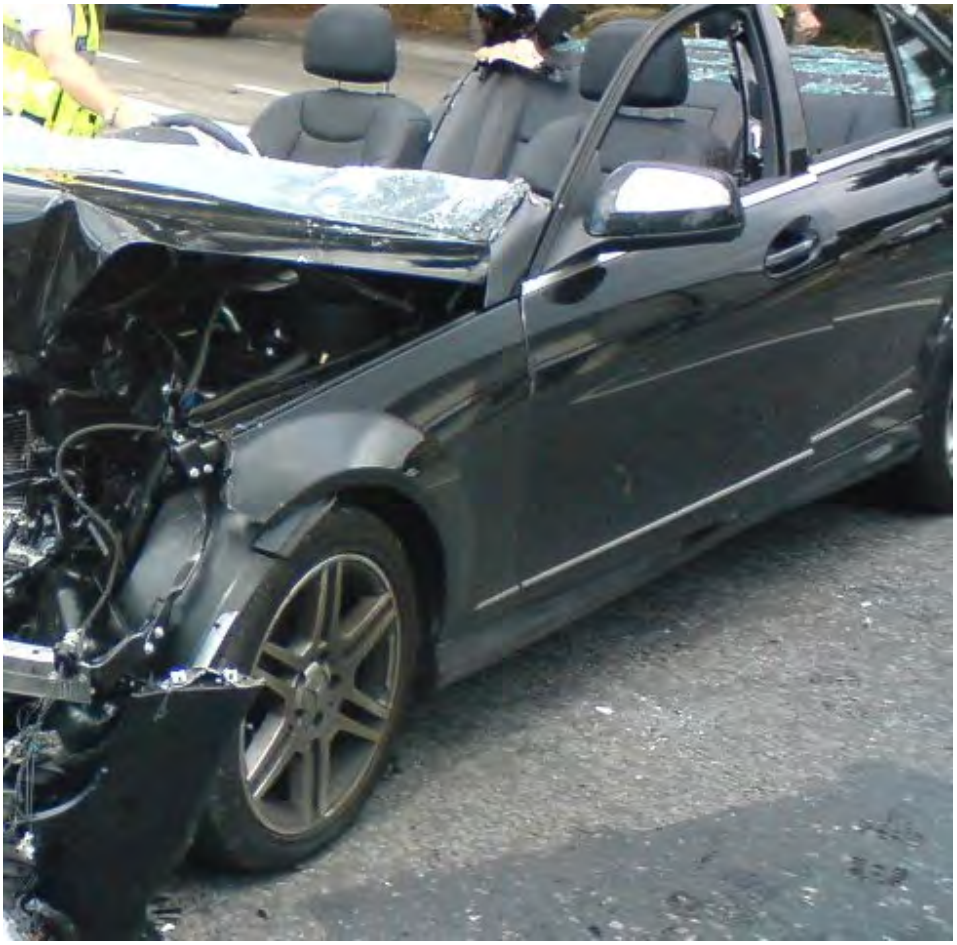
Roof Removal or Flap a look at both:

Nearly ever incident we attend the Gold standard for casualty extrication is for the roof to be removed, this gives us maximum space for casualty care and for the medics/Doctors to give evasive immediate life saving treatment, which would not be possible with the roof still in situ.

Complete roof removal has and is still the best option for a vehicle on its wheels, offering the greatest amount of created room for medical intervention, casualty access and removal.

It can be completed in minutes and will normally require 6-8 cuts depending on the size of the vehicle and how many posts need cutting.

We have always taught to cut the posts as low as we can to remove as much weight and metal as possible, but this is now not so easy with the ever increasing amount of airbags fitted to vehicles today, and also the new exotic metals we are having to deal with on a daily basis, these factors are relevant as to what we do, forcing us to now cut high on the posts.



There are many different thoughts on where the last cut should be, as a rule of thumb this cut should be the post offering the most structural integrity over the casualty, good control over these cuts is paramount as I have witnessed this post being cut early on at an incident and the remaining cuts completed leaving no structural support or protection over the casualty and medics, which could have ended in someone getting badly injured, this was down to poor training and the OIC not controlling operations.

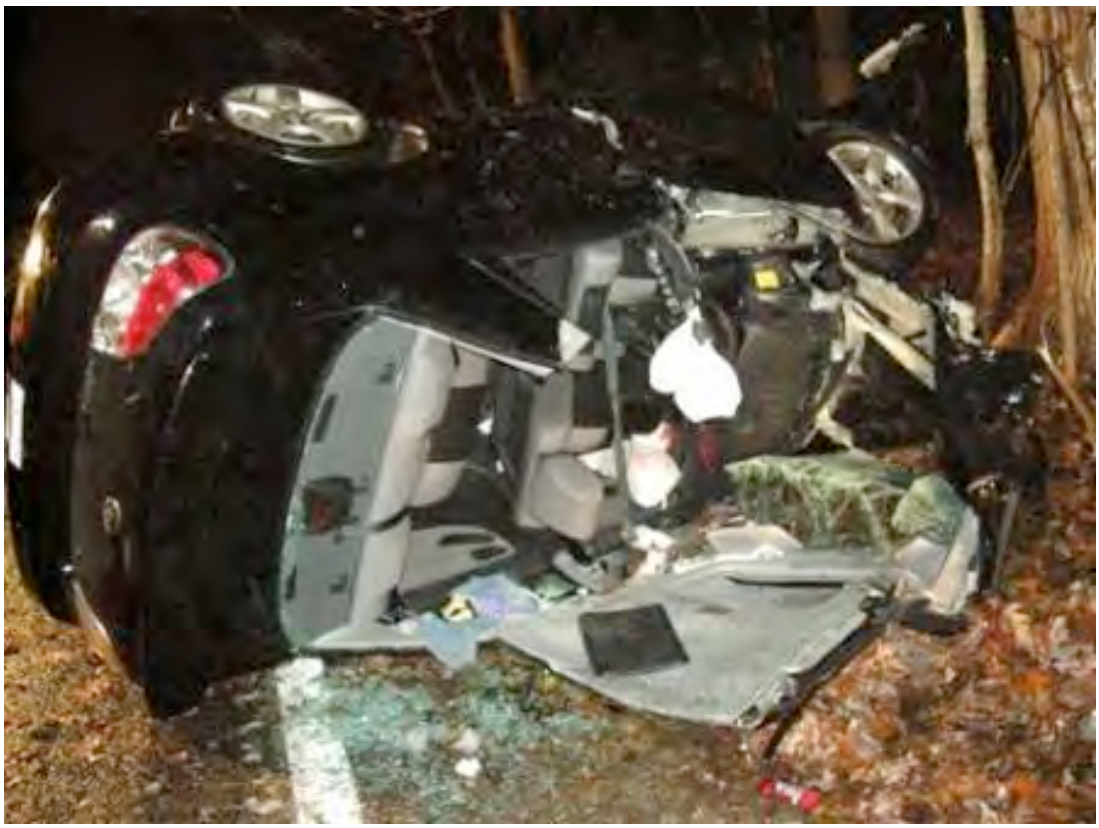
Roof Flap

The roof flap technique, this quite often seems to be the evolution of choice, either through bad habit's or is favored for some reason.

This technique can be very effective and quick to carry out but still requires if not the same but close to as many cuts to complete, depending on what type of flap you are going to carry out.

Yes one reason is that it reduces the amount of glass dust created, again this will depend on where you decide to make the flap. With the correct casualty protection (clear sheet) and compartmentation of the casualty and medics, glass dust does not really pose as a serious problem, and as i am aware there is no scientific data to show that this has caused a problem at RTC'c / MVA's that is not to say that we throw caution to the wind, never reduce the levels of PPE required c/w respiratory protection for everyone in the immediate area.

A good safety measure when flapping a roof is to attach a Line/rope to one of the posts to assist with the flap, this will greatly help with a heavy roof, and secondly is someone was to loose their footing it act as a safety to prevent the roof dropping out of control.



We have also witnessed the roof being flapped with the tailgate still attached, this is not best practice at all, it will raise the center of gravity as we flap the roof, it will be prone to catching the wind especially a rouge gust. Doing it this way will be very hard to control and is not advised, remove the tailgate and make your work easier.

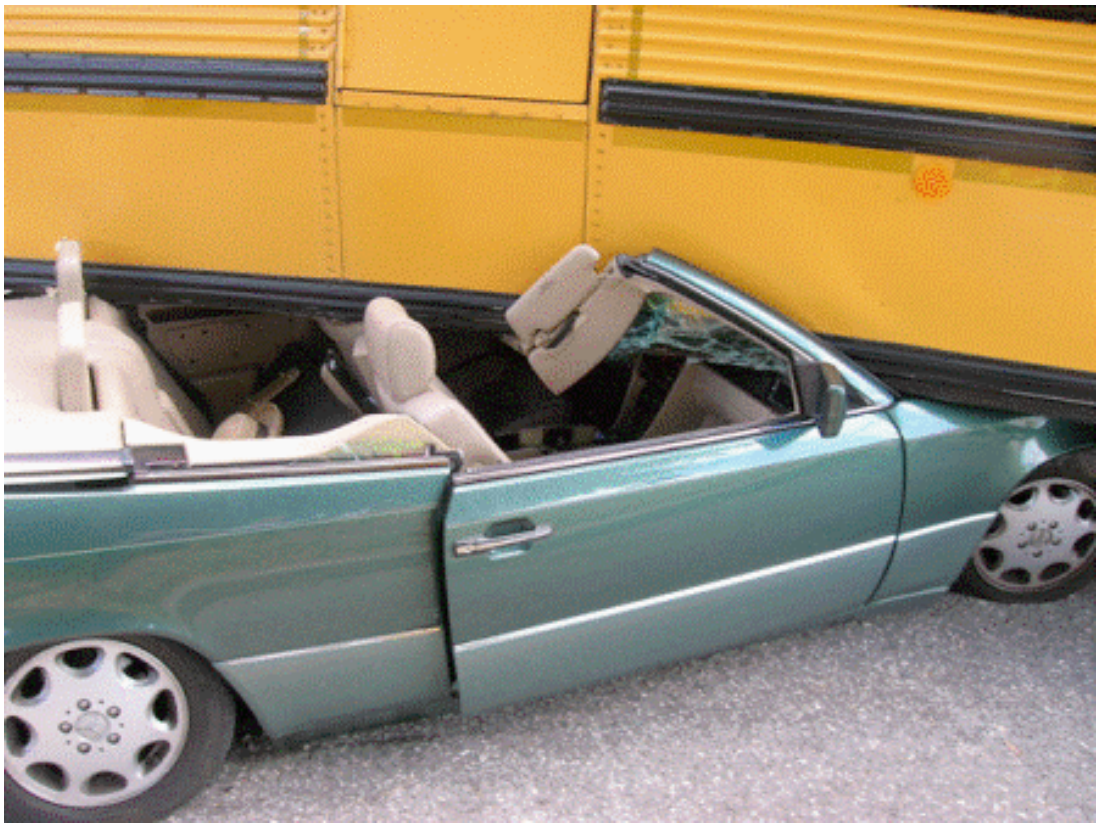
Think ahead if there is a sunroof fitted, can we still flap the roof effectively, as the multiple layers of strengthening for the sunroof may hinder this technique.

There are also the half flap techniques from all angles and areas of the roof, think of one thing, will that technique do what you need to make the right amount of space for a casualty centered extrication, sometimes all that is needed is a half roof flap. (two cuts, two relief cuts) are all thats needed.

Remember some medical airway management can only be carried out from the front of the casualty, so if you have flapped the roof in a way that leaves the windshield and A-posts in place this will prevent or greatly hinder this medical treatment, plan ahead for every action we perform.

Lets get out of the old school thinking, that we do it because its what we prefer or because its what we have always done.

Both have their place at a rescue, use the right one for the best outcome, get good at them and practice them regularly.



<u>Some TIPS</u>

- Cut and remove all seat belts
- Secure a line to the roof to assist with the flap
- Carry out any cross ramming, door removal etc before roof removal, as once the roof is removed a lot of structural integrity will be lost, making ramming etc a lot harder.
- Double check all cuts are complete and have severed the part we are cutting
- Complete the last cut nearest the casualty maintaining structural protection over them
- Expose all trim
- Secure the roof once flapped