Interim Strategies: What to know when it’s time to turn to interim life safety measures (ILSMs). These measures briefly compensate for potential hazards during periods of equipment or system repair, renovations, and new construction.

Hospital Heliport Hazard: Health care organizations with heliports need to submit for and complete FAA Form 5010 to make sure they are “visible” to drone and other unmanned aircraft operators.

Laser-Sharp Focus on Medical Laser Safety: Often overlooked, the use of medical lasers in surgical suites necessitates appropriate management by health care organizations and use of laser protective equipment. Joint Commission–accredited facilities should follow industry consensus standards, as required by OSHA, to maximize the safety of patients and staff during laser-related procedures.

What’s Your Solution? See suggested solutions in answer to this question: How does your organization maintain appropriate humidity levels in spaces that are especially sensitive to moisture, such as sterile storage areas and laboratories?
PATIENT SAFETY

Hospital Heliport Hazard

HEALTH CARE ORGANIZATIONS WITH HELIPORTS NEED TO SUBMIT FOR AND COMPLETE FAA FORM 5010 TO MAKE SURE THEY ARE “VISIBLE” TO DRONE AND OTHER UNMANNED AIRCRAFT OPERATORS

by Rex J. Alexander

With ever increasing air traffic due to drones and other unmanned aircraft systems (UAS)—and soon urban air mobility (UAM) and autonomous delivery aircraft—our airspace is becoming busier and more crowded than ever before. For this reason, it is vital for each airport and heliport in operation to be accurately accounted for, and that includes hospital heliports. In the United States, this accountability is accomplished through the Federal Aviation Administration (FAA) “Airport Master Record” program, often referred to as the “5010 database” because FAA Form 5010 is the document that needs to be completed and submitted for inclusion in the record.

The 5010 record is a one-page data sheet that contains pertinent information for a specific takeoff and landing site: location information (latitude and longitude), flight hazards, point of contact, radio frequencies, noise sensitive areas, phone numbers, services, and so forth. The record allows for the identification of each individual site through a special code known as an “airport identifier.” A heliport with this identifier becomes part of a searchable database that enables its location to be taken into account by aircraft operators for flight planning purposes.

According to an alert issued by NASA’s Aviation Safety Reporting System (ASRS) on January 31, an estimated 1,600 to 1,800 hospitals in the United States have heliports that are not included in the current FAA airport master record 5010 database. As a result, these heliports do not exist in the eyes of the FAA; they can’t be found in the FAA’s database or any other aviation database.

In other words, without an airport identifier, these hospital heliports are unknown and invisible to anyone searching for them in the federal system. This includes UAS and drone operators, who are required by federal law to notify airports and heliports of their activity when operating in close proximity (5 miles or less) to any airport or heliport.

If a hospital heliport does not exist in the 5010 system, UAS and drone operators will not be alerted to its presence and will not know to avoid the airspace or look for air traffic, nor will they be able to contact or alert the hospital regarding their presence and nearby flight operations. Inclusion in the 5010 database is also of critical importance to many of the vital Global Positioning System (GPS) and computer-based applications that federal and state agencies rely on during natural disasters and mass casualty incidents, such as fires, floods, tornadoes, hurricanes, and terrorist attacks.
To determine whether they have an airport identifier and are included in the 5010 database—and if so, whether the information therein is accurate—health care organizations with heliports can search these websites:

- Airport IQ 5010 Airport Master Records and Reports (https://www.gcr1.com/5010WEB/advanced search.cfm)
- FAA Airport Data & Contact Information (https://www.faa.gov/airports/airport_safety/airportdata_5010/)
- AirNav.com / Advance Airport Search (http://airnav.com/airports/search.html)

**What to do**

Hospitals that do not have a Form 5010 on record will more than likely need to submit FAA Form 7480-1 “Notice of Construction, Alterations and Deactivation of Airports” to the FAA before they can submit for their Form 5010 and obtain an airport identifier. The Form 7480-1 process can be initiated through the FAA Flight Standards District Office (https://www.faa.gov/about/office_org/field_offices/fsdo/) (FSDO) having geographical jurisdiction in conjunction with the aeronautics division of the state’s department of transportation. A copy of FAA Form 7480-1, including instructions for completion and submission, can be accessed on this page of the FAA's website (https://www.faa.gov/forms/index.cfm/go/document .information/documentID/185334).

The 7480-1 submission process will trigger an airspace study by the FAA Airport District Office (ADO), which will assign an FSDO inspector to the case. Once the airspace study has been completed by the inspector, the ADO will issue an airspace determination letter along with a blank Form 5010 to the applicant.

Oftentimes, a critical step that is not completed is filling out and returning Form 5010 to the FAA. This is the responsibility of the heliport owner; the FAA will not proactively look to see whether Form 5010 was submitted and contact the heliport if the form is missing. Once an airspace determination has been rendered, a heliport has 18 months in which to complete the Form 5010 process. If the heliport misses that deadline, a new airspace determination may have to be initiated before submission of Form 5010.

**Stay current**

Just as important as having a 5010 airport master record on file is keeping the information up-to-date. There are numerous 5010 records in the FAA database that have never been updated since they were issued. In some cases, these records have been found to be 20 to 30 years old and even older. Over the years,
many heliports have been relocated from ground facilities to rooftop facilities, while others have been moved, along with their hospitals, several miles to a completely different location.

Hospitals with 5010 records on file with the FAA can search the databases listed above to ascertain whether the latitude and longitude of their heliport are accurate as well as the hospital’s physical address. Some FAA records have been found to be 10 to 20 miles and even 50 miles from the heliport’s actual location. With the aid of a basic mapping program such as Google Earth, the latitude and longitude information of a hospital’s heliport can easily be determined within an accuracy of +/− a few feet.

Equally as important as the accuracy of the location information is the facility’s contact information. There should always be someone at each facility who has been identified as the “heliport manager” in the 5010 record. This individual’s information should always include a phone number that is monitored 24/7 and that does not go into voice mail. A continuously monitored security or emergency department phone line makes for an excellent choice in this case. When the heliport manager leaves the organization or no longer serves in this capacity, a new person should assume this role as soon as possible and the information on the 5010 record should be updated accordingly.

A good habit that all hospitals with heliports should practice on at least an annual basis is to validate their 5010 information as follows:

- Confirm that the name of the hospital is still correct.
- Confirm that the name of the heliport manager is correct.
- Call the phone numbers listed on the 5010 record to make sure the right person answers and in a timely manner and the call doesn’t go into voice mail.
- Validate and update the accuracy of the latitude and longitude.
- Validate and update the accuracy of the address.
- Validate and update the heliport’s markings, dimensions, and lighting.
- Evaluate and update any hazards in the surrounding airspace. These include but are not limited to buildings, towers, antennas, fences, trees, wires, and poles.

To update the information on an existing 5010 airport master record, hospitals can contact the FAA Flight Standards District Office as well as the aeronautics division of their state’s department of transportation for assistance.
Verifying 5010 data does not require a formal background or education in aviation. To make a positive impact on helicopter air ambulance operations and patient safety, you only need to answer three simple questions:

1. Does the hospital have a heliport?
2. If yes, does the heliport have a 5010 record on file with the FAA?
3. If yes, is the information on the 5010 up-to-date?

Answering these three simple questions can go a long way toward identifying and mitigating high-risk hazards for hospitals, air ambulance providers, and the patients they have both sworn to protect.

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Reference