment/supply kits per local policy. (AEC)
4. Brief/Update C2 agency of patient status changes. (MCD)
5. Calculate crew rest. (2FN)
6. Coordination with Command Post, Squadron, etc. (AEC)
7. FAX mission paperwork to AE C2 agency. (MCD)
8. Arrange for flight home (as required). (MCD/CMT)
9. Coordinate billeting arrangements with pilot (as required). (MCD)
10. Notify tasking AE command element of crew's status, billeting arrangements and AECM plans. (MCD)

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SECTION V**

**FUSELAGE FIRE/SMOKE AND FUMES ELIMINATION**

**1. OXYGEN – ON, 100% (ALL)**

NOTE: Protective Breathing Equipment (PBE) or Emergency Passenger Oxygen System (EPOS) may be used if oxygen mask/eye protection are not available. If a PBE is not available and the Emergency Passenger Oxygen System (EPOS) is the only available source, the AECM will cease crew duties and be seated until the PIC has directed crew members to remove emergency oxygen. NOTE: The MA-1 portable oxygen bottle delivers 100% oxygen at all settings. The regulator does not have to be turned to “emergency” to provide 100% oxygen.

WARNING: Removal of oxygen masks when smoke or fumes are present can result in personal injury or death.

**2. CREW ALERTED (AEC)**

**3. FIRE COMBAT AS DIRECTED (AEC)**

NOTE: The pilot/LM/BO will direct crewmembers to fight the fire as required. Crewmembers not directly involved with combating the fire will proceed with their emergency procedures checklist. WARNING: Although Halon 1211 vapor has a low toxicity, its decomposition products can be hazardous. On decomposition, Halon 1211 has a characteristic sharp, acrid odor, even in concentrations of only a few parts per million. The odor provides a built-in warning system for the agent and at the same time creates a noxious, irritating atmosphere for those who are in the hazard area during and following a fire. Leave and/or ventilate area after fighting a fire.

NOTE: To use the Halon 1211 fire extinguisher, hold a vertical position, about eight feet from the fire. Remove the pull-ring pin and aim nozzle at base of the fire. Squeeze lever and sweep agent across base of fire.

**4. PATIENTS AND PASSENGERS ASSIST (AS NECESSARY) (AEC)**

**EMERGENCY SIGNALS**

**1. Ground Evacuation**

- a. Prepare to abandon airplane – three short rings. (KC-135 only)
- b. Abandon airplane – one long sustained ring/horn blast.

**2. Ditching or Crash Landing**

- a. Prepare for ditching or crash landing – six short rings/horn blasts.
- b. Brace for impact – one long sustained ring/horn blast.

**IN-FLIGHT DOOR WARNING**

- |                            |             |       |
|----------------------------|-------------|-------|
| 1. Oxygen                  | As required | (AEC) |
| 2. Crew                    | Notified    | (AEC) |
| 3. Patients and passengers | Secured     | (AEC) |
| 4. Crewmembers             | Secured     | (AEC) |

**RAPID DECOMPRESSION**

**1. OXYGEN – ON, 100 % (ALL)**

NOTE: The MA-1 portable oxygen bottle delivers 100% oxygen at all settings. The regulator does not have to be turned to “Emergency” to provide 100% oxygen.

**2. CREWMEMBER SECURED (AS REQUIRED) (AEC)**

**3. PATIENTS AND PASSENGERS ASSIST (AS REQUIRED) (AEC)**

**MEDICAL EMERGENCY/CHANGE IN PATIENT STATUS**

- 1. First responder notify crew (AEC)
- 2. Render patient care IAW current guidelines (AEC)
- 3. Notify PIC (MCD)
- 4. Notify applicable C2 agencies (TACC/AOC/PMRC) (MCD)

**TABLE 1.1. Ditching Chart-MCD**

FIRST ACTION	DITCHING IMMINENT (10 Minutes Left)	PROVIDE	POSITION	AFTER DITCHING
<p><b>MCD</b></p> <ol style="list-style-type: none"> <li>1. Acknowledge pilot's order to prepare for ditching. Reconfirm egress with PIC/LM/BO.</li> <li>2. Brief AEC.</li> <li>3. Don life preserver.</li> <li>4. Inflate LPU 6/P (Infant Cot).</li> <li>5. Brief patients on assigned side of aircraft on evacuation procedures.</li> <li>6. Prepare and secure litter and ambulatory patients on assigned side of aircraft.</li> </ol> <p>WARNING: Brief patients to inflate life preservers after leaving the aircraft.</p> <p>NOTE: The LPU 6/P (Infant Cot) is the only life preserver that can be inflated inside the aircraft.</p> <ol style="list-style-type: none"> <li>7. Distribute medical supplies, medications, and equipment to crewmembers. As a minimum collect narcotics, oral airways, Bag-Valve-Mask resuscitator, flashlight and patient manifest.</li> <li>8. Secure cabin.</li> <li>9. Receive cabin secured report from FN/CMT.</li> <li>10. Report cabin secured to PIC/LM/BO.</li> </ol>	<ol style="list-style-type: none"> <li>1. Check patients on assigned side of aircraft are properly secured and assuming brace for impact position.</li> <li>2. Take assigned seat.</li> <li>3. Fasten seat belt.</li> <li>4. Assume ditching position at brace for Impact signal.</li> </ol>	<ol style="list-style-type: none"> <li>1. Medical supplies, medications, equipment.</li> <li>2. Flashlight</li> <li>3. Patient manifest.</li> </ol>	<ol style="list-style-type: none"> <li>1. Assigned seat.</li> </ol>	<ol style="list-style-type: none"> <li>1. Remain seated until aircraft has come to a complete stop.</li> <li>2. Open exits.                             <ol style="list-style-type: none"> <li>a. Open available exits and deploy life rafts as directed per egress plan or by PIC/LM/BO</li> </ol> </li> <li>3. Direct and assist patient egress per egress plan or as directed by PIC/LM/BO; ambulatory followed by litters.                             <p>WARNING: Brief patients to inflate life preservers after leaving the aircraft.</p> </li> <li>4. Evacuate aircraft</li> <li>5. Board assigned life raft.                             <ol style="list-style-type: none"> <li>(1) The first crewmember into the life raft will secure the clamp on the equalizer tube, as required.</li> <li>(2) Assist patients into the life rafts.</li> <li>(3) Group life rafts together (if possible).</li> </ol> </li> </ol>

**TABLE 1.2. Ditching Chart-FN**

<b>FIRST ACTION</b>	<b>DITCHING IMMINENT (10 Minutes Left)</b>	<b>PROVIDE</b>	<b>POSITION</b>	<b>AFTER DITCHING</b>
<p><b>FN</b></p> <ol style="list-style-type: none"> <li>1. Don life preserver.</li> <li>2. Inflate LPU 6/P (Infant Cot).</li> <li>3. Brief patients on assigned side of aircraft on evacuation procedures.</li> <li>4. Prepare and secure litter and ambulatory patients on assigned side of aircraft.</li> </ol> <p>WARNING: Brief patients to inflate life preservers after leaving the aircraft. NOTE: The LPU 6/P (Infant Cot) is the only life preserver that can be inflated inside the aircraft.</p> <ol style="list-style-type: none"> <li>5. Distribute medical supplies, medications, and equipment to crewmembers. As a minimum collect narcotics, oral airways, Bag-Valve-Mask resuscitator and flashlight.</li> <li>6. Secure cabin.</li> <li>7. Report cabin secured to MCD.</li> </ol>	<ol style="list-style-type: none"> <li>1. Check patients on assigned side of aircraft are properly secured and assuming Brace for Impact position.</li> <li>2. Take assigned seat.</li> <li>3. Fasten seat belt.</li> <li>4. Assume ditching position at Brace for Impact signal.</li> </ol>	<ol style="list-style-type: none"> <li>1. Medical supplies, medications, equipment.</li> <li>2. Flashlight.</li> </ol>	<p>1. Assigned seat.</p>	<ol style="list-style-type: none"> <li>1. Remain seated until aircraft has come to a complete stop.</li> <li>2. Open exits.                             <ol style="list-style-type: none"> <li>a. Open available exits and deploy life rafts as directed per egress plan or by PIC/LM/BO</li> </ol> </li> <li>3. Direct and assist patient egress per egress plan or as directed by PIC/LM/BO; ambulatory followed by litters.</li> </ol> <p>WARNING: Brief patients to inflate life preservers after leaving the aircraft.</p> <ol style="list-style-type: none"> <li>4. Evacuate aircraft</li> <li>5. Board assigned life raft.                             <ol style="list-style-type: none"> <li>(1) The first crewmember into the life raft will secure the clamp on the equalizer tube, as required.</li> <li>(2) Assist patients into the life rafts.</li> <li>(3) Group life rafts together (if possible).</li> </ol> </li> </ol>

**TABLE 1.3. Ditching Chart-CMT**

FIRST ACTION	DITCHING IMMINENT (10 Minutes Left)	PROVIDE	POSITION	AFTER DITCHING
<p><b>CMT</b></p> <ol style="list-style-type: none"> <li>1. Don life preserver.</li> <li>2. Brief assigned assistants to remain in aircraft to assist in evacuation of patients on assigned side of aircraft. Inflate LPU 6/P (Infant Cot).</li> <li>3. Brief patients on assigned side of aircraft on evacuation procedures.</li> <li>4. Prepare and secure litter and ambulatory patients on assigned side of aircraft.</li> </ol> <p><b>WARNING:</b> Brief patients to inflate life preservers after leaving the aircraft.</p> <p><b>NOTE:</b> The LPU 6/P (Infant Cot) is the only life preserver that can be inflated inside the aircraft.</p> <ol style="list-style-type: none"> <li>5. Receive medical supplies, medications, and equipment from MCD. Collect first aid kit and flashlight.</li> <li>6. Remove restraints from psychiatric patients.</li> <li>7. Secure cabin.</li> <li>8. Report cabin secured to MCD.</li> </ol>	<ol style="list-style-type: none"> <li>1. Check patients on assigned side of aircraft are properly secured and assuming Brace for Impact position.</li> <li>2. Take assigned seat.</li> <li>3. Fasten seat belt.</li> <li>4. Assume ditching position at Brace for Impact signal.</li> </ol>	<ol style="list-style-type: none"> <li>1. Medical supplies, medications, equipment.</li> <li>2. First aid kit.</li> <li>3. Flashlight.</li> </ol>	<ol style="list-style-type: none"> <li>1. Assigned seat.</li> </ol>	<ol style="list-style-type: none"> <li>1. Remain seated until aircraft has come to a complete stop.</li> <li>2. Open exits.                         <ol style="list-style-type: none"> <li>a. Open available exits and deploy life rafts as directed per egress plan or by PIC/LM/BO.</li> </ol> </li> <li>3. Evacuate aircraft per egress plan or as directed by PIC/LM/BO and inflate life preserver.                         <p><b>WARNING:</b> Brief patients to inflate life preservers after leaving the aircraft.</p> </li> <li>4. Board assigned life raft.                         <ol style="list-style-type: none"> <li>a. The first crewmember into the life raft will secure the clamp on the equalizer tube, as required.</li> <li>b. Assist patients into the life rafts.</li> <li>c. Group life rafts together (if possible).</li> </ol> </li> </ol>

**TABLE 1.4. Ditching Chart-2AET**

FIRST ACTION	DITCHING IMMINENT (10 Minutes Left)	PROVIDE	POSITION	AFTER DITCHING
<p><b>2AET</b></p> <ol style="list-style-type: none"> <li>1. Don life preserver.</li> <li>2. Brief assigned assistants to remain in aircraft to assist in evacuation of patients on assigned side of aircraft and assist with launching life rafts. Inflate LPU 6/P (Infant Cot).</li> <li>3. Brief patients on assigned side of aircraft on evacuation procedures.</li> <li>4. Prepare and secure litter and ambulatory patients on right side of aircraft.</li> </ol> <p><b>WARNING:</b> Brief patients to inflate life preservers after leaving the aircraft.</p> <p><b>NOTE:</b> The LPU 6/P (Infant Cot) is the only life preserver that can be inflated inside the aircraft.</p> <ol style="list-style-type: none"> <li>5. Receive medical supplies, medications, and equipment from MCD. Collect first aid kit and flashlight.</li> <li>6. Remove restraints from psychiatric patients.</li> <li>7. Secure cabin.</li> <li>8. Report cabin secured to CMT.</li> </ol>	<ol style="list-style-type: none"> <li>1. Check patients on assigned side of aircraft are properly secured and assuming Brace for Impact position.</li> <li>2. Take assigned seat.</li> <li>3. Fasten seat belt.</li> <li>4. Assume ditching position at Brace for Impact signal.</li> </ol>	<ol style="list-style-type: none"> <li>1. Medical supplies, medications, equipment.</li> <li>2. First aid kit.</li> <li>3. Flashlight.</li> </ol>	<ol style="list-style-type: none"> <li>1. Assigned seat.</li> </ol>	<ol style="list-style-type: none"> <li>1. Remain seated until aircraft has come to a complete stop.</li> <li>2. Open exits.                             <ol style="list-style-type: none"> <li>a. Open available exits and deploy life rafts as directed per egress plan or by PIC/LM/BO.</li> </ol> </li> <li>3. Evacuate aircraft per egress plan or as directed by PIC/LM/BO and inflate life preserver.                             <p><b>WARNING:</b> Brief patients to inflate life preservers after leaving the aircraft.</p> </li> <li>4. Board assigned life raft.                             <ol style="list-style-type: none"> <li>a. The first crewmember into the life raft will secure the clamp on the equalizer tube, as required.</li> <li>b. Assist patients into the life rafts.</li> <li>c. Group life rafts together (if possible).</li> </ol> </li> </ol>

**TABLE 1.5. Ditching Chart-3AET**

<b>FIRST ACTION</b>	<b>DITCHING IMMINENT (10 Minutes Left)</b>	<b>PROVIDE</b>	<b>POSITION</b>	<b>AFTER DITCHING</b>
<p><b>3AET</b></p> <ol style="list-style-type: none"> <li>1. Don life preserver.</li> <li>2. Brief assigned assistants to remain in aircraft to assist in evacuation of ambulatory patients in assigned portion of cargo compartment and assist with launching life rafts. Inflate LPU 6/P (Infant Cot).</li> <li>3. Brief ambulatory patients and passengers in cargo compartment on evacuation procedures.</li> <li>4. Prepare and secure ambulatory patients in forward portion of cargo compartment.</li> </ol> <p><b>WARNING:</b> Brief patients to inflate life preservers after leaving the aircraft.</p> <p><b>NOTE:</b> The LPU 6/P (Infant Cot) is the only life preserver that can be inflated inside the aircraft.</p> <ol style="list-style-type: none"> <li>5. Receive medical supplies, medications, and equipment from FN. Collect first aid kit and flashlight.</li> <li>6. Remove restraints from psychiatric patients.</li> <li>7. Secure cabin.</li> <li>8. Report cabin secured to CMT.</li> </ol>	<ol style="list-style-type: none"> <li>1. Check ambulatory patients in assigned portion of aircraft are properly secured and assuming Brace for Impact position.</li> <li>2. Take assigned seat.</li> <li>3. Fasten seat belt.</li> <li>4. Assume ditching position at Brace for Impact signal.</li> </ol>		<ol style="list-style-type: none"> <li>1. Assigned seat.</li> </ol>	<ol style="list-style-type: none"> <li>1. Remain seated until aircraft has come to a complete stop.</li> <li>2. Open exits.                             <ol style="list-style-type: none"> <li>a. Open available exits and deploy life rafts as directed per egress plan or by PIC/LM/BO.</li> </ol> </li> <li>3. Evacuate aircraft per egress plan or as directed by PIC/LM/BO and inflate life preserver.                             <p><b>WARNING:</b> Brief patients to inflate life preservers after leaving the aircraft.</p> </li> <li>4. Board assigned life raft.                             <ol style="list-style-type: none"> <li>a. The first crewmember into the life raft will secure the clamp on the equalizer tube, as required.</li> <li>b. Assist patients into the life rafts.</li> <li>c. Group life rafts together (if possible).</li> </ol> </li> </ol>

**TABLE 1.6. AE Emergency Landing Chart-MCD**

<b>FIRST ACTION</b>	<b>LANDING IMMINENT (10 Minutes Left)</b>	<b>PROVIDE</b>	<b>POSITION</b>	<b>AFTER LANDING</b>
<p><b>MCD</b></p> <ol style="list-style-type: none"> <li>1. Acknowledge pilot's order to prepare for emergency landing. Reconfirm egress with PIC/LM/BO.</li> <li>2. Brief AEC.</li> <li>3. Brief assigned assistants to remain in aircraft to assist in evacuation of patients on left side of aircraft.</li> <li>4. Brief patients on assigned side of aircraft on evacuation procedures.</li> <li>5. Prepare and secure litter and ambulatory patients on assigned side of aircraft.</li> <li>6. Distribute medical supplies, medications, and equipment to assigned assistants and crewmembers. As a minimum collect narcotics, oral airways, and Bag-Valve-Mask resuscitator, flashlight and patient manifest.</li> <li>7. Secure cabin.</li> <li>8. Receive cabin secured report from FN/CMT.</li> <li>9. Report cabin secured to LM.</li> </ol>	<ol style="list-style-type: none"> <li>1. Check patients on assigned side of aircraft are properly secured and assuming "Brace for Impact" position.</li> <li>2. Take assigned seat.</li> <li>3. Fasten seat belt.</li> <li>4. Assume emergency landing position at "brace for Impact" signal.</li> </ol>	<ol style="list-style-type: none"> <li>1. Medical supplies, medications, equipment.</li> <li>2. Flashlight.</li> <li>3. Patient manifest.</li> </ol>	<p>1 Assigned seat.</p>	<ol style="list-style-type: none"> <li>1. Remain seated until aircraft has come to a complete stop</li> <li>2. Open exits. <ol style="list-style-type: none"> <li>a. Open available exits as directed per egress plan or by PIC/LM/BO.</li> </ol> </li> <li>3. Direct and assist patient and passenger egress per egress plan or as directed by PIC/LM/BO; ambulatory followed by litters.</li> <li>4. Evacuate aircraft through designated exit.</li> <li>5. Direct patients away from aircraft. <ol style="list-style-type: none"> <li>a. Direct patients to meet upwind of the aircraft or as directed by the pilot.</li> <li>b. Accomplish a head count and provide numbers to pilot or senior ranking survivor.</li> </ol> </li> </ol>

**TABLE 1.7. AE Emergency Landing Chart-FN**

FIRST ACTION	LANDING IMMINENT (10 Minutes Left)	PROVIDE	POSITION	AFTER LANDING
<p><b>FN</b></p> <ol style="list-style-type: none"> <li>1. Brief assigned assistants to remain in aircraft to assist in evacuation of patients on right side of aircraft</li> <li>2. Brief patients on assigned side of aircraft on evacuation procedures.</li> <li>3. Prepare and secure litter and ambulatory patients on assigned side of aircraft.</li> <li>4. Distribute medical supplies, medications, and equipment to assigned assistants and crewmembers. As a minimum collect narcotics, oral airways, Bag-Valve-Mask resuscitator and flashlight.</li> <li>5. Secure cabin.</li> <li>6. Report cabin secured to MCD.</li> </ol>	<ol style="list-style-type: none"> <li>1. Check patients on assigned side of aircraft are properly secured and assuming "Brace for Impact" position.</li> <li>2. Take assigned seat.</li> <li>3. Fasten seat belt.</li> <li>4. Assume emergency landing position at "brace for Impact" signal.</li> </ol>	<ol style="list-style-type: none"> <li>1. Medical supplies, medications, equipment.</li> <li>2. Flashlight.</li> </ol>	<ol style="list-style-type: none"> <li>1. Assigned seat.</li> </ol>	<ol style="list-style-type: none"> <li>1. Remain seated until aircraft has come to a complete stop.</li> <li>2. Open exits.               <ol style="list-style-type: none"> <li>a. Open available exits as directed per egress plan or by PIC/LM/BO.</li> </ol> </li> <li>3. Direct and assist patient and passenger egress per egress plan or as directed by PIC/LM/BO; ambulatory followed by litters.</li> <li>4. Evacuate aircraft through designated exit.</li> <li>5. Direct patients away from aircraft.               <ol style="list-style-type: none"> <li>a. Direct patients to meet upwind of the aircraft or as directed by the pilot.</li> <li>b. Accomplish a head count and provide numbers to pilot or senior ranking survivor.</li> </ol> </li> </ol>

**TABLE 1.8. AE Emergency Landing Chart-CMT**

<b>FIRST ACTION</b>	<b>LANDING IMMINENT (10 Minutes Left)</b>	<b>PROVIDE</b>	<b>POSITION</b>	<b>AFTER LANDING</b>
<p><b>CMT</b></p> <ol style="list-style-type: none"> <li>1. Brief assigned assistants to remain in aircraft to assist in evacuation of patients on left side of aircraft.</li> <li>2. Brief patients on assigned side of aircraft on evacuation procedures.</li> <li>3. Prepare and secure litter and ambulatory patients on assigned side of aircraft.</li> <li>4. Receive medical supplies, medications, and equipment from MCD. Collect first aid kit and flashlight.</li> <li>5. Remove restraints from psychiatric patients.</li> <li>6. Secure cabin.</li> <li>7. Report cabin secured to MCD.</li> </ol>	<ol style="list-style-type: none"> <li>1. Check patients on assigned side of aircraft are properly secured and assuming "Brace for Impact" position.</li> <li>2. Take assigned seat.</li> <li>3. Fasten seat belt.</li> <li>4. Assume emergency landing position at "brace for Impact" signal.</li> </ol>	<ol style="list-style-type: none"> <li>1. Medical supplies, medications, equipment.</li> <li>2. First aid kit.</li> <li>3. Flashlight.</li> </ol>	<ol style="list-style-type: none"> <li>1. Assigned seat.</li> </ol>	<ol style="list-style-type: none"> <li>1. Remain seated until aircraft has come to a complete stop.</li> <li>2. Open exits.                             <ol style="list-style-type: none"> <li>a. Open available exits as directed per egress plan or by PIC /LM/BO.</li> </ol> </li> <li>3. Direct and assist patient and passenger egress per egress plan or as directed by PIC/ LM/BO; ambulatory followed by litters.</li> <li>4. Evacuate aircraft.</li> <li>5. Direct patients away from aircraft.                             <ol style="list-style-type: none"> <li>a. Direct patients to meet upwind of the aircraft or as directed by the pilot.</li> <li>b. Accomplish a head count and provide numbers to pilot /MCD/or senior ranking survivor.</li> </ol> </li> </ol>

**TABLE 1.9. AE Emergency Landing Chart-2AET**

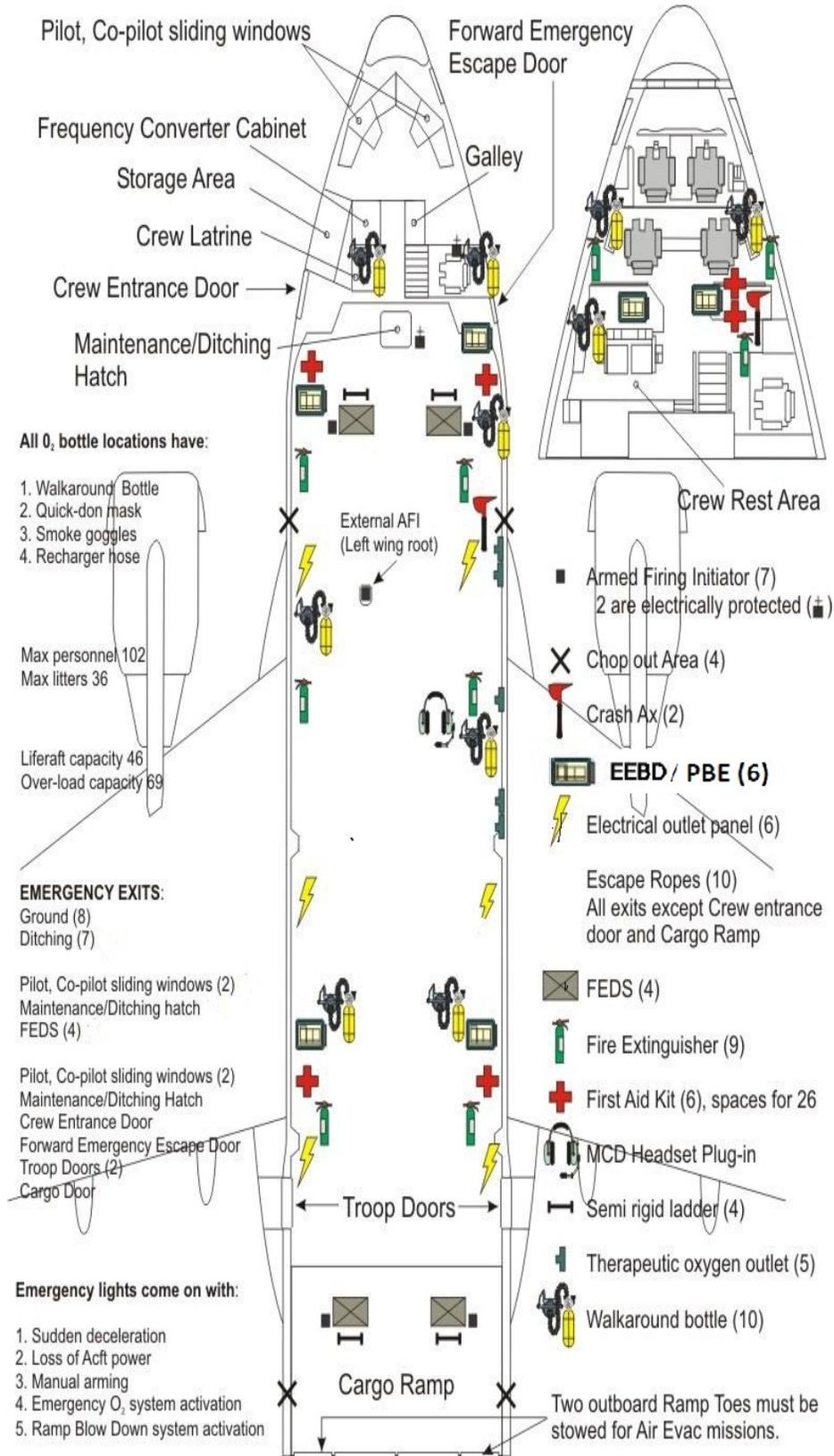
FIRST ACTION	LANDING IMMINENT (10 Minutes Left)	PROVIDE	POSITION	AFTER LANDING
<p><b>2AET</b></p> <ol style="list-style-type: none"> <li>1. Brief assigned assistants to remain in aircraft to assist in evacuation of patients on right side of aircraft.</li> <li>2. Brief patients on assigned side of aircraft on evacuation procedures</li> <li>3. Prepare and secure litter and ambulatory patients on assigned side of aircraft.</li> <li>4. Prepare and secure litter and ambulatory patients on assigned side of aircraft.</li> <li>4. Receive medical supplies, medications, and equipment from FN. Collect first aid kit and flashlight.</li> <li>5. Remove restraints from psychiatric patients.</li> <li>6. Secure cabin.</li> <li>7. Report cabin secured to CMT.</li> </ol>	<ol style="list-style-type: none"> <li>1. Check patients on assigned side of aircraft are properly secured and assuming "Brace for Impact" position.</li> <li>2. Take assigned seat.</li> <li>3. Fasten seat belt.</li> <li>4. Assume emergency landing position at "brace for Impact" signal.</li> </ol>	<ol style="list-style-type: none"> <li>1. Medical supplies, medications, equipment.</li> <li>2. First aid kit. (if available)</li> <li>3. Flashlight.</li> </ol>	<ol style="list-style-type: none"> <li>1. Assigned seat.</li> </ol>	<ol style="list-style-type: none"> <li>1. Remain seated until aircraft has come to a complete stop.</li> <li>2. Open exits.                             <ol style="list-style-type: none"> <li>a. Open available exits as directed per egress plan or by PIC /LM/BO.</li> </ol> </li> <li>3. Direct and assist patient and passenger egress per egress plan or as directed by PIC/ LM/BO: ambulatory followed by litters.</li> <li>4. Evacuate aircraft.</li> <li>5. Direct patients away from aircraft.                             <ol style="list-style-type: none"> <li>a. Direct patients to meet upwind of the aircraft or as directed by the pilot.</li> <li>b. Accomplish a head count and provide numbers to pilot /MCD/or senior ranking survivor.</li> </ol> </li> </ol>

**TABLE 1.10. AE Emergency Landing Chart-3AET**

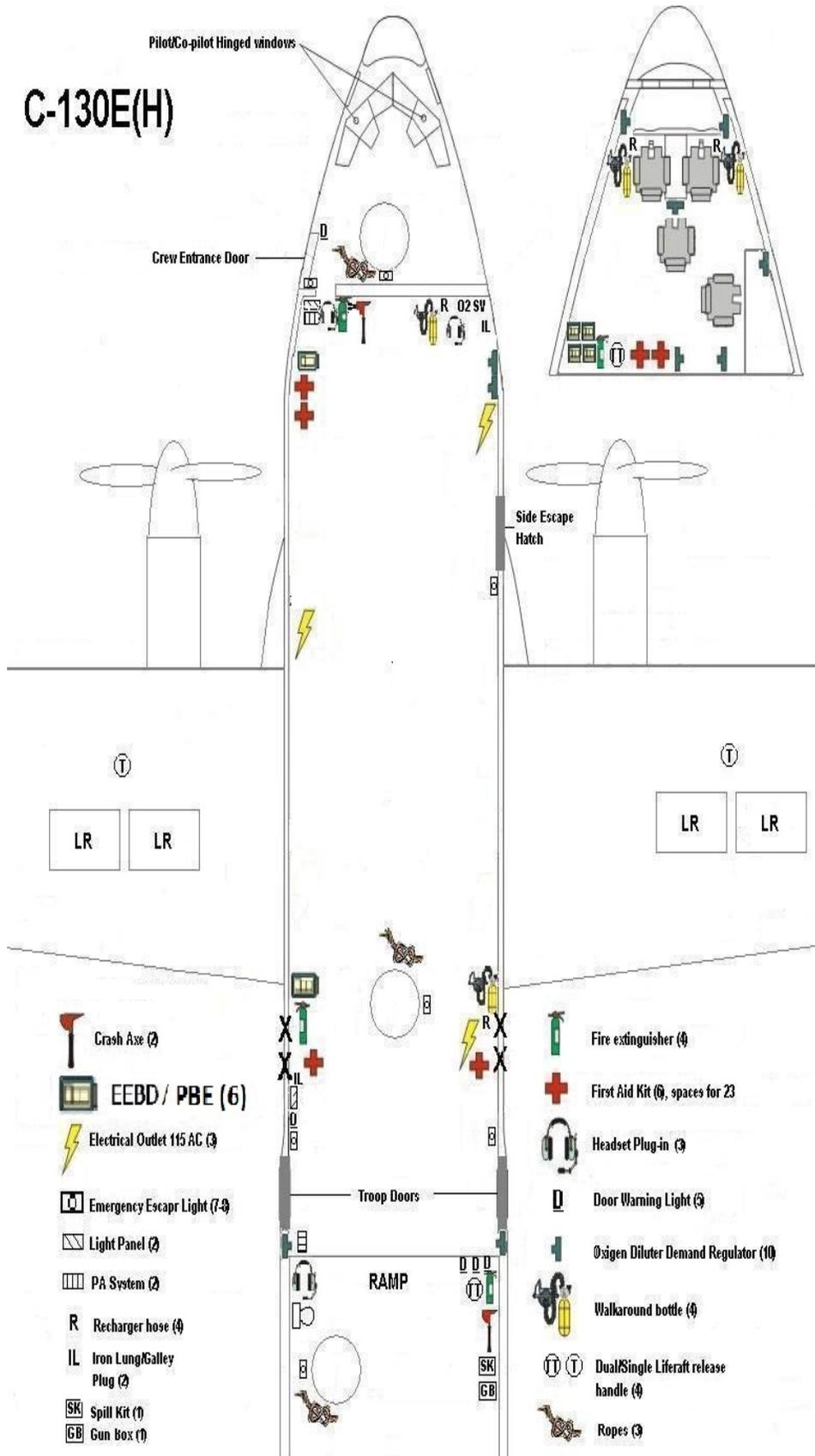
FIRST ACTION	LANDING IMMINENT (10 Minutes Left)	PROVIDE	POSITION	AFTER LANDING
<p><b>3AET</b></p> <ol style="list-style-type: none"> <li>1. Brief assigned assistants to remain in aircraft to assist in evacuation of ambulatory patients and passengers in forward portion of cargo compartment.</li> <li>2. Brief ambulatory patients in cargo compartment in evacuation procedures.</li> <li>3. Prepare and secure ambulatory patients in assigned portion of cargo compartment.</li> <li>4. Receive medical supplies, medications, and equipment from FN. Collect first aid kit and flashlight.</li> <li>5. Remove restraints from psychiatric patients.</li> <li>6. Secure cabin.</li> <li>7. Report cabin secured to CMT.</li> </ol>	<ol style="list-style-type: none"> <li>1. Check ambulatory patients in assigned portion of aircraft are properly secured and assuming "Brace for Impact" position.</li> <li>2. Take assigned seat.</li> <li>3. Fasten seat belt.</li> <li>4. Assume emergency landing position at "brace for Impact" signal.</li> </ol>	<ol style="list-style-type: none"> <li>1. Medical supplies, medications, equipment.</li> <li>2. First aid kit.</li> <li>3. Flashlight.</li> </ol>	<ol style="list-style-type: none"> <li>1. Assigned seat.</li> </ol>	<ol style="list-style-type: none"> <li>1. Remain seated until aircraft has come to a complete stop.</li> <li>2. Open exits.                             <ol style="list-style-type: none"> <li>a. Open available exits as directed per egress plan or by PIC /LM/BO.</li> </ol> </li> <li>3. Direct and assist patient and passenger egress per egress plan or as directed by PIC/ LM/BO: ambulatory followed by litters.</li> <li>4. Evacuate aircraft .</li> <li>5. Direct patients away from aircraft.                             <ol style="list-style-type: none"> <li>a. Direct patients to meet upwind of the aircraft or as directed by the pilot.</li> <li>b. Accomplish a head count and provide numbers to pilot /MCD/or senior ranking survivor.</li> </ol> </li> </ol>

SECTION VI

C-17



# C-130E(H)



- Crash Axe (2)
- EEDB/ PBE (6)
- Electrical Outlet 115 AC (3)
- Emergency Escape Light (7-8)
- Light Panel (2)
- PA System (2)
- R Recharger hose (4)
- IL Iron Lung/Galley Plug (2)
- SK Spill Kit (1)
- GB Gun Box (1)

- Fire extinguisher (4)
- First Aid Kit (6, spaces for 23)
- Headset Plug-in (3)
- Door Warning Light (3)
- Oxygen Diluter Demand Regulator (10)
- Walkaround bottle (4)
- Dual/Single Liferaft release handle (4)
- Ropes (3)

C-21

-  FIRE EXTINGUISHER (2)
-  FIRST AID KIT (1)
-  LIFERAFT (1)
-  EEDB/ PBE (2)
-  3 Amp AC OUTLET (2)
-  Survival Kit (1)
- 28 V ELECTRICAL OUTLET (2)**
-  PATIENT OXYGEN (2)
-  Air (2)
-  VACUUM (2)

