



TOPSIDE



Volume 4, Number 4

The NDP Newsletter for NOAA Diving Supervisors and Divers

August 2003

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TRAINING SCHEDULE

Training requests are still being accepted for the September and January **Working Diver/Divemaster** courses, and **DMT Prep** and **DMT** courses in December. Please contact Laurie Barber for enrollment or if you have any questions about requirements.

The August **Working Diver Refresher** course was cancelled due to lack of enrollment.

The **DMT Preparation** course has replaced EMT - see this month's TOPSIDE for more information.

Course schedules through January 2004:

2003:

Sep 15 - Oct 03	Working Diver	Seattle, WA
Sep 29 - Oct 03	Divemaster	Seattle, WA
Dec 01 - 06	DMT Prep	Seattle, WA
Dec 08 - 13	Diver Medic	Seattle, WA

2004:


Jan 12 - 30	Working Diver	Key West, FL
Jan 26 - 30	Divemaster	Key West, FL

SEEKING MEDICAL TREATMENT

On more than one occasion, the NOAA Diving Medical Review Board reviewed a diving medical accident case where there has been a significant delay in either the recognition of diving related symptoms, the reporting of such symptoms, or the seeking of medical care. Such delay in recognizing symptoms or receiving definitive medical care can have significant long-term consequences for one's health and well being.


In addition, **diving injuries are not always apparent to the diver or an outside observer, and may present with signs or symptoms that are very subtle, and can easily be mistaken for a non-diving injury. All NOAA divers are reminded that any adverse symptom experienced within 48 hours of a dive, should be considered diving related until proven otherwise.** This includes both subtle and gross symptoms of: joint or limb pain, fatigue, headache, confusion, visual defects, ringing in the ear(s), personality change, dizziness, "just not feeling right," nausea, vomiting, crying, respiratory difficulty (cough or shortness of breath), "feeling spacey," bowel or bladder dysfunction, numbness, tingling, twitching, altered balance and/or coordination, abdominal pain, blotchy rash, itching, seizure, and unconsciousness. **This list is not all inclusive. Medical care for any of these symptoms should be sought at once.** It is best to present to a medical provider and facility trained in hyperbaric medicine, with a functional chamber on location. However, if transport to such a facility will delay medical care, **you should present to the nearest emergency room as soon as possible.** If seeing a physician who is not trained in hyperbaric medicine, you must for your own well being, stress that this may be a diving related symptom, and **request consultation with a hyperbaric physician.** It is not an uncommon event to find a physician unfamiliar with diving related problems in an emergency room setting. (cont.)

MEDICAL TREATMENT (cont)

However, **100% oxygen can be administered in any emergency room while an available chamber is being sought.** In addition, **divers are reminded to start oxygen therapy (if available) from their diving first-aid kit immediately, while still in the field.** A good rule of thumb is: **if there is any suspicion that a symptom or case presentation may be diving related, it should be treated as such, justified by that suspicion alone if nothing else.** If a diving related case is suspected, notify your dive master and UDS immediately after emergency medical treatment. Any personnel with any pre- or post-dive medical concerns, should consult with an appropriate medical authority knowledgeable in diving medicine. This would include the NOAA Diving Center, Captain Michael Vitich, USPHS (301-713-3440 x186), or the Divers Alert Network (800-446-2671 for non-emergency medical questions). 

DMT PREP & DMT COURSE OVERVIEW


An intensive DMT Prep Course will be conducted at NDC from December 1, 2003 through December 6, 2003. Thereafter, the DMT component of the course will be held from December 8 through December 13, 2003. Instructors will include NOAA medical staff personnel, and visiting guest lecturers from Madigan Army Medical Center and Bremerton Naval Hospital. Both courses will include classroom and practical sessions.

The DMT Prep Course is modeled after the Medical Person-In-Charge (MPIC) curriculum, for shipboard medical providers. U.S. Coast Guard approval for the MPIC certification is pending. However, the National Board of Diving and Hyperbaric Medical Technology (NBDHMT) has approved the DMT Prep Course as meeting the requirements for basic emergency medical training, as a pre-requisite for DMT training and certification. The second week will focus on DMT material including practical sessions in IV's, intubation, suturing, injection administration, operating a hyperbaric chamber, and more. Any questions, please contact the NDC. 



PUBLIC SAFETY DIVING GRADS

The NOAA Diving Program graduated fourteen divers from the two-week Public Safety Diver Training Class on August 1st, 2003. The class was designed for local, state and federal law-enforcement and fire safety divers. Training included dry-suit familiarization, search and rescue techniques using a submerged vehicle, evidence handling and recovery, hull inspection and detection of suspicious packages attached to small boats.

Standing, back row, L to R: Frank Brennan, Seattle Fire Dept; Bernie Patton, Seattle Fire Dept; Greg Beard, Seattle Harbor Patrol; Mike Moore, U.S. Secret Service; Dave Scott, Seattle Fire Dept; and Wynn Holdal, Snohomish County Sheriff's Dept; Standing, front row, L to R: Bill Simpson, Seattle Fire Dept; Brian Fenske, Snohomish County Sheriff's Dept; Mike Todd, Seattle Fire Dept; Kent Carpenter, Seattle Harbor Patrol; Marc Buller, U.S. Secret Service; Shannon Shockley, U.S. Secret Service; John Flood, Snohomish County Sheriff's Dept; and Rick Eads, Seattle Harbor Patrol. Congratulations to the August Public Safety Diving Training graduates! 

TRI TEST KITS

TRI dive compressor test kits were mailed out the second week of July. **Please complete the required dive compressor testing and return the kits ASAP.** NOAA Diving Regulations require the testing of all dive air compressors every 6 months. 