

just south of the couloir that they were thought to have been attempting. A helicopter evacuation was completed by late morning. (Source: *Bergtrage*, Mountain Rescue Council, Seattle, 84-01, March 1984)

Analysis

We will never know if the accident was caused by falling rock, snow, or ice, or by a slip on rock or snow. But we do know that the weather was a factor. It was clear and warm, and that turned the whole gully into a potential bowling alley. (Source: George Sainsbury, Seattle MRC)

FALL ON ROCK, INADEQUATE PROTECTION

Washington, Leavenworth—Icicle Creek

This accident related to a fall taken by Don Novak (49) on April 7, 1984, about 1530. Don was attempting to lead the left hand portion of Z Crack. He had climbed this particular route three times earlier the same day, once top roped, once top roped placing protection, and once cleaning the protection. This was his fourth trip up the route. I was alongside him on a rock buttress about three meters away from the actual route and was observing his progress and made comments at different points either to him or his belayer. Don moved up from a stable platform about two meters above his last point of protection and placed a #6 hexentric on perlon in a portion of the crack. This protection is needed or one is exposed to a potential ground fall due to the slope of the hillside. I am sure Don was aware of this as I had personally supervised the placing of a piece of protection while he was climbing top roped to prevent a possible pendulum and ground fall while climbing top roped. With his climbing partner, I had personally placed the protection myself and remember explaining the rationale to him again.

As Don moved up past the needed piece, it was either kicked out or rope drag pulled it out leaving Don exposed to groundfall. He moved down about one and a half moves and appeared stable. He looked at his rack and appeared to select a chock slung on red perlon. I refrained from interrupting his concentration at this point as he seemed to be following what I would have told him to do anyway. Don made the half move to where he would have needed to place the piece and instead of placing it, hesitated and then moved up with his right arm to a rock nubbin. Before I could get a yell out to put the piece in, his feet slipped and he was unable to hold himself. He fell between four and five meters to the sloping rock/dirt surface and rolled another two meters before the rope really took hold. There was absolutely nothing his belayer could have done short of pulling in three meters of rope during the fall to have helped.

Don came to rest wedged between a tree and a rock. It took less than ten seconds for him to be reached by myself and the other instructor, Bill Busacca. Other people came to aid: three medically trained persons and about five people with MOFA training. We determined that his back was not a problem and repeated our survey a second time to be sure before allowing him to even move. He felt more comfortable sitting and complained of his wrist and left hip area. He had some abrasions on his left side near where the kidney is and we were concerned that he might be injured

internally. His wrist problem was obvious and was treated. We also treated him for some mild shock from which he rapidly recovered. We continued his treatment during the evacuation, which was made by a sitting carry to the road and a waiting car. From the time of the accident to the arrival at the hospital was about 45 minutes. The physician's analysis was a broken radius near the wrist with a possible fracture of the thumb bone. (Source: Randy Nelson, Instructor, The Mountaineers)

Analysis

The rock was wet enough to require additional caution and even though the victim had climbed the route several times, adequate protection still needed to be in place. (Source: The Mountaineers, Accident Report Form, dated April 7, 1984)

FALL ON ROCK, INADEQUATE PROTECTION Washington, Leavenworth—Icicle Creek

On May 13, 1984, Dr. Robert Yakel (52) was on an Olympic Mountain Rescue Team (for which he is the medical advisor) training trip to the Icicle Creek practice area when he took a ten meter fall, fracturing his right ankle and left knee. When he fell, a chock popped out, but broke his fall to some extent. Participants noted that he was not wearing a hard hat, and that if he had landed on his head, he would probably have been killed. (Source: George Sainsbury, Seattle MRC)

LOSS OF CONTROL—VOLUNTARY GLISSADE, INADEQUATE EQUIP- MENT, EXCEEDING ABILITIES Washington, Granite Mountain

On May 18, 1984, Donald Archibald and Ronald Aronoff (37) had scaled Granite Mountain, leaving the trail head parking lot about 1130. On the descent, Aronoff was leading with Archibald following. Aronoff was dressed warmly, and was wearing a wet suit. He chose to slide on the snow, and slid ahead of Archibald. As he progressed, he gathered more speed, and eventually left Archibald's view for a period of about five minutes. Archibald located Aronoff on the snow field, in the avalanche chute, near the treeline by an alderwood patch. Aronoff's legs were wrapped around a small tree, his head was downhill, and he appeared to have suffered a "two-inch deep gash from the upper lip to the forehead, and had cut his nose in half." Aronoff's left eye was swollen shut, the right eye was dilated and fixed, and the victim was not conscious. There was some loss of blood. Archibald moved the victim's head and body toward the top of the mountain to prevent further bleeding, and laid the victim on his side to keep the passage way clear for easier breathing. He then left the mountain for help.

Victim Aronoff was airlifted from the 1000 meter level by MAST and taken directly to Harborview Medical Center, where he was treated for a concussion and lacerations. The scene was secured about 2100 hours. (Source: Clinton Olson, King County Department of Public Safety)