

# **A Trip Worth Reporting: TSRA Instructors in Action**

**Big South Fork, March 11, 2018**

by Jonathan Ryan

On Sunday, March 11, while paddling on the Big South Fork we had to evacuate an incapacitated paddler.

There were 10 people in the team, with paddling experience ranging from 1 year to 20 years, 4 Swiftwater Rescue Instructors, a Wilderness First Responder, several people with Wilderness First Aid/CPR, and almost everyone had taken Swiftwater Rescue. Water temperature was 45°, air mid- to upper 50's, river flow 1150 cfs, and everyone was dressed for immersion.

We scouted Double Drop, and ran it and Washing Machine uneventfully, but had three (!) swimmers at the Ell. One self-recovered into an eddy, and the two others were recovered with little fanfare—the swimmers swam to an eddy and others grabbed their paddles or towed their boats to shore.

When the swimmers were ready, we moved on down the river and got to A\$\$ Kicker at 3:20 p.m. Those who felt they knew the line ran it one by one, while a few others got out of their boats to scout, and then proceeded to run it. After a rather long time, one of the remaining two at the top started motioning to us that something was going on with the other paddler, who had been out of sight for several minutes. A couple of paddlers who were in an eddy on that side of the river got out and went up to investigate, and then I crossed over and went up at 3:45 pm.

The victim was one of the swimmers at the Ell, a female in her mid-20s whom I had paddled with on the Ocoee a few months prior. She was probably the least experienced paddler, but from the Ocoee trip I know that mentally she was very tough and completely unfazed by a capsize and swim. She was seated on a rock, helmet and PFD on the ground beside her, looking rather ashen and with a bewildered expression on her face. She said she had just bent over, and instantly got horribly dizzy and nauseous to the point that she could not stand up without losing her balance and falling over.

She was Alert and Oriented x4 (knew who she was, where she was, what the prior events had been, and what time/day it was) and had not experienced anything even close to a loss of responsiveness. She was breathing normally, her pupils were equal sized, round and reactive to light, and she denied ever having experienced anything like this before. Based on these symptoms, and a lack of MOI (Mechanism Of Injury) for a head injury, I began suspecting it may have been a case of intense vertigo (a la motion sickness) caused by cold water in the inner ear severely upsetting her sense of balance.

I had experienced symptoms identical to hers in the summer of 2013. I had gotten off the Hiwassee after a really good, fun day of surfing, playing and rolling over a dozen times, feeling on top of the world. I got out of my boat feeling great, bent over to pick it up and basically collapsed on the ground from vertigo. It took 45 minutes before I recovered enough to walk 100 yards from the takeout to the campground at Hiwassee Outfitters, and all I could do was just sit in a chair for the rest of the day.

Now, here we were in a remote gorge on the plateau in the winter, an area where hiking out even for a healthy and uninjured person would have been extremely challenging. With someone who basically could not walk and probably could not sit upright, it was out of the question. A litter evacuation would have meant spending the night there in the open in 20°-30° temps waiting for a team of 30+ rescuers to arrive the next day.

I asked her if she wanted some Meclazine (Boninine), an OTC motion-sickness/anti-emetic medication I keep in my first aid kit, and she said yes. After she took it, we spent another 15-20 minutes discussing our options. The plan was simple: we just had to get everyone two miles down the river to O&W Bridge where our vehicles were.

Rather than try to make the whole entire plan at once, we broke it down into bite-sized chunks: since she couldn't walk out, we had to get her into her boat, so that was Step 1. She put her PFD and helmet back on, I scouted the route, and her boyfriend and one of the other SWR instructors supported her and she used her paddle for additional support. It was like walking someone who was falling-down drunk over rocks that ranged in size from basketballs to small cars. After they got her to the water's edge, I got in my boat and paddled up to them. They wedged her boat in a crack between two rocks, carefully assisted her into it and put her spray skirt on, all the while keeping one hand on her so she didn't fall over. I kept her boat from drifting out into the current. When she was in, her boyfriend got into his boat and then we eased her out into the water, with one of us on either side of her for support, and started floating down the river rafted up together. It was now 4:20 p.m. Lucky for us, we were in the Eastern time zone, it was the first day of Daylight Savings Time, so we had about 2 more hours of daylight.

Step 2: We were 3/4 of a mile or so above where Pine Creek comes into the BSF on river right; there is an old 4x4 tote road that runs from the O&W road down to the river there, so that was the first place we had the option of getting off the river. There were a few Class II rapids to go through and a long pool with a mild current in it. Another paddler took my place in the raft and I paddled ahead scouting the route so they had plenty of time to position themselves before hitting the rapids. Everything went smooth as silk and we arrived at the beach at Pine Creek at 4:50.

Step 3: The tote road down to Pine Creek has a locked gate at the top and getting a Ranger with a key would have taken at least 2 hours. The patient was improving slightly, but was still very unstable on her legs. We now split the team up into 3 crews. Crew 1 would walk the patient up the tote road to the O&W road, a very steep 1/4 mile hike, and remain with her there. Crew 2 would bomb down the remaining mile of river to O&W bridge, get a vehicle, and drive up to meet crew 1 at the tote road and take charge of the patient. Crew 1 would then walk back down to their boats and paddle on to O&W. Crew 3 put the spray skirt on the patient's boat, tied the tunnel closed with a prussic, and towed it down to O&W.

(If you ever have to tow an empty boat a long distance, hang a throw bag off the stern of the towed boat to act as a drogue (sea anchor) to prevent it from running you over or fishtailing from side to side.)

Crew 3 left Pine Creek at 5:00 p.m. and arrived at O&W at 5:20 p.m., just as crew 2 was taking off in their truck to get the patient.

By 6:00 crew 1 was back at O&W and we had all the boats and gear loaded up.

Step 4: The patient had driven over from Knoxville alone while everyone else had come from the Nashville area. We still had to go back to the put-in at Burnt Mill Bridge on Clear Fork to get the other two vehicles. When we got to the put-in it was after 7 p.m., dark, raining hard and everyone was very tired.

Step 5: River Karma—what goes around, comes around. A year before, I had to have a buddy drive me back to Nashville from O&W when a pulled back muscle spasmed leaving me unable to take off my PFD, change out of my dry suit, or drive, and barely able to walk. So, I got one of the others to drive my truck back to Lebanon and drop it off at the Home Depot parking where their trucks were, while the victim's boyfriend drove her truck, and I drove her in his truck to Knoxville to drop her at her parents' house. I will say that she was markedly improved by the time we got there. The rest of the crew had their own adventures and we caught up to them on I-40 near Monterrey, and eventually all got home well after midnight.

It was a good day on a great river with some wonderful people and I can't wait to go kayaking again!

P.S. The patient was able to go to work the next day.