



- < Make sure you have a **COVID-19 MEDEVAC SoP** in place
- < Ensure the SoP reflects the need for any **specific permissions** from Government Ministries / Agencies (e.g. Health, Foreign Affairs, Aviation) and identify and confirm optimum route to obtain these
- < **Involve others** in developing / confirming / updating it to incorporate lessons as needed
- < Ensure the **RC is aware of and in agreement with the SoP**





- < Take time to reach out to those who may be involved in a MEDEVAC as a way of making initial contact. A **quick introduction during a calm period** can be a nice way to build a relationship which may need to work under stress (and check contact details are correct)
- < Keep **key contact details** easily to hand. Store telephone numbers in your phone under a dedicated group
- < **Advise** the key group if the Covid-19 Coordinator is away (e.g. AL) and clearly identify and provide contact details for alternate Covid-19 Coordinator in advance
- < Create **dedicated email groups**, to make information sharing easier
- < A dedicated group on a **mobile messaging** platform (e.g. Signal, Telegram, or WhatsApp-although this is less secure) is also a good way to maintain rapid practical communication*
- < Have someone available who can **speak the local language** to assist with any outreach that may be necessary to facilitate the MEDEVAC
- < details are correct (a) (6) - (e) 9 (t) - 1815 BDC (06 in) / (6) - 2332 P reW* n. 21. 20 (y) -



- < Consider early whether the **assistance of Security** colleagues will be needed to help facilitate the MEDEVAC, and engage them as needed
- < Ensure **early engagement of family of patient** by Referring Entity. Information should be shared with them, and where available **counselling / psycho-social support** made available
- < Consider using open-source **flight tracking** to help ensure that ground transportation links up well with aircraft arrival (e.g. Flightaware.com). Note that if used, this should complement not replace engagement with Medevac Cell.
- < Consider having **umbrellas** available during transportation of patient to departure flight, in case infrastructure limitations create need to shield patient from sun/rain
- < Conduct an **inclusive and constructive Lessons Learned** after every MEDEVAC. Capture any key lessons, share them and as needed incorporate them in your SoP.



- < Don't hesitate to **alert the MCU** at an early stage
- < If you have any doubts about the process reach out and **ask the MCU**. Better to ask early and get it right than guess and cause a potential delay to the MEDEVAC.
- < Get **patient measurements** early in the process
(height, weight, shoulder to shoulder, hip to hip, elbow to elbow)
- < Patients should be encouraged to **prepare a small go-bag** with personal essentials in advance (e.g. travel docs, medication, hygiene items, mobile phone + charger, clothing)
- < Make the [WHO epishuttle video](#) available to patient and their family **at an early stage**
- < Ensure the **treating physician is aware in advance of what the MEDEVAC will entail** and what may be required from them to facilitate it. Enable them to **clearly inform patient**