

Fall From Summit Pinnacle

California, Mt. Shasta

On June 22, shortly after noon, a 44-year-old man fell off the summit pinnacle of Mt. Shasta and sustained multiple injuries. Shasta Mountain Guides owner/operator Chris Carr and local physician Dr. Sean Malee were on the scene and handled patient care. Dr. Malee's report follows.

As the climb doc for the Breast Cancer Fund Climb Against the Odds, I was waiting on the summit for the last rope team of our group, led by Shasta Mountain Guides. Senior guide Rich Meyer observed an independent climber fall off the south side of the summit pinnacle. He fell approximately 25 feet vertically over rime-covered rock, then tumbled another 100 feet down firm, icy snow, coming to a rest on the summit plateau.

I descended on skis to reach the climber, who was one of several leaders of a large group of Boy Scouts that had ascended the east side of Mt. Shasta on a multi-day climb. I immediately made an assessment. The patient was complaining of a broken left arm and had no memory of the events after summiting. His head was covered with abrasions and blood, with a small laceration over his left eye. He also complained of back pain on his right side.

I dug out a level area and moved the patient to a stable position. Using emergency Mylar blankets and a bivy sack, as well as scavenged garments from other climbers, we insulated him from the snow to prevent hypothermia. Over the three-hour rescue we were blessed with warm sunshine, light winds, and ambient temperatures of around 35° to 40°F. Lead climbing ranger Nick Meyers eventually notified me that California Highway Patrol (CHP) helicopter H-14 was on the way. During the three hours we waited, the injured climber remained alert and oriented, with good vitals and warm extremities.

Near the limits of the CHP helicopter's altitude capabilities, the pilot made a heroic, full-power landing on the south side of the summit plateau, at approximately 13,800 feet, at 3 p.m. The rescuers carried the patient by his clothing and moved him into the helicopter behind the pilot's seat as quickly as possible. The pilot was able to lift off and descend directly to the hospital for definitive care. The patient's injuries included multiple spinal fractures, distal left forearm fracture, multiple rib fractures, pneumothorax, a traumatic liver injury, and abrasions to the head. Last word was that he was in stable condition and expected to make a good recovery.

ANALYSIS

I attributed the fall to fatigue, inexperience, and a lack of focus, given the exposed position he was in. (More concerning was the lack of preparation of the patient's entire group, given that the majority of them were youths and few to none were wearing helmets or carrying packs, many were clad all in cotton, and few had any spare layers of insulation.) Without the help of the experienced mountain guide who happened to be on scene and the pilot's "dicey" landing, the climber likely would have not survived the ordeal. (Sources: Dr. Sean Malee, Mt. Shasta and Castle Crags Wilderness Climbing Ranger Report 2016.)

Images

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