

Dive Plan Approval

Dive date/s		RAMP Number	
Project name			
Dive Coordinator			

ACTIVITY OUTLINE

Field work location	Car travel time/day(h)	Hours worked/day (Drive + field + Lab + prep time)	TAS Approval (Yes, No Pending)

Note: Add extra rows for multiply day dive trips.

Vessel Name:	
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Boat trailer will be parked at:	
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Divers Name:	Phone #	Dives/ day:	Restricted/ Scientific Diver	First Aid (exp. date)	DAN O2 (exp. date)	Medical (exp. date)	Boat Licence (Y/N)

Weather forecast

Wind		Swell		Seas	
Marine warnings:					

Fitness level

Low

- Single dive- observation

Medium

- Repetitive dives- observation
- Single dive- long transects (200m+)
- Single dive- strong current

High

- Repetitive dives long transects (200m+)
- Repetitive dives- strong current

Fluid management

Personal water L

Reserve water L

Dives

Day #: 1	Dive 1	Dive 2				
SI from last dive (Hours)						
RF						
Est. Depth (Meters)						
Deco limit (Mins)						
Est. dive time (Mins)						
Effective bottom time (Mins)						
RG						
Buddy pair/standby diver						
Dive leader						
Surface support						

For multiple days diving insert the required number of dive plan table.

Do any special conditions need to be adopted above and beyond normal safe diving practice?

Safety equipment

Personal Protective Equipment

- | | | | |
|------------------|-------------------|----------------------|---------------|
| Hat | Suitable clothing | Appropriate footwear | Sunscreen |
| Wet-weather gear | Dive knife | Wetsuit | Shark shields |

Other

- | | | | |
|---------------|----------------------------|-------|--|
| First aid kit | Oxygen first aid equipment | Other | <input style="width: 200px; height: 20px;" type="text"/> |
|---------------|----------------------------|-------|--|

EMERGENCY PROCEDURES

Emergency procedures can be found in the SSCI emergency procedures manual.

- Lost buddy procedures must be discussed in every pre-dive briefing.
- Sufficient oxygen (O₂) must be carried in the boat and the vehicle to ensure the patient receives 100% O₂ during the entire evacuation procedure, from the dive location to the medical facility.

Expected evacuation location	
Expected evacuation time to transport any patient to nearest facility	
Number of oxygen cylinders and size required	

EMERGENCY CONTACTS

Divers emergency services	1800 088 200
Chamber location and phone #	Fiona Stanley Hospital Hyperbaric Unit (08) 6152 2222
Sea rescue log in details	
Nearest medical/police contact/location and phone #	

The Dive Coordinator must ensure all personnel involved in this boating/diving operation are made aware of any hazards that exist at the dive location and any task related. No boating or diving shall be attempted unless the area and conditions are deemed to be safe for the type of work that is intended to be carried out.

Task Specific Hazard	Controls/Description
Diver to diver communication	
Diver to surface communication	
Diver emergency recall	
Fouling/entrapment	
Water temperature	
Description of underwater terrain	
Isolation of dive site	
Pre-dive fitness	
Manual handling	
Dive platform	

Boat handling	
Tides/Currents	
Dangerous marine life	
Marine traffic	
>50M from boat	
Disorientation/lost	

All participants must acknowledge and understand the potential hazards associated with this operation before diving commences.

Diver's Name	Signature

As Dive Coordinator, I understand to notify all personnel involved of the potential hazards associate with this operation.

Signature of Dive Coordinator		Date	
Approved	Yes	No	
Signature of Dive Officer		Date	