

able force, landing on my right side. I was wearing a helmet, did not lose consciousness, and was able to take stock of my situation. I noticed the rope was tight up to the Camelot, which had held its placement well and had presumably absorbed some of the force of the fall. I called down to my friends, and soon one of the climbers we met came up to check me over, set up an anchor and a chest harness, and lower me down the cliff. The rescue went smoothly and we were on our way to the hospital in what seemed like a very short time. WG and our two new friends all remained calm and efficient throughout the rescue, and I am deeply indebted for their kind and competent assistance.

At the hospital I was found to have a stable pelvic fracture with a large hematoma around my right hip, a maxillary fracture with loss of several teeth, facial lacerations, and a severe fracture/dislocation of my right wrist, which required open reduction and screw fixation. There remains a possibility that I will have some permanent nerve damage in my right hand from the injury.

### **Analysis**

In retrospect I would have been better off attempting to down-climb when I first recognized that the rock was becoming dangerously rotten. I may have fallen anyway, but would likely not have hit the ledge and been injured as badly. (Source: Tom Thrall)

## **FALSE ALARM**

### **Arizona, Grand Canyon**

On the evening of September 23rd, rangers began a search for hikers who repeatedly activated their rented SPOT satellite-tracking device. The GEOS Emergency Response Center in Houston reported that someone in the group of four hikers—two men and their two teenaged sons—had pressed the “help” button on their SPOT unit. The coordinates for the signal placed the group in a remote section of the park, most likely on the challenging Royal Arch loop. Due to darkness and the remoteness of the location, rangers were unable to reach them via helicopter until the following morning. When found, they’d moved about a mile and a half to a water source. They declined rescue, as they’d activated the device due to their lack of water. Later that same evening, the same SPOT device was again activated, this time using the “911” button. Coordinates placed them less than a quarter mile from the spot where searchers had found them that morning. Once again, nightfall prevented a response by park helicopter, so an Arizona DPS helicopter whose crew utilized night vision goggles was brought in. They found that the members of the group were concerned about possible dehydration because the water they’d found tasted salty, but no actual emergency existed. The helicopter

crew declined their request for a night evacuation but provided them with water before departing. On the following morning, another SPOT “help” activation came in from the group. This time they were flown out by park helicopter. All four refused medical assessment or treatment. The group’s leader had reportedly hiked once at the Grand Canyon; the other adult had no Grand Canyon and very little backpacking experience. When asked what they would have done without the SPOT device, the leader stated, “We would have never attempted this hike.”

The group leader was issued a citation for creating a hazardous condition—36 CFR 2.34(a)(4). (Source: Brandon Torres, Canyon District Shift Supervisor, from an entry found in the Morning Report, October 21, 2009) *(Editor’s Note: While not a climbing accident, this episode is included to illustrate the misuse of ever more sophisticated and available technologies. We are not seeing a lot of this inappropriate use in the climbing world yet, but we are certainly seeing an increase in the use of cellphones for calling in for rescue help.)*

## **VARIOUS FALLS – UNABLE TO SELF-ARREST WHILE GLISSADING, FAULTY USE OF CRAMPONS (3), OUT OF CONTROL FALL**

### **California, Mount Shasta**

On January 18, a climber in Avalanche Gulch attempted to glissade on hard snow with crampons on, beginning at 11,500 feet. He quickly lost control and went into a slide/tumble for 500 vertical feet. He suffered an ankle fracture and other minor injuries. He was assisted by another climbing party and some local skiers/snowboarders to lower elevations. He was transported by toboggan by a USFS Climbing Ranger to the trailhead.

On May 24, a 52-year-old male sprained his ankle while glissading near Lake Helen at the 10,400-foot level. A climbing ranger assessed the injury, taped the ankle, and the subject continued down with help from his party.

On May 30, a climbing ranger stopped two out of control climbers sliding through the Red Banks at 12,400 feet. The ranger assisted them through the remainder of the chimney.

On June 7, a 46-year-old male was glissading down Avalanche Gulch around the 11,500-foot level with crampons on. A crampon caught on the snow and as a result, the man sustained open fractures to his tibia and fibula. Bystanders, including two MDs and several climbing guides, called 911 and stabilized him. Three climbing rangers responded to the scene with rescue gear and packaged him for transport via CHP Helicopter H-16 to Mercy Mt. Shasta for treatment.

On June 28, after observing several climbers sliding out of control through the Red Banks chimney around the 12,400-foot level, rangers instructed several dozen climbers in proper use of the ice ax.