



## AAC Publications

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### **Fall on Snow – Inexperience, Inadequate Equipment**

Oregon, Mt. Hood, South Side

**On May 28 a roped party of three climbers was descending the Pearly Gates at approximately 8:30 a.m. when one climber fell, pulling the others into an uncontrolled fall. No anchors or running protection were being used at the time of the fall.**

The top climber (male, 50), who was the leader of the party, had wrapped excess rope around his body in a Kiwi coil configuration but had failed to tie off the working end of the rope at his harness. During the fall, the leader became wedged in a crevasse (southeast of the bergschrund) creating a virtual “dead man” anchor for the rope team. Had the leader not become snagged in the crevasse, the entire rope team would have fallen another 400 to 500 feet down the mountain.

After the fall was arrested, the leader was wedged in the upper crevasse, complaining of pain and unable to extract himself. Climber 2 (female, 48) lost a boot and crampon but reported that she was okay (she was later found to have a clavicle fracture), and Climber 3 (female, 48) was caught on the lip of a lower crevasse with an apparent head injury. All three came to a stop on a 50° slope and were unable to move.

A Portland Mountain Rescue (PMR) rescuer who had just begun descending the mountain was able to respond immediately, initiating a call for additional resources and coordinating a response with two mountain guides who volunteered to assist. Communication with the fallen climbers was difficult, as only two of the three climbers spoke any English and this was minimal.

One guide worked to secure the team’s rope with a solid anchor to support the other climbers, extract the leader from the crevasse, and assess and treat his injuries. The second guide assisted climber 2, who did not feel confident unclipping from the rope system. Her missing boot and crampon were recovered by other climbers and returned to her. The PMR rescue leader attended to Climber 3, who was disoriented with a possible head injury. When assessing Climber 3, the rescuer identified that she was clipped into the rope with a non-locking carabiner and her harness was improperly buckled. Had the carabiner or harness failed, this climber could have fallen an additional 400 feet or more.

Rockfall and falling ice were assessed to be an immediate threat to life, thus the patients had to be moved out of the hazard zone as safely and expeditiously as possible. Climber 2 was lowered first. A solid anchor was rigged above her and offset from the edge of the crevasse below her, allowing the patient to be pendulumed around the crevasse and then lowered down the headwall and out of danger. Climber 3 was lowered on the same system as Climber 2. The PMR rescue leader then returned to the apex of the Hogsback and found the assisting mountain guide attempting to lower Climber 1 down the Hogsback. This climber did not speak any English but was clearly very cold and in great pain from apparent back and shoulder injuries. Climber 1 was lowered another 25 to 50 feet to remove him from the highest risk of falling objects. At that point, a shelf was cut into the slope to stabilize the patient.

Due to the severity of Climber 1’s injuries, an Army Medevac Blackhawk helicopter was requested to hoist him from the scene. He was flown from the Hogsback to a nearby hospital for treatment. Climbers 2 and 3 descended the mountain with rescuers. The assistance of the two mountain guides, as well as many other climbers who donated personal climbing gear and clothing, made a big difference in the rescue. All should be commended for their time and generosity.

## **ANALYSIS**

These climbers clearly lacked the expertise and experience for this route. In addition to the unsafe use of a rope and harness described above, witnesses reported that their technique while descending was poor. The climbers did not carry adequate gear to stabilize and protect each other from the elements if an accident occurred, requiring other climbers to donate clothing and gear to support them during the rescue. One climber had medical conditions requiring them to take prescription medications, which they had reportedly not taken within the last 24 hours. They were uncertain of the name of the medication or dose, further complicating the rescue.

The lack of English made it challenging for rescuers to assess and coordinate the rescue. PMR asked the sheriff to find a translator, and they located a tourist at Timberline Lodge who had a relative in New York who was able to assist. A teleconference using speakerphone was then used to interview the patient. This revealed important medical information, making the effort to locate a translator well worthwhile.

Lastly, this is a good illustration of when moving a trauma patient may be necessary. Though all patients had significant injuries, rocks falling by the patients were life threatening, so the decision to move the patients out of the hazard zone was appropriate. The patients were moved as little as possible and only to the extent necessary to remove them from the hazard zone. (Source: Steve Rollins, Portland Mountain Rescue.)

## Images



Position of three climbers after a fall in the Pearly Gates area. All three had to be rescued, and one required a helicopter evacuation.

## Article Details

Author	Steve Rollins, Portland Mountain Rescue
Publication	ANAM
Volume	11
Issue	72
Page	76
Copyright Date	2019
Article Type	Accident reports