

ROLE: Medic

The Medic has the overall responsibility for onboard first aid readiness, basic medical support, and preventive health measures for the crew, throughout the stage of the voyage. The Medic is not a doctor; when there is doubt, significant symptoms, or serious injury, the Medic ensures early contact with medical services ashore.

Responsibilities

The Medic is responsible for minimizing illness and injury through prevention, hygiene routines, and clear guidance to the crew, and for providing immediate first aid when incidents occur.

As The Medic you have the following responsibilities:

- Maintain a low threshold for contacting a doctor ashore when symptoms or injuries exceed onboard capability
- Ensure the crew is informed about hygiene routines and infection prevention on board (handwashing, food safety, sanitation)
- Coordinate closely with the Stage Manager regarding access to hygiene facilities along the route (showers, toilets, sanitation)
- Ensure a proper medical handover from the previous stage Medic upon boarding
- Check and verify the contents and readiness of the first aid kit and other medical supplies at the start of the stage
- Ensure crew health forms are available when needed and remind crew what to bring ashore if medical attention is required (European Health Insurance Card, travel insurance with insurer phone number)
- Provide first aid and basic wound care according to best practice, including follow-up where relevant
- Establish and communicate routines for safe food handling due to exposure to unfamiliar bacteria ashore (thorough cooking, washing/peeling vegetables)
- Reinforce that hand sanitizer is not a replacement for proper handwashing when hands are dirty
- Assess and manage common injuries and illnesses until the crew member can be seen by medical personnel ashore
- Lead immediate response for serious incidents (unconsciousness, suspected head injury, major burns, suspected fractures, cardiac arrest) and coordinate evacuation/medical contact as required
- Support onboard infection control measures during outbreaks or suspected contagious illness (e.g., COVID-19), including monitoring and escalation criteria

Requirements and skills to fulfill the role

The following requirements defines the role:

- Relevant medical competence (nurse or equivalent first aid/medical experience appropriate for the voyage)
- Strong situational awareness and ability to prioritize under pressure
- Clear communication skills – able to give simple, direct instructions to a crew under stress
- Calm and structured approach in emergencies
- Practical mindset and ability to improvise with available equipment (e.g., splinting)
- Willingness to escalate early and involve medical professionals ashore when needed

It is recommended The Medic has refreshed key elements from first aid training prior to boarding. A structured handover with the previous stage Medic is required before the stage begins, including verification of medical supplies and any relevant notes for continuity (handled appropriately).

Expected deliverables

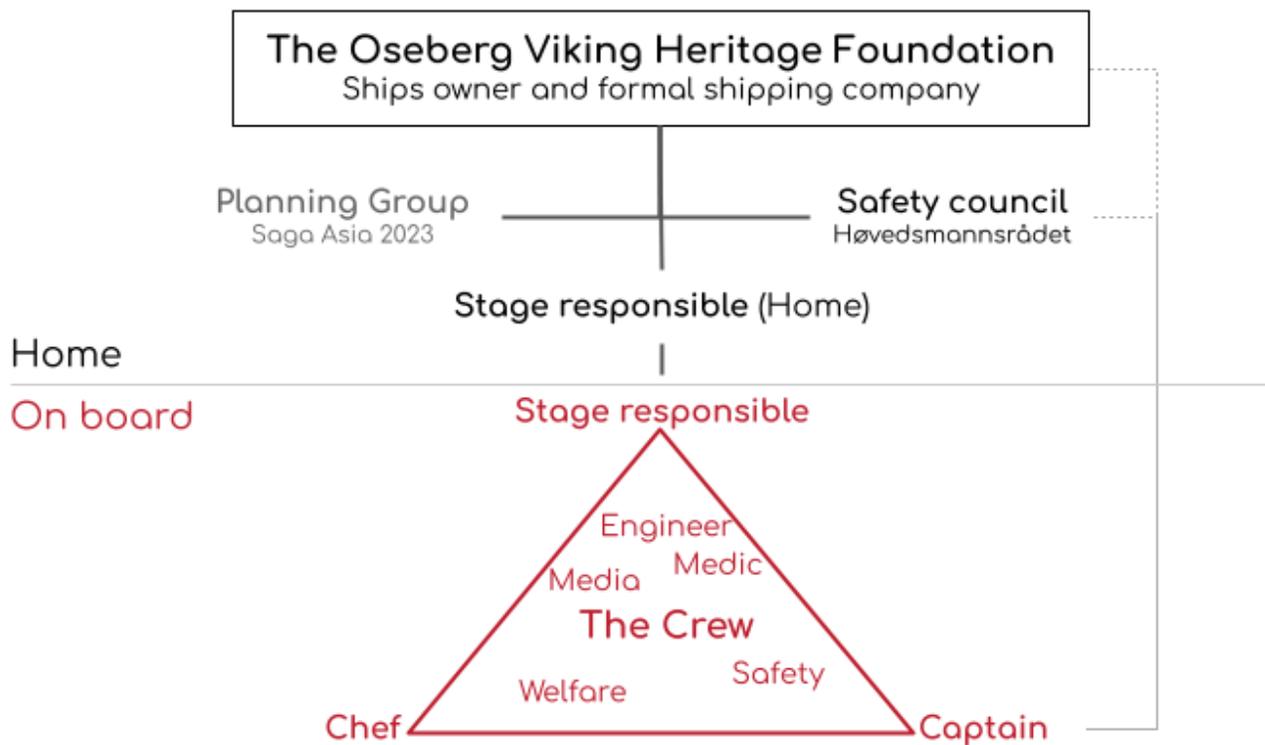
- A medical handover completed at the start of the stage (and prepared for handover to next stage), including: first aid kit status, missing items, and continuity notes
- Visible and understood hygiene routines on board (handwashing expectations, sanitation practices, food safety practices)
- Immediate first aid response when incidents occur, with appropriate escalation ashore when indicated
- Clear crew guidance during incidents: what is happening, what actions to take, and what will happen next
- A short incident summary to the expedition leader when relevant (what happened, actions taken, whether external medical contact was made, follow-up needs)

Organizational setup

See illustration below.

On board the ship the Captain closely collaborates with the Stage Responsible and the Chef as a part of the daily routines.

Organization when on the voyage



Operation guidance

The following procedures are The Medic baseline actions. Adapt as needed based on situation, resources, and medical advice from shore.

Wound care – general

- Always wash hands before treatment
- Clean wounds with 0.9% saline (NaCl) and sterile gauze/swabs if needed
- Apply a sterile dressing
- Clean wounds: change dressing every other day
- Signs of infection (pus/odor): patient should be examined by a doctor ashore for antibiotics; change dressing daily until assessed

Superficial cuts

- Clean with saline (NaCl)
- Apply Steri-Strips (“paper stitches”): attach one side, approximate the wound edges, then attach the other side
- Leave a few millimeters between strips to allow inspection and airflow
- Cover with sterile dressing
- Clean wound: redress every other day; strips may remain in place
- Inflamed/infected wound: remove strips when cleaning; change dressing daily
- Deep cuts: rinse with saline, apply sterile dressing, and ensure the patient goes ashore for suturing within 6 hours

Burns

- Cool the area immediately (bucket of seawater is acceptable; ice pack if available)
- Rinse with saline
- Apply an ointment-impregnated dressing (paraffin gauze) underneath and a sterile compress on top
- Clean burn: change every other day
- Major burns or suspected infection: must be examined by a doctor ashore

Fractures

- Suspected arm fracture: immobilize in a sling before seeking medical care
- Suspected leg fracture: splint using available rigid items (e.g., wooden utensils) and gaffer tape
- Priority: keep the fracture stable and the patient safe until medical help is reached

Head injury

- Head injuries should be examined by a doctor ashore
- Suspected concussion with nausea/vomiting: keep the patient awake until medical help is available

COVID-19 / contagious illness

- Frequent handwashing and cough etiquette (cough into elbow)
- Consider disposable eating utensils when dishwashing constraints reduce hygiene (e.g., low water temperature)
- Consider rapid testing if available
- Monitor temperature and general condition
- If fever exceeds 38.5°C: consult a doctor
- If the patient needs to see a doctor ashore: patient should wear a face mask

Unconscious person – breathing

- Place in the recovery position and monitor continuously until help arrives

Unconscious person – not breathing / no pulse

- Start CPR immediately
- Use two teams:
 - Team 1: CPR with 30 compressions and 2 rescue breaths; ensure visible chest rise
 - Team 2: prepare and operate the AED/defibrillator; follow device instructions
- Ensure nobody touches the patient during shock delivery
- Resume compressions immediately after the shock
- Rotate teams frequently; compressions are physically demanding
- Continue until medical help arrives or the patient recovers signs of life