



**Backcountry One Day Outings**  
 (1-2 hr or more from Emergency Medical Services)  
**Safety Management Plan**

**Section I: Leader(s) Information**

Outing Name:	Outing Dates:
Sponsoring Entity:	Chapter:
Leader Name:	Phone number:
Leader Name:	Phone number:

**Section II Outing Information – Fill out this section if you are not using Campfire Events**

Outing Purpose Statement & Brief Description of Outing:

**Outing Details**

Trip Date:	Trip Time:	Difficulty Rating:
Field Communication Device (cell phone, inReach, etc) To Be Used:	Field Comm Device Contact Info:	
Location and Directions (including hiking and trailhead information if applicable)		
Participant Pre-Requisites:		
List of Activities and Hazards included in the Outing:		

Pre-Trip Safety Talk: Include your safety talk, a welcome greeting, conduct, safety guidelines, etc.



### Section III: Resources

Please check all resources that apply to your Outing:

Available resources	Location of resource	Notes on use
<input type="checkbox"/> 911	If NOT in 911 area, write steps for emergency response	
<input type="checkbox"/> Cell phone		Signal reliability: Location of best signal:
<input type="checkbox"/> InReach/PLB		
<input type="checkbox"/> First Aid Kit		
<input type="checkbox"/> Medical Forms		
<input type="checkbox"/> Vehicle		Location of keys: Location of spare keys:
<input type="checkbox"/> Other		

#### Partner Contacts:

Name:	Position:	Phone #:
Name:	Position:	Phone #
Name:	Position:	Phone #
Name:	Position:	Phone #

#### Clinic and/or Hospital Contacts and Directions (please attach printed map for each):

Clinic or Hospital Name:	Address:	Phone number:	Distance from site



### **In Case of an Emergency:**

1. Ensure the area is safe to enter
2. Call 911.
3. Stabilize patient and administer first aid until medical help arrives
4. Contact:
  - a. the Emergency Line/On-call person immediately. **Call 1-888-OUTINGS..** A 24/7 answering service will pick up, indicate to them that this is an “Outings Emergency” and they will patch you through to Outings Safety. **Do not call our individual work #s because we cannot guarantee they will be answered.**

or

  - b. **By inReach or Zoleo\*:**  
If sending an inReach message, send it to **EVERYONE listed here:**
    - Nancy Crane 314-610-4099
    - Amberleigh Hammond 303-717-4296
    - Doug Sandok 415-212-9203

You should enter all these #s into your device as Contacts before your trip. You can add an \_ before each name to force them to appear together and at the top of your contacts list.

\*An inReach message can be sent to multiple people, but each person will only be able to see and respond to your message, not one another.

InReach messages are limited to 160 characters at a time. Having a succinct message will improve your chance of getting support quickly. Here is a sample script:

*\*This is \_\_\_\_ with a patient report/evac request. We are currently located at \_\_\_\_\_. Patient is \_\_\_\_\_, DOB \_\_\_\_\_, with chief complaint \_\_\_\_\_. Cause of the injury/illness is \_\_\_\_\_. (If you have findings from a physical exam, vitals, or other relevant patient history, include here). We suspect the following problem(s) \_\_\_\_\_. We plan to \_\_\_\_\_ and request \_\_\_\_\_.*

5. If possible, someone should go with the patient to the hospital. The most experienced leader should stay with the rest of the group
6. Complete an [Incident Report](#)

**Please send a copy of your Safety Management Plan to your Outings chair or entity designee**