



July 2010, Vol 1. No. 2

We Care! A Note on Pre-Existing Conditions

The season of encampments and other activities are in full swing. Do you lose sleep in anticipation of going to an encampment? Are you ready to fly an airplane? Are you excited to be a part of an activity staff? Would you give anything in the world to ensure you could go?

Some may choose to give up everything to participate. Showing up sick, injured, in casts, on crutches, with sprained limbs, respiratory conditions, or sunburned. Pre-existing conditions are to be listed on activity applications, and they are often left blank. Pre-existing conditions may result in a more severe injury for the person.

All members of the Civil Air Patrol need to adopt an attitude of "We Care" that says we care for ourselves, and for those around us, enough to not attend an activity if we can not meet a certain level of physical preparedness.

Cadets, senior members, and parents must ensure physical conditions are disclosed. This allows command and activity staff to establish appropriate accommodations, or help make decisions with the member or member's parents, if participation in the activity is feasible.

If you knew that failure to disclose a pre-existing condition resulted in termination of an activity for you, would you disclose it? You must, as not disclosing a medical condition, acute or chronic, could be considered not being forthright. In some cases, you could be filling a position from which another person could have benefited.

Please complete applications with integrity and make good decisions. Share this information: think of others before yourself. This also applies to unit meetings where acute medical conditions or personal illness are not captured on a form. Communicate with your leadership. We Care!

Avoiding Tailstrikes By Lt Col Al Matson, Stan/Eval Officer, MN Wing

One of the recurring problems we see in flight operations is tail strikes resulting in bent or missing tail tie-down rings. This problem is not unique to Civil Air Patrol, but it is a problem that we can prevent if we understand how and when this type of damage is likely to occur.

Most often tail strikes occur during soft-field takeoff and landing practice, and typically this is done with a flight instructor aboard the aircraft. The tail strike occurs when the pilot holds the yoke too far aft, either during the takeoff roll (over-rotation) or during the landing flare (over-flaring). This can be solved by development of an understanding of what we are trying to accomplish during soft-field practice.

During takeoff or landing, we try to prevent the nose wheel from sinking into a soft surface. In most cases, all this requires is just enough aft pressure on the yoke to hold the nose wheel lightly on the surface, where it will skip over the soft material. Let's face it, if you were really taking off from a surface that required you to hold the nose wheel completely off the surface, you should not be conducting the takeoff in the first place!

Since instructors usually are aboard during tail strikes (as they are instructing the soft-field procedures), they are in a position to prevent strikes. The best way to do this is for instructors to place a hand in a position to block over-rotation or over-flaring. Instructors should do this every time these procedures are practiced. Guard the yoke!

Take the time to view the video put together by Lt. Col. Nick Modders and his team at the 130th Composite Squadron, MN Wing. They demonstrate how you can safely instruct pilots on the proper sight picture during soft-field practice.

Click here to view video:
http://www.youtube.com/watch?v=2qBc9_xUMBs

Not mentioned, but very important, is the need to chock the wheels while conducting the tail lowering exercise. Below, and on the next page, you will find a few images that are meant to supplement the video.

In the image at right, you can see that the yoke is being held back using the seatbelt. This is a good idea even with a pilot aboard; to make sure that the elevator does not strike the ground when the tail is lowered.



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FAA Updates IMSAFE





Alert# 10-03



HEAT INJURIES

As temperatures rise the exposure to the summer elements may result in related mishaps. It is imperative that we increase awareness of heat related inj0(s(er)i(re)3(d)34()-9ante)3(d)34()-90th)3(e)3i of csured 0(s(as they participate in all CAP activities.

Operations involving high ambient temperatures and high humidity, direct physical contact with hot objects (i.e. aircraft or vehicles), or strenuous physical activities have a high potential for inducing heat stress and heat related injuries in people engaged in such operations.

AFFECTED WINGS: ALL
AFFECTED DUTY POSITIONS: ALL
PUBLISHED: June 17, 2010
EFFECTIVE: Immediately
REFERENCES: CAPR 62-2

CAUSAL FACTORS

- I. Age, weight, degree of physical fitness, degree of acclimatization, metabolism, medications and a variety of medical conditions such as asthma, emphysema may affect a person's sensitivity to heat and may adversely impair an . However, even the type of clothing worn must be considered. Prior heat injury predisposes an individual to additional injury.
- II. It is difficult to predict just who will be affected and when, because individual susceptibility varies. In addition, environmental factors include more than the ambient air temperature. Radiant heat, air movement, conduction, and relative humidity all affect an individual's response to heat.

HEAT DISORDERS AND HEALTH EFFECTS

HEAT STROKE occurs when the body's system of temperature regulation fails and body temperature rises to critical levels. This condition is caused by a combination of highly variable factors, and its occurrence is difficult to predict. Heat stroke is a medical emergency. The primary signs and symptoms of heat stroke are confusion; irrational behavior; loss of consciousness; convulsions; a lack of sweating

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(usually); hot, dry skin; and an abnormally high body temperature, e.g., a rectal temperature of 40.5°C (105°F).

If body temperature is too high, it may result in death. Individuals with heat stroke ha

Under extreme conditions, such as working for 6 to 8 hours in heavy protective gear, a loss of sodium may occur. Recent studies have shown that drinking commercially available carbohydrate-electrolyte replacement liquids is effective in minimizing physiological disturbances during recovery.

HEAT COLLAPSE ("Fainting"). In heat collapse, the brain does not receive enough oxygen because blood pools in the extremities. As a result, the exposed individual may lose consciousness. This reaction is similar to that of heat exhaustion and does not affect the body's heat balance. However, the onset of heat collapse is rapid and unpredictable. To prevent heat collapse, the person should gradually become acclimated to the hot environment.

HEAT RASHES are the most common problem in hot work environments. Prickly heat is manifested as red papules and usually appears in areas where the clothing is restrictive. As sweating increases, these papules give rise to a prickling sensation. Prickly heat occurs in skin that is persistently wetted by unevaporated sweat, and heat rash papules may become infected if they are not treated. In most cases, heat rashes will disappear when the affected individual returns to a cool environment.

HEAT FATIGUE. A factor that predisposes an individual to heat fatigue is lack of acclimatization. The use of a program of acclimatization and training for tasks in hot environments is advisable. The signs and symptoms of heat fatigue include impaired performance of skilled sensorimotor, mental, or vigilance jobs. There is no treatment for heat fatigue except to remove the heat stress before a more serious heat-related condition develops.

CAP SAFETY ADVISORY

Heat injuries have the potential of affecting ground team members and flight crews. Hydration is essential and rest is a must. It is highly recommended that members affected by heat injuries follow the direction of the medical staff or health professionals. Rest, hydration, and limited duty to recover should be considered before releasing the affected member back to participation with CAP activities.

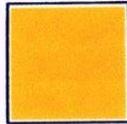
Use of the attached Heat Index chart is encouraged to be used in the decision making process of whether a CAP activity is a GO or NO-GO based on exposure risk.

Adjusting activity schedules is highly recommended to prevent unnecessary exposure to heat. Longer and more frequent break times are recommended as the Heat Index risk exposure increases with consideration for cancelling an activity as an option.

BEST PRACTICE

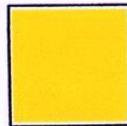
The Pee Chart

How dehydrated are you?



(Highly Dehydrated)

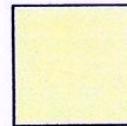
Go drink a large bottle of water immediately!!!



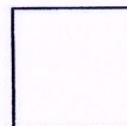
You are still seriously dehydrated. Drinking more now will make you feel a lot better.



Moderately dehydrated. You lose fluid on a regular basis throughout the day. Drink more water to get hydrated.



Almost there. Get some more water in your system to help flush all those toxins from your body. Stay hydrated and healthy!



Great job. Now don't let yourself get dehydrated. Drink at least 8-12 large glasses of water throughout the day.

***Caffeinated drinks dehydrate - limit your consumption.**

***Sport drinks can provide supplementary electrolytes, but
Water is the Key!**

Drink one sport drink for every three to four bottles of water. Don't wait to get thirsty. If you're thirsty, you're a quart low.



Safety Best Practice

PREVENTING HANGAR RASH

Lt. Col. Alan Matson, DOV, MN Wing