

# NABOS 2009 Arctic Expedition aboard Icebreaker Kapitan Dranitsyn

**August 15 – September 7, 2009**

## **Organizers:**

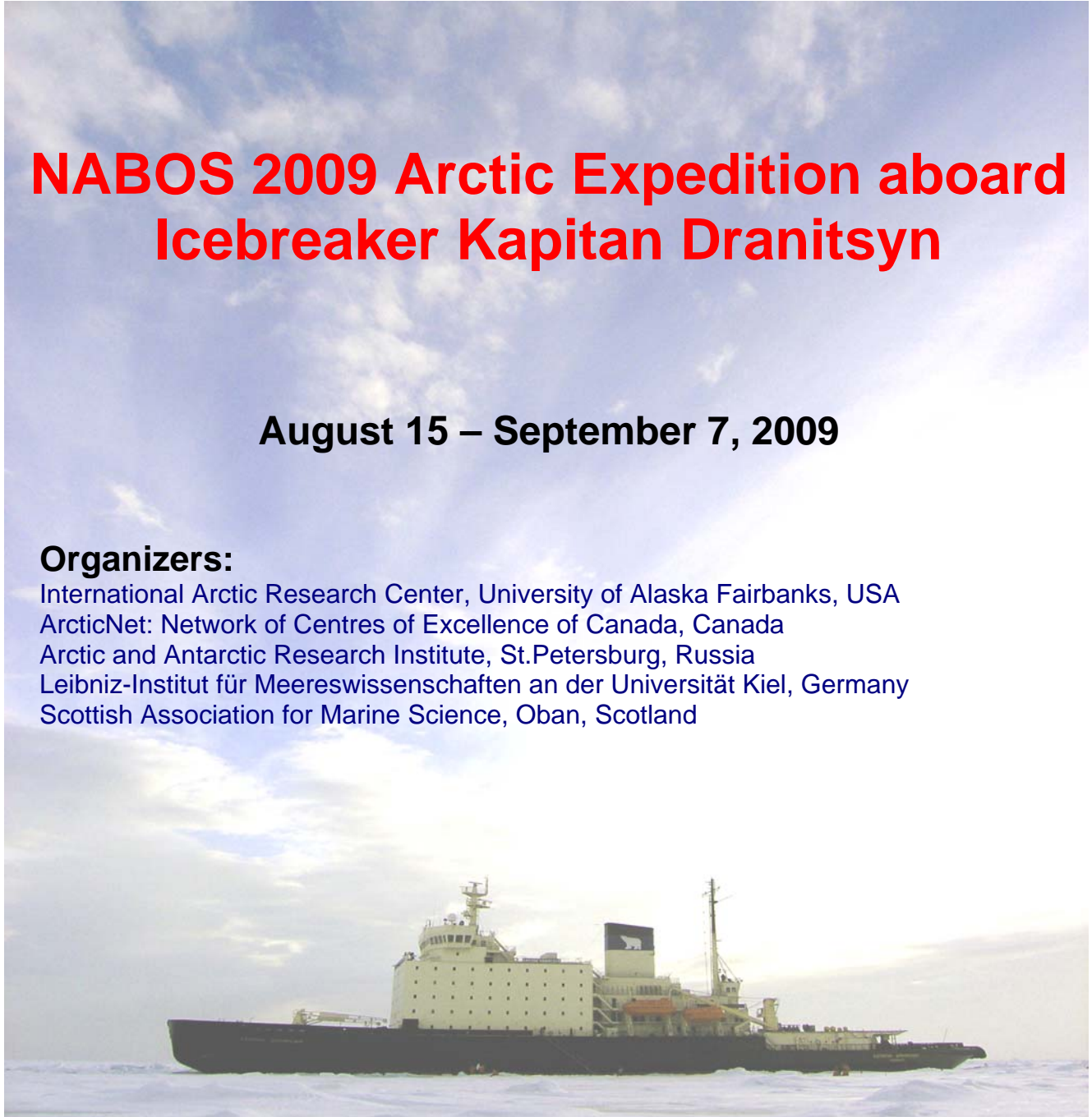
International Arctic Research Center, University of Alaska Fairbanks, USA

ArcticNet: Network of Centres of Excellence of Canada, Canada

Arctic and Antarctic Research Institute, St.Petersburg, Russia

Leibniz-Institut für Meereswissenschaften an der Universität Kiel, Germany

Scottish Association for Marine Science, Oban, Scotland



# Welcome!

*from the IARC Director and NABOS Project Leader*

## Dear IARC 2009 Arctic Expedition Participants:

We welcome you to the Nansen and Amundsen Basins Observational System (NABOS) 2009 Arctic Expedition aboard Icebreaker *Kapitan Dranitsyn*.

This is the *Kapitan Dranitsyn's* seventh scientific cruise to the Arctic Ocean under the auspices of the NABOS program that brings together international research institutions and programs. This promises to be an exciting and informative time.

Oceanographic observations carried out in the 2000s documented large-scale warming in the intermediate Atlantic Water layer of the Eurasian Basin of the Arctic Ocean. The strength of the warming in the 2000s was unique. For example, observations carried out in 2006 in the vicinity of Svalbard at  $\sim 30^{\circ}\text{E}$  captured exceptional warming of a magnitude that was unprecedented with no parallel in the regional instrumented record. However, mooring- and ship-based observations carried out in 2006–08 showed strong ( $\sim 1^{\circ}\text{C}$ ) cooling in the western and central parts of the Nansen Basin. Thus, this expedition promises to provide key information about transition of the Arctic Ocean to a cooler state.

We hope that your experience in this 2009 Arctic Expedition will be personally satisfying and become an important milestone in your scientific careers.

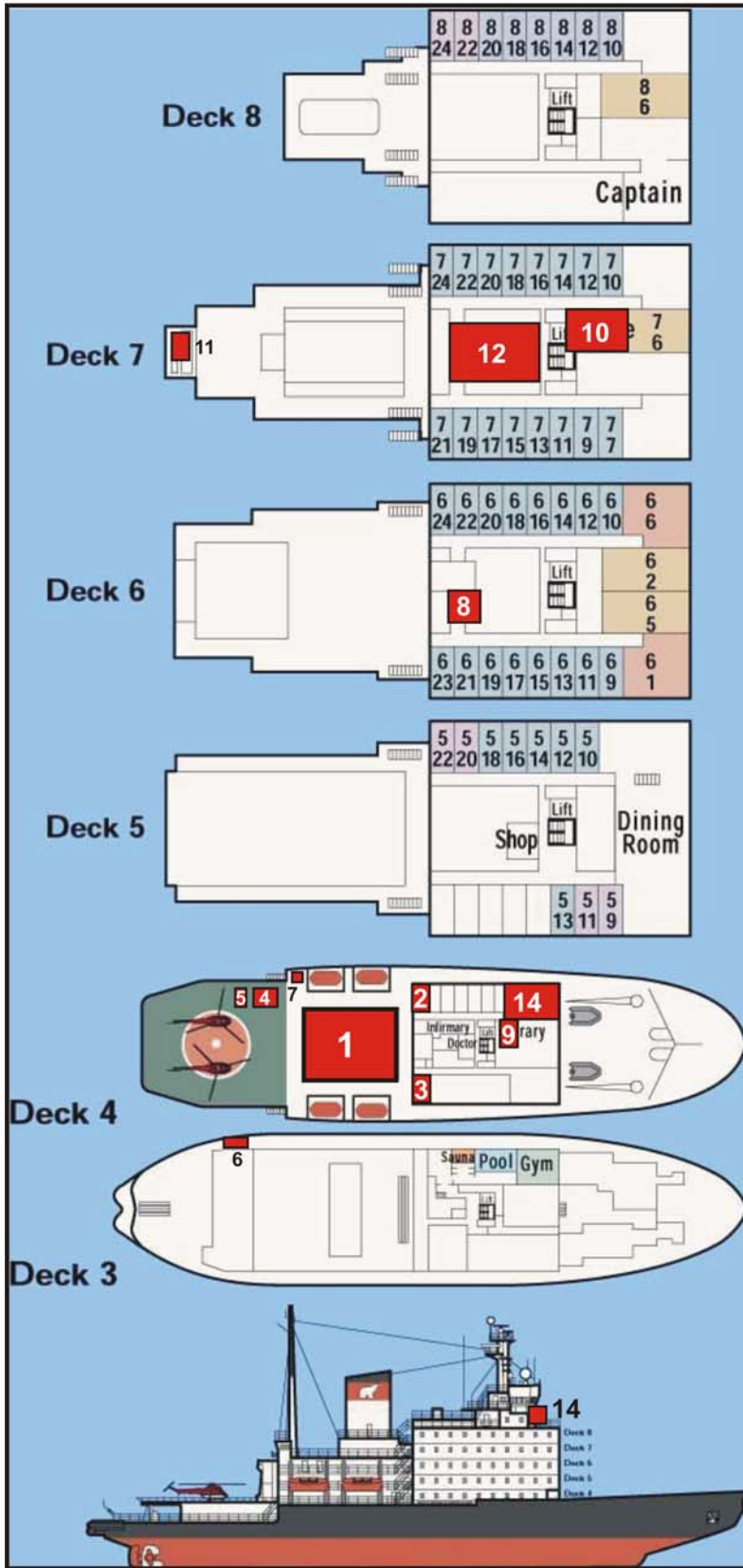
With best wishes for a successful, enjoyable, and productive participation in this 2009 Arctic Expedition,

Sincerely,

Larry Hinzman  
Director, IARC



















Igor Polyakov  
NABOS Project Leader

# Plan of Laboratories/Offices/Working Sites



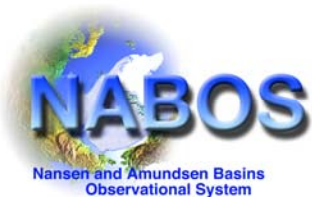
- 1. Helicopter hangar:** Used for CTD/Rosette water sampling, mooring equipment storage and preparation, CTDs data retrieve, eco-sounding activity. GPS. Wet. No running water. Computers are permitted only for related activities. No storing capacities. No other activity.
- 2. Cabin 4-40:** Hydrochemical laboratory only. Running water.
- 3. Instrument preparation laboratory:** Other dry activity permitted. No running water.
- 4. CTD/Rosette/Mooring winch**
- 5. Mooring capstan**
- 6. Open deck mooring assistants site.**
- 7. Open deck echo-sounding site.**
- 8. Cabin 6-35:** Hydrochemical laboratory only. Water filtration. Running water.
- 9. Library:** Open for very gentle and clean research activity. Social activity.
- 10. Cabin 7-26:** Expedition office. Satellite phone and e-mail, printer. Senior scientists/technicians meeting room. No other activity.
- 11. Helicopter control room:** Open for your requests.
- 12. Conference room:** Computer projector, TVs, screen. Meetings. Seminars. Other social activity.
- 13. Cabin 9-1:** Meteorological laboratory only (Deck 9).
- 14. Lounge:** Social activity only. No smoking.

# List of Participants

#	Name	Position	Affiliation	Team	Country
1	Alexeev, Vladimir	Chief Scientist	IARC, UAF	Adm	USA 
2	Alexeeva Tatiana	Team Leader	AARI	Ice	Russia 
3	Belcheva, Nina	Scientist	POI	Che	Russia 
4	Beliveau, Ian	Moor.Tech	Oceanetic	Tec	Canada 
5	Bieniek, Peter	PhD student	GI, UAF	Met	USA 
6	Birke, Ewig	PhD student	IFM-Geomar	Hyd	Germany 
7	Bouchard, Caroline	PhD student	LU	Bio	Canada 
8	Chechin, Dmitriy	PhD student	IAP RAS	Met	Russia 
9	Chernyavskaya, Ekaterina	PhD student	AARI.	Hyd	Russia 
10	Dmitrenko, Igor	Scientist	IFM-Geomar	Hyd	Germany 
11	Folomeev, Oleg	Scientist	AARI	Ice	Russia 
12	Irina, Anastasia	Ph.D Student	AARI	Hyd	Russia 
13	Ivanov, Vladimir	Co-Chief Sci.	IARC	Hyd	USA 
14	Keen, Peter	Technician	Oceanetic	Tec	New Zealand 
15	Kemp, John	Technician	WHOI	Tec	USA 
16	Kirillov, Sergey	Co-chief scientist	AARI	Hyd	Russia 
17	Lalande, Catherine	Team leader	LU	Bio	Canada 
18	Legatt, Rebecca	Student	IARC	Hyd	USA 
19	Makhotin, Mikhail	Scientist	AARI	Hyd	Russia 
20	Makkaveev, Petr	Team leader	IO RAS	Che	Russia 
21	Meldrum, David	Moor.Tech	NOCS	Tec	UK 
22	Nikulina, Anna	Scientist	AARI	Che	Russia 
23	Pietro, Jeff	Mooring Tech	WHOI	Tec	USA 
24	Pipko, Irina	Team leader	POI RAS	Che	Russia 
25	Pnyushkov, Andrey	Scientist	IARC, UAF	Hyd	USA 
26	Pugach, Svetlana	Scientist	POI RAS	Che	Russia 
27	Rember, Rob	Chief Mooring Tech	IARC, UAF	Tec	USA 
28	Repina, Irina	Team leader	IAP RAS	Met	Russia 
29	Smirnov, Alexander	Scientist	IAP RAS	Met	Russia 
30	Syromyatina, Margarita	Adm. assistant	SPb SU	Adm	Russia 
31	Vinogradova, Elena	Scientist	IO RAS	Che	Russia 
32	Waddington, Ian	Mooring Tech	NOCS	Tec	UK 

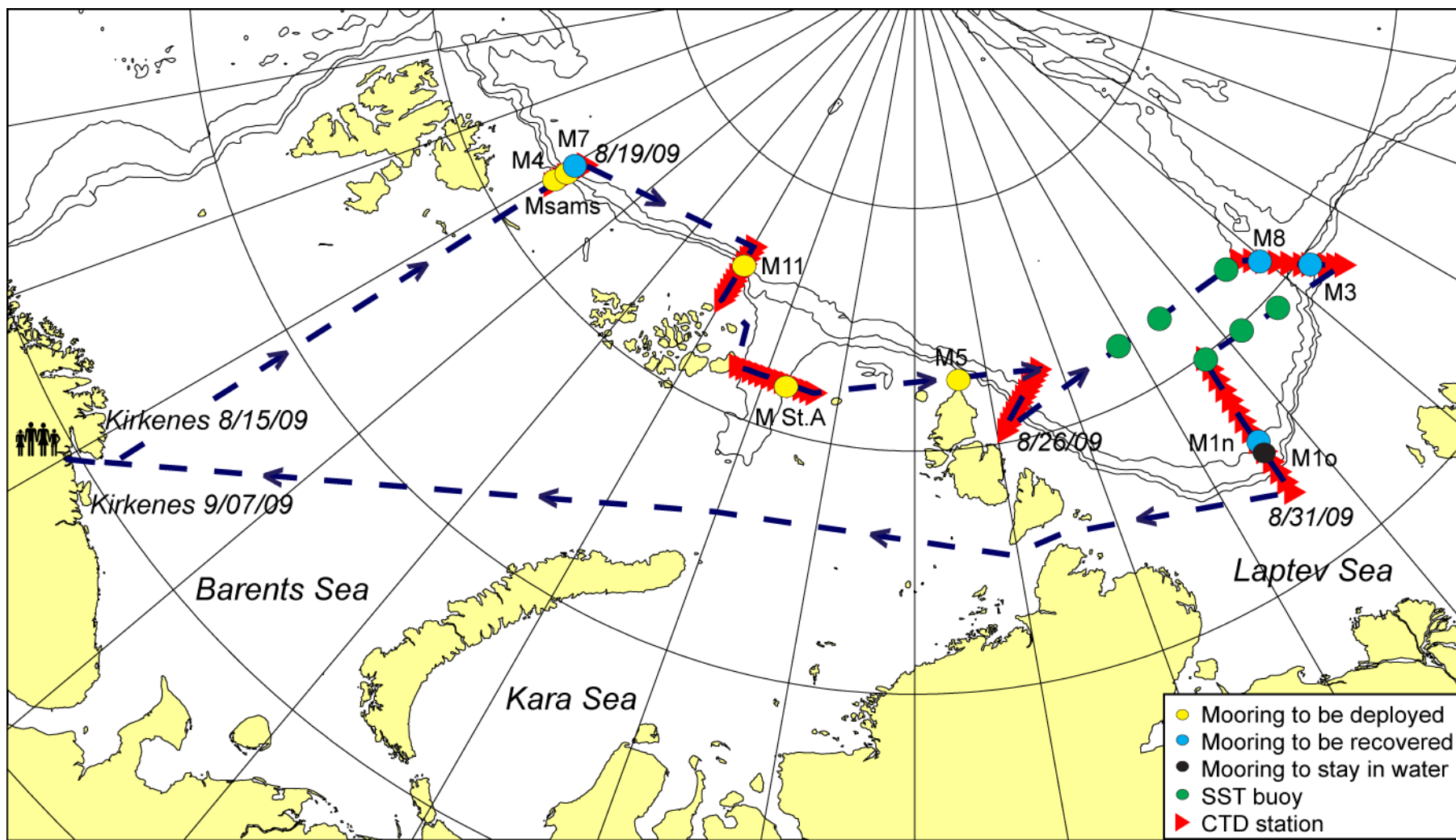
## ***Abbreviations***

	Affiliation		Team
<b>AARI</b>	Arctic and Antarctic Research Institute	<b>Adm</b>	Administration
<b>IARC</b>	International Arctic Research Center UAF	<b>Bio</b>	Hydrobiology
<b>IO RAS</b>	Shirshov Institute of Oceanology	<b>Che</b>	Hydrochemistry
<b>IAP RAS</b>	Obukhov Institute of Atmospheric Physics	<b>Geo</b>	Geochemistry
<b>LU</b>	Laval University	<b>Hyd</b>	Hydrography
<b>NOCS</b>	National Oceanographic Center Southampton	<b>Ice</b>	Ice
<b>POI RAS</b>	Pacific Oceanographic Institute	<b>Met</b>	Meteorology
<b>SPbSU</b>	St.Petersburg State University	<b>Tec</b>	Mooring technicians
<b>UAF</b>	University of Alaska Fairbanks		
<b>IFM</b>	Institut fuer Meereskunde		



# NABOS 2009 Cruise Map

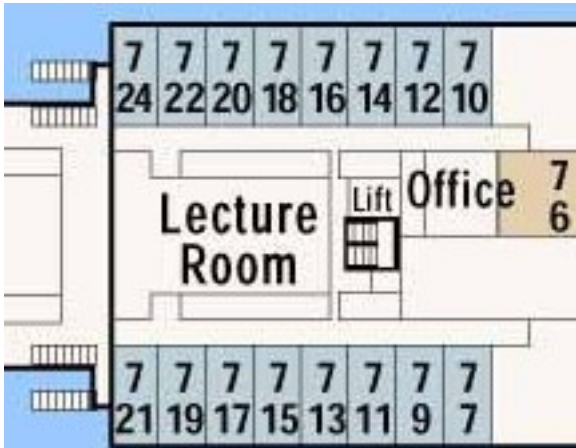
August 15 – September 7, 2009



# Cabin Assignment

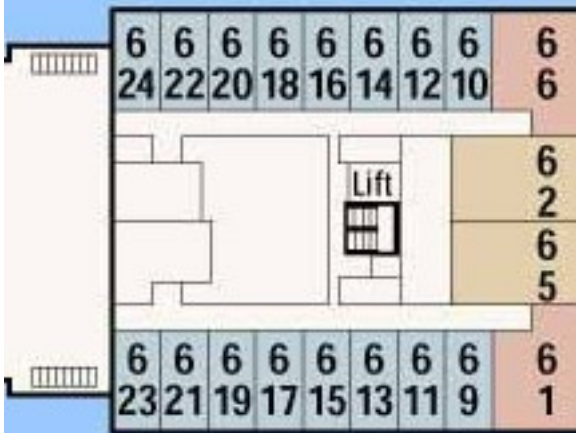
D  
E  
C  
K

7



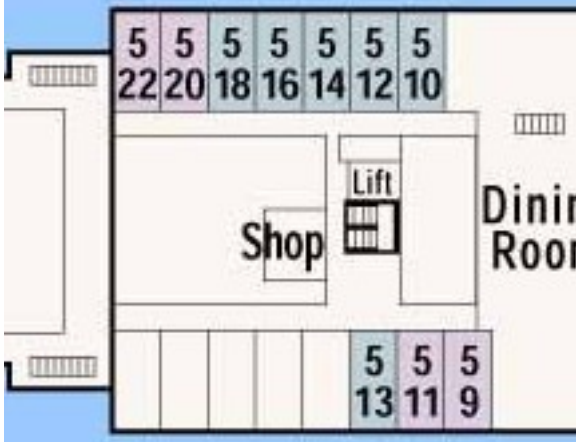
D  
E  
C  
K

6



D  
E  
C  
K

5



Name	Cabin #
1. Alexeev, Vladimir	6-1
2. Alexeeva Tatiana	6-10
3. Belcheva, Nina	6-13
4. Beliveau, Ian	7-18
5. Bienek, Pieter	6-21
6. Birke, Ewig	7-20
7. Bouchard, Caroline	7-13
8. Chechin, Dmitriy	6-23
9. Chernyavskaya, Ekaterina	6-18
10. Dmitrenko, Igor	6-2
11. Folomeev, Oleg	6-24
12. Ilina, Anastasia	7-22
13. Ivanov, Vladimir	6-5
14. Keen, Peter	7-14
15. Kemp, John	7-16
16. Kirillov, Sergey	6-6
17. Lalande, Catherine	7-15
18. Legatt, Rebecca	7-17
19. Makkaveev, Petr	6-20
20. Makhotin, Mikhail	6-22
21. Meldrum, David	7-9
22. Nikulina, Anna	7-24
23. Pietro, Jeff	7-12
24. Pipko, Irina	6-15
25. Phyushkov, Andrey	7-7
26. Pugach, Svetlana	6-19
27. Rember, Rob	7-6
28. Repina, Irina	6-9
29. Smirnov, Alexander	6-17
30. Syromyatina, Margarita	6-12
31. Vinogradova, Elena	6-11
32. Waddington, Ian	7-10

## Cruise Schedule

Date	Location	Activity	
		Work	Meetings
August, 15 Saturday	Kirkenes	<u>10:00 – 15:00</u> Loading and embarkation	<u>21:00 – 22:00</u> Welcome meeting <u>22:00 - 24:00</u> Welcome reception
<b>Departure from Kirkenes 16:00 August, 15</b>			
August 16	Sailing to Station #1 (Barents Sea)	Checking and preparation of equipment	<u>9:00 – 12:00</u> Safety instruction meeting <u>13:00 – 16:00</u> Icebreaker tour <u>17:00 – 19:00</u> NABOS program overview. Team presentations
August 17	Sailing to Station #1 (Barents Sea)	Meteorology, equipment preparation	<u>9:00 – 11:00</u> Team leaders workshop <u>17:00 – 19:00</u> Team presentations
<b>Start of operations in watches: 13:00 August 18, 2009</b>			
August 18	Station #1, Svalbard transect	CTD, met, net tow M SAMS	Meetings as needed
August 19	Svalbard transect, Sailing to the Franz Joseph Land (FJL) transect	CTD, met, net tow M4, M7	
August 20	FJL transect	CTD, met	
August 21	FJL transect,	CTD, met, M11	
August 22	FJL transect, sailing to St.Anna Trough transect	CTD, met	
August 23	St.Anna transect,	CTD, met, M St.Anna	
August 24	Sailing to Severnaya Zemlya (SevZ)		
August 25	SevZ transect	CTD, met	
August 26	SevZ transect	CTD, met, M5	
August 27	Sailing to Lomonosov Ridge (LR) transect	CTD, met, net tow, SST buoys	
August 28	LR transect, Sailing to the Laptev Sea (LS) transect	CTD, M8, M4, net tow, SST buoys	
August 29	LS transect	CTD, met, net tow	
August 30	LS transect	CTD, met, mooring M1n, checking on M1o	
August 31	LS transect, sailing HOME.	CTD, met	
<b>End of operation in watches: 20:30 August 31, 2009</b>			
September 1	Sailing home	Packing	<u>17:00 – 19:00</u> <i>Team Presentations:</i> Preliminary results
September 2	Sailing home	Packing	
September 3	Sailing home	Packing	
September 4	Sailing home	Packing	
September 5	Sailing home	Packing	<u>18:00 – 20:00</u> Final meeting <u>21:00 – 28:30</u> Farewell reception
September 6	Sailing home	Packing	
<b>Estimated arrival in Kirkenes: September 6, Sunday, around midnight</b>			
<b>Expedition team leaves the vessel before 10 a.m, on September 7</b>			

*Notes:*

1. Ship time (Moscow Time = GMT+3 hrs) is used. Norwegian time = GMT+2 hrs.
2. Watches schedule: 08:00 – 16:00; 16:00 – 24:00; 00:00 – 08:00
3. We usually get together either in the meeting room or in the lounge for movies, slide shows, popular presentations, etc. Cruise participants are strongly encouraged to bring along their favorite movies, prepare a talk/slide show on practically any subject of general interest.

# **Expedition meetings. Preliminary agenda**

## **August 15, 21:00 – 22:00 Welcome Meeting**

(chaired by Vladimir Alexeev)

### **Welcome from the Ship Owner and the Crew**

*Captain of the Icebreaker Kapitan Dranitsyn (Russia)*

### **Welcome from Russian NABOS Partners**

*Co-chief scientist Dr. Sergey Kirillov (Russia)*

### **Welcome from the NABOS Project**

*Chief Scientist Dr. Vladimir Alexeev (USA)*

### **Brief presentation of Expedition Participants**

## **August 16, 09:00 – 16:00 Orientation meeting**

(chaired by Vladimir Alexeev)

### **Safety Rules aboard Icebreaker Kapitan Dranitsyn**

*First Chief Mate and First Passenger Mate*

### **Safety Regulation during research operations aboard Kapitan Dranitsyn**

*Cruise chief scientist Dr. Vladimir Alexeev*

### **University of Alaska Fairbanks Regulation on Discrimination and Sexual Harassment**

*Dr. Vladimir Ivanov, IARC UAF*

### **Alarm Safety Training**

*supervised by KD crew*

### **Excursion around the Icebreaker (13:00-16:00)**

*KD crew*

## **August 16, 17:00 – 19:00, Research Team Meeting**

chaired by Igor Dmitrenko (Germany)

### **NABOS program overview**

*Vladimir Alexeev (USA)*

### **Hydrographic research during NABOS 2009 expedition**

*Co-Chief scientist Sergey Kirillov (Russia)*

### **Biological studies during NABOS 2009 expedition**

*Catherine Lalande (LU, Canada)*

### **Ice observations during NABOS 2009 expedition**

*Tatiana Alexeeva (AARI, Russia)*

## **August 17, 17:00 – 19:00, Research Team Meeting**

chaired by Vladimir Ivanov (USA)

### **Mooring operations during NABOS 2009 expedition**

*Rob Rember (IARC, USA)*

### **Meteorological research during NABOS 2009 expedition**

*Irina Repina ( Russia) and Vladimir Alexeev (USA)*

### **Hydrochemical research during NABOS 2009 expedition**

*Team leader*

## **September 1, 18:00 - 19:00, Research Team Meeting**

chaired by *Sergey Kirillov (Russia)*

**Agenda TBD.**

## **September 5, 18:00 - 19:00, Final Meeting**

chaired by *Vladimir Alexeev (USA)*

**NABOS 2009 Expedition: Highlights and activity report**

*Vladimir Ivanov*

**Brief reports from research teams, 10 minutes each**

*Team leaders*

**Discussion**

**Final remarks: Data exchange policy, cruise report, common documents**

*Vladimir Alexeev, University of Alaska Fairbanks, USA*

# NABOS 2009 Operational schedule

Operation	Time (end)	latitude	longitude	Depth	CTD	Mooring	Net	SST buoys
Depart KKN	8/15/09 16:00	69-45.20	30-08.45					
KD0109	8/18/09 13:00	81-13.82	30-58.42		x		x	
KD0209	8/18/09 15:00	81-18.13	30-58.62		x		x	
KD0309	8/18/09 17:00	81-22.45	30-58.82		x		x	
KD0409, Mooring SAMS	8/19/09 00:00	81-30.00	31-00.00		x	D	x	
KD0509, M4	8/19/09 07:00	81-34.00	30-51.00		x	D	x	
KD0609	8/19/09 08:30	81-37.00	31-00.89		x		x	
KD0709, M7	8/19/09 15:30	81-40.00	31-11.00		x	R	x	
KD0809	8/19/09 17:30	81-47.31	31-08.13		x		x	
KD0909	8/19/09 19:30	81-54.61	31-05.22		x		x	
KD1009	8/19/09 21:30	82-01.92	31-02.23		x		x	
KD1109	8/20/09 22:30	83-18.82	60-05.37		x		x	
KD1209	8/21/09 00:00	83-10.68	60-04.37		x		x	
KD1309	8/21/09 03:00	83-02.55	60-03.40		x		x	
KD1409	8/21/09 05:00	82-54.41	60-02.48		x		x	
KD1509	8/21/09 07:30	82-46.27	60-01.58		x		x	
KD1609	8/21/09 09:30	82-38.14	60-00.72		x		x	
KD1709, M11	8/21/09 17:00	82-30.00	60-00.00		x	D	x	
KD1809	8/21/09 19:00	82-23.02	59-58.67		x		x	
KD1909	8/21/09 21:00	82-16.04	59-57.49		x		x	
KD2009	8/21/09 23:00	82-09.06	59-56.34		x		x	
KD2109	8/22/09 01:00	82-02.08	59-55.22		x		x	
KD2209	8/22/09 12:00	80-58.18	65-53.52		x		x	
KD2309	8/22/09 14:00	80-58.86	66-46.57		x		x	
KD2409	8/22/09 16:00	80-59.42	67-39.74		x		x	
KD2509	8/22/09 18:30	80-59.84	68-33.00		x		x	
KD2609	8/22/09 21:00	81-00.13	69-26.34		x		x	
KD2709	8/22/09 23:00	81-00.29	70-19.72		x		x	
KD2809	8/23/09 01:00	81-00.33	71-13.12		x		x	
KD2909	8/23/09 03:30	81-00.23	72-06.51		x		x	
KD3009, M St. Anna	8/23/09 11:00	81-00.00	73-00.00		x	D	x	
KD3109	8/23/09 13:00	80-59.49	73-53.55		x		x	
KD3209	8/23/09 15:00	80-58.85	74-47.12		x		x	
KD3309	8/23/09 17:00	80-58.07	75-40.55		x		x	
KD3409	8/23/09 19:00	80-57.17	76-33.82		x		x	
KD3509	8/25/09 01:00	81-18.65	106-59.14		x		x	
KD3609	8/25/09 03:00	81-13.18	106-22.60		x		x	
KD3709	8/25/09 05:00	81-07.65	105-46.81		x		x	
KD3809	8/25/09 07:30	81-02.07	105-11.77		x		x	
KD3909	8/25/09 10:15	80-56.43	104-37.44		x		x	
KD4009	8/25/09 12:30	80-50.73	104-03.83		x		x	
KD4109	8/25/09 14:45	80-44.99	103-30.91		x		x	
KD4209	8/25/09 17:00	80-39.20	102-58.66		x		x	
KD4309	8/25/09 19:15	80-33.35	102-27.08		x		x	
KD4409	8/25/09 21:25	80-27.46	101-56.14		x		x	
KD4509, M5	8/26/09 04:00	80-21.53	101-26.02		x	D	x	
KD4609	8/26/09 06:00	80-14.68	101-00.71		x		x	
KD4709	8/27/09 20:15	80-58.25	137-38.94		x		x	D

KD4809, M8	8/28/09 03:00	80-47.00	138-47.00		x	R	x	
KD4909	8/28/09 06:00	80-34.46	139-43.32		x		x	
KD5009	8/28/09 09:00	80-21.77	140-37.42		x		x	D
KD5109	8/28/09 12:00	80-08.95	141-29.19		x		x	
KD5209, M3	8/28/09 20:00	79-56.00	142-19.00		x	R	x	D
KD5309	8/28/09 22:30	79-47.65	142-53.76		x		x	
KD5409	8/29/09 02:00	79-39.23	143-27.82		x		x	
KD5509	8/29/09 04:30	79-30.76	144-00.97		x		x	
KD5609	8/29/09 06:45	79-22.23	144-33.24		x		x	
KD5709	8/29/09 09:00	79-13.64	145-04.65		x		x	
KD5809	8/30/09 06:00	79-56.92	126-23.73		x		x	D
KD5909	8/30/09 09:00	79-41.77	126-17.19		x		x	
KD6009	8/30/09 11:45	79-26.62	126-10.96		x		x	
KD6109	8/30/09 14:15	79-11.47	126-05.03		x		x	D
KD6209	8/30/09 16:45	78-56.31	125-59.36		x		x	
KD6309	8/30/09 20:00	78-41.16	125-53.95		x		x	
KD6409, M1	8/31/09 03:00	78-26.00	125-49.00		x	R	x	D
KD6509	8/31/09 05:30	78-10.73	125-47.56		x		x	
KD6609	8/31/09 08:00	77-55.47	125-46.39		x		x	
KD6709	8/31/09 10:30	77-40.20	125-45.26		x		x	
KD6809	8/31/09 13:00	77-24.93	125-44.19		x		x	
KD6909	8/31/09 15:30	77-09.66	125-43.15		x		x	
KD7009	8/31/09 18:00	76-54.40	125-42.16		x		x	
KD7109	8/31/09 20:30	76-39.13	125-41.20		x		x	
Arrive KKN	9/6/09 22:00	69-45.20	30-08.45					

Note 1. Ship time (Moscow Time = GMT+3 hrs) is used. Norwegian time = GMT+2 hrs.

Note 2. Red color denotes stations with mooring operations, brown color denotes ice station

Note 3. Time estimations are done for the average speed with respect to the expected ice conditions on the route

Note 4. Exact station coordinates will be specified with respect to actual bottom topography

Note 5. Specific work activities at exact station may be excluded on request of corresponding team leader

D – mooring deployment

R – mooring recovery

# Miscellaneous Information

## Things to Bring

Health Insurance  
Coverage information  
Forms  
Extra glasses / contacts  
Non-metal neck lanyard for glasses  
cleaning supplies for contacts  
Prescription medications  
sufficient for minimum of 5 weeks  
be sure to leave in original containers  
Sunglasses (important)  
Non-metal neck lanyard for glasses  
Sunscreen (important)  
Over-the-counter medications  
Headache remedies  
cold remedies  
sinus remedies  
motion sickness (very important)  
diarrhea remedies  
muscle relaxers  
shower soap  
Chapstick  
Shampoo & other hair products  
Deodorant  
Photos & info from your institute  
Toothbrush & toothpaste  
Electrical converter with assorted plugs  
check to make sure the converter is  
powerful enough for items being plugged in  
Alarm clock  
Flashlight  
Extra batteries for battery operated equipment  
Books and magazines  
Camera with extra battery  
Bottled water and soda (recommended)  
Snack food  
Bring extra copies of passport & itinerary

## Clothing, Outside

Winter Parka  
light weight jacket  
cap wear coverings  
Face mask  
warm gloves with clips to attach to parka  
steel-toed winter boots -non-skid soles  
shoes or hiking boots - non skid soles  
for inside and on deck  
wool or thick socks that wick moisture from skin  
pants  
windproof  
snowpants  
wool  
hard hat - will be provided

## Clothing, Inside

swimwear for swimming pool and sauna (optional)  
exercise wear (optional)  
leisure clothing (wash and wear)  
shower shoes or flip flops (optional)

## Cabins

Fully furnished including bedding, toilet and shower. Single occupancy. Lockable from the inside. Daily housekeeping. Bedding laundered weekly. Storage is limited so it is recommended not to bring suitcases, use duffle bags or foldable luggage. There are no weight restrictions on board but check your airline for their luggage size and weight limits.

## Laundry

Laundry facilities You can either do your laundry yourself (approximately \$4 USD per load, detergent is provided) or pay a housekeeper to do it for you at a higher cost. Clothes are hung up to dry.

## Commissary or Store

There is none. Be sure to bring adequate supplies with you or purchase before boarding.

## Communications

Internet is available as a dial-up connection thru the satellite phone -- very costly (your expense) and very unreliable. Charges for e-mail and internet are paid at the end of the cruise in USD to the ship's purser.

## Cruise Map

The IARC website at [www.iarc.uaf.edu](http://www.iarc.uaf.edu) shows the cruise map as well as information from previous research cruises.

## Emergency Contact

In the event of an emergency, the people to contact is Dr. Igor Polyakov of IARC  
E-mail: [igor@iarc.uaf.edu](mailto:igor@iarc.uaf.edu)  
Phone: Wk 1-907-474-2686; Hm 1-907-474-0598. The information will be relayed to the KD during daily contact. A back-up fax will be sent ASAP.

## Misc. Ship Info

The Icebreaker Kapitan Dranitsyn is a cruise ship that is leased to serve as a research vessel. The accommodations are spacious, there is a swimming pool, sauna, small workout area, lounge (no alcohol is served). A safety presentation and life boat drills are held shortly after departing

## Equipment

There is a projector for Power Point presentations, a combination printer, scanner and copier. Please bring a laptop computer if you can. Some limited office supplies will be provided.

## Identification Badge

NABOS expedition members will be given an ID badge to wear (optional).

## Smoking Regulation

Smoking is permitted only at the specially designated area near the stairs on deck 4. No smoking in cabins, laboratories, lounge etc.

## Meals and Snacks

Deck 5 -- Breakfast: 8-9 am;  
Lunch: 1-2 pm;  
Deck 5 -- Tea: 4-5 pm;  
Dinner: 8-9 pm  
Deck 4 -- open 24 hrs. Hot water, tea, instant coffee, sweets (small room by Lounge).

## Tipping

Is not required. Some tip the crew members at the end of the cruise, leave books or magazines, have small items to give away such as pens, pins, or candy.

## Interpreter

Ms. Margarita Syromyatina from St.Petersburg State University is an interpreter and administrative assistant. She can assist with translation from Russian to English if necessary Most of the members of the research expedition are fluent or understand English, but the ship's crew may not.

Kirkenes. A safety manual is included in a booklet that will be given to you on the *Kapitan Dranitsyn*. Information on the *Kapitan Dranitsyn* can be found on the IARC website as well as the internet.

## Medical Assistance

There is a small clinic staffed by a Russian medical doctor.

## Valuables

It is recommended not to bring valuable jewelry with you. It is dangerous to wear rings and necklaces or chains around equipment.

## Voltage

220 volts on a frequency of 50 Hz.  
Please bring your own plug adaptors (US to European).

# Kirkenes, Norway and Misc.

## Airport Arrival

A shuttle is available. Have Norwegian Kroners for payment. The same is true for return transportation to the airport. Kirkenes is small and any driver will know the locations of all hotels.

## Lodging

There are several hotels in Kirkenes. However, since they do not have plenty of rooms it is recommended to book hotel beforehand. In case of problems while booking hotel you may apply to Henricsen Shipping Service AS, NABOS agent company in Kirkenes with reference to NABOS-2009 cruise:  
Phone: +47 78991129  
e-mail: h-shipp@online.no

## Misc. info

- 1.) Change currency before arriving in Kirkenes. Normal banking hours are 9:30 am to 4:00 pm, Monday thru Friday. You will need both Kroners and U.S. dollars.
- 2.) Credit cards are not accepted everywhere.
- 3.) One piece snow-machine suits are available for rent in Kirkenes. If one is rented, make sure it is large enough to wear a sweater or large shirt underneath.

# Approx. service fees aboard the I/B *Kapitan Dranitsyn*

## Laundry:

<b>Charges for laundry services rendered by the Owner's*</b>			
Type of service rendered	Charges in Rubles**		
	Tariff	VAT 18 %	Amount
1. GENTLEMEN (washing and ironing) ironing)			
1.1. Shirts (regular\sports)	74,57	73,42	88,00
1.2. T-shirt (SS\No buttons)	44,97	8,08	53,00
1.3. Underwear (Sports, vests)	29,66	5,34	35,00
1.4. Pyamas, jacket (cotton)	89,83	76,77	106,00
1.5. Handkerchief	75,26	2,75	18,00
1.6. Socks (per pair)	22,04	3,97	26,00
1.7. Swimsuits \ Shorts	59,32	10,68	70,00
1.8. Trousers	89,83	76,77	106,00
2. LADIES (washing and ironing)			
2.1. Dress	734,75	24,25	159,00
2.2. Blouse	89,83	76,77	106,00
2.3. Slacks	89,83	16,17	106,00
2.4. T-shirt (SS\No buttons)	44,97	8,08	53,00
2.5. Skirt	89,83	16,17	106,00
2.6. Slip (petticoat)	29,66	5,34	35,00
2.7. Nightgown (Pygamas)	89,83	16,17	106,00
2.8. Underwear	22,04	3,97	26,00
2.9 Swimsuits \ Shorts	59,32	10,68	70,00
2.10. Handkerchief	15,26	2,75	18,00
2.11. Jacket, sweater	149,15	26,85	176,00
3. Ironing			
3.1. Dress	89,83	76,77	106,00
3.2. Blouse, Shirt	59,32	70,68	70,00
3.3. Jacket, skirt	74,57	73,42	88,00
3.4. Trousers, pants	74,57	13,42	88,00
<b>Charges for laundry services, by self-service method</b>			
Washing and ironing (total) including:	84,75	15,25	100,00
1. Washing and drying of 5 kg of linen	67,80	72,20	80,00
2. Drying of linen (up to 1 hour)	76,95	3,05	20,00

\*Items received from 08:00 till 12:00 are ready in 48 hours; 100% extra is charged for 24 hours service.

\*\*The rate of exchange applied on the date of invoice billed.

## Radio, e-mails, fax, phone:

	Service			
	TELEX, FAX first address	TELEX, FAX second	E-mail	Delivery notification
<b>Charges in USD per 256 bit ( 32 bytes)</b>	0,25*	0,07*	0,18*	0,17*
<b>Charges in USD per minute</b>	Voice & data			Fax
	1,25*			4,50*

\*Additionally VAT at rate of 18 % is applied.

# **Discrimination and Sexual Harassment Regulation Note**

All University of Alaska Fairbanks employees and charter party participants are subject to, and must abide by, the university's policy and regulation on Discrimination and Sexual Harassment, P04.02.020. Full text of the policy and regulation is located at: <http://www.alaska.edu/bor/regulation/4r/r04-02.html>

## **NABOS Expedition 2009 Safety Guidelines aboard the I/B *Kapitan Dranitsyn***

Developed by the NABOS group in consultation with UAF Risk Management and Captain Tom Smith, University of Alaska Marine Superintendent

### **I. Introduction**

This document, in conjunction with the attached document "[RVOC Safety Training Manual, chapter 1 Research Party Supplement](#)" (**Attachment 3**) is intended to describe the safety protocols to be employed during the NABOS expedition. Additionally, the authority structure of the expedition and a system of watches will be described because a safe working environment is directly affected by an ordered operation during scientific activities conducted by personnel who are well rested.

Participation in scientific operations requires that you have read these documents.

All participants of the expedition should understand that inherent risk is associated with shipboard operations. Operations occur around the clock, twenty-four hours per day. We work with heavy equipment, near and over the side of a vessel. Conditions can be windy, icy, slippery and cold. Rough weather can cause the vessel to pitch and roll. Additionally, we are working aboard a ship-of-opportunity, and not a dedicated research vessel, and therefore certain operations must be improvised. This manual is part of an effort to establish a culture of safety during the expedition that will try and make all operations as safe as possible.

If any participant has a concern, or if they think something is unsafe, or if they have suggestions on how to improve operations, they should communicate their concerns and/or suggestions to their shift operations safety officer and/or to the cruise chief scientist.

**It is the policy of the NABOS group that safety comes first and science comes second**

### **II. Chain of Command**

- a) On a ship, the Captain is ultimately responsible for the safety of the passengers. The Captain has authority over all operations which impact the safety of participants or the safety of the ship itself.
- b) Because of the unique nature of our charter aboard a ship of opportunity, and as described in the NABOS charter agreement with ship owner, certain responsibilities are given to the scientific party. UAF personnel have authority over the other personnel who run the hydrographic stations.

- c) The Chief Scientist for the cruise is **Dr. Vladimir Alexeev**. Except where superseded by the authority of the ship's Captain, he has ultimate authority with regard to scientific operations. As he cannot be expected to be available and working 24 hours per day, there will be a designated Watch Safety Officer **Dr. Sergey Kirillov** from AARI. During mooring operations, IARC Chief Mooring Technician, **Mr. Rob Rember** (or the person he authorizes), will be in charge of operations, and will be expected to determine the window of safety appropriate to the circumstances.
- d) Expedition participants are encouraged to point out unsafe operations or conditions to the on-duty watch officer. Under such circumstances, it is the responsibility of the watch officer to assess the situation, and make a decision about how or if the operation should proceed.

### **III. Establishment of Watches**

Every oceanographic station will be supervised by an individual who is highly experienced with oceanographic operations: a watch officer. This individual is responsible for supervising, including directing the general safety of operations. This person has the authority to halt operations, et cetera. This person should be able to communicate fluently both in English and in Russian, and experienced with directing the ship when lines are in the water and solving problems such as back-lashed winches, et cetera.

Under extreme circumstances such as issues with winches or lines or equipment, the on-duty watch officer should involve the most experienced person on the boat to help resolve the issue, if necessary waking them up. The watch officer may participate in the operations as is reasonable, but should not be essential to such operations in order that they may be able to step back, observe, and direct.

Each participating group shall communicate to the Chief Scientist a 12-hour watch schedule for their activity with hours, personnel and room numbers, and who should be notified of an upcoming station during each shift. During our scientific survey, the responsible Watch Safety Officer will be responsible for notifying the group leader of each watch as a station is approached. The daily operation plan, including schedule of watches (**Attachment 1**), will be posted in public areas at decks 5, 6 and 7. This is only the document to advise the Captain or his Chief Mate on duty to carry out research activity. Any corrections must be authorized by the Chief Scientist or Watch Officer on duty.

The Watch Officer completes the Station List (**Attachment 2**) reporting all performed research activities. During the oceanographic station no research activity is allowed without notification and only upon permission of the Watch Officer. The Watch Officer is authorized to communicate with the Captain or his Chief Mate on duty regarding any performed research operations.

### **IV. Personal Safety Equipment:**

All expedition personnel will be required to wear a suitable hard hat (helmet) when in the area of scientific operations. Recognizing the extreme climate that we operate in, this helmet should be of the type that can easily be worn over a hat. Cold weather liners should be provided. Failure to wear adequate equipment may mean that you are dismissed from operations until you are properly attired. It is the responsibility of the Watch Officer to enforce this.

Long hair should be properly secured. Jewelry such as rings should be removed.

Personnel should wear protective eye wear (safety glasses) when working in close proximity to equipment or operations that potentially expose them to eye hazards. Additionally, safety-toed shoes or boots will be worn when working with or near loads that could impact or roll onto the foot area. We have had good luck with these workboots: [http://www.muckbootsonline.com/steel\\_toe\\_chore\\_work\\_boot.html](http://www.muckbootsonline.com/steel_toe_chore_work_boot.html)

All safety-related training will be documented with topic of training, name of trainee, and training content.

## **V. Safety practices demonstration and drills**

A safety practices seminar on the operations deck will be conducted where typical issues and proper practices are discussed.

- a) Topics to be discussed: dynamic loading, wire inspection and safety, operations in under roll, backlashing of a winch, et cetera.
- b) Demonstration of proper procedures for handling of loads in under roll: Use of tag lines and stays. The Russian crane operators should participate in this. Tag lines should be rigged for all ice-free operations, as they are difficult to rig rapidly if needed. They only need to be secured when the watch officer determines their need.

## **VI. Mooring operations**

These operations are the most dangerous at-sea operation. There are a number of convenient vantage points where these operations can be observed. There is a core team of mooring technicians who are responsible for mooring operations day or night, whenever a station comes along. However, successful operations require a large team, about 8 persons. Fully manned shifts will be established before all mooring operations.

The mooring team and Chief Scientist will gather all participants in mooring deployments together prior to the operation to discuss the upcoming activity. Difficult/risky procedures will be identified as well as overall work-flow.

## **VII. Safety consciousness**

The NABOS team will strive to cultivate a culture of safety where people are encouraged to voice concerns and have them answered.

## **VIII. Safe Operating Conditions**

As stated in our charter, it is the responsibility of the ship's captain to determine the safe operating conditions of the vessel, and the science party will defer to the Captain's judgment if conditions exceed the operating capacity of the vessel. Complementary to this, the Chief Scientist or the Watch Officer will have the authority to halt operations if conditions are deemed unsafe. During any operation, any member of the party should bring safety concerns to the attention of the watch officer or mooring technician who has the authority to evaluate the situation and make a decision about how to proceed, or to shut down the operation, as their judgment warrants.

During mooring deployment and recovery, the mooring technicians have the authority to conduct the operation safely, and if he/she feels that the operation cannot be completed safely, to abort the operation.

## **IX. Crane considerations**

In the absence of an A-frame, our charter authorizes the ship Owner to perform operations in support of our oceanographic research activities at sea using the fore and aft cranes.

- a) We have been notified by the Captain that the *Kapitan Dranitsyn* aft-deck crane is limited to operations in which the ship's roll is not to exceed 5°. It is the policy of the NABOS expedition that we will defer the Captain's authority in enforcing this operating threshold, as he has wisely done in the past. Additionally, good common sense, professional judgment, and principles of seamanship should be our guide in making these decisions.
- b) A system of crane signals will be established and communicated to the crane operators.

## **X. Ice-station**

- a) Ice station require a special set of considerations. The Chief Scientist will first test the ice with probes to determine the suitability of the ice conditions for making an ice camp.

Once the safety of the ice has been established, expedition members will be permitted to venture onto the ice.

- b) Hazardous regions such as melt-ponds, et cetera will be flagged and must be avoided.
- c) Polar bears are a potential danger while on the ice. There will not be an armed guard available. However, a watch will be maintained on the bridge at all times while expedition members are on the ice. The ships horn will be blasted to notify parties on the ice of their need to return to the vessel.

## **XI. Accident/Incident Reporting and Notification**

1. Individuals involved in an accident/incident have the responsibility to notify the Chief Scientist, or other authorized Watch Officer, immediately after the accident, or incident, has occurred. The person involved in an accident will complete a University of Alaska Accident/Incident Report (**Attachment 4**) at their earliest convenience and forward to the Chief Scientist, or other authorized Watch Officer. If the person involved in the accident/incident is unable to complete the report, it will be completed by the Chief Scientist or other authorized Watch Officer. Accident/Incident Report forms can be found at <http://www.uaf.edu/safety>. Completed forms will be faxed to Environmental Health, Safety, and Risk Management (EHS/RM) at 907-474-5489 within 48 hours.

2. In the event a work-related injury/illness requires hospitalization, or is fatal, the Chief Scientist or authorized Watch Officer will notify EHS/RM immediately to facilitate mandated reporting to the Occupational Safety and Health Administration (OSHA). Patients admitted to the ship's infirmary, under the physician's direct care for 8 hours or more, will be considered "hospitalized". When contacting EHS/RM regarding a hospitalization/death, please include the following information: patient name, location of accident, time of accident, a contact person and the telephone number of the contact person, a brief description of the accident, the number of fatalities or hospitalized employees, and the extent of any injuries. EHS/RM will make the required notification to OSHA based on the information provided. Failure to notify OSHA within 8 hours of hospitalization or fatality can result in citations and monetary penalties assessed to UAF, specifically the department failing to make the notification to EHS/RM. It is imperative that EHS/RM be contacted as soon as there is knowledge of an impending hospitalization, or a fatality occurs, to facilitate this OSHA notification.

3. In the event there are any questions regarding these procedures, how to report a hospitalization or a fatality, or if you need to consult with a safety officer, please contact EHS/RM at (907) 474-5413. After hours, weekends, holidays, etc., call University Emergency Dispatch at (907) 474-7721 and they can relay the message to an EHS/RM safety officer.

4. State of Alaska Report of Occupational Injury or Illness (**Attachment 5**), also referred to as the Workers' Compensation Form, should be completed for all accidents requiring medical treatment and/or hospitalization, or time off work due to work-related injury/illness, or when an injured employee loses consciousness. If in doubt, contact EHS&RM for guidance on when and how to complete this form. Unfortunately, these forms are not available online so hard copies need to be hand-carried to your field operations. The Chief Scientist or other authorized Watch Officer will complete a Report of Occupational Injury or Illness within 10 days of the date of the accident. Completed accident forms should be distributed as follows: The Blue copy must be sent to the Alaska Workers' Compensation Board in Juneau, Alaska; the address can be found on the front of the form. The Pink copy should be sent to ESH&RM, the white copy must be sent to Statewide Risk Management, and the employee keeps the Yellow/Green copies.

As typical mail service will not be available, these forms can be faxed to the Department of Statewide Risk Management at (907) 450-8151. Failure to report claims in a timely manner may result in an assessment of penalties against the University by State agencies. Departments will be responsible for paying any fees arising out of their delayed reporting.

**Attachments:**

- 1. Station Plan Sheet**
- 2. Station List Sheet**
- 3. RVOC Safety Supplement**
- 4. University of Alaska Accident/Incident Report**
- 5. State of Alaska Report of Occupational Injury or Illness**

## Attachment 1: Station Plan Sheet

Date dd/mm/yy	Ship Time hh:mm	Position		Station number	Watch Officer	Depth, m	Activity						
		Lat, N	Lon, E				Echo- sounder	CTD/ Rosette	Moor dep	Moor rec	Tutbu- lence	Nets	Ice station
06/10/09	11:00	8130.00	11000.00	KD0108	Dmitrenko	> 3000		x					
	12:00										x		
	12:30											x	
end	13:00												
06/10/09	15:00	8124.37	10900.85	KD0208	Dmitrenko	> 3000		x					
	16:00										x		
	16:30											x	
	17:00												
end	18:00												

Co-Chief Scientist

\_\_\_\_\_  
Sergey Kirillov

Chief Scientist

\_\_\_\_\_  
Vladimir Alexeev

# Attachment 2: Station List Sheet

Icebreaker KAPITAN DRANITSYN, August 15 – September 7, 2009

## STATION LIST

Station Number: **KD 01 09** Data: \_\_\_\_\_ Time of beginning: \_\_\_\_\_

\_\_\_\_\_  
dd/mm/yy

\_\_\_\_\_  
hh:mm (GMT\*)

Latitude: \_\_\_\_° \_\_\_\_' N Longitude: \_\_\_\_° \_\_\_\_' E Depth: \_\_\_\_\_ m Ice: \_\_\_\_\_  
(navigation chart)

Watch officer: \_\_\_\_\_

#	Research Activity	Time GMT*		GPS Position		Comments 1	Comments 2
		beginning	end	beginning	end		
1	<b>Echo-sounder</b>			$\varphi = \text{ }^\circ \text{ '}$	$\varphi = \text{ }^\circ \text{ '}$		Depth:
				$\lambda = \text{ }^\circ \text{ '}$	$\lambda = \text{ }^\circ \text{ '}$		
2	<b>CTD/ Rosette</b>			$\varphi = \text{ }^\circ \text{ '}$	$\varphi = \text{ }^\circ \text{ '}$		Sampling levels:
				$\lambda = \text{ }^\circ \text{ '}$	$\lambda = \text{ }^\circ \text{ '}$		
				$\lambda = \text{ }^\circ \text{ '}$	$\lambda = \text{ }^\circ \text{ '}$		
3	<b>Mooring deployment</b>			$\varphi = \text{ }^\circ \text{ '}$	$\varphi = \text{ }^\circ \text{ '}$		Final position:
				$\lambda = \text{ }^\circ \text{ '}$	$\lambda = \text{ }^\circ \text{ '}$		$\varphi = \text{ }^\circ \text{ '}; \lambda = \text{ }^\circ \text{ '}$
4	<b>Mooring recovering</b>			$\varphi = \text{ }^\circ \text{ '}$	$\varphi = \text{ }^\circ \text{ '}$		
				$\lambda = \text{ }^\circ \text{ '}$	$\lambda = \text{ }^\circ \text{ '}$		
6	<b>Turbulence measurements</b>			$\varphi = \text{ }^\circ \text{ '}$	$\varphi = \text{ }^\circ \text{ '}$		Sampling list:
				$\lambda = \text{ }^\circ \text{ '}$	$\lambda = \text{ }^\circ \text{ '}$		
7	<b>Nets tow</b>			$\varphi = \text{ }^\circ \text{ '}$	$\varphi = \text{ }^\circ \text{ '}$	#:	Final position:
				$\lambda = \text{ }^\circ \text{ '}$	$\lambda = \text{ }^\circ \text{ '}$		$\varphi = \text{ }^\circ \text{ '}; \lambda = \text{ }^\circ \text{ '}$
8	<b>Ice Station</b>			$\varphi = \text{ }^\circ \text{ '}$	$\varphi = \text{ }^\circ \text{ '}$		
				$\lambda = \text{ }^\circ \text{ '}$	$\lambda = \text{ }^\circ \text{ '}$		
9				$\varphi = \text{ }^\circ \text{ '}$	$\varphi = \text{ }^\circ \text{ '}$		
				$\lambda = \text{ }^\circ \text{ '}$	$\lambda = \text{ }^\circ \text{ '}$		
10				$\varphi = \text{ }^\circ \text{ '}$	$\varphi = \text{ }^\circ \text{ '}$		
				$\lambda = \text{ }^\circ \text{ '}$	$\lambda = \text{ }^\circ \text{ '}$		

**\*GMT Time = Moscow time - 3h**

# Attachment 3: University of Alaska Accident/Incident Report



## University of Alaska Fairbanks

### Accident/Incident Report (personal injury)

**To report an automobile accident, do not use this form, please go to:**

**<http://www.alaska.edu/swrisk/download/alinsured.pdf> - fill out form**

#### **SECTION I: EMPLOYEE INFORMATION** (completed by employee)

Name \_\_\_\_\_ Sex \_\_\_\_\_ Date of Birth \_\_\_\_\_  
(Last, First, M) Male Female

Home Address \_\_\_\_\_ Home Phone \_\_\_\_\_

Date Employed \_\_\_\_\_ Supervisor's Name \_\_\_\_\_

Department \_\_\_\_\_ Work Phone \_\_\_\_\_

(Normal department, even though working in another department at time of incident)

#### **SECTION II: INCIDENT** (completed by employee)

Job title at time of incident \_\_\_\_\_ Experience in this job \_\_\_\_\_

Department where incident occurred \_\_\_\_\_ On company premises? Yes \_\_\_ No \_\_\_

Exact location of incident \_\_\_\_\_

How did the incident occur? Describe events that resulted in incident. What happened? How did it happen? What were you doing?  
(Be specific)

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Describe injury/illness in detail. Indicate body part(s) affected. (Examples: Twisted left knee with excessive swelling, cut right index finger at second joint, fracture of ribs, nauseous from inhaling fumes, etc.)

\_\_\_\_\_  
\_\_\_\_\_  
Name the object/substance that directly injured employee. (Examples: lathe, chlorine gas, 50 pound box, etc.)

\_\_\_\_\_  
\_\_\_\_\_  
Name(s) of witness(es)

Severity of injury:  None  First Aid  Medical treatment

Date of incident \_\_\_\_\_ Time \_\_\_\_\_:\_\_\_\_\_ \_\_AM \_\_PM Date employer knew of accident \_\_\_\_\_

Additional Employee Comments:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

***Fill in the above information and print the two page form. Forward to your supervisor for completion of section III***

\_\_\_\_\_  
**SECTION III: SUPERVISOR'S REPORT OF INCIDENT** (completed by employee's supervisor)

When were you notified of injury/illness? Date \_\_\_\_\_ Time \_\_\_\_\_:\_\_\_\_\_ \_\_AM \_\_PM

Do you agree with the employee's incident information on side one?  Yes  No (provide comments below)  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What could have been done to prevent this accident? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What action have you taken to avoid any reoccurrence? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Supervisor's name \_\_\_\_\_

Shop/Department \_\_\_\_\_

Supervisor Signature \_\_\_\_\_ Date \_\_\_\_\_

***Forward to EHS&RM via intercampus mail Box 8145, or fax at 474-5489***

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**SECTION IV: INVESTIGATION** (completed by Safety Officer)

Background Information of Incident (provided by employee) validated \_\_\_ Yes \_\_\_ No (If no, provide comments \_\_\_\_\_)

\_\_\_\_\_  
\_\_\_\_\_

Account of Accident (what happened—sequence of events, extent of damage, type of accident/hazard, agency or source of energy/hazard material. etc.) \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Analysis of Accident (How/Why—Direct, indirect, and basic causes)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Recommendations to Prevent a Recurrence

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Safety Officer Name \_\_\_\_\_

Safety Officer Signature \_\_\_\_\_

Date \_\_\_\_\_

# Attachment 4: State of Alaska Report of Occupational Injury or Illness

Alaska Department of Labor and Workforce Development  
Alaska Workers' Compensation Board  
P.O. Box 115512, Juneau, AK 99811-5512

## REPORT OF OCCUPATIONAL INJURY OR ILLNESS

AWCB Case Number
------------------

**EMPLOYEE: Answer ALL questions 1-20, sign, and give to your employer immediately.**

1. Last Name	First Name	Initial	2. Telephone Number	3. Date of Birth	4. Sex <input type="checkbox"/> M <input type="checkbox"/> F	5. Social Security Number
6a. Mailing Address			7a. Residence Address			
6b. City			State			ZIP Code
7b. City			State			ZIP Code
8. Place (city/town/village/camp) where injury/occupational illness happened				9. Date of Injury or Exposure to Disease		10. On Employer's Premises? <input type="checkbox"/> Yes <input type="checkbox"/> No
11. Name and Address of Attending Physician				12. Hospitalized In-Patient? <input type="checkbox"/> Yes <input type="checkbox"/> No		13. Name of Hospital
City			State			ZIP Code
Hospital Address				State		
ZIP Code						
14. Describe Part(s) of Body Injured / Nature of Occupational Illness <input type="checkbox"/> Left <input type="checkbox"/> Right				15a. Describe How the Injury or Illness Happened		
15b.						
15c.						
16. To all health care providers: You are authorized to provide my employer (named in box 18), its workers' compensation liability insurance company (box 21), and its claims adjuster (box 22), information concerning any health care advice, testing, treatment, or supplies provided to me for the injury or illness described above in box 14. This information will be used to evaluate my entitlement to receive benefits, including payment of medical benefits, under the Alaska Workers' Compensation Act. This authorization is valid for a one-year period from the date of my signature (box 17a). I know I have a right to receive a copy of this authorization and agree a photographic copy of this authorization is as valid as the						
Employee/Patient's signature:						
17. If Employee Unavailable for Signature, explain circumstances in this space:						17a. Date Signed

**EMPLOYER: Review employee 18-20, answer questions 21-49.**

18. Employer's Name			19. Employer's Alaska Address (if different from mailing)			
20. Employer's Mailing Address (street and number)			21. Name of Insurer:			
20a. City		State		ZIP Code		20b. Telephone
22. Full Name of Adjusting Company			22a. Mailing Address (street and number)			
23. Date Employer First Knew of Injury		24. Date/Time (a.m./p.m.) Employee Left Work Date		24. Date/Time (a.m./p.m.) Employee Left Work Time		
25. Off work after Injury or Illness? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> 3 or more days		26. Date Returned to Work		27. Death (Y/N) Date		22b. City
State		ZIP		22c. Telephone		
28. Location Where Injury or Illness Happened:			29. Employee's Occupation		30. Date Hired by Employer	
31. Earnings Calculated By: <input type="checkbox"/> Hr. <input type="checkbox"/> Day <input type="checkbox"/> Output <input type="checkbox"/> Wk. <input type="checkbox"/> Mo. <input type="checkbox"/> Year		32. Rate of Pay \$ per		33. Days Employee Works per Week <input type="checkbox"/> 3 or Less <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7		34. Describe Scheduled Days Off
35. Workday Began: <input type="checkbox"/> AM <input type="checkbox"/> PM		36. Employee Paid for day injured or ill? <input type="checkbox"/> Yes <input type="checkbox"/> No		37. Employer EIN #		38. Give Details of How Injury or Illness Happened
38a.						
39. Injury/Illness Due to Machine Product Failure? <input type="checkbox"/> Yes <input type="checkbox"/> No		40. Mechanical Guard/Safeguards Provided? <input type="checkbox"/> Yes <input type="checkbox"/> No		41. List any machine/substance/object causing injury		42. If Machine, What Part?
43. Names and Addresses of Witnesses			44. If Injury/Illness Caused by Anyone Besides Employee, Give Name/Address			
			45. Dependents (in case of death), Names/Addresses			
46. If you Doubt Validity of Injury or Illness, State Reason						
47. Signature of Authorized Employer Representative			48. Title		49. Date Signed	

**WARNING TO EMPLOYEES AND EMPLOYERS:** AS23.30.250 imposes civil penalties for fraud as well as certain false or misleading statements or acts. Criminal penalties for theft by deception (including fines and incarceration) apply to knowingly made false statements, claims, or employee misclassifications.

Distribution: Original – Workers' Compensation Division; Copy – Adjuster; Copy – Employer; Copy – Employee

## Instructions for **REPORT OF OCCUPATIONAL INJURY OR ILLNESS** **TO THE EMPLOYEE**

**You must complete and sign** the "EMPLOYEE" section, questions 1-17, and answer questions 18-20 in the "EMPLOYER" section of this form. Keep a copy for your records. Immediately give this form to your employer. The employer will then complete their portion, and forward copies to the insurer, their claims administrator, and the Workers' Compensation Division. You should notify your employer immediately, but no later than 30 days after your injury occurred or illness began.

After obtaining medical treatment, tell your health care provider's office to complete and mail the required "Physician's Report" (form 07-6102) to your employer's insurer for payment and to the Workers' Compensation Division for your file. A completed report is a requirement for payment under AS 23.30.095(c).

If you, your employer, and your doctor promptly file the required reports, there should be no delay in payment of compensation. You will not be paid compensation for lost wages for the first three days off work unless your disability lasts more than 28 days. The first installment of compensation becomes due on the 14<sup>th</sup> day after the employer has knowledge of the injury, illness or disease. After the first payment, you should get a check every two weeks while you are disabled. If you have not received payment within 21 days from the date you were injured or became ill, contact the insurer or adjuster first. If you have any questions or problems, contact the Workers' Compensation Division office nearest you (contact information listed below). If you are off work for 3 or more days, you will need to provide additional information to your employer's claims adjuster regarding your wages, marital status, and number of dependents.

If you believe your work related injury or illness will keep you from returning to your job at the time of injury, you may need retraining. The training benefits to which you may be entitled, and how you go about getting them, depend on your date of injury. If you are off work for 45 days, contact the division office in Anchorage to learn more about your rights for reemployment benefits. You may also refer to the Reemployment Benefits section of the "Workers' Compensation and You" brochure available at the Division's internet web page:

[www.labor.state.ak.us/wc](http://www.labor.state.ak.us/wc)

INFORMATION IN FILES MAINTAINED BY THE DIVISION OF WORKERS' COMPENSATION, EXCEPT FOR MEDICAL AND REHABILITATION RECORDS, IS AVAILABLE FOR PUBLIC REVIEW AND COPYING FOR NONCOMMERCIAL PURPOSES.  
AS 23.30.107

## **TO THE EMPLOYER**

This form must be completed and mailed immediately, and in no case later than **ten days** after you have knowledge that your employee has been injured, or claims to have been injured, while working for you. Be certain to mail a completed copy to the Workers' Compensation Division within the 10-day period. Failure to file this report within the required time may subject you and/or your insurer to a penalty equal to 20 percent of the amount of compensation due to the injured worker. AS23.30.070

Make three (3) copies. File the original of this form with the Alaska Division of Workers' Compensation, P.O. Box 115512, Juneau, AK 99811-5512. Keep a copy for your records, give a copy to the injured employee, and send the last copy to your claims adjuster. If you believe the employee will be unable to work for more than three days because of injury or illness, be certain to complete items 31, 32, 33, and 34, or contact your insurer's claims adjuster and provide information about the injured employee's earnings. (Your insurer's claims adjuster is **NOT** the agent or broker from which you purchased your workers' compensation insurance policy).

## OSHA REQUIREMENTS

**Report industrial deaths and accidents to the Division of Labor Standards and Safety.** Alaska Statute 18.60.058 requires employers to report to the Division of Labor Standards and Safety an employment accident which is fatal to one or more employees or which results in the overnight hospitalization of one or more employees. The report, which must be made immediately, but no later than 8 hours after receipt by the employer of information that the accident has occurred, must relate the circumstances of the accident, the number of fatalities, and the extent of the injuries.

Monday-Friday Alaska OSH (800) 770-4940 • 24-hour OSHA Hotline (800) 321-6742

*"Injury" means accidental injury or death arising out of an in the course of employment and an occupational disease, illness, or infection which arises naturally out of the employment or which naturally or unavoidably results from an accidental injury.*

*"Injury" does not include mental injury caused by stress unless it is established that (A) the work stress was extraordinary and unusual in comparison to pressures and tensions experienced by individuals in a comparable work environment, and (B) the work stress was the predominant cause of the mental injury. A mental injury is not considered to arise out of and in the course of employment if it results from a disciplinary action, work evaluation, job transfer, layoff, demotion, termination, or similar action taken in good faith by the employer.*

### Alaska Worker's Compensation Division Offices:

Anchorage: 3301 Eagle St, #304  
PO Box 107019  
Anchorage, AK 99510-7019  
(907) 269-4980

Fairbanks: 675 Seventh Ave, Station K  
Fairbanks, AK 99701-4586  
(907) 451-2889

Juneau: 1111 West 8<sup>th</sup> St, #307  
PO Box 115512  
Juneau, AK 99811-5512  
(907) 465-2790

### Division of Labor Standards and Safety Offices:

3301 Eagle St, #301  
PO Box 107022  
Anchorage, AK 99510-7022  
(907) 269-4940 or (800) 770-4940

1111 West 8<sup>th</sup> St, #304  
PO Box 020630  
Juneau, AK 99802-0630  
(907) 465-4855