

UNITED STATES OF AMERICA

NATIONAL TRANSPORTATION SAFETY BOARD

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Investigation of:

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AIR METHODS CORPORATION

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LIFENET HELICOPTER ACCIDENT

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Docket No.: CEN11FA599

August 26, 2011

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NEAR MOSBY, MISSOURI

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Interview of: LORA GIRSCH

Via Telephone

Monday,

October 10, 2011

The above-captioned matter convened, pursuant to notice.

BEFORE:

MALCOLM BRENNER, Ph.D.

Senior Human Performance Investigator

APPEARANCES:

JIM SILLIMAN, Investigator-in-Charge  
National Transportation Safety Board  
31 West 775 North Avenue  
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MALCOLM BRENNER, Ph.D.  
Senior Human Performance Investigator  
National Transportation Safety Board  
490 L'Enfant Plaza East, SW  
Washington, D.C. 20594  
(202) 314-6000

CRYSTAL  
Hamilton County Community Hospital  
2600 Miller Street  
PO Box 428  
Bethany, MO 64424

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I N T E R V I E W

## INTERVIEW OF LORA GIRSCH

1  
2  
3 MS. GIRSCH: I was the ward clerk that night. They had  
4 me page the helicopter out. I saw the crew land, come in, and  
5 that's about my function. I was there when they landed and when  
6 they took off.

7 BY DR. BRENNER:

8 Q. Um-hum. Okay. And can you describe -- had you ever  
9 dealt with this crew before?

10 A. Yes. I've seen them several times before.

11 Q. When was the last time you saw them?

12 A. Oh, my. They are not our -- they're not usually the  
13 crew that we call. We utilize LifeFlight more than LifeNet.

14 Q. Um-hum.

15 A. So, I can't say for sure, but 3 or 4 months, probably.

16 Q. Okay. Did you recognize the pilot?

17 A. No, I did not recognize the pilot.

18 Q. How about the medical crew?

19 A. I recognized Randy.

20 Q. Um-hum.

21 A. Because he's been a medic that's come to our facility  
22 before.

23 Q. Okay. How was it that you used Air Methods this time  
24 instead of the LifeFlight?

25 A. We paged LifeFlight out. They were just -- they were

1 already on a call. It would've been longer than the physician  
2 wanted, so we called LifeNet.

3 Q. Tell me what happened there. How was the landing, and  
4 what happened from then on?

5 A. From my observation, they landed like normal. I took  
6 the cart out to the helicopter like the ward clerk is supposed to  
7 do, and they loaded their gear on the cart and they walked in.  
8 They were very upbeat, very friendly, just like normal.

9 Q. Did you talk to the pilot, interact with him?

10 A. I talked with the medics.

11 Q. Um-hum. Okay.

12 A. The pilot stayed at the chopper and the medics came in  
13 the hospital.

14 Q. Did you observe the pilot while he was on the ground?

15 A. Not really, sir. I saw him out at the chopper.

16 Q. Um-hum. Did the pilot ever come out of the chopper?

17 A. Yes, he did.

18 Q. When was that? What'd he do?

19 A. We observed him standing outside the chopper. When we  
20 got back in the hospital, I looked back out the door and he was  
21 out and had his helmet off and was standing at the chopper.

22 Q. Um-hum. About how long was that after -- even stuff  
23 that seems very routine to you is very helpful for us. So, thank  
24 you very much.

25 How long -- you say you observed him outside the

1 chopper. How long after landing was that?

2 A. Oh, not very long; probably 3, 4 minutes.

3 Q. All right. And what was he doing? He was standing by  
4 the chopper?

5 A. Yeah. He was taking off his headgear.

6 Q. Was he talking on a cellphone?

7 A. I'm sorry, I didn't observe that, no. I don't know.

8 Q. Okay. And then when did you next observe the pilot?

9 A. When we were getting ready to load the patient up and  
10 when they were taking off.

11 Q. About how long was that?

12 A. Oh, my. They came in -- maybe 15, 20 minutes.

13 Q. And as far as the turnaround, how would you characterize  
14 that?

15 A. I'm sorry, sir. I guess I don't know what you mean.

16 Q. How long (indiscernible). Is that a normal turnaround  
17 time or is that fast or is that slow?

18 A. It's about normal. Once they get in, get their report,  
19 get their paperwork.

20 Q. Um-hum. How was the patient?

21 A. I'm sorry?

22 Q. How was the patient?

23 A. I'm -- honestly I don't know and I can't say because I'm  
24 just a ward clerk and I didn't really have anything to do with the  
25 patient.

1 Q. Oh, good. So, then you say that as they were getting  
2 ready to load the patient and take off, you saw the pilot again.  
3 What was he doing there?

4 A. Putting his headgear back on, getting ready to get in  
5 the seat.

6 Q. Um-hum. What was his mood like, any idea?

7 A. That I don't know. He was very friendly; he waved.

8 Q. Who did he wave -- what do you mean waved? He waved  
9 good-bye, or?

10 A. There were some people standing at the window watching  
11 them and he -- they always turn around and wave at the observers.

12 Q. Oh, all right. Once they brought the patient, and then  
13 I guess they loaded the patient and took off, during that time,  
14 was he talking to the medical crew?

15 A. The pilot?

16 Q. Yes, um-hum.

17 A. I'm not sure. I did not go out of the building after  
18 they took the patient out.

19 Q. I see.

20 A. They were all standing there together for a few seconds.

21 Q. Okay. And then, how long from that point until the  
22 takeoff, they actually took off?

23 A. Oh, probably 4 or 5 minutes after they loaded the  
24 patient.

25 Q. Okay. So once they -- I see. So, the patient comes

1 out, they load they patient, and they were talking or they were  
2 interacting at least then.

3 A. Um-hum.

4 Q. They waved to the observers at some point during this,  
5 and then they loaded up and took off. Is that right?

6 A. That's pretty much how it went.

7 Q. Okay. Was there anything that seemed unusual in this  
8 compared to normal operations?

9 A. Not in my observations. It just looked like a normal  
10 pickup.

11 DR. BRENNER: Okay. Jim, did you have any questions?

12 MR. SILLIMAN: Let me see. I'm just trying to think  
13 here.

14 BY MR. SILLIMAN:

15 Q. So, the pilot stayed out at the helicopter, and then the  
16 flight paramedic and the flight nurse came in to get the patient  
17 and so forth. Did you talk with either of the -- either the  
18 flight paramedic or the flight nurse?

19 A. Yes. I talked with Randy.

20 Q. Do you remember what you discussed? I don't need  
21 details about patients or things like that, but just the general  
22 -- what generally did you talk about?

23 A. He was just asking me how long I had left to work, and  
24 he was laughing because I had quite a while to work and his shift  
25 was almost over, he said. And he was just pretty much in a joking



1 mood, very upbeat and very joking. He wondered why I didn't have  
2 any coffee made.

3 Q. Okay. Is that -- I guess you knew -- and his name was  
4 Randy, and I guess he was pretty well known in the flight  
5 nurse/flight paramedic industry, from what I understand, and --

6 A. Yes, he was.

7 Q. And is that -- was that his general demeanor typically,  
8 and --

9 A. Oh, yes.

10 Q. Yeah?

11 A. Yes, he was always very friendly, very jokey.

12 Q. Okay.

13 A. Very friendly with everybody.

14 Q. Okay. Did -- so, that didn't appear to be -- that  
15 appeared to be very normal, then, for him?

16 A. Oh, yes, very normal.

17 Q. Okay. And did he mention anything about the flight  
18 itself or the pilot or this particular flight that was maybe more  
19 abnormal than any other flight?

20 A. No, not a word. He never said a word about the flight.  
21 Not to me, anyway.

22 Q. Yeah. And the flight paramedic, did you have much time  
23 to talk with him at all?

24 A. No. I just said hi and how are you, and that was about  
25 it to him. I don't really know the others very well.

1 Q. Okay. And how long did you think -- do you think you  
2 were talking with Randy about these general things and just  
3 talking stories, so to speak?

4 A. All the way in from the chopper through the ambulance  
5 bay and into the ER; probably 3 or 4 minutes, maybe 5 minutes.

6 Q. Okay. And then when he gets the -- when he got to the  
7 patient and they were loading, you know, getting the patient ready  
8 for transfer and so forth, is that something that you observed or  
9 is that where you kind of drop out of the -- or are you actively  
10 involved with that as well?

11 A. Not usually. But where the room was situated, I was  
12 sitting at the desk and I could see them loading and getting the  
13 patient ready.

14 Q. Okay. So, I suppose at that time, then, his focus  
15 really was getting on the -- you know, toward the patient and  
16 getting the patient ready, then, for transfer?

17 A. Exactly. Once he walked in the room, that's all his  
18 focus was on was the patient.

19 Q. And I suppose that's true for the flight paramedic as  
20 well?

21 A. Yes. Both of them were in there.

22 Q. Okay. During that time, were they just really focused  
23 on the patient or did they -- do you remember them saying anything  
24 about the flight at that point or anything?

25 A. No, sir, they didn't. They were in the room with the

1 patient and trying to get her situated to get her out of there.

2 Q. Okay. And then when they brought the patient out of the  
3 emergency room or the ICU, I'm not exactly -- is it the emergency  
4 room or some --

5 A. It's the emergency room.

6 Q. Okay. Once they bring him out of the emergency room,  
7 did you have further opportunity to talk to the flight nurse or  
8 the flight paramedic or were they focused now on the patient or  
9 were they able to talk as well?

10 A. Yes. When they were leaving, they told us to have a  
11 good day. We told them to have a safe flight and they walked out  
12 the doors.

13 Q. Okay. And so no time during that whole time did they  
14 show any apprehension or concern or talk about the actual  
15 helicopter or the flight, then, it sounds like?

16 A. None. Not once that I heard.

17 Q. Okay. And you said that LifeFlight was your typical EMS  
18 helicopter that would come typically there. Is that because  
19 they're located closer to -- is it Bayfield, or Bayview, or --

20 A. Bethany.

21 Q. Bethany, I'm sorry. Bethany, or is it for some other  
22 reason?

23 A. They are closer. They're based out of Trenton.  
24 LifeNet's based out of St. Joe.

25 Q. Okay.

1 MR. SILLIMAN: Malcolm, I can't think of anything else.

2 DR. BRENNER: Well, I think that really answers a lot of  
3 questions.

4 BY DR. BRENNER:

5 Q. Is your position normally inside the hospital? You say  
6 you're at a desk normally?

7 A. Yes. I'm a ward clerk.

8 Q. I see. And so it just happened you went out to the  
9 helicopter to deliver some things in the beginning, but that was  
10 -- normally, you wouldn't necessarily do that?

11 A. I usually do that. We have a gurney that we take out to  
12 the choppers so they can bring their equipment in on it so they  
13 don't have to carry everything.

14 Q. Oh, sure, good idea. Okay. I don't think there are --  
15 is there anything else we haven't asked you that might help us in  
16 the investigation?

17 A. I'm not sure. I was going to ask you the same question,  
18 if you had any more questions for me.

19 Q. No. I think you've been real thorough here. I realize  
20 it seems very routine, but this is very informative for us.

21 BY MR. SILLIMAN:

22 Q. Well, I do -- a question that you raise now, Lora, is  
23 when you brought the gurney out there, are you with other people  
24 or did you bring that yourself, or --

25 A. Brought that myself.

1 Q. Okay. And by that time, I'm just kind of assuming that  
2 they shut the helicopter down before you go out there, and so they  
3 secure the helicopter before you bring the gurney out?

4 A. Yes. We have a line pretty much that we know not to  
5 cross before, you know, when the props are shutting down and  
6 stuff.

7 Q. Okay. And the flight paramedic and flight nurse, they  
8 had their helmets on when you first got there, then, and --

9 A. Yes, they did.

10 Q. Okay. And they -- I suppose they take their helmets off  
11 before they go into the hospital with the gurney in it and so  
12 forth?

13 A. Yes, they did.

14 Q. Okay. Yeah, that's all. I just wanted to clarify those  
15 details in my head. Well, thank you.

16 BY DR. BRENNER:

17 Q. Is there anyone -- routinely, is there anyone who's out  
18 there with the pilot? If the pilot stays with the chopper, is  
19 there anyone out there with the chopper as well that would observe  
20 him or not?

21 A. Not usually. It's just the crew. And if the medics  
22 come in the hospital. But sometimes the pilots do come in if  
23 they're having a longer takeoff time.

24 CRYSTAL: This is Crystal. Can I say something about  
25 that?

1 MR. SILLIMAN: Sure.

2 CRYSTAL: On a 3 to 11 shift, we used to have  
3 maintenance come in and help, but we're cutting costs, so  
4 maintenance don't come in anymore when we ever get a chopper in.  
5 Generally our staff, like the ward clerk, you know, make sure the  
6 lights are turned on, make sure the police is called, and that  
7 kind of stuff. During the day we would have maintenance and  
8 they'd probably be out there, but during like 3 to 11 shift, it's  
9 just our nursing staff that handles everything.

10 MR. SILLIMAN: Okay.

11 DR. BRENNER: I see.

12 MR. SILLIMAN: Great. Malcolm, I can't think of  
13 anything else at this point.

14 DR. BRENNER: I don't as well, either.

15 Yeah, well, thank you very much, Lori. We appreciate  
16 your being available and helping us out.

17 MS. GIRSCH: No problem, thank you.

18 MR. SILLIMAN: Yeah, this is very helpful. We sure  
19 appreciate your, you know, your help in this matter.

20 MS. GIRSCH: No problem.

21 CRYSTAL: Okay. We'll go get Christian.

22 MR. SILLIMAN: Okay. Well, thanks very much.

23 CRYSTAL: Be right back.

24 MR. SILLIMAN: All right.

25 (Whereupon, the interview was concluded.)

CERTIFICATE

This is to certify that the attached proceeding before the

NATIONAL TRANSPORTATION SAFETY BOARD

IN THE MATTER OF:           AIR METHODS CORPORATION  
                                  LIFENET HELICOPTER ACCIDENT  
                                  AUGUST 26, 2011  
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PLACE:                      Via Telephone

DATE:                        October 10, 2011

was held according to the record, and that this is the original,  
complete, true and accurate transcript which has been compared to  
the recording.

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Joseph M. Parent  
Transcriber