

**HELICOPTER UNDERWATER ESCAPE
AND OFFSHORE SAFETY INDUCTION TRAINING**



General Description of Training

This training involves classroom lectures and practical activities that may include: underwater escape training, basic fire fighting, escape from smoke filled environment, sea survival, wearing survival suits, use of re-breather system and lifeboat drills. The courses are delivered over 1 – 3 days. Trainees spend 60% of the course doing practical exercises.

PHYSICAL PROFILE OF COURSE	
<p>Helicopter Escape Trainees will be inverted and rotated in a simulator (minimum four), whilst wearing a seat belt and they will be required to escape from the simulator whilst underwater in a heated pool. Trainees may also be required to fit and wear a survival suit and use a re-breather escape set.</p> <p>Basic Fire Fighting Trainees will be required to use a fire blanket, hose reel and range of fire extinguishers to extinguish small fires. Trainees will have to carry portable extinguishers to extinguish a fire.</p> <p>Smoke Escape Trainees will be required to don a smoke escape hood and an Escape Breathing Apparatus set and move through smoke, darkness and heat in three 10 min exercises.</p>	<p>Sea Survival Trainees will participate in a 60 - 90 minute pool exercise focused on sea survival skills and techniques, including: water entry (from one metre), swimming and towing other trainees, treading water, climbing in and out of a life raft and being winched from the water using a helicopter rescue strop.</p> <p>Lifeboat Evacuation Trainees will be required to complete the following activities:</p> <ul style="list-style-type: none"> • Climb three flights of stairs, don a PFD and board a lifeboat (TEMPSC). • TEMPSC lowered into a pool and remain inside the lifeboat for up to 45 minutes whilst examining survival equipment and discussing casualty handling.

MEDICAL EXAMINATION

Name		Date of Birth	
Address			
Employer			

MEDICAL HISTORY *(Please circle answers and fill in all blank spaces)*

Blood Pressure	Sys	Dia	Heart Condition	Normal	Abnormal
Pulse			Back Condition	Normal	Abnormal
Weight (kg)			Skin Condition	Normal	Abnormal
Hernia	Yes	No	Ears	Normal	Abnormal
Whiplash	Yes	No	Previous Ear Damage	Yes	No
Height (cm)			Sinuses	Normal	Abnormal

Please detail medical history items that have been marked Yes or Abnormal:

Are there any other additional signs or symptoms Trainers should be aware of whilst observing this person?

In view of the physical stresses associated with the course and my examination of the person registering to attend on this form, I certify that this individual is fit to undertake training.	Medical Practitioner's Name and Contact Details or Stamp:	
Date of Examination:	Medical Practitioner's Signature:	