University of South Florida
Diving Safety Program Ben Meister bmeiste@usf.edu- PED 214

Dive Plan

(vessel, lab or sho)e		
General Dive Site Location:		
(ie: off Key Largo, off Clearwater)		
Dive Plan Submitted By		
Principal Investigator:	Lead Diver:	
Proposed No. of Dives:	Proposed No. of Divers:	
(profile each div) Work Proposed	(List each dive)	
To alo /F avvis as out I lo a de		
Tools/Equipment Used:		
Any Hazardous Conditions Anti	cipated:	
(ie: cold water, extreme currents, ext	reme depths, low visibility	
Safety Precautions:		
(ie: oxygen, chase vessel, dry s)uits		

Diving Roster:

	Name	Level	Depth Certification	on
1		Lead DiverScienti	fic Diver	fsw
2				fsw
3				fsw
4				fsw
5				fsw
6				fsw
7				fsw
8				fsw
9				fsw
10	0			fsw
	()			

Diving Accident Emergency Management Plan

A diving accident victim is any person who has been breathing air underwater regardless of depth. It is essential that emergency procedures approximated and that medical treatment is initiated as soon as possible. It is the responsibility of the expedition's Diversater to develop procedures for such emergencies including evacuation and

Additional Dive Plan Info:		
Type of tables/version used:		_
DIVE PROFIL	EC	
DIVE FROITE	L.C	
Dive No.: 1 Date Location:		
Buddy Team 1:	&	
Buddy Team 2:	&	
Buddy Team 3:	- &	
Buddy Team 4:	&	
Buddy Team 5:	_ &	
SI= RG		RG
 Depth		Safety stopmin
Gas used:	į	
Air	_	Time in:
RNT=	_	Time out:
Nitrox % O2 ABT=	_	
TRT=		_

Dive No.: 2 Date Location: Buddy Team 1: Buddy Team 2: Buddy Team 3: Buddy Team 4: Buddy Team 5:	_ & _ & _ &	
SI= RG		RG
Depth Gas used:	<u> </u>	Safety stop min
Air		Time in:
RNT= Nitrox % O2 ABT=		Time out:
	_	_
*******************************	*****	*****
Dive No.: 3 Date Location:		
Buddy Team 1:	_ &	
Buddy Team 2:	&	
Buddy Team 3:	&	
Buddy Team 4:	&	
Buddy Team 5:		
SI= RG		RG
 Depth		Safety stop min
Gas used:	j I	Time in:
Air	-	<u> </u>
RNT= Nitrox % O2	-	Time out:
TBT=		_

Emergency	Contact	Inform	ation	for	Each	Diver
	Ountable	111101111	auon	101	Lacii	

Diver:

Diver:	Diver No. 9		
Emergency Contact:	Relation:		
Work Telephone:	Home Telephone:		
Street Address:			
City:			
	• • • • • • • • • • • • • • • • • • • •		
Diver:		Diver No. 10	
Emergency Contact:		Relation:	
Work Telephone:	Home Telepho	one <u>:</u>	
Street Address:			
City:			
Diver:		Diver No. 11	
Emergency Contact:		Relation:	
Work Telephone:	Home Telepho	one:	
Street Address:			
City:		Zip:	
Diver:		Diver No. 12	
Emergency Contact:		Relation:	
Work Telephone:	Home Telepho	one:	
Street Address:			
City:		Zip:	

Dive No.: 6 Date Buddy Team 1: Buddy Team 2:		& _ &	
Buddy Team 3:			
Buddy Team 4:		_	
Buddy Team 5:		_ &	
SI= RG_			RG
Depth	_ 		Safetystopmin
Gas used:		<u> </u>	Time in:
Air	RNT=		Time out:
Nitrox % O2	ABT=		
	TBT=		_
********	*******	******	*****
Dive No.: 7 Date	Location:		
Buddy Team 1:		&	
Buddy Team 2:			
Buddy Team 3:			
Buddy Team 4:		_ &	
Buddy Team 5:			
SI= RG_	_		RG
Donth	_		Safety stop min
Depth Gas used:			
			Time in:
Air	RNT=		Time out:
Nitrox % O2	ABT=		_
	TBT=		

Dive No.: 8	Date	_ Location:		
Buddy Team	1:		_ &	
Buddy Team	2:		_ &	
Buddy Team	3:		_ &	
Buddy Team	4:		_ &	
Buddy Team	5:		_ &	
SI=	RG			RG
				_ Safety stop <u>min</u>
	h			