
Royal Roads University Off-Site Activity and Student Travel: Medical Information Form, Assessment of Emergency and Medical Emergency Communication Plan

This form is used during any off-site learning activities which include overnight travel.

Name of activity or event:	
Dates of activity or event:	
Location of activity or event:	

The personal information collected on this form is collected under the authority of the University Act and is subject to the Freedom of Information and Protection of Privacy Act. The personal information collected will only be used in the event of a medical incident or emergency taking place during the activity or event for which it has been gathered. The information below will assist medical personnel in assessing a medical situation. A copy of this form will be kept in a secure location at Royal Roads and a copy of this form will be kept with Royal Road staff attending the activity or event for which it was collected.

For more information regarding the collection and use of personal information please contact Royal Roads University's Privacy Officer at 250 391-2600 (ext 4178) or via email at:

info@royalroads.ca, or in writing to:

Risk Management, 2005 Sooke Road, Victoria, BC, V9B 5Y2.

Please complete the medical information below to the best of your ability:

1) Please list blood type:

2) Please list any current or previous medical conditions that may be impacted by travel, including any medical condition affected by high altitude or heat.

3) Please list any medication(s) you require for the above medical conditions:

Do you carry the medication with you? Yes No

Do you have the name of the prescription if required? Please provide:

4) Do you have any allergies (drug, food or other) that may be affected during this activity?

If yes, please describe advised treatment:

5) Do you have any allergies requiring an epi-pen? Yes No
If yes, where do you keep your epi-pen?

Medical Travel Insurance: (required for international travel, must be in the amount of \$1,000,000 or more)

I give permission to Royal Roads University to provide this information as needed to first responders and medical providers in the event of a medical emergency:

Name (Please print):	
Signature:	
Date: (dd/mm/yyyy):	

Assessment of Emergency and Medical Emergency Communication Plan

Royal Roads University faculty and staff will use the following Worksafe BC guidelines to assess

Name of Medical Insurance Provider		Policy Number
Period of validity	Provider Phone Number	Provider Email
Provider Address, City, Country and Postal Code		

whether an immediate emergency medical response is required:

- Airway or breathing problems
- Abnormal skin colour
- Anxiety, lightheadedness, confusion or dizziness
- Unable to walk unassisted
- In great pain (including chest pain lasting longer than 10 minutes)
- Loss of consciousness
- Severe bleeding that does not stop within 10 minutes
- Severe physical trauma (such as a traffic accident or high fall)

Emergency medical response is guided by actual or implied consent:

Actual consent: refers to patients making an informed decision and allowing you to help them.

Implied consent: refers to a situation where a patient is unable to respond and the law assumes that, if able, the patient would give consent in an emergency situation.

Eg. Implied consent may occur when the rescuer is unable to communicate with the individual who appears to be in harm. This most often happens because the individual is unconscious or semiconscious, but may also be a result of intoxication, language barriers, mental disorder, or trauma. With implied consent, there is an assumption that the individual would ask for help if they could.

Medical Emergency Communication Plan

In the event of a medical emergency (as outlined above), **after** getting emergency care:

- Staff or designate will immediately contact ISOS for assistance and emergency response
- Staff or designate will immediately contact Emergency Contact/CARE team at Royal Roads University
 - *CARE team will take over communication with the Emergency Contact of involved participants
 - *If needed, CARE will loop in Program Head/Director and School Manager and Executive
- Staff or designate will continue to update the RRU/CARE team until such a time as the emergency is controlled and the affected person(s) is able to communicate on their own.
- Staff or designate if possible, will communicate and update the Program Head, Director and School Manager and update as able. PH/Director and SM will also loop into CARE team as well for updates.

I have read and understand the above protocols for medical emergency response and am allowing permission for them to be used in the event of a medical emergency. I understand that an incident report will be completed and sent to the Royal Roads CARE team for follow-up:

Name (Please print):	
Signature:	
Date: (dd/mm/yyyy):	