



SEP & AVH
RECURRENT
E-STUDY GUIDE

SEMESTER B
MARCH 2020 TO
AUGUST 2020



Document Information

Document Title	SEP Recurrent E-Study Guide Semester B. March 2020 to August 2020
Created by	Janet Ainsworth Janine Matier
Title	Manager Training Programs (Cabin Safety) Manager Training Programs (Aviation Health)
Date	01 February 2020
Approved by	Gary Watson
Title	Manager Cabin Crew Training
Contact (Phone)	02-511 3333
e-mail address	SEPtrainers@etihad.ae aviationhealth@etihad.ae

Revision	0-20
Date	01 March 2020

RECURRENT TRAINING

This Study Guide has been designed by the Safety Training Department to support you in the preparation for your Recurrent Training for Semester B which will run from March 2019 to August 2019. The completion of this Study Guide is not mandatory; however, we strongly recommend you use this resource as an aid for your revision.

The Study Guide is sectioned as per the recurrent exam structure and each question has the SEPM (REV 21) reference for you to refer to.

By completing this, you will not only familiarize yourself with the content of the SEPM, you will also be aware of the structure and working of exam style questions used in the SEP Training Department.

As per previous Recurrent's, all examinations will be conducted electronically via iTrain. Please ensure your password is current to avoid disruption in re-setting it on the day.

If you have any questions at any time, please do not hesitate to contact the training department in person or by email at:

- SEP Team - SEPtrainers@etihad.ae
- AVH Team - aviationhealth@etihad.ae

MANUAL HANDLING

As a reminder, you are required to complete the Manual Handling CBT assigned to you on iTrain. (<https://itrain.etihad.ae>) **prior** to attending your recurrent training.

Failure to do so will result in an email being sent to your Performance Manager to follow up.

You will **not** be given an opportunity to complete during the recurrent day.

GENERAL SAFETY

SAFETY EQUIPMENT

1. What precautions must you take when using a fire extinguisher, containing the Halon agent?

keep a safe distance from the fire(6 ft), aim at the base of the fire, spray the agent in sweeping motion on open fire or in short bursts on contained fire, avoid inhaling the agent

SEPM 6.2.1

2. What is the pre-flight check of the HALON fire extinguisher?

SEPM 6.2.1.1

correct number of units, secured in the correct stowage, in good condition, red plastic disc is present

3. What is the pre-flight check of the KIDDE fire extinguisher?

SEPM 6.2.1.2

correct number of units, secured in the correct stowage, in good condition, pressure gauge pointer in green band, ring pin is in place through the handle and the lever, plastic seal is intact

4. What is the pre-flight check of the Air Total fire extinguisher?

SEPM 6.2.1.3

correct number of units, secured in the correct stowage, in good condition, pressure gauge pointer in green band, seal wire of the safeguard lever is intact.

5. What is the pre-flight check of the Halon Free fire extinguisher?

SEPM 6.2.1.4

correct number of units, secured in the correct stowage, in good condition, pressure gauge pointer in green band, ring pin is in place through the handle and the lever, red seal is intact

6. What is the pre-flight check of the AEROSPACE Protective Breathing Equipment?

SEPM 6.2.2.1

correct number of units, secured in the correct stowage, in good condition, ensure foil pouch is in place

7. How would you operate the Aerospace PBE?

SEPM 6.2.2.1

firmly grasp red access handle on the stowage box, pull to break seal and open stowage box, remove and discard cover, pull sealed bag from the stowage box, hold sealed bag firmly with one hand and use other hand to tear open; shake hood to loosen and open; with visor facing down slide both hands inside the neck seal opening, bend head forward then guide neck seal over the top of head and down over the face, rest the PBE hood on head

8. What is the pre-flight check of the Air Liquide Protective Breathing Equipment? (A380)

SEPM 6.2.2.2

correct number of units, secured in the correct stowage, in good condition, status indicator is green
green seal is intact

9. What is the indication when the Air Liquide Protective Breathing Equipment (PBE) needs to be replaced? (A380)

SEPM 6.2.2.2

the sound of oxygen flow stops

10. What is the purpose of the protective gloves

SEPM 6.2.4

provide crew members with protection against heat and fire, when handling hot surfaces and dealing with a fire emergency on board

11. what is the pre-flight check of the Dual and Single Outlet Portable Oxygen (PO) sets?

SEPM 6.3.1/2

correct number of units, secured in the correct stowage, in good condition, minimum acceptable pressure 1500 PSI, mask is available with the bottle and connected to the HI outlet, carrying strap is present

12. What will happen to the flow of oxygen, if the mask bayonet is not correctly connected to the outlet?

SEPM 6.3.1/2

oxygen will not flow

13. What is the pre-flight check of the ADT 406S Emergency Locator Transmitter (ELT)?

SEPM 6.4.1.1

correct number of units, secured in the correct stowage, in good condition, toggle switch in armed position,

14. How would you operate the ELT ADT406S after a ground and ditching evacuation?

SEPM 6.4.1.1

on ground: pull toggle switch up to ON position- transmission will start automatically, check red LED illuminates steady and confirm aural indication, place the ELT vertical in a high area free from obstruction

in water: check toggle switch is in ARMED position, attach ELT to the slide raft using the lanyard place the ELT in the water, check red LED light illuminates steady and confirm aural indication

15. How would you operate the ELT R406 after a ground evacuation?

SEPM 6.4.1.2

break the water soluble tape to release the antenna, fill the plastic bag with any thin non- alcoholic liquid; add the electrolyte salt solution to the liquid to enhance satellite transmission; insert ELT in the plastic bag to ensure the liquid covers the two holes, place ELT upright in a high area, free from obstructions

16. How would you operate the ELT R406S in a ditching situation?

SEPM 6.4.1.3

Break water soluble tape holding the lanyard, attach ELT to the slide raft using the lanyard, ensure the four-position switch is set to ARM, place the ELT in water

17. How would you adapt an adult lifejacket on a child?

SEPM 4.4.2.2

open and inflate the LJ away from pax view, pull red inflation handle downwards sharply to inflate LJ. If inflation fails blow through the red oral inflation valve, place the LJ over the child's head, bring the strap around the waist and click buckle to secure; adjust strap by pulling end of strap away from body

18. When would you distribute the Infant Life Jacket (ILJ) and ILJ instruction card?

SEPM 6.4.2.3.1

during boarding

19. What is the pre-flight check of the AIRLITE flashlight?

SEPM 6.4.4.2

correct number of units, secured in the correct stowage, in good condition, tamper shield is intact press the Push-to-test button- green LED illuminates

20. What is the pre-flight check of the Polar Survival Equipment?

SEPM 6.4.3

correct number of units, secured in the correct stowage, in good condition, plastic seal intact

21. When will crew distribute a Polar Survival Blanket (PSB)?

SEPM 6.4.3.3

in a planned emergency, during cabin preparation

22. Where can you find the Reverse Osmosis Water Pump?

SEPM 6.4.6.1/2

ESK

STANDARD OPERATING PROCEDURES

1. During refueling, which exits will be designated as the Primary and Secondary Exits? **SEPM 7.2.1.1**
where one boarding bridge or stairs is attached forward to the wing it will be designated as Primary exit.
The aft most pax door on the left hand side is designated as the Secondary exit

2. What are your actions if you detect fuel vapour in the cabin during refueling? **SEPM 7.2.1.1**
inform the commander

3. Up to what age can a child/infant use an approved car seat in conjunction with an aircraft seat provided that the seat has been purchased? **SEPM 7.2.3.1.1.2**
36 months

4. What are the cabin crew responsibilities when passengers are using a car seat? **SEPM 7.2.3.1.1.4**

The parent has properly secured the car seat using the aircraft seatbelt and that they remain secured during all phases of flight. The infant / child is secured and the harness strap releases with one push of the button. • The parents know how to release the infant / child from the car seat. The buckle of the aircraft seatbelt must be easily accessible for both opening and closing once fitted to the car seat. Parents are briefed regarding the "Fasten seatbelt" sign requirements. For installation of a car seat on passenger seat equipped with airbag seatbelt, cabin crew must ensure that when securing with aircraft seatbelt, an extension seatbelt is attached to de-activate the airbag facility. This will ensure there is no negative impact from the airbag

5. What does the Passenger classification code WCHC -STABLE stand for? **SEPM 7.2.3.1.3.2**
pax who has a permanent but stable disability and can assist in their own evacuation can be accepted without a safety assistant.

6. What does the Passenger classification code DPNA stand for? **SEPM 7.2.3.1.3.2**
disabled pax with intellectual or developmental disability, needing assistance

7. What is the role of the Safety Assistant? **SEPM 7.2.3.1.3.4**
to assist the pax with disability to exit the AC in case of an emergency evacuation, or to establish communication with cabin crew for the purposes of the required safety briefing.

8. What is the weight limit if a passenger is carrying a large item for which they have purchased a seat next to them? **SEPM 7.2.3.6**
75kg or 165 lbs

9. What live animals may be carried in the cabin? **SEPM 7.2.3.7**
falcons

10. Preferably, what is the total number of falcons allowed? **SEPM 7.2.3.7.1**
15

11. Why do you need a second operating crew member present at the door before normal door opening? SEPM 7.2.3.8.4
 position himself at the side of the door closest to the arming system, cross-check to ensure door is disarmed, place the back of their hand over the arming system to prevent the door from being re-armed. Confirm DOOR WARNING CHECK COMPLETED to the door operator.

12. What must the second operating crew member do after confirming 'Door Warning Check Completed' to the door operator? SEPM 7.2.3.8.4
 shall remain present at the door with the door operator and monitor the operation until the door is fully open

13. What must you do before closing a cabin door? SEPM 7.2.3.8.4
 ensure that ground equipment operator driver understands that the door is about to be closed and the equipment must remain in position during closing of the door, look out for any possible obstruction around the door area that may hinder the closure of the door or may cause damage to the door, check that the door seal and girt bar floor bracket is free from any debris that may obstruct the closure of door or arming-disarming of the slide/raft

14. What is 'Cabin Secure'? SEPM 7.3.2.5
 a term used from the Cabin Crew to the CM and from the CM to the flight crew to report that: all pax received a safety briefing/demo as and when required, the entire cabin including it's occupants, galleys and lav's are secured against stronger AC movements or acceleration; all CC are seated/secured in their assigned seat as and when required

15. Why is it important to conduct a silent review before take-off and landing? SEPM 7.3.2.6
 to ensure CC stay focused and mentally prepared for any situation that may occur, silent review is a basic element of preparation for emergencies

16. When will you adopt the semi-brace position? SEPM 7.3.2.7
 as soon as the flight crew makes the PA for cabin crew to be seated for departure or arrival

17. Who is given access to the flight deck and authorized to use a flight deck seat? SEPM 7.3.7.2
 group chief executive officer, chief operating officer, vice president flight operations, director of flight operations, head of fleet/ manager fleet flight op, GCAA inspectors in their official capacity, etihad GCAA licensed pilots and cabin crew, engineers, flight and ground dispatchers, synthetic flight instr and etihad aviation training multi pilot licensed instructors in uniform and on duty, load masters in uniform and on duty, etihad quality/aviation security auditors to conduct inflight audits, any other person as a "one off approval" authorized by the VPFO prior to travelling

18. During a flight, what procedures must be followed when a pilot needs to leave the flight deck?

SEPM 7.3.7.4

galley is clear of pax, curtain is closed, enter the appropriate code on the numeric keypad and wait for the cockpit door to be unlocked, enter the FD and lock the door behind, before leaving ensure that the FWD galley area is free of pax and the curtain is closed; ensure the cockpit door is firmly closed and locked

19. When is the 'Sterile Cockpit Policy' applied for take-off?
from engine start to top of climb

SEPM 7.3.8.2

20. When is the 'Sterile Cockpit Policy' applied for landing?
from TOD through to engine shut down

SEPM 7.3.8.2

21. When does the No Contact Period apply for take-off?
the application of take off power until the undercarriage is retracted

SEPM 7.3.8.3

22. When does the No Contact Period apply for landing?
from extension of the undercarriage prior to landing until the AC has vacated the runway

SEPM 7.3.8.3

23. Whilst conducting service on ground, what precautions should be observed?
if AC refueling is ongoing, service by hand, exists to be used for rapid deplaning or emergency evacuation, aisles and emergency exits are not obstructed, cabin and galleys are secured once advised by commander of imminent departure

SEPM 7.5.1

TURBULENCE

1. What are your actions when notified of an expected moderate/severe turbulence?
make PA(if no automatic PA), suspend service, secure cabin and galleys, stow baby bassinets, open and secure curtains/rope class dividers, take crew seat, report 'Cabin Secure'

SEPM 7.4.3

2. During cruise you hear the command "Cabin crew be seated" what is your first action?
secure self immediately in the best way possible, if in the aisle with a cart wedge it across the aisle, apply brakes and secure self, if possible make PA(if no automatic PA)

SEPM 7.4.3

3. What are your actions during expected light turbulence?
make PA(if no automatic PA), check seat belt compliance, report 'Cabin Secure', continue service as per Commander's brief

SEPM 7.4.3

4. How is 'cabin secure' passed during turbulence?
each CC shall pass the check to the galley operator for their assigned area

SEPM 7.4.3

5. What are your actions, if during turbulence, if the conditions become unsafe and the seatbelt sign is off? SEPM 7.4.4
CC should make PA's instructing pax to return to their seats and fasten seatbelts. the CM or any CC should request the Flight Crew to turn the fasten seatbelt sign on

ABNORMAL AND EMERGENCY PROCEDURES

1. What does the NITS briefing stand for? SEPM8.1.2
N- nature of the abnormal event of emergency situation

I- intention of the commander

T- time available before touch down

S- special instructions

2. What will you hear from the cockpit to alert you of a pilot incapacitation? SEPM 8.2.1
this is the captain, cabin manager to the cockpit immediately

3. Commit to memory the Pilot Incapacitation Drill SEPM 8.2.1
Pull- Pilot back

Fasten- Shoulder harness

Fold- Arms securely under harness

Move- Seat aft and recline

Lock- Shoulder harness

Pull- Legs away from controls

Administer- First aid

Assist- Other pilot

4. What is the crew brace position on a forward facing crew seat? SEPM 8.4.1
push back into the crew seat, seatbelt and shouder harnesses tightly fastened, centre buckle as low as possible, knees together, feet fully on the floor slightly apart behind the knees to stabilize the body; the body is pressed back into the seat and the head bent forward to prevent D whiplash effect

5. The main gear collapses on take-off resulting in violent aircraft movement, what will you shout to the passengers? SEPM 8.5.1

'Brace! Brace!'

6. Commit to memory the Planned Emergency Preparation Drill

SEPM 8.7

RECEIVE- NITS BRIEFING

DEMONSTRATE- EXIT, BRACE AND LJ(in case of ditching only)

SECURE- DESIGNATED AREA

SELECT, BRIEF AND RE-SEAT- ABP

PREPARE AND STOW- SURVIVAL ITEMS(IF NEEDED)

PASS- CABIN SECURE

BRACE- ON COMMANDERS'S COMMAND

7. Commit to memory the Ground Evacuation Drill
when AC comes to a complete stop

SEPM 8.9.1

EVALUATE- INSIDE& OUTSIDE CONDITIONS

if no command and situation is catastrophic

INITIATE- EVACUATION

OPERATE- EXIT IF SAFE ENSURING SLIDE FULLY INFLATED

EVACUATE- PASSENGERS

CHECK- CABIN

TAKE- EQUIPMENT(IF AWAY FROM AIRPORT)

EVACUATE- SELF

DIRECT- PASSENGERS AWAY AND UPWIND

8. In a ditching situation, what are your Secondary Exits on aircraft that are fitted with slide/rafts?

SEPM 8.10.3

exits fitted with escape slides

9. What is the DARED evacuation technique?

SEPM 8.10.5

D- dedicated assist space/command position- allows the CC to safely position themselves in a secured location while assisting pax in evacuating the AC

A- assertiveness-CC must use loud, positive and forceful commands

R- redirecting- at unusable exists, to adjacent nearest usable exist

E-exit by-pass- sending pax past a usable exit to another usable exit to maintain a balanced flow

D- dried-up exit- a usable exit where there are no evacuating pax

10. What is rapid Deplaning?

SEPM 8.10.9

DON-

a controlled deplaning of aircraft occupants using ground equipment

11. What does the command "This is the Captain, Normal operations, Normal operations, Passengers remain seated tell you?" SEPM 8.11
remain at station, wait for further instructions

12. Immediately after take-off you hear the command, "This is the Captain, Attention crew at stations, Attention crew at stations." What are your actions? SEPM 8.11
stand by at station, evaluate inside and outside conditions, communicate hazards if any, wait for further instructions

DECOMPRESSION

1. What is Decompression? SEPM 8.12.1.3
the loss of cabin pressure resulting in the cabin altitude equalizing with the outside AC altitude

2. What are the objective and subjective signs of a slow decompression? SEPM 8.12.3.2/3
subjective signs: gradual cold sensation, signs and symptoms of Hypoxia

objective signs: the cabin lighting come to 100% full bright, the exit signs will illuminate the fasten seatbelt/no smoking or No mobile signs come on, possible hissing sound in the affected area (in case of a small air leak)

on Boeing- 2LO/HI chimes sound, the decompression pop-up window appears on the cabin management syst displays(CSCP/CACP/CAP) when lighting page is selected

on A380- a pre-recorded PA is broadcast

3. What is your first action upon discovering a slow decompression, and oxygen masks have not deployed? SEPM 8.12.3.4
when informing the flight crew confirm that they have donned their oxygen masks, inform the rest of the cabin crew

4. Commit to memory the Slow Decompression Drill SEPM 8.12.3.5
at the first noticeable sign of a possible slow decompression

ALERT- FLIGHT CREW

or if informed by the flight crew of a possible slow decompression

STOP- ACTIVITIES

SECURE- SELF IN DESIGNATED CREW SEAT

INSTRUCT- PAX TO FASTEN SEATBELTS

KEEP- FLIGHT CREW INFORMED

if oxygen masks have deployed

APPLY- RAPID DECOMPRESSION DRILL

5. What are the objective and subjective signs of a rapid decompression? SEPM 8.12.4.2/3

OBJECTIVE: a loud bang in the vicinity of the opening; a rush of air to the outside; cabin filled with dust, flying debris and loose objects; fog in the cabin that lasts for few seconds (as hot air from the cabin meets cold air from outside); rapid drop in the cabin temp; the fasten seatbelt/ no smoking/ no mobile signs (as installed) comes on automatically; all cabin lights turn to full bright (if left dimmed during the flight); the cabin drop-out O2 system doors open automatically when specific cabin alt is reached according to each AC type and the mask are released; the PA sys automatically broadcasts pre-recorded announcement for the use of the masks

If a break in AC structure is the cause of the depressurization: unsecured items in the immediate area are rejected from the AC; debris may fly around the cabin; loose items may become projectiles; dust particles may limit visibility; high noise level may limit communications in the cabin

SUBJECTIVE: all signs and symptoms of hypoxia; all symptoms of decompression sickness; difficulty in breathing and speaking (as air is sucked out of the lungs); cold sensation; sinuses and ears may feel full momentarily

6. During a decompression, if the pre-recorded PA does not broadcast and no PA from the flight crew, what are your actions? SEPM 8.12.4.4.2

cabin crew should be secured in the crew seat and give short commands in between breath i.e. "put on nearest mask, fasten seatbelt" or by use of motions/ gestures to demonstrate the donning of masks where possible

7. When will you start your post decompression duties? SEPM 8.12.4.5.1
when advised by the Flight crew that O2 masks can be removed (when the AC has reached a safe altitude)

8. What will you do with your Portable Oxygen (PO) bottle for landing once you have completed your post decompression duties? SEPM 8.12.4.5.2
portable O2 bottles must be removed and stowed away before landing

9. Commit to memory the Rapid Decompression Drill. SEPM 8.12.4.6

DON- NEAREST O2 MASK

SECURE- SELF

when advised via flight crew PA "This is the Captain: 2x emergency descent
post decompression duties

OBTAIN- PO AND MRT

CHECK- FLIGHT CREW

CHECK- CABIN, LAVATORIES, GALLEYS AND CRC
ADMINISTER- FIRST AID/ O2
REPORT- CABIN DAMAGE/ INJURIES TO FLIGHT CREW
SECURE- CABIN FOR LANDING

ABNORMAL PROCEDURES

1. In the event of an aircraft being dispatched with an inoperative exit and/or escape equipment, what exits must the crew demonstrate during the manual Safety Demonstration? SEPM 8.15.2
all cabin doors excluding the inoperative door
2. What actions will you take if the oxygen masks inadvertently deployed and a passenger has started the O2 generator? SEPM 8.15.4
leave the PSU door open, do not try to close it; relocate pax if possible to ensure that they are seated in a location where a PSU O2 generator has not been used; masks may be removed by cutting the masks tubing; relocate pax; brief in case of decompression; inform flight crew; do not touch the PSU(hot)
3. What actions will you take if the O2 wasn't started? SEPM 8.15.4
try to relocate pax if possible, for their comfort; do not remove the masks so the PSU could still be used in the event of a decompression; inform flight crew

AIRBUS A330

FAMILIARISATION

1. How do you request normal entry to the flight deck via the keypad? SEPM 13.3.4.1
press the # key and look at the camera

2. What does a steady green light on the flight deck door keypad indicate? SEPM 13.3.4.1
door is unlocked and can be opened

3. Where is the water shut-off valve located in the galley? SEPM 13.7.3
in the vicinity of the sink/ faucet

4. What is the pre-flight check for the automatic fire extinguisher? SEPM 13.8.4
pressure gauge needle is in the green zone

5. What is the pre-flight check of the lavatory Smoke detector? SEPM 13.8.5
not tampered with or obstructed, CM check the serviceability of the smoke detectors from the 'Smoke
Detect.' page on the FAP

6. What are your actions in case of continuous suction noise coming from the lavatory? SEPM 13.8.10
inform the commander and follow his instructions; enter the defect in the CML; should all attempts fail
throw a blanket and cushion into the toilet bowl

CABIN INTERCOMMUNICATION DATA SYSTEM (CIDS) & COMMUNICATION

1. What is the pre-flight check of the FAP? SEPM 13.13.3
serviceability check by selecting random function keys
CAUT button is not flashing

2. What indication on the ACP would inform you of a purser call from the cabin? SEPM 13.13.6
pink light steady

3. Which crew members should answer an All Attendant call initiated from the flight deck? SEPM 13.14.1.3
all must answer

4. What will you hear when the flight crew initiates an emergency call to the cabin? SEPM 13.14.1.4
3xHI LO

5. What will you see on all Attendant Indication Panels (AIPs) when the flight crew initiates an emergency call to the cabin? SEPM 13.14.1.4
CALL PRIO CAPT red flashing all

6. How do you make a Normal PA on an interphone? SEPM 13.14.2.1
Press PA+ALL+PTT

EMERGENCY EXITS

1. What is the pre-flight check of the Type A Door? SEPM 13.16.1
slide arming lever is in the disarmed position
safety pin is inserted and locked in the disarmed socket and red flag is displayed and in good cond
cover is closed
CM checks slide pressure of all doors on FAP

2. When will the Red Cabin Pressure Warning Indicator flash red? SEPM 13.16.1.1
when the door is disarmed and: all engines are shut down, the cabin is pressurized

3. When will the Slide Armed Indicator illuminate steady white? SEPM 13.16.1.1
when the door is in the armed mode and the door control handle is lifted more than 4 degrees

4. When should you check the door locking indicators? SEPM 13.16.1.3.2/13.16.1.3.3
after closing the door and before arming

5. What will happen if the slide arming lever is in the ARMED position and the door is opened from outside? SEPM 13.16.1.5
it will automatically move to disarmed position

EMERGENCY SYSTEMS

Smoke Detection System:

1. What will you hear in the cabin if smoke is detected in the lavatory? SEPM 13.17.1.1
triple chime every 30 seconds

2. What will you see on the Attendant Indication Panel (AIP) if smoke is detected in the Video Control Centre (VCC)? SEPM 13.17.1.1
red flashing light plus message SMOKE VIDEO

3. If a smoke detector is activated, how do you reset the aural and some of the visual indications in the cabin? SEPM 13.17.1.2
press the SMOKE RESET button(FAP) or SMOKE LAV button(AAP)

Evacuation signaling system:

1. From where can you activate the evacuation signaling system? SEPM 13.17.2
flight deck, L1 station

2. Once the evacuation signaling system is activated, how can you silence the evacuation horn in your respective area? SEPM 13.17.2.1.2
by pressing the HORN SHUT OFF button

3. What will you see on the Attendant Indication Panels (AIPs) if the evacuation signaling system is activated from the flight deck? SEPM 13.17.2.2
EVAC ALERT message with red flashing light

4. What will you hear in the cabin once the evacuation signaling system is activated from the flight deck? SEPM 13.17.2.2
evacuation horn

Emergency Lighting System:

1. What is the pre-flight check of the Emergency Lighting System? SEPM 13.17.3
CM shall indicate commencement of the emergency lights pre flight check via PA; CM shall press the EMER pb-sw on the FAP; cabin crew shall check the ceiling emergency lights, exit locators, exit markers and additional exit signs in the area; cabin crew shall check all FPMS stripes in their area are intact.
.....
.....
2. From where can you activate the emergency lights? SEPM 13.17.3.2
flight deck and EMER pb-sw on the FAP
.....
.....
3. When will the emergency lights be activated automatically? SEPM 13.17.3.2
in case of electrical power failure
.....
.....
4. Once activated, how long will the emergency lights last for? SEPM 13.17.3.1
10 minutes
.....
.....

Oxygen System:

1. How many oxygen masks are in each lavatory and cabin attendant station service unit? SEPM 13.17.4.1.1
2
.....
.....
2. Once activated, how long will the cabin emergency oxygen system last for? SEPM 13.17.4.1.2
22 minutes
.....
.....
3. How will you start the oxygen flow following the deployment of the oxygen masks in the cabin? SEPM 13.17.4.1.3
pull the mask towards the face
.....
.....
4. How will you manually deploy the cabin oxygen masks? SEPM 13.17.4.1.4
using the MRT
.....
.....

5. What is the use of the Door Stop?
it allow maintenance personnel to test the pneumatic opening of the container door without deployment of all O2 masks

SEPM 13.17.4.1.5

EQUIPMENT LOCATION

SEPM 13.20

1. At which stations are the Protective Gloves (PG) located?

R1, R4

2. At which cabin attendant stations are the Megaphones (MP) located?

L1, L4

3. At which stations are the Emergency Locator Transmitter's (ELT) located?

L1, L4

AREAS OF RESPONSIBILITY

SEPM 13.21

1. Which cabin crew member is responsible for the aft galleys?

R4

2. Which cabin crew member is responsible for flight deck clearing?

R1

3. Which cabin crew member is responsible for the PRM key?

L1

A320/A321

FAMILIARISATION

1. How do you request normal entry to the flight deck via the keypad? SEPM 14.3.5.1
press the # key and look at the camera

2. Where is the water shut off valve located in the aft galley? SEPM 14.6.2
AFT of L2 door.
321: G3: FWD of R4 door, G5: AFT of R4 door

3. When should cabin crew pull the galley Drain Release Handle? SEPM 14.6.2
in case of overflow

4. What is the pre-flight check for the waste bin automatic fire extinguisher? SEPM 14.7.3
pressure gauge needle is in the green zone

5. What is the pre-flight check of the lavatory Smoke detector? SEPM 14.7.4
not tampered with or obstructed. CM checks the serviceability of the smoke detectors from the SMOKE DETECT page on the FAP/PTP

6. What will you do in case of a water leak in one of the lavatories? SEPM 14.7.6
use the manual water shut off valve to stop the water supply to the lav

7. Where are the manual controls for the Business Class seats located? SEPM 14.9.2.1.1
AFT under the centre armrest cover

8. Where will you find the In-Flight Entertainment (IFE) PAX SYS switch? SEPM 14.13
in the VCC

9. What extra feature does LAV D have? SEPM 14.16.4.1
is equipped with a foldable partition which can be opened to allow the loading/ offloading of a stretcher through the L2/L4 door

10. If needed, where can MedLink be contacted from? SEPM 14.16.5
flight deck

CABIN INTERCOMMUNICATION DATA SYSTEM (CIDS)

1. What are the indication panel which are components of the CIDS? SEPM 14.11
attendant indication panel(AIP), area call panel(ACP), pax service unit(PSU)

2. What is the pre-flight check of the cabin interphone handsets? SEPM 14.12.1
make a PA, make an interphone call to another station

3. How do you make a normal call to the flight deck? SEPM 14.12.1.3
press CAPT on the handset

4. What colour light will illuminate on the Area Call Panel (ACP) when a call is made from one attendant station to another? SEPM 14.12.1.3
pink steady

5. How do you make an emergency call to the flight deck? SEPM 14.12.1.4
press PRIO CAPT or EMER CALL on the handset

6. What will you hear when the flight crew initiates an emergency call to the cabin? SEPM 14.12.1.4
3xHI LO all stations

7. What will you see on all Attendant Indication Panels (AIPs) when the flight crew initiates an emergency call to the cabin? SEPM 14.12.1.4
red light flashing

EMERGENCY EXITS

1. What does the arming lever on each door control? SEPM 14.14.1.1
to arm and disarm the slide, it controls the following: the emergency power assist system,
the escape slide/raft, electrical door warning system

2. What will be your action if the Slide Armed Indicator illuminates steady white during a normal door operation? SEPM 14.14.2.1
immediately re-stow the door control handle and ensure the door is correctly disarmed. if the light remains illuminated report to CM who shall inform the commander

3. What are your actions if the Cabin Pressure Warning Indicator starts flashing red after disarming your door? SEPM 14.14.2.4
should not attempt to open the door, immediately report the CM who shall inform the commander

4. How is the Over Wing Emergency Exit (OWEE) slide pressure checked? SEPM 14.14.6
CM check slide pressure of the OWEE on the FAP/PTP

5. What is the use of the life line when installed at the Over Wing Emergency Exit (OWEE)? SEPM 14.14.6.2
they serve to assist pax moving on the wing during the evacuation

6. Where is the manual inflation handle located of a Type I exit/door? SEPM 14.14.7.1
at floor level on the RHS of the girt bar assembly

7. How do you detach and separate the escape slide from the Type I door? SEPM 14.14.7.3
detach: lift the girt bar flap cover, pull the white release handle, the escape slide detaches from the AC door sill, but remain connected to the AC by a mooring line
separation: cut the mooring line with the hook knife located at the door sill end of the escape slide

EMERGENCY SYSTEMS

Smoke Detection System:

1. What is your action when smoke is detected in the Video Control Centre (VCC)? SEPM 14.13
the PAX SYS switch must be turned OFF

2. What will you hear in the cabin if smoke is detected in the lavatory? SEPM 14.15.1.1
repetitive triple chime(every 30 sec) at all CAS,

3. What will you see on the Additional Attendant Panel (AAP) if smoke is detected in the lavatory? SEPM 14.15.1.1
SMOKE RESET button illuminated red

4. In the event of smoke in a lavatory, how would you reset the aural and some of the visual indications in the cabin? SEPM 14.15.1.2
press the SMOKE RESET button(FAP) or SMOKE RESET/ RESET button(AAP)

Evacuation signaling system

1. Where are the evacuation signalling panels located in the aircraft? SEPM 14.15.2.1
flight deck, L1 FAP, L2 AAP
flight deck, L1 FAP, R2 AAP, R3AAP, L4 AAP

2. What will happen once you press EVAC RESET key on the AAP during an evacuation? SEPM 14.15.2.1.2
it silences the evacuation horn and AAP indication in the respective area in cabin

3. In what position is the Evac Signal activation switch in the flight deck set to? SEPM 14.15.2.2
CAPT

4. What will you see on the Attendant Indication Panels (AIPs) if the evacuation signaling system is activated from the flight deck?
EVAC ALERT message with red flashing light

SEPM 14.15.2.3

5. What will you hear in the cabin once the evacuation signalling system is activated from the flight deck?
evacuation horn sounds

SEPM 14.15.2.3

Emergency Lighting System:

1. During the pre-flight check, for how long should the emergency lights be switched on for?

30 seconds

SEPM 14.15.3

2. What is the pre-flight check of the Floor Path Marking System (FPMS)?
the crew will check that the FPMS strips in their area are intact

SEPM 14.15.3

3. Once activated, how long will the emergency lights work for
13min-320, 10 min-321

SEPM 14.15.3.1

4. When will the emergency lights be activated automatically?
in case of electrical power failure

SEPM 14.15.3.2

5. From where can you activate the emergency lights?
flight deck and EMER pb-sw on the FAP

SEPM 14.15.3.2

Oxygen System:

1. What is the duration of the cabin oxygen system?
13-320, 22min-321

SEPM 14.15.4.1.2

2. How will you start the oxygen flow following the deployment of the oxygen masks in the cabin?

pull the mask towards the face

SEPM 14.15.4.1.3

3. How will you verify that oxygen is flowing into the mask following the deployment of the oxygen masks in the cabin? SEPM 14.15.4.1.3
the in-line flow indicator turns green or the inflation of the green portion of the reservoir bag

4. How will you manually deploy the cabin oxygen masks? SEPM 14.15.4.1.4
using the manual release tool (MRT) insert the pin end into the operation rod hole in the container door

5. What is the pre-flight check of the Passenger Service Unit (PSU) Door Stop? SEPM 14.15.4.1.5
the door stop must be in the flush position

EQUIPMENT LOCATION

SEPM 14.18

1. Where is the Halon (HAL) located at L1 CAS?
L1 crew seat
2. Where are the Protective Gloves (PG) located in the aircraft?
R2A, flight deck
3. Who is responsible to conduct the pre-flight check of the Emergency Locator Transmitter?
R1 & R2A on EIH, I, K, L, M

AREAS OF RESPONSIBILITY

SEPM 14.19

1. Who is responsible to brief Able-bodied Passenger (ABP)s seated at the OWEE?
L2
2. Which crew member is responsible for flight deck clearing
R1
3. Which crew member is responsible for LAV E?
R2A
4. Which crew member is responsible for the aft galley 5?
R2A

A321-200 VARIANT

1. Which cabin crew member is responsible for arming/disarming the R1 door? SEPM 14.14.2.3/4
L1

2. Which crew member is responsible for arming/disarming L2 door? SEPM 14.14.2.3/4
R2

3. If operating with 5 crew, which crew member shall carry out a Door Warning Check on L1 door prior to opening the door? SEPM 14.14.3.1
R2

4. Which doors must be disarmed prior to opening in an unplanned ditching situation? SEPM 14.14.3.1
L2/R2/L3/R3

5. What must you check after disarming the L4 Door? SEPM 14.14.3.1
Arming lever is in the DISARMED position, additional slide armed placard is discontinued, safety
Pin is inserted and locked in the disarmed socket and red flag is displayed, cross check the
Opposite door is disarmed

6. Where is the manual inflation handle located on the L2, R2, L3 and R3 exits? SEPM 14.14.7.1
in upper RHS of the door frame

A380-800

FAMILIARISATION

1. In what position should the Privacy Door be prior to passing cabin secure for take-off? SEPM 16.4.4.2
The door must be latched in open position

2. What is the pre-flight check of the Waste Bin Automatic Fire Extinguisher? SEPM 16.9.4
Pressure gauge needle is in the green zone

3. What is the pre-flight check of the Smoke Detection System? SEPM 16.9.5
CC must check that the smoke detector is not tampered with or obstructed
Check the serviceability of smoke detector

4. In case of a water leak in the shower, where will you find the water shut off valve? SEPM 16.12.4
located behind an access panel next to the shower.

5. When must the aft staircase barrier be installed? SEPM 16.14.7
must be securely stowed when the aircraft is on ground and for TTL. It must be installed at all times during cruise.

6. What will you do in case an Upper Deck (UD) Overhead Stowage Compartment (OHSC) is stuck in closed position? SEPM 16.15.1.1
use an MRT to release the latch manually:
- Insert the MRT through the sealing into the gap between the jammed OHSC and the adjacent OHSC
- Slide the MRT slowly down to the latch
- Carefully use the MRT to shift the pin on the latch to the unlocked position
- Repeat the above 3 steps on the opposite side of the OHSC
- Support the OHSC with one hand and simultaneously pull the handle to open it

7. From where in the cabin can you contact MedLink? SEPM 16.23.7
M1L CAS and the RCC at U1R.

CREW REST COMPARTMENTS

1. How would you secure the upper and lower Flight Crew Rest Compartment (FCRC) doors for taxi, take-off and Landing (TTL)? SEPM 16.5
The FCRC doors must be closed and latched at all times.

2. Where is the location of the entrance door to the Lower Deck Crew Rest Compartment (LD-CRC)? SEPM 16.17
opposite M3R door.

3. What is the pre-flight check of the Fire Extinguishing System (FES)? SEPM 16.17.3

1. Press the LAMP TEST pb

2. All panel LEDs should illuminate

3. Check FES Switch cover is sealed and intact

4. What indications will you have when there is Air Conditioning Low Flow in the Lower Deck Crew Rest Compartment (LD-CRC)? SEPM 16.17.7.2

A low airflow chime sounds continuously for 30 seconds (cannot be reset)

- LEAVE COMPARTMENT sign illuminates on the PSU of each bunk and on the Info Column and Info Panel

- LD-CRC lighting switches to 100% brightness

CIDS & COMMUNICATION

1. Where are the Mini Flight Attendant Panels located on the aircraft? SEPM 16.18.4

There are 6 Mini-FAPs on the aircraft located:

- Above M1L crew seat, LHS sidewall GM65, LHS sidewall GU91, Upper FCRC, Lower FCRC & LD-CRC

2. What is the function of the Area Ready key on the Mini-FAP? SEPM 16.18.12.7

Each Mini-FAP can report that the corresponding area is secure by pressing the 'Area Ready' button.

3. What will you see on the Area Call Panel (ACP) when you receive a call from another Cabin Attendant Station (CAS)? SEPM 16.20.2

Steady Green, receiving station name

4. How will you make a conference call? SEPM 16.20.2

Conf + select area + send

5. How will you make an emergency call from a Cabin Attendant Station (CAS) to the flight deck?

Prio Capt Send

SEPM 16.20.3

EMERGENCY EXITS

1. What is the function of the Doors and Slides Indicator Panel? SEPM 16.21.1.1
To operate the door electrically

2. Where is the Manual Inflation Pushbutton (MIP) located? SEPM 16.21.1.2
Located on the upper RHS of the door frame

3. After arming the door, where is the safety pin stowed? SEPM 16.21.2.5
Stow in the designated pouch of the crew seat

4. What is the purpose of the M1 Slide Extension? SEPM 16.21.6.2.1
to extend the length of the escape slide to ensure it reaches the ground when the aircraft is in the nose up position

5. What must you ensure prior to operating M3 doors in ditching? SEPM 16.21.6.3
To disarm the door

6. How would you detach and separate the MD Slide raft? SEPM 16.21.6.4
To detach -
Lift the girt bar flap cover
- Pull the tab marked PULL TO RELEASE
To separate-
Pull the mooring line release handle

When EVAC Command is initiate -

Flight Deck - EVAC LIGHTS flashes red and evacuation horn sounds.

Cabin- FAP EVAC CMD illuminates green (if initiated from the FAP).

EVAC reset light flashes red on FA,Mini FAP and AAP

AIP !EVACUATION! message with red flashing light

Loudspeakers Evacuation horn sounds

EMERGENCY SYSTEMS

Smoke Detection System:

1. What indications appear on all Attendant Indication Panels (AIP) in case smoke is detected in a lavatory? **Red flashing** SEPM 16.22.1.1

2. What will you see on the Mini-FAP if smoke is detected in a lavatory? SEPM 16.22.1.1

SMOKE RESET button illuminated red + Smoke Page displayed

3. How will you reset the visual and audio indications if the smoke detector has been activated in LU12 SEPM 16.22.1.2

Press smoke reset button on FAP, mini FAP and AAP

Evacuation Signaling System

1. What happens if you press the EVAC RESET hard key on the Flight Attendant Panel (FAP), Mini-FAP, or Additional Attendant Panel (AAP)? SEPM 16.22.2.1.2/3

Flashes red when the EVAC system is activated; when pressed, it silences the evacuation horn and AIP indication in the respective area in cabin.

2. What happens if the EVAC CMD on either of the Flight Attendant Panels (FAP) is pressed?

SEPM 16.22.2.2

If the EVAC CMD hard key on either of the FAPs is pressed, evacuation signals are activated in the flight deck only

3. Once activated, how can an evacuation be completely stopped (deactivated)? SEPM 16.22.2.3

The EVAC system can only be deactivated by pressing the EVAC CMD button from the panel where the command was initiated.

Emergency Lighting System:

1. What is the pre-flight check for the Floor Path Marking System (FPMS)? SEPM 16.22.3

Cabin crew shall check that all FPMS strips in their area are intact

2. When conducting the pre-flight check of the Emergency Lighting System, what is the maximum amount of time the Cabin Manager (CM) can press the EMER pb-sw on for? SEPM 16.22.3

30seconds

3. Once activated, what is the duration of the emergency lights? SEPM 16.22.3.1

10 minutes

4. Where is the location of the Emergency Light switch in the cabin? SEPM 16.22.3.2

They can also be activated manually from the flight deck and from the EMER pb-sw on the FAPs in the cabin.

5. When will the emergency lights be activated automatically? SEPM 16.22.3.2

The cabin emergency lights are activated automatically in case of electrical power failure.

Oxygen system:

1. What is the duration of the oxygen flow dependent on? SEPM 16.22.4.1.2

oxygen flow rate is automatically regulated, the duration of flow depends on:

- Cabin altitude

- Number of masks in use

2. When an oxygen mask is pulled, how many oxygen masks are activated? SEPM 16.22.4.1.3

Pulling one mask activates the flow of oxygen to that mask only.

3. How do you confirm that oxygen is flowing to your mask? SEPM 16.22.4.1.3

Oxygen flow to the mask is indicated by an in-line flow indicator which turns to green.

ECAS

1. How do you activate the Emergency Crew Alerting System (ECAS)? SEPM 16.22.5

ECAS button for a minimum of 2 seconds. The message !CABIN ALERT! will appear for 1 second on the AIP nearest to the ECAS button pressed. This serves as confirmation to the cabin crew that the alert has been received by the flight crew.

2. How will you confirm that the Emergency Crew Alerting System (ECAS) notification has been received in the flight deck? SEPM 16.22.5

ECAS button for a minimum of 2 seconds. The message !CABIN ALERT! will appear for 1 second on the AIP nearest to the ECAS button pressed. This serves as confirmation to the cabin crew that the alert has been received by the flight crew.

ECAS locations -

U1L CAS area

- U2R CAS area

- GU95

- M1L CAS area

- GM26

M3R/M3RA CAS area

- GM65

- M5L CAS area -

3. Where is the Emergency Crew Alerting System (ECAS) button located at M5 area? **SEPM 16.22.5**

M5L CAS area

4. Where is the Emergency Crew Alerting System (ECAS) button located at M3 area? **SEPM 16.22.5**

M3R / M3RA CAS area

EQUIPMENT LOCATION

SEPM 16.25

1. What equipment can you find in the Lower Deck Crew Rest Compartment (LD-CRC)?

Crash axe, gloves, mrt, Halon, Flash lights x 2, PBE

2. Where are the Air Liquide Protective Breathing Equipment (PBEs) located in the cabin?

At all CAS

3. Where are the Emergency Locator Transmitter's (ADT 406S) (ELT) located in the cabin?

U1L, U3L, M1L, M5L Stowage

4. Where are the Megaphones (LED Type) (MP) located in the cabin?

U1L, U3L, M1L, M5L Stowage

5. Where will you find the crash axes (CA) in the aircraft?

LDCRC and FD

AREAS OF RESPONSIBILITY:

SEPM 16.26

1. Which cabin crew member is responsible for the Lobby?

U1L

2. Which cabin crew member is responsible for the FCRC and Flight Deck Privacy Area?

M1R

3. Which cabin crew member is responsible for flight deck clearing?

M1L

4. Which cabin crew member is responsible for the LD – CRC?

M3L

AVIATION HEALTH

General

Choking

1. An adult casualty is choking but is able to cough, what would be your actions SEPM 4.6.5.1
reassure and confirm the casualty is choking by asking "Are you choking?"
encourage the casualty to cough and stand by

2. A female pregnant casualty is choking and unable to cough, what would be your actions? SEPM 4.6.5.1
give thrusts on the chest by placing your arms under the armpits and your hands on the lower half of the breast bone. Pull straight back to give the chest thrusts. Give thrusts until the object is forced out and the casualty can breathe, cough or talk or until the casualty becomes unresponsive

3. A 4-year-old boy is choking but can cough, what would be your actions? SEPM 4.6.5.1
reassure and confirm the casualty is choking by asking "Are you choking?", encourage to cough and stand by

4. The 4-year-old boy is then unable to cough any more, what would be your actions now? SEPM 4.6.5.1
stand behind the casualty, wrap your arms around the casualty's waist so that your arms are in the front; make a fist with one hand; put the thumb side of your fist slightly above casualty's belly button and well below the breast bone; grasp your fist with the other hand and give quick upward thrusts into his abdomen

5. An adult casualty has collapsed to the floor due to choking, what are your actions? SEPM 4.6.5.2
lower the casualty and make sure he is lying on a firm flat surface. tap the shoulders and shout into both ears, shout for help and AED, scan for breathing for 10 sec- if there is no breathing or abnormal breathing then proceed to the next step; administer 30 chest compression; the AED shall be operated as soon as it arrives, after 30 chest comp, open the airway, if you see an object in the mouth, remove it
CPR give 2 breaths

1. When would you perform CPR on a casualty? SEPM 4.6.3.2
when an unconscious casualty is not breathing or has an abnormal/agonal breathing

2. Where would you place your hand for chest compressions on an adult casualty SEPM 4.6.3.2.2.1
lower half of the breastbone

3. Where is the Ambu-Bag located and who is permitted to use it during CPR SEPM 6.5.9
in the EMK it can only be used by a medical volunteer

4. State all locations of the Pocket Mask? SEPM 6.5.6 & 6.5.3.1
left hand side min cabin crew seats

5. During CPR, you have completed 30 chest compressions, however no Pocket Mask is available, what would be your actions? SEPM 4.6.3
continue with chest compressions until mask is available

6. The AED is in use and the AED is prompting "low battery, replace battery now". What would be your actions? SEPM 6.5.7.1.
continue to use until battery is depleted as replacement battery is not available

7. In what circumstances would you stop CPR? SEPM 4.6.3.3
if it becomes unsafe to continue e.g. severe turbulence, forecasted difficult landing after liaising with the flight crew

Equipment

1. A guest has vomited, you require the UPK, who needs to approve the opening? SEPM 6.5.10
inform cabin manager or cabin senior

2. When would you seal a FAK with a red seal? SEPM 6.5.5
when an item has been depleted and another kit is opened for the same item

3. When would you seal an AED with a red seal? SEPM 6.5.5
if the machine is unserviceable

4. When would you seal the Emergency Medical Kit (EMK) with red seal? SEPM 6.5.5
when an injectible item has been depleted excluding the EpiPen

5. What is the pre-flight check of the Lifeline view AED? SEPM 6.5.7.2
correct number of units, secured in the correct stowage, one seal intact: green seal ex AUH, g
blue or red seal from outstation, active status indicator (ASI) shows a flashing green light

6. If a crew member becomes ill inflight, can they utilize the contents of the FA-P? SEPM 6.5.1
yes

7. Are Cabin Crew permitted to open medical kits to familiarize themselves with the content? SEPM 6.5.3
no

8. Who must the Crew communicate with prior to opening a FAK? SEPM 6.5.3
cabin manager

9. What are the contents of the UPK? SEPM 6.5.10
instruction sheet, socket of absorbant powder, surface disinfectant, face mask with eye shield,
polyethylene apron, 2 nitrile gloves, scoop and scraper, yellow clinical waste bag, antiseptic hand
towelette, absorbant cleaning cloth

10. When would you seal the Ambu Bag with a red seal? SEPM 6.5.9
all 3 masks have been used

Medication

1. What is the nasal decongestant used for? SEPM 4.2.3.2.2
can reduce swelling of the sinuses and open the passages
Opens the blocked nose and sinuses

2. State the precautions before administering Aspirin SEPM 6.5.1
allergies, alcohol consumed, pregnant, asthma, bleeding tendencies, peptic ulcer/ gastritis

3. State the general precautions when administering any medication SEPM 6.5.1
allergies, alcohol consumed, pregnant

4. State the precautions before administering Anti- Inflammatory SEPM 6.5.1
allergies, alcohol consumed, pregnant, asthma, peptic ulcer/ gastritis

5. How would you manage a guest who can't take their own medication and is now requesting to be served an alcoholic drink? SEPM 6.5.1
do not refuse

6. A casualty is having an asthma attack and forgotten their Ventolin inhaler at home. How many puffs are they permitted to take from the Ventolin Inhaler in the EMK? SEPM 4.7.1.1.
up to 2 puffs 30 to 60 seconds apart

7. State your actions if the casualty is having an asthma attack for the first time SEPM 4.7.1.1
ensure scene safety, obtain medical history and vital signs, deploy tempus if available, administer O2, assist casualty into a comfortable position usually sitting upright and leaning forward on a tray table, loosen tight clothing, clear the surrounding area and give some space, call MEDLINK

8. A casualty is having a severe allergic reaction for the first time, state your actions SEPM 4.7.5.3
assess scene safety, obtain history and vital signs, administer O2, call MEDLINK

9. Under what circumstances are crew permitted to administer an Epi-pen? SEPM 4.7.5.3
if instructed by MEDLINK to do so

10. Under what circumstances can crew administer GlucoGel/Hypostop Gel? SEPM 4.7.5.1.2
in case where you have a casualty experiencing hypoglycaemia (low blood sugar) and there isn't any medical volunteer on board, MEDLINK may instruct the crew to administer the GlucoGel/Hypostop Gel

Trauma

1. A casualty is bleeding from a cut on her arm, there is no glass or other foreign body/object inside the wound, how would you manage it? SEPM 4.8.3

asses scene safety, put on gloves, put the wound under running water to flush out any dirt, using gauze pads gently dry the skin around the wound, apply a dressing and secure it adhesive tape, support the injury: part in a position raised above the level of the casualty's heart to minimize the blood loss, you may use a sling

2. You have applied direct pressure; however, the bleeding is not stopping, what would be your actions? SEPM 4.8.4

as a last resort, apply a tourniquet

3. If the casualty loses a significant amount of blood, what condition could the casualty develop? SEPM 4.7.2.2.1

low volume shock(hypovolaemic shock)

4. A casualty has a nosebleed, what are your actions? SEPM 4.8.10

ask the casualty to lean forward, breathe through the mouth and pinch the soft part of the nose for 20 min provide a cup to collect blood from the nose or mouth, also provide tissues to wipe the blood away, ask the casualty not to swallow blood in the back of the mouth/ throat, but to spit it out in the cup

5. When would you need to contact Medlink, when dealing with a casualty with a nosebleed?

SEPM 4.8.10

if the bleeding doesn' stop in total of 20 minutes

6. During severe turbulence a female casualty has signs and symptoms of a fracture to her wrist. She explains it is very painful, the limb looks deformed. What would be your actions? SEPM 4.8.6

immobilise the limb using a sam splint and secure it in place with folded triangular bandages(place one above and one below the fracture site). Elevate the limb where possible

7. A crew member has burnt his arm on hot coffee. How would you assist him? SEPM 4.8.11.1

flush the skin with copious amounts of water or apply a cold compress, once cooled cover with burn dressing and bandage loosely

8. In cases of burns, when it is required to call Medlink?

SEPM 4.8.11.1

the injured area includes the face, neck, hands or groin, the burn covers more than 1% of the skin- an area about the same size as the palm, the casualty is very young or old, there is doubt about the casualty's condition

9. How would you treat a chemical burn?

SEPM 4.8.11.1

brush off any dry chemical with a sterile gauze, remove all contaminated clothing from affected area if not stuck to skin, check vital signs, remove jewelry from injured areas flush the affected area with water for at least 20 minutes, apply burn dressing and bandage loosely

10. A casualty has an object embedded in his eye; how would you manage this?

SEPM 4.8.12.2

Stabilise the object to prevent movement by padding around the object

11. While walking in the cabin, a casualty trips and is complaining of pain in his ankle. You are not sure if it is a strain/sprain or a fracture. What would be your actions?

SEPM 4.8.7

RICE procedure: R-rest the affected area, I-ice, apply an instant cold compress wrapped in a cloth to the injured area for 10 minutes, C- compression, apply compression by bandaging the affected area with an elastic bandage, E-elevate and support the affected area

12. When is the R.I.C.E procedure used?

SEPM 4.8.7

management of strains and sprains

Illness

1. What are the signs and symptoms a casualty could have, when having a heart attack?

SEPM 4.7.2.1.1

cramping central chest pain, pressure, heaviness or tightness across the chest, numbness or tingling in the chest and possibly radiating to the neck, jaw, shoulder or down one arm, difficulty breathing or shortness of breath, weakness, nausea/vomiting, pale or grey, sweating, cool, clammy skin, anxiety or fear, history of heart related illness

2. What would be your actions, when assisting a casualty with a suspected heart attack?

SEPM 4.7.2.1.1

reassure and calm the casualty, obtain a history and vital signs, deploy tempus, contact MedLink, the physician may advise you to give GTN spray, if the casualty has his medication assist him to take it, administer O2 on a high flow, assist casualty into a comfortable sitting position, encourage to chew 1 aspirin if there is no contraindication to aspirin

3. A casualty is having a seizure, what are the signs and symptoms?

SEPM 4.7.4.3

stiff arms/legs and arched back followed by jerky uncontrolled movements, eyes rolling upward or staring gaze, loss of consciousness, may collapse suddenly and cry out, brief cessation of breathing resulting in blue lips, earlobes and nail beds, possible tongue or lip biting, loss of bladder or bowel control, lethargy and sleepiness following a seizure, fever (especially children)

loosely fasten seatbelt, do not place anything into mouth, obtain medical history from the travelling companions or bystanders, look for a warning bracelet, protect the casualty from injury by placing pillows and blankets around the casualty, contact MedLink

4. How would you assist a casualty who is having a seizure in their seat?

SEPM 4.7.4.3

5. After the seizure has finished, the casualty explains they have seizures “quite a lot, perhaps twice per week”, would you call MedLink?

SEPM 4.7.4.3

yes

6. A casualty is unconscious and breathing normally, what position would you place the casualty in?

SEPM 4.6.3.1.1

recovery position

7. As there is a possibility, the casualty could stop breathing, how often would you check for breathing?

SEPM 4.6.3.1.1

every minute for 10 seconds

8. What would be your actions, if the casualty stops breathing?

SEPM 4.6.3.2.1

commence CPR

9. When is the F.A.S.T acronym used?

SEPM 4.7.4.1

F- facial weakness

A- arm weakness

S- speech problems

T- time to call medlink

10. What actions would you take, when you suspect a casualty has had a stroke?

SEPM 4.7.4.1

obtain history and vital signs, use the FAST system as a guide, document the time of the onset of symptoms, deploy the tempus, consult medlink, help casualty into a comfortable position (if conscious) with head and shoulders raised, support weak areas, administer O2 on high flow, wipe away fluids from the mouth, monitor, be prepared to resuscitate

11. What position would you place a casualty in to, who is suspected of a stroke?

SEPM 4.7.4.1

if the casualty is conscious help him or her into a comfortable position with the head and shoulders raised. support weak areas of the body with a blanket and pillows

12. You are unsure if a diabetic casualty has high or low blood sugar, what would be your actions?

SEPM 4.7.5.1.2

offer a sweet drink

13. A casualty has fainted, what would be your actions?

SEPM 4.7.2.4

raise the legs above the level of the heart to improve the blood flow to the brain, obtain history and vital signs, administer O2 on high flow, loosen any tight clothing, contact MedLink immediately if casualty has injuries, is over 65 or has other pre-existing medical conditions

14. When would you call Medlink, when assisting a casualty who has fainted?

SEPM 4.7.2.4

if the casualty has injuries, is over 65 or has other medical conditions

15. What are the signs and symptoms of Hypoxia?

SEPM 4.2.2.2

impaired night vision, headache, reduce capacity for work, impaired performance at skilled task, hyperventilation, blue lips, earlobes and nail beds, impaired coloured vision followed by loss of peripheral vision and total vision, impaired muscle coordination, poor judgement, euphoria or depression, impaired memory, rapid or loss of consciousness, seizures, respiratory and cardiac failure, death

16. What would be your actions when assisting a casualty with Hypoxia?

SEPM 4.2.2.3

administer O2 on high flow, monitor the breathing rate and depth (slow down the breathing rate), contact MedLink, inform the flight crew immediately as cabin pressurization may need to be adjusted

17. How would you assist a casualty who is hyperventilating as she is a very nervous flyer?

SEPM 4.7.1.2

reassure and advise to breathe normally, move casualty to a quiet area of the AC, give O2 on high flow, call MedLink

18. A casualty is having an Asthma attack inflight, he has forgotten his Ventolin at home, can you assist him?

SEPM 4.7.1.1

provide the ventolin from the EMK and administer up to 2 puffs 30 to 60 seconds apart, wait for 15 minutes and call MedLink if no improvement

19. How many puffs of Ventolin is he permitted to take from the Ventolin in the EMK?

SEPM 4.7.1.1

up to 2 puffs 30 to 60 seconds apart