



Rega 2021
with Annual Report 2020





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“Rega has passed the stress test”



Michael Hobmeier



Ernst Kohler

2020 – the year the coronavirus pandemic struck. Since then, the virus has had the world in its grip, challenging not only our healthcare system, politicians and economy, but also each and every individual, as well as Rega. But even if the pandemic has not yet been overcome, we can safely say: Rega has passed the stress test.

In the first place, at all times we were able to fulfil our task of providing air rescue services in Switzerland and repatriating patients back to their home country to the same degree and accustomed high level of quality. As a result, last year we were once again able to bring medical assistance by air to more than 11,000 people in distress.

In addition, during the crisis it became clear that the investments we have made in recent years in terms of staff, infrastructure and innovations have paid off. One example of this is the patient isolation unit (PIU) for transporting highly infectious patients, which Rega developed in 2015 in response to the Ebola epidemic in West Africa. Rega was able to benefit from the experience gained from this last year, when we repatriated 140 Covid-19 patients in a PIU on board our ambulance jets. The investments in the field of information technology have also proved their worth, with the shift by large parts of our staff to working at home going off without a hitch.

A third aspect is particularly pleasing: besides providing air rescue services, in 2020 Rega was entrusted with various additional tasks, thereby supporting the Confederation, the cantons and the Swiss population in their efforts to handle the pandemic by putting our expertise and infrastructure at their disposal. Among other things, on the request of the Confederation, the Helicopter Operations Centre – as the only emergency call centre operating countywide – is acting as a “national coordination centre”, coordinating the distribution of patients among the intensive care units and thus relieving the pressure on both the hospitals and the Swiss healthcare system.

And last but not least, despite challenging circumstances, we have not stood still and in the past year, too, we have successfully completed various Rega projects. On the following pages, you can read about what improvements the new high-tech night vision goggles bring for our helicopter crews and how an electronic patient report form makes life easier for the emergency flight physicians on duty.

A look at the past year shows that Rega is well positioned, agile and in demand. Our work is only possible thanks to our over 3.6 million patrons. We would like to thank the public at large for their ever-growing support and will continue to work tirelessly towards providing modern, nationwide and patient-oriented air rescue services in Switzerland.

A handwritten signature in black ink, appearing to read 'M. Hobmeier'.

Michael Hobmeier
Chairman of the Foundation Board

A handwritten signature in black ink, appearing to read 'E. Kohler'.

Ernst Kohler
CEO/Chairman of the Management Board

Seeing in the dark

One in four missions performed by Rega helicopters take place after dark. For over 30 years now, Rega crews have been using night vision goggles so that they can also bring medical assistance to people in distress at night. New, state-of-the-art night vision goggles specially adapted to Rega's needs have been in use since the spring of this year.

Whether in the event of an accident or a serious illness, Rega's help is needed around the clock, including at night. Last year, Rega helicopter crews provided medical assistance by air on more than 10,000 occasions – 2,500 times at night. The number of missions that Rega flies after darkness has fallen has almost doubled in the last 20 years, due in part to the present-day shift towards a 24-hour society. Rega has responded to this development by increasing its operational readiness at night. Nowadays, during the night-time, too, the helicopter crews are in the air within a few minutes of the alarm being raised.

Flights at night are particularly demanding for the entire crew, but especially for the helicopter pilot. Obstacles such as power cables and trees, as well as clouds, are particularly difficult to perceive in the dark. In addition to comprehensive basic and on-going further training, various technical aids, such as modern night vision goggles, do much to nevertheless ensure the safety of crews and patients at all times.

Operating with groundbreaking devices

For example, the landing, hoist and search lights mounted on the Rega helicopters can generate a total of almost 2,000 watts of light to illuminate, for instance, a landing site or the scene of a rescue hoist operation. By way of comparison, the two headlights of a car each produce 50 watts. In addition, digital, satellite-based maps displayed on the cockpit screens make navigating in the dark considerably easier. These maps also show the locations of ropes, cables and power lines, which are fed

into the navigation system in the cockpit from Rega's own obstacle database.

Night vision goggles, or NVGs for short, are always carried on board the rescue helicopters. These devices amplify any residual light, and comprise a pair of binoculars attached to the front of the pilot's helmet that can be flipped up or down and a battery pack that sits on the back of the helmet. Rega pilots have been using NVGs for over 30 years: in 1987, Rega was the first civilian organisation in the world to equip all its helicopter bases with these military-grade light-enhancing devices. Already back then, Rega opted for the most powerful product on the market. Although, according to the guidelines of the European Aviation

Safety Agency (EASA), a night flight may only be carried out if it would also be possible without NVGs, the residual light amplifiers are very useful during visual flights and a great help in visual orientation at night – both for the helicopter pilot and for the paramedic assisting him in the navigation, who can also take a scrutinising look through a NVG device if necessary.

High requirements

Rega's previous night vision goggles were in use over a period of decades. As time went on, repairs became more frequent and it was increasingly difficult to obtain spare parts. With over 30 years of night flying experience, helicopter pilot Heinz Segessenmann

The night vision goggles amplify the residual light, which helps the pilot to navigate.



is an expert in everything to do with NVGs and is also in charge of the replacement project: "It was time to update our existing devices. We have gained a lot of valuable experience with them and they have given rise to specific ideas and requests as to how they might be improved. The simplest solution would have been to have opted for the successor product, because these devices are already certified for the helicopter types deployed by Rega. But after extensive analysis of the market, we came to the conclusion that there are other options that are better suited to our needs."

Continue reading on page 8 ►



Wider field of vision and greater contrast

The above comparison shows that the view through the new night vision goggles offers a wider field of vision and sharper contrasts (top) than were possible with the previous image with its shades of green (bottom).

Residual light amplifier

The new night vision goggles are a tailor-made solution specially adapted to Rega's needs.



The key features of the new night vision goggles

Night vision goggles amplify any residual natural or artificial light from the night sky, make it visible to the human eye, and generate an image in shades of green or black & white. In addition, highly sensitive image intensifier tubes with white or green phosphor imagery are used. Rega's new NVGs now generate a black & white or greyscale image – as opposed to the previous NVGs which presented the viewer with contrasting shades of green. The night scene appears more natural in the greyscale image; the colours reduce strain on the eye and help prevent visual fatigue. Furthermore, contrasts, shapes and shadows are much more distinct, which increases the pilot's environmental and situational awareness. As a result, pilots can recognise danger earlier or better and react accordingly.



Optics

State-of-the-art technology in the image intensifier tubes – the core component of night vision goggles – delivers a higher resolution, more distinct contrasts and increased depth of perception, as well as a sharper image. As a result, obstacles or changes in the weather can be detected earlier and more precisely.



Housing and mounting system

The new NVGs have a more robust finish. The swivel mount supplies the binoculars with power and allows them to be moved from the operating position (in front of the pilot's eyes) to the flipped-up position.



Field of view

The field of view is around 25 percent larger than before, which makes it easier to perceive the surroundings in the dark. The pilot has to turn his head less, which helps reduce fatigue.



Weight and ergonomics

Together, the binoculars, helmet mount and battery pack are lighter than before: with the pilot's helmet, they weigh around three kilograms. This weight is optimally distributed on the helmet in order to keep the strain on the pilot's neck to a minimum.

The decision not to fall back on the successor model meant that Rega had to develop its own certification programme. Nevertheless, Rega wanted to take matters into its own hands. Not only because it had the necessary know-how and experts, such as test pilots and engineers from its own Design and Development Centre, but also because the project group was convinced that this additional effort would pay off for the crews and ultimately for the patients, too. And so this complex and ambitious project got underway.

Tailor-made solution

The first task was to establish which was the optimal model for Rega. Specially selected NVG manufacturers were invited to the Rega Centre along with their products. "We analysed the various night vision goggles to see to what extent they met our needs by conducting tests in a completely blacked-out tent, and subsequently trialled the two favourites in the course of a test flight," explains Segessenmann. The best possible image intensifier tubes – the core component of every night vision device – were also ascertained, with the aim of fitting them into the chosen night vision goggles. The solution was provided by a small European company that was able

to combine the desired image intensifier tubes and the housing with the optics in accordance with Rega's requirements to create "new", tailor-made night vision goggles.

Design and Development Centre pushes ahead with certification

In autumn 2019, the certification project was launched with the aim of obtaining certification for the new NVGs for Rega's rescue helicopters. For in the field of aviation, everything that is carried on board an aircraft must meet the strictest requirements and pass inspection by an independent body. Rega's in-house Design and Development Centre drew up a certification programme, which was then submitted to the EASA for approval. This defined all the individual steps, as well as the time and resource plans for the compatibility tests of the NVGs in an external laboratory and for the test flights. Not only aircraft and certified test pilots had to be planned for, but also new-moon nights for the NVG test flights and possible delays due to bad weather conditions.

The EASA gave the go-ahead for the proposed procedure and in spring 2020, Rega's future night vision goggles were extensively tested in the laboratory. What effect does humidity, heat and vibration have on them?

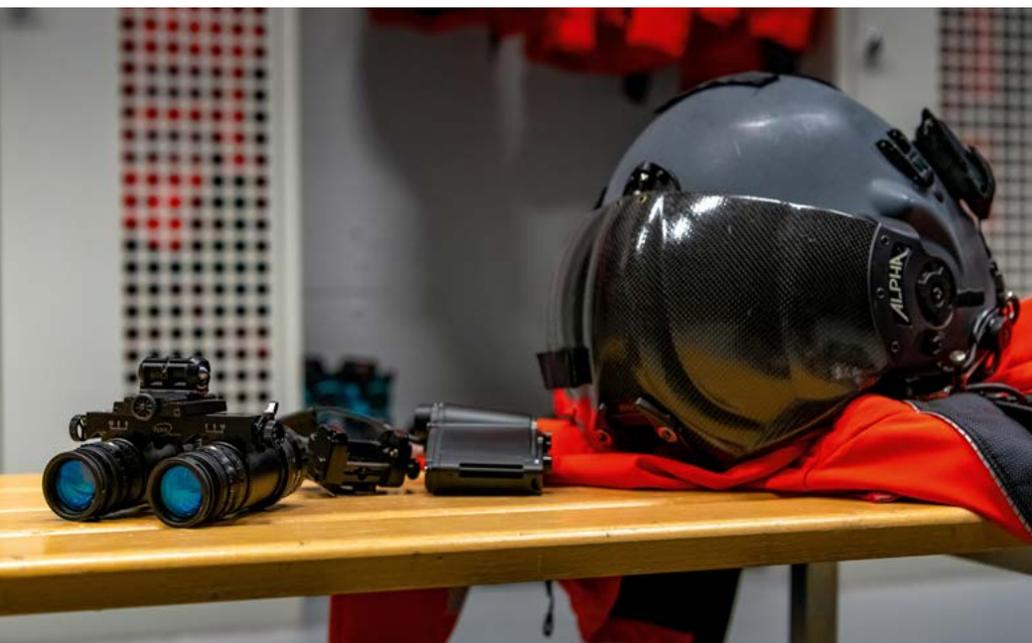
And how do the pilots deal with this? The laboratory tests were followed by so-called ground tests. For this, the helicopter is placed in a "darkroom". Here, among other things, checks are conducted to see if the pilot can easily read symbols on panels outside the cockpit when they are wearing the night vision goggles. After these tests were successfully completed, all the possible configurations on the helicopter were run through on various test flights, in accordance with EASA specifications: with searchlight, with dual and single cockpit, with cargo mirror, etc. The evaluations were meticulously documented and submitted to the EASA. The final documentation comprised several hundred pages.

Parallel to the submission for the night vision goggles to the EASA, the Rega engineers, in collaboration with the manufacturer, modified the helmet mount. This "interface" not only holds the binoculars firmly in place on the front of the helmet, but also provides the power connection between the battery fixed on the back of the helmet and the NVG device. The newly designed mounting system is also optimised to withstand intensive use.

Going the extra mile has paid off

Going the extra mile in terms of evaluation and certification has paid off: since spring of this year, all of Rega's rescue helicopters have been equipped with these ultra-modern devices, and the advantages of the cutting-edge technology have already come to bear during missions (see orange box on page 7). The NVGs support the cockpit crews in their work and provide an extra degree of flight safety – en route to the patient, during the swift, gentle transport to a hospital, and on the flight back to the helicopter base. Consequently, Rega continues to be optimally equipped for night missions.

The binoculars and battery pack are attached to the pilot's helmet before the night flight.



“Saving lives while ensuring the greatest possible level of safety”



Together with his staff, Head of the Helicopter Procedures and Training division and Chief Pilot at Rega, Heinz Leibundgut, is

responsible for recruiting and training the cockpit crews. In addition, he is in charge of innovative projects, such as the expansion of the Low Flight Network (LFN), which enables flights under instrument flight rules, or the procurement of new equipment, such as night vision goggles.

What is it like for a helicopter pilot to fly in the dark?

We fly the same missions as during the day, and the procedure of the mission is also the same. But the darkness brings with it a variety of challenges. We can see less, so we lack many visual points of reference, such as trees or buildings, to orientate ourselves by. In daylight, a quick glance is sufficient to perceive the scene; we can orientate ourselves in the terrain without problem and also gauge distances to obstacles quickly and precisely. In the dark, however, orientation is more demanding. Night vision goggles, which amplify any residual light, aid us in this respect. But just like looking through a pair of binoculars, our field of view is somewhat constrained by the “tunnel vision”. As a result, at night we consciously take more time to do things. Our task is to save lives, to help people in distress – while also ensuring the greatest possible level of safety.

How do the new night vision goggles help the pilot?

The image that you can see through the new NVGs is richer in contrast and sharper than before – we simply see better with them. This helps us not just with orientation and recognising obstacles; we can also detect a change in the weather earlier – for example, if fog suddenly emerges during a mission. Another important factor at night is fatigue: similar to driving a car in the dark, you tire more quickly when flying



at night than during the day. Some features of the new night vision goggles now reduce this physical fatigue. The new greyscale image, for example, puts less strain on the eyes than the previous image with its contrasting shades of green. The field of view is now around a quarter larger, which means you do not have to turn your head as much to get your bearings. Also the new NVGs are somewhat lighter. Subtle improvements that together make all the difference.

What other aids do helicopter pilots use at night?

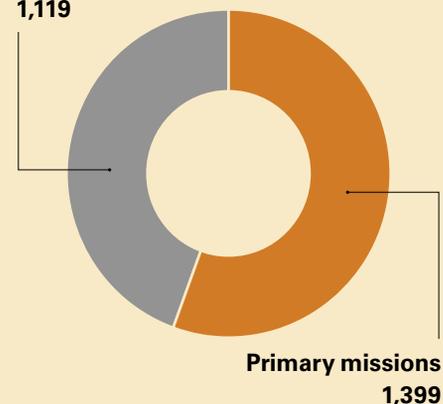
We operate a fleet of state-of-the-art rescue helicopters. Thanks to the four-axis autopilot, they can hover independently on the spot. This is a great help for the pilot during a mission using the rescue hoist. In addition, we have powerful headlights, whose light cones we can control. Another aid is the digital map material, which not only displays our position with metre precision on large screens in the cockpit, but also warns us of possible dangers, such as cables and telephone lines. These technical aids provide significant support. But the most important factors that enable us to fly night missions as safely as possible are sound basic training, experience and the regular further training of our crews. And I deliberately say “crews” and not “pilots”, because at night cooperation between all the members of the crew

is particularly important, so that we can come to the assistance of our patients as quickly and safely as possible, including in the dark.

Night missions in 2020: reasons for raising the alarm

Rega’s night missions illustrate its broad range of missions: in terms of the 1,399 primary missions (emergency missions direct to the scene of the incident), the most frequent reasons for raising the alarm were acute illnesses followed by occupational and road accidents. In addition, Rega was called out a total of 1,119 times during the night to perform secondary missions, whereby the crews transfer patients from a peripheral hospital to a central one.

Secondary missions 1,119



Occupational accidents	219
Alpine accidents	31
Illnesses	701
Sports accidents	59
Road accidents	140
Winter sports accidents	78
Other causes	171

Helicopter Operations Centre: investing time in order to save time

It can decide not only between life and death, but also how long a patient is hospitalised or spends time convalescing – the time that transpires between an accident or serious illness occurring and the patient being admitted to a suitable hospital for treatment. A look inside Rega’s Helicopter Operations Centre shows how the Rega flight coordinators, in particular, sometimes need to invest time in order to ultimately save time for the benefit of the patient.

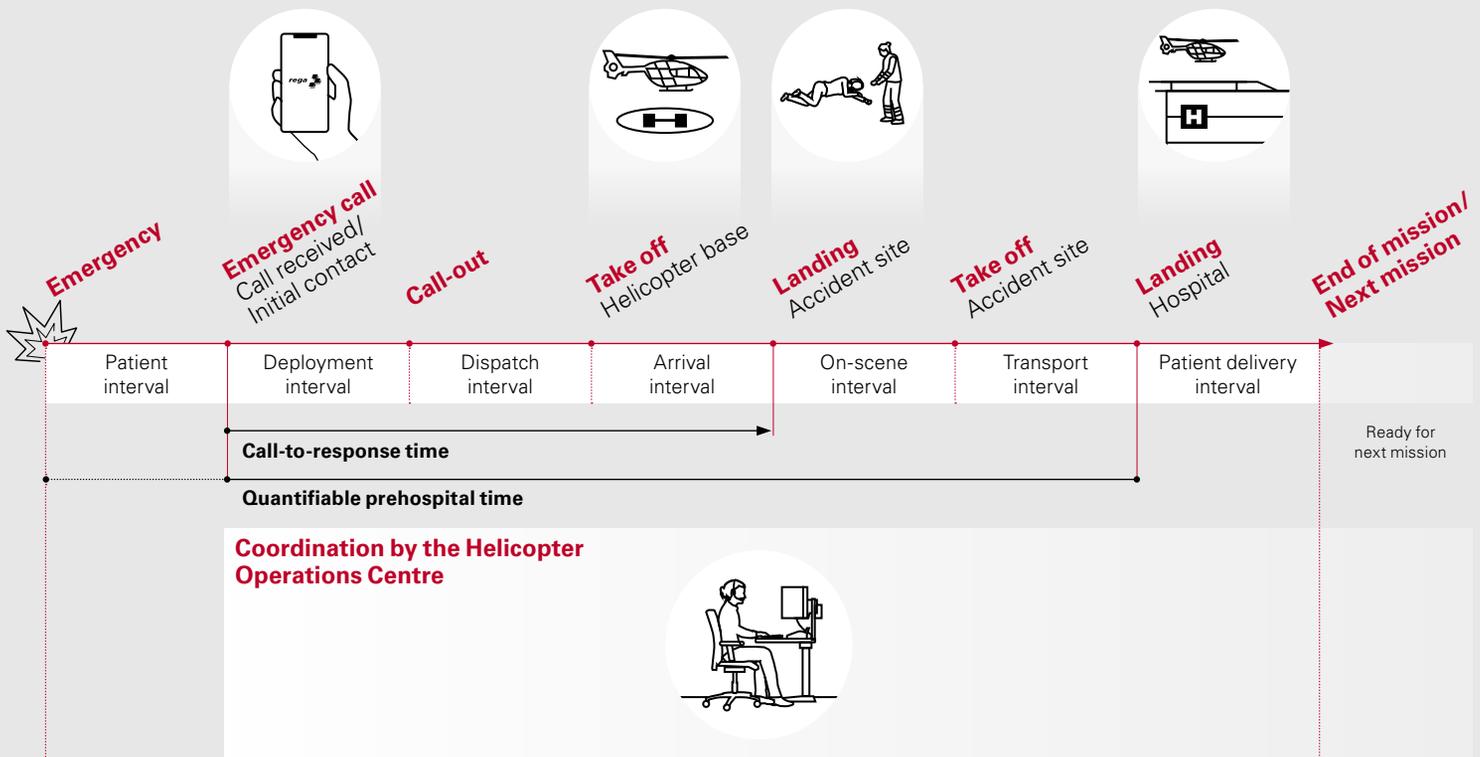
As soon as a medical emergency occurs, the clock starts ticking: especially with serious injuries and illnesses, such as strokes and acute cardiovascular problems, swift admission to hospital can have a major impact on the patient’s survival chances and minimise the risk of permanent damage. Due to Switzerland’s topography, air rescue plays an important role in the sphere of emergency medical care. From many rural areas, it is a long journey to a main hospital – and in such cases, the rescue helicopter is

the fastest and most gentle mode of transport in an emergency. In addition, in the rough terrain of the Swiss mountains, the helicopter is often the only means of rescue that can reach the accident site within an adequate period of time.

Optimising wherever the patient can benefit

One of Rega’s tasks is to continually improve the provision of medical care by air. The time factor plays a key role here. Therefore, ever since it was

Time intervals in the provision of emergency medical care



The time from the point when a medical emergency occurs to when the patient is handed over at a hospital can be divided into individual **intervals**. The time intervals shown in the diagram have been agreed on by various protagonists who are directly involved in emergency medical care, such as air rescuers, ground rescue services, ambulance call centres and hospitals. For example, the time up to when the rescue service call centre receives the alarm call is referred to as the **patient interval**, while the period between the emergency call centre being alerted and the means of rescue being called out is the **deployment interval**. In turn, the duration of the transport from the accident scene to the hospital is called the **transport interval**, while the **quantifiable prehospital time** refers to the time from

the emergency call being made right through to hospitalisation. The mutual understanding of the various intervals makes it possible to define time reference values for the individual intervals and to plan the provision of emergency medical care to the population accordingly. The **call-to-response time** is an important parameter in this respect. In addition, the reference values form a basis for quality assurance by enabling compliance to be checked. They also provide an ideal starting point for further optimising the rescue chain in liaison with all the protagonists involved and thus shortening the prehospital time even further for the benefit of the patients.

founded, Rega has pursued the goal of keeping the length of time from the incident happening to the patient being hospitalised – the so-called prehospital time – as short as possible. It achieves this by identifying the relevant influencing factors and optimising those that it can influence itself. For example, the maximum flying speed of a rescue helicopter or the time the pilot needs to start the engines cannot be changed significantly. In contrast, the Rega Helicopter Operations Centre is of central importance in this respect: the influence it has on the time it takes for a patient to be hospitalised is particularly great, as the following examples of the tasks performed by a flight coordinator during a helicopter mission show.

Raising the alarm without losing any time

Every helicopter mission begins with the alarm being raised: in around two-thirds of the 12,000 helicopter missions organised by Rega's flight coordinators each year, the Operations Centre is alerted directly (see illustration on page 13). This includes the alarm being raised by private individuals, but also by piste rescue services, the police or hospitals, who contact the Operations Centre directly via the emergency number 1414 or the Rega app if they require Rega's assistance. The app is a prime example of how a Rega-designed technical solution saves time in an emergency: a person who uses it to raise the alarm simultaneously transmits the coordinates of their location to Rega's dispatch system. As a result, the exact location of the accident site can be determined much more quickly.

Digital interfaces to a SNZ 144

However, Rega has not only improved the process for being alerted directly, but also for emergency calls that come in via a cantonal ambulance call centre 144 (SNZ). Around 30 percent of Rega's helicopter missions are the result of being called out by a SNZ. It is correspondingly important that the two organisations work together as efficiently as possible so that no



The flight coordinators organise around 12,000 helicopter missions every year.

time is lost in the transfer of mission data. The solution is provided by digital interfaces between the two dispatch systems: if a rescue helicopter is required, a SNZ dispatcher can transmit the mission information that has already been recorded – such as coordinates or patient details – directly to the Rega dispatch system at the click of a mouse, thereby simultaneously requesting a rescue helicopter. This means that the Rega flight coordinator does not have to enter the information again, but instead can focus on the important decision as to which helicopter crew should be called out for the mission without wasting any time.

Distance is just one of many factors

Once the Rega flight coordinator has verified the accident site, they determine and then mobilise the nearest suitable crew for this mission. Technology also provides valuable support in this respect, with Rega's dispatch system suggesting the nearest available rescue helicopter wherever necessary. However, in the field of air rescue, there are other factors besides the distance to the accident site that Rega's flight

coordinators need to take into account. One of these is the weather conditions: the "free" helicopter suggested by the system may not, for instance, be able to fly to an accident site in the neighbouring valley because the route over the mountain pass is covered in cloud. No automated dispatch system can take this information into consideration, which is why the Rega flight coordinator constantly monitors the meteorological conditions during the course of the day. To do this, they can draw on the current flight weather data from a network of more than 60 Rega weather stations, which Rega has built up over the last ten years.

Reacting flexibly

Another aspect that the flight coordinators take into account before deploying a rescue helicopter is the overall picture of all ongoing helicopter missions throughout Switzerland. They have a "bird's eye view" of what is going on at all times and, unlike the algorithm of a dispatch system, do not only think in predefined categories. For instance, a flight coordinator can also consider a crew for a mission that is close to the scene of the accident



The flight coordinator supports the helicopter crew during the entire mission.

but is shown by the system as being “not available” – because, for example, they know that this crew is currently handing over a patient at the hospital and will be available for the next mission very shortly. No computer system can provide this kind of flexibility.

Coordinating with mission partners

The rescue helicopter that is geographically the closest is also not always the most suitable one because a mission may require additional equipment or the assistance of mission partners, such as the mountain rescuers from the Swiss Alpine Club SAC. These rescue

specialists are mobilised by the Rega Operations Centre to, among other things, assist the crew on missions in rough terrain and are picked up by the helicopter crew from wherever they happen to be at the time of the call-out. The current location of a mountain rescuer who is needed for the mission can therefore also influence the decision as to which helicopter crew is called out.

Time well invested

The limiting factors relating to air rescue, such as weather, equipment and crew training, as well as the overall

picture of the on-going helicopter missions, are therefore all taken into account by Rega’s flight coordinators before they mobilise a crew. Despite cutting-edge infrastructure, these clarifications cannot be fully digitised, require specialist knowledge – and often take some time. But experience gained over the last decades has shown that this is time well invested. Time that can ultimately shorten the prehospital time and thus benefit the patients. After all, what use is it to a patient if a rescue helicopter is called out at almost the same time as the emergency call is received because it was automatically suggested by the dispatch system as being the nearest available helicopter, but then the crew cannot reach the accident site due to bad weather or is not able to carry out the mission because it lacks a piece of equipment? Therefore, in view of all the air rescue clarifications that have to be made prior to a helicopter crew being called out, it is true to say that sometimes it is necessary to first invest time in order to ultimately save time. For the patient, it is not the time between the emergency call being received and the helicopter taking off that is decisive, but rather the length of time it takes for the helicopter crew to actually arrive on the scene and start providing emergency medical care.

Support throughout the mission

Once the flight coordinator has decided which helicopter crew is the most suitable for the mission, they mobilise the crew. With a click of the mouse, they send the call-out request, which already contains the key information about the mission and the coordinates of the accident site. However, the work of the Rega flight coordinator does not end with the dispatch of the helicopter: subsequently they support the crew throughout the entire mission, continually supply them with additional information, coordinate with the mission partners, and register the patient at the destination hospital. In addition, the flight coordinator is in contact with other rescue helicopters that are currently in the air or on a hospital

helipad, which increases flight safety for everyone involved, especially at night. In this way, the flight coordinators support the Rega crews remotely as an additional, fourth member of the crew.

People are at the centre

Whether on the ground or in the air: in an emergency, all the links in the rescue chain need to make the right decisions at the right time within their area of responsibility. The decisions made by the various protagonists – from the person raising the alarm to the first responder to the emergency service dispatcher and the means of rescue used – have a direct impact on how long it takes for a patient to be hospitalised. In particular in the field of air rescue, the correct deployment decision is

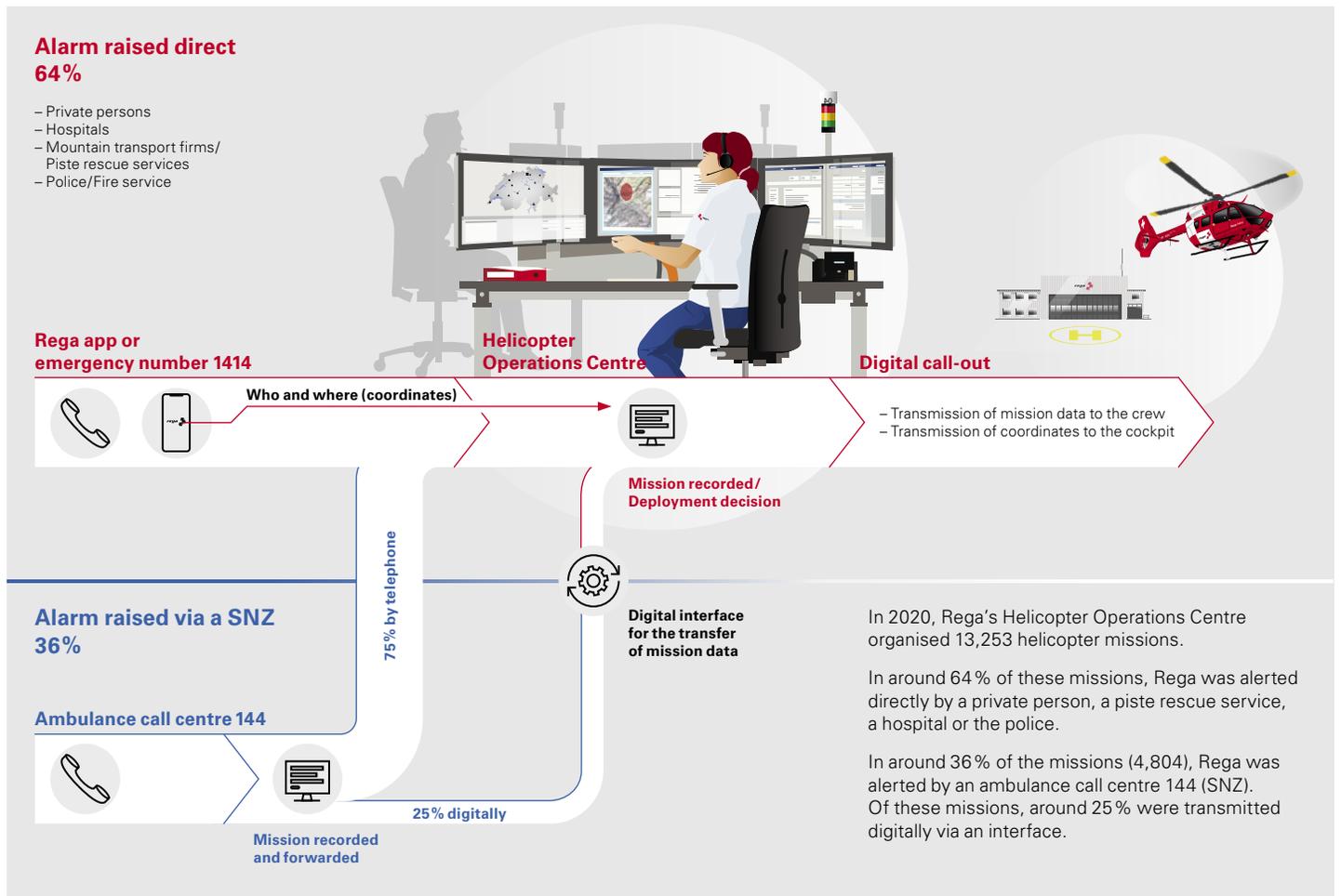
decisive as to whether a mission can subsequently be performed efficiently – thus saving time to the benefit of the patient. While, in their demanding work, the helicopter flight coordinators are supported by ultramodern technology and infrastructure, central to everything they do is their experience and their flexibility – competences that cannot be replaced by a computer.

Clearly regulated tasks and competences

In order to further improve the provision of emergency medical assistance to the Swiss population, all the links in the rescue chain must optimise their own processes. However, this is only possible if the various areas of responsibility and competences – and

thus also the points of contact – are clearly defined. Only thus can the interfaces between the various partners be improved and further harmonised. From the experience gained from hundreds of thousands of helicopter missions, Rega is very aware of the impact that the central coordination of rescue helicopters has on how efficiently a mission is carried out – and on how quickly a patient can be helped. As a result, Rega will, for the welfare of its patients, continue in future to coordinate rescue helicopters in Switzerland through its own Operations Centre, which is optimally geared towards fulfilling this task.

How the alarm is raised at the Operations Centre



Quick, clear-cut and comprehensive – the new electronic patient report form

Whether medicines administered, therapeutic measures taken on location or vital parameters recorded on the flight to hospital: Rega's emergency flight physicians document every step in the medical treatment of their patients. What they used to record by hand on pre-printed forms is now done digitally.

Until now, Rega used a paper-based form with two carbon copies, as is common practice among many emergency services. On it, the emergency physician documented by hand the patient's medical treatment. However, usually patients are attended to out-of-doors, sometimes under arduous circumstances. While it is possible to write notes with numb fingers in adverse weather conditions, particularly in the case of rain, wind and cold, this can result in not only the legibility of

the handwriting suffering, but also the actual information carrier – the sheet of paper.

Unambiguity is important

Rega is part of a rescue chain and the vast majority of patients are taken to hospital for further treatment after receiving emergency medical care from the Rega flight physician. Full documentation of the therapeutic measures taken is therefore correspondingly important. Consequently, a robust, digital solution is of great advantage in this respect. The digitally recorded information is not only unambiguous, but also enduring.

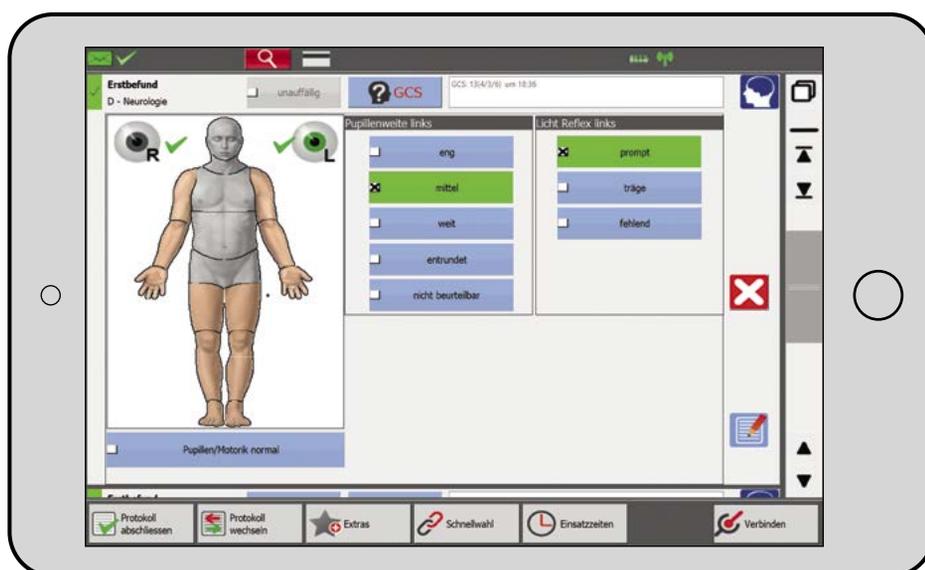
What is required?

In this age of digitalisation, implementation of this project initially seemed simple. However, it quickly became apparent that there were no ready-made solutions on the market that met Rega's

needs. So Rega found a manufacturer that could adapt its existing software for rescue services to Rega's specific requirements. In order to define and then implement the ideal IT solution, a team of Rega emergency physicians and IT specialists drew up a list of specifications. For example, they analysed what the medical staff needed when out on a mission and how they could be supported as effectively as possible by a technical aid. As patients are usually treated out-of-doors and the helicopter flight from the accident site to the hospital often only takes a few minutes, a fast, particularly user-friendly and hard-wearing system was required. After a comprehensive test phase, the tablet devices complete with touchscreen and the new IT software were put into active use.

How the system works

When a crew is called out on a mission, each crew member receives a digital call-out from the Helicopter Operations Centre as before. This already contains the key information, such as the name, gender and year of birth of the injured person, as well as the reason for raising the alarm. What is new is that the electronic patient report form is automatically "opened" on the emergency physician's tablet device based on this data. It is then continuously supplemented during the mission, with information from two sources. First, the medical equipment in the helicopter automatically transmits the patient's vital parameters, such as the oxygen content in the blood or the heart rate, to the software. Second, the emergency physician documents by hand the details of the therapy and the injury or illness via a user interface that is tailored to Rega's requirements.



Recording diagnoses quickly and easily: the Rega emergency flight physician taps on the injured body part or the affected area on the screen and then selects more precise details from the options menu.

Support with pre-stored data

Thus, for example, the location of the accident site, the circumstances of the accident and details of the treatment can be quickly recorded with just a few inputs. Is the patient responsive, is their breathing stable? Is medication being administered and if so, in what dosage? Simple symbols on the screen help the



Having undergone a comprehensive test phase, the tablet devices with the new IT software are now in active use.

physician to enter the data. Possible diagnoses can also be recorded quickly and easily: on the silhouette of a person, the emergency physician taps on the injured body part or the affected area and then selects more precise details from the options menu. If, for example, they tap on the arm, they can then choose fracture of the humerus or forearm, dislocated shoulder or other typical arm injuries. If a specific case deviates from the norm, the emergency physician enters this directly. The preliminary diagnosis and the medical treatment given can thus be easily recorded while the patient is being flown to hospital. Entry of the data is practical and simple, and the user interface is generously designed: thanks to the large buttons, the emergency flight physician can make their selection even with icy-cold fingers or wearing gloves.

Clear information for the hospital

The final stage of the patient care by the Rega emergency physician is the handover of the patient at the hospital. Here, they inform the doctor-in-attendance both verbally and with the help of the data recorded on the tablet about how the accident happened and what measures have already been taken. Previously, they would have left a carbon copy of the paper form with the hospital staff after the handover. Now, the electronic patient report form is transmitted to the hospital by means of an encrypted e-mail – so that clear and unambiguous documentation is also available after the Rega crew have departed.

Even greater focus on patients

The digitisation of the medical report form shows that Rega crews can be supported in their work and relieved

of some of the burden by simplifying administrative processes. This allows them to focus even more strongly on those tasks that cannot be digitised – for example, direct interaction with the patients.

Medical assistance by air

Swiss Air-Rescue Rega was founded in 1952 for the purpose of providing emergency medical assistance by air.

Thanks to wide-scale support from the Swiss people, it is able to meet the challenges posed by a country with extremely demanding topography. Rega is on call around the clock with its highly trained employees and state-of-the-art aircraft, finances the building and renovation of its dense network of helicopter bases, and constantly improves its air rescue services and procedures.

Rega provides assistance wherever a person's life or health can be preserved or protected through its intervention. Ambulance jets and rescue helicopters are swift, comfortable and efficient means of transport. Their targeted use helps reduce the subsequent costs arising from acute illnesses and accidents.

Rega is an autonomous, privately run, non-profit foundation. With its 3,625,000 patrons, it is firmly rooted within the Swiss population. Rega operates independently of political interests and is not subsidised by the State. Rega is an integral part of primary healthcare in Switzerland and with its work contributes towards improving the quality of life, the economy and tourism in this country.

Key figures for 2020

Total number of missions organised	16,273
Helicopter	13,253
Fixed-wing aircraft	770
Other missions ¹	2,250
Patronage contributions and donations (CHF million)	107.4
No. of patrons (in millions)	3.625
No. of employees ²	380
Operating revenue (CHF million)	175
Operating expenditure (CHF million)	164
Operating result (CHF million)	+11.4
Balance sheet total (CHF million)	590

¹ Other missions: transports by ambulance, missions on behalf of the Swiss Alpine Club SAC, Spéleo-Secours, Redog, etc.

² No. of full-time equivalent employees at the end of December





Solidarity, empathy, professionalism, competence, Swissness
You can rely on Rega.

Locations

Rega's helicopter bases

Rega aims to reach any location in its operational area within 15 minutes' flying time. Twelve Rega helicopter bases distributed throughout the country make this possible. They are located in Dübendorf, Basel, Berne, Lausanne, Untervaz, Locarno, St. Gallen, Erstfeld, Samedan, Wilderswil, Mollis and Zweisimmen. In addition, there is a partner base in Geneva and a training base in Grenchen.

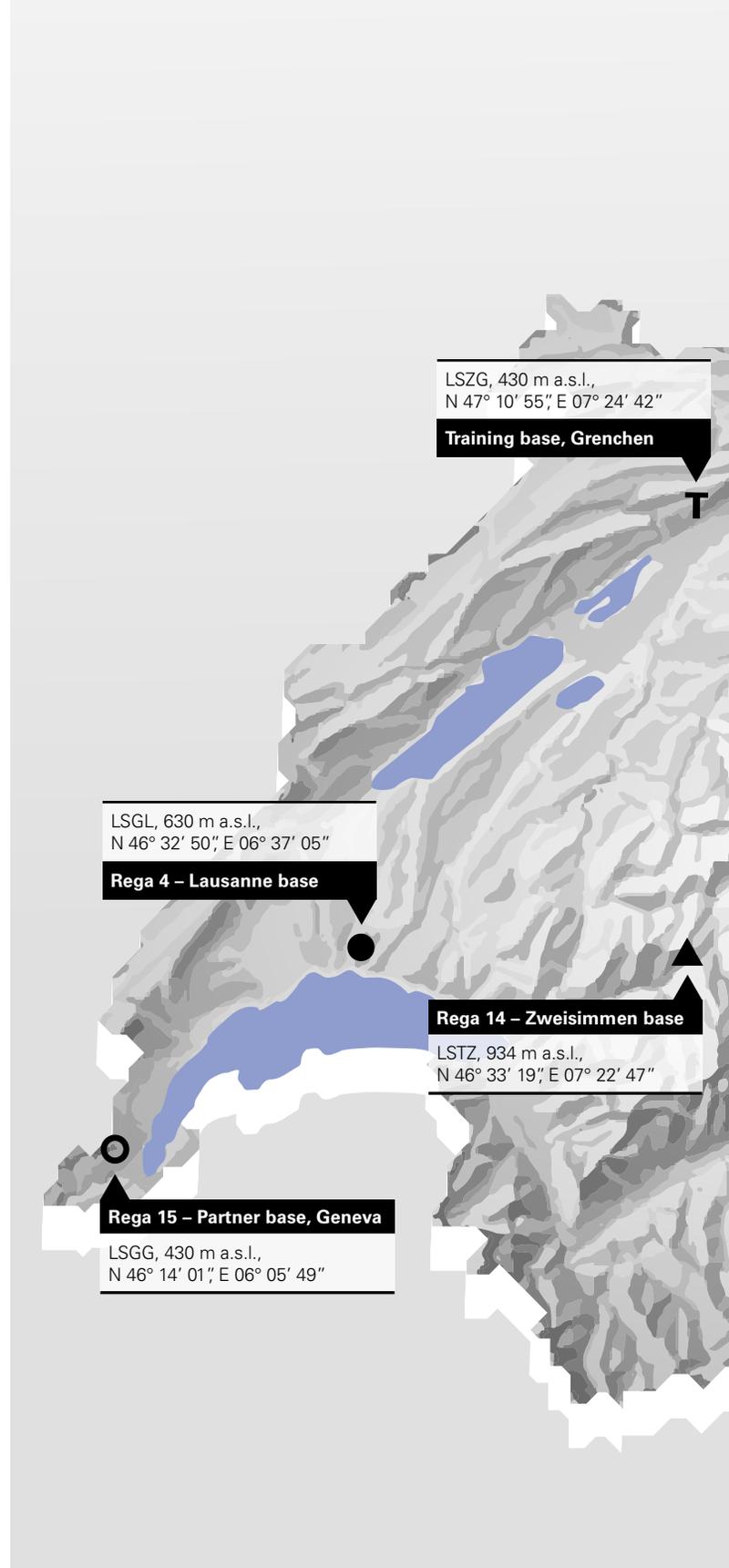
At each of the helicopter bases, a Rega crew comprising a pilot, paramedic and emergency flight physician are standing by at all times, ready to bring emergency assistance by air to people in distress as swiftly as possible.

The Rega Centre

Rega's headquarters is located at Zurich Airport, with direct access to the take-off and landing runways. While the three ambulance jets take off from here to destinations all over the globe, the rescue helicopters only come to the Rega Centre for major maintenance work or servicing. In addition to the hangar and the maintenance works for the Rega fleet, the Rega Centre is home to the Operations Centre, the administrative offices and the large, central materials store.

Operations Centre

The Operations Centre at the Rega Centre organises around 17,000 missions every year. It can be contacted around the clock – in Switzerland via emergency number **1414** and from abroad by calling **+41 333 333 333**.



The Rega fleet

Helicopters, lowland bases



Airbus Helicopters H145

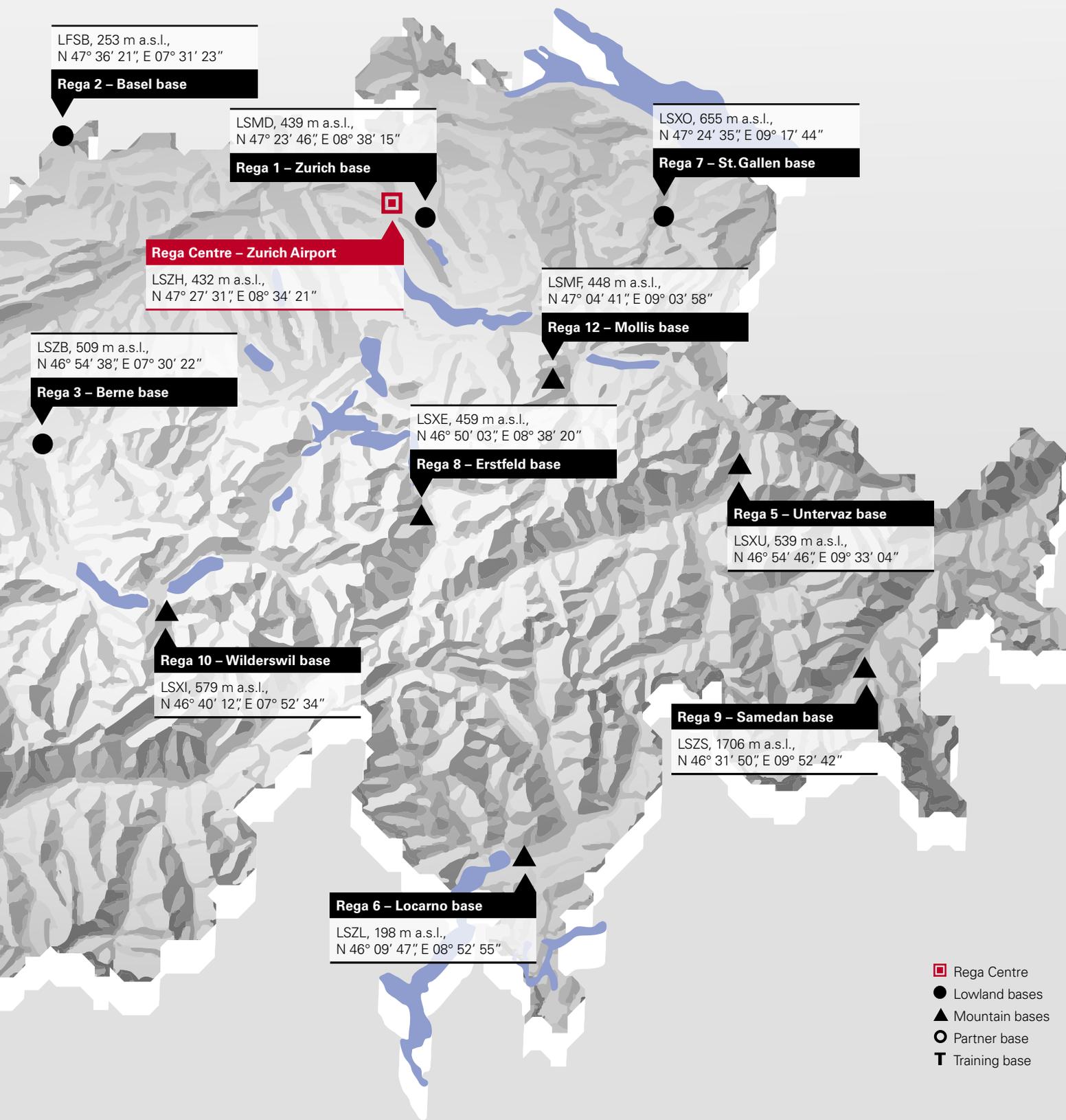
Number of helicopters:	7
Patient capacity:	1 lying, 1 sitting
Rotor diameter:	11 m
Length:	13.64 m
Height:	3.95 m
2 engines, take-off power:	Arriel 2E, 2 x 894 HP
Maximum flying speed:	230 km/h
Rescue hoist:	90 m cable length, 270 kg

Helicopters, mountain bases



AgustaWestland Da Vinci

Number of helicopters:	11
Patient capacity:	1 lying, 1 sitting
Rotor diameter:	10.83 m
Length:	12.96 m
Height:	3.40 m
2 engines, take-off power:	Pratt & Whitney, 2 x 778 HP
Maximum flying speed:	235 km/h
Rescue hoist:	90 m cable length, 270 kg



Helicopter, flight school



Airbus Helicopters H125

Number of helicopters:	1
Rotor diameter:	10.69 m
Length:	12.94 m
Height:	3.34 m
1 engine, take-off power:	Turbomeca Arriel 2D, 860 HP
Maximum flying speed:	220 km/h

Ambulance jets



Bombardier Challenger 650

Number of aircraft:	3
Patient capacity:	4 lying
Wing span:	19.61 m
Length:	20.86 m
Height:	6.40 m
Maximum take-off weight:	21,863 kg
Maximum flying speed:	850 km/h
Maximum range:	6,500 km

Missions

Rega in Switzerland



Rega's rescue helicopters are on call 24 hours a day, 365 days a year, in the service of the Swiss people. The 18 Agusta-Westland Da Vinci and Airbus Helicopters H145 helicopters transport state-of-the-art medical services directly to the casualty – not just in response to serious accidents or injuries, but also in cases of acute illness, such as cardiac problems.

The rescue helicopters are called out to deal with incidents in inaccessible mountainous terrain, as well as on motorways and in built-up areas. They are used to transport critical patients gently and reliably to the nearest suitable medical centre or to fly newborn babies to a paediatric hospital. A highly versatile and efficient means of rescue, the helicopter plays an indispensable role in the modern-day healthcare system.

Helicopter operations are divided into primary and secondary missions. Primary missions comprise rescue flights that transport emergency medical assistance directly to the scene of the incident. Secondary missions mostly involve inter-hospital transfers – for example, if a patient's condition has worsened and requires specialist attention. Almost a quarter of all Rega helicopter missions take place at night – a demanding task for the pilot, paramedic and emergency physician making up the crew.

Primary/secondary missions by helicopter in 2020 (10,376 patients in total)

1,580

Winter sports accidents

902 Alpine accidents

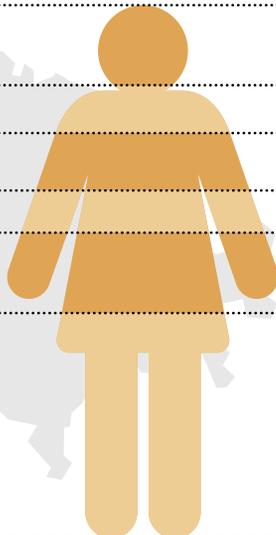
1,117 Occupational accidents

835 Road accidents

1,579

Other accidents

4,363
Illnesses



Rega international



For people who become seriously injured or ill abroad, Rega represents a bridge to their homeland. Its three own ambulance jets are used exclusively for transporting patients. The crew always comprises at least two pilots, a physician and an intensive care nurse. Rega is equipped to transport patients who are in a very critical physical condition. However, as each transport involves a certain degree of risk, operations of this kind need to be closely supervised by experienced medical consultants.

The use of an ambulance jet is not always necessary. Often patients are repatriated on board a scheduled aircraft – competently and professionally attended to by a member of Rega’s medical staff.

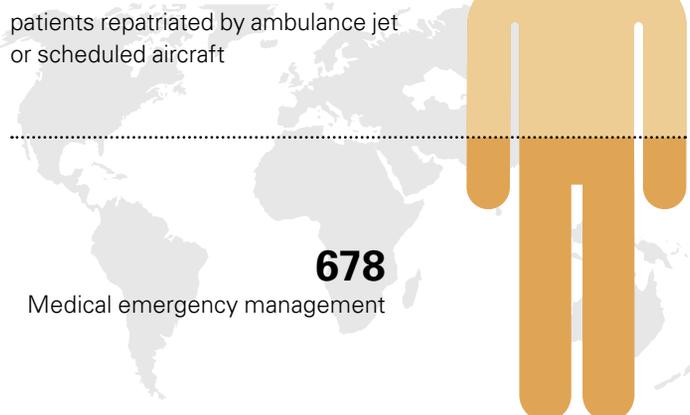
If travellers suffer serious medical problems abroad, Rega can also assist by providing them with expert medical advice by telephone as part of its emergency medical management. Medical consultants are on duty around the clock and, together with the doctors on location and the patients themselves, seek the best possible solution – such as informing them of the nearest suitable hospital.

Providing that it has capacity available, Rega also puts its knowledge and fleet at the disposal of clients abroad for patient transports. These missions help Rega crews to maintain and improve their operational and medical expertise, and also contribute towards covering costs.

Medical emergencies abroad in 2020 (1,436 patients in total)

758

patients repatriated by ambulance jet
or scheduled aircraft



Patronage

No patrons, no Rega

Thanks to their annual contributions, Rega's patrons enable the continued existence of the air rescue organisation. They keep Rega in the air, as a public service for the Swiss people.

Professional rescue by air around the clock, 365 days a year, with highly qualified staff, state-of-the-art rescue equipment and a dense network of helicopter bases – it would be impossible to provide all this in a cost-effective manner. When, back in the 1960s, the fledgling air rescue organisation ran into serious financial difficulties, instead of relying on public funds, it set up a privately operated patronage system. Since then, the patrons have paid Rega's "deficit" with their annual contributions. At around 60 percent, these patronage contributions, together with donations, cover more than half of the total budget. The remaining costs are principally covered by cost bearers, such as health, accident and travel insurers, in the form of payments for missions carried out on their behalf.

In the meantime, this system has more than proved its worth. It gives Rega the freedom and independence to perform its duties as it deems best and allows it to fully focus on its patients' welfare.

As a token of thanks for patrons' support, Rega can waive the cost of any of the services it performs on their behalf, provided that the person's insurance company is not liable to pay them.

You can find the Conditions of Patronage on page 38.

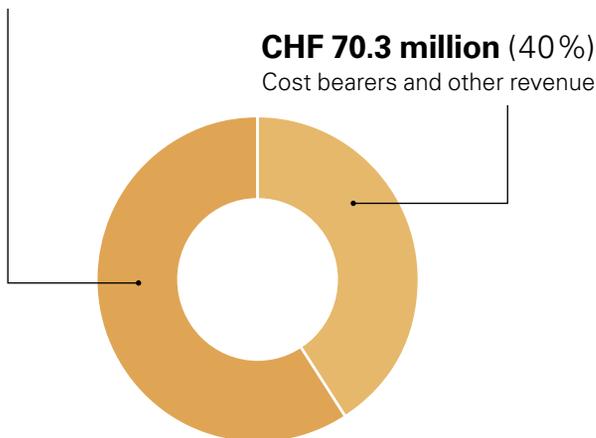
Cost coverage in 2020

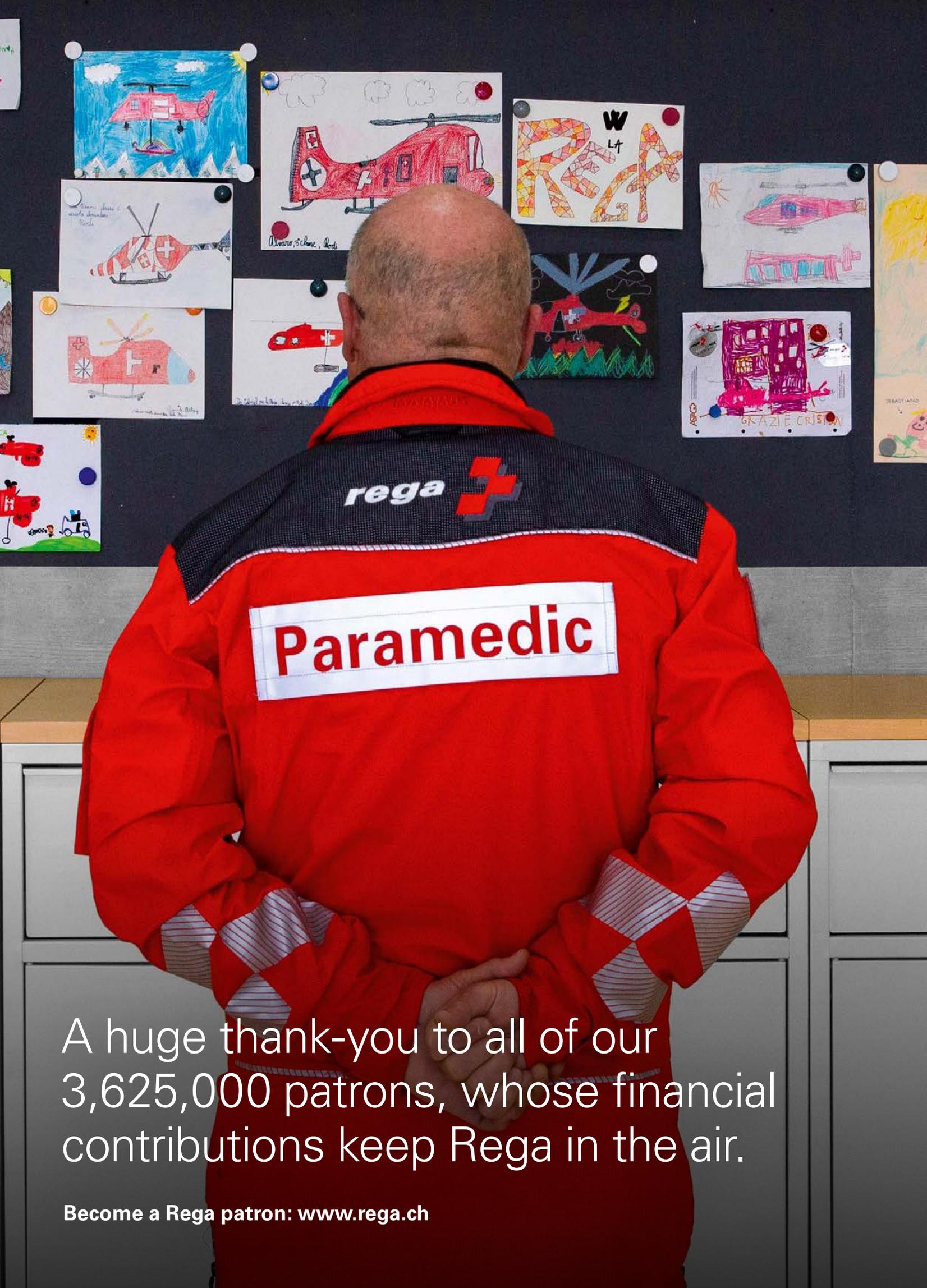
CHF 107.4 million (60%)

Patrons' contributions and donations

CHF 70.3 million (40%)

Cost bearers and other revenue





A huge thank-you to all of our
3,625,000 patrons, whose financial
contributions keep Rega in the air.

Become a Rega patron: www.rega.ch

Milestones

Swiss Air-Rescue Rega was founded in 1952 to provide emergency medical assistance by air. Since then, it has organised over 470,000 missions and rescued countless people in distress. Even back in the pioneering days, Rega's air rescuers succeeded in achieving the impossible. Rega has remained true to this credo to this day.

> 27.4.1952 **The organisation is founded**
 Swiss Air-Rescue is founded as a sub-section of the Swiss rescue association, Schweizerische Lebensrettungsgesellschaft (SLRG), in the Hotel Bären in Twann.

> 1952 **Swiss Air-Rescue is ready to start operations**
 On 25 December, Dr. Rudolf Bucher, the head of Swiss Air-Rescue, announces over Radio Beromünster that the parachutists and helicopters are ready for action.

> 1953 **The first rescue parachutists**
 In winter 1953, Swiss Air-Rescue parachutists are used on a rescue mission for the first time.

> 1955 **Large-scale live demonstration**
 During three days in March, over 300,000 spectators watch a live demonstration in the area around Zurich's lower lake basin, held to procure funds for air rescue services.

> 1956 **Emergency assistance in the USA**
 After a plane accident, Swiss Air-Rescue pioneers recover the bodies of 128 persons from an inaccessible area in the Grand Canyon region.

> 1957 **The first helicopter of its own**
 A countrywide collection by the Association of Swiss Consumers' Cooperative Societies (now Coop) produces sufficient funds to purchase a Bell-47 J helicopter.

> 1960 **An autonomous organisation under Fritz Bühler**
 Swiss Air-Rescue breaks away from its parent organisation, the SLRG. Fritz Bühler is appointed Technical Director.

> 1960 **First repatriation**
 For its first repatriation mission, the private Piaggio 166 aircraft owned by Dr. Armin Meyer flies a patient from France back home to Switzerland.

> 1966 **Self-help by means of patronage**
 No funds from the Swiss government. However, a nationwide appeal for help proves successful. 25,000 patrons save Swiss Air-Rescue from financial ruin.

> 1968 **Bell 206A, the first turbine-powered helicopter**
 The Jet Ranger HB-XCU has a turbine, but no rescue hoist. In mountainous areas where the helicopter is unable to land, rescue is only possible using the fixed rope.

> 1971 **First direct rescue from the Eiger north face**
 What until now had been deemed impossible, suddenly becomes reality: using a rescue hoist, the crew from the Gsteigwiler base lift two climbers directly off the rock face.

> 1971 **First Alouette III**
 The Alouette III SE 316 HB-XDF is Rega's first helicopter to be financed by patrons' contributions. The picture shows it in operation at the Engadin Ski Marathon in 1972.

> 1973 **Twin-engine helicopter**
 The introduction of the Bölkow BO-105C – depicted here on the roof of the University Children's Hospital in Zurich – marks the beginning of the era of twin-engine helicopters at Rega.

> 1973 **Operations abroad with its own aircraft**
 Rega's Learjet 24D HB-VCY is the first civilian ambulance jet in the world. It is fully equipped with medical apparatus and is on stand-by around the clock.

> 1979 **Rega becomes a non-profit foundation**
 The Association sets up a Foundation. Fritz Bühler is appointed the first Chairman of the Foundation Board. In 1981, Rega also becomes a Corporate member of the Swiss Red Cross.

> 1984 **Long-haul ambulance jet**
 The Challenger CL-600 HB-VFW is equipped to perform long-haul operations with several patients on board. In Geneva, it is christened "Fritz Bühler".

> 1987 **Helicopters with night vision goggles**
 Rega is the first non-military organisation in the world to equip all of its helicopters with night vision goggles, thus increasing the safety of night missions.

> 1992 **The new fleet is made up of Agustas**
 On 14 August, the Untervaz base in Canton Graubünden puts the first of the 15 new twin-engine Agusta A 109 K2 helicopters into operation.



1996

The first round the world flight

In a mission lasting 43 hours, the Challenger CL-600 transports three patients in consecutive legs, a journey that takes it all the way round the world for the first time.



1997

New Rega Centre at Zurich-Kloten

For the first time, Rega's hangar, Operations Centre, maintenance works, logistics operations, Patronage Centre and Administration Department are all united under one roof.



2002

Three new Challenger CL-604 jets

Three identical aircraft from the Canadian manufacturer, Bombardier, replace the 15-year-old air ambulance fleet.



2002

Five Eurocopter EC 145 helicopters

Rega purchases five spacious rescue helicopters from helicopter manufacturer Eurocopter for use at its lowland bases. This is followed by a sixth.



2004

Tsunami in Southeast Asia

Rega is pushed to the limit. Over a period of ten days, 16 medical teams are in operation. Within the space of a week, more than 60 casualties are repatriated to Switzerland.



2009

The AgustaWestland Da Vinci is Rega's new mountain helicopter

Rega purchases from helicopter manufacturer AgustaWestland 11 rescue helicopters for use at its mountain bases.



2009

Mobile heart-lung machine on board

For the first time, critically-ill patients can be hooked up to a heart-lung machine in the Rega helicopters and jets.



2011

Flying "blind" to the Inselspital

27 July: thanks to satellite-based navigation, Rega flies to the Inselspital University Hospital in Berne despite poor visibility, using the GPS-assisted approach procedure.



2013

The flight simulator for the AW Da Vinci sets new standards

in pilot training. Instrument flight and emergency scenarios can now be practised realistically and efficiently – in safety and without harming the environment.



2014

Premiere for Rega's new transport incubator,

which can be used in both the jets and the helicopters and provides premature or newborn babies with the best possible medical care.



2015

Rega orders three all-weather AW169-FIPS helicopters

from Leonardo (formerly AgustaWestland), which are equipped with an anti-icing system and will go into operation in 2023.



2016

Rescue despite poor visibility thanks to IFR flight route network

In December, two routes of the Low Flight Network for helicopters, which is based on satellite navigation, are certified for daytime use.



2017

Precise flight weather data

60 new or enhanced measuring stations and weather cameras now continually supply Rega's helicopter pilots with up-to-date meteorological information – a key prerequisite for IFR flights.



2017

Authorisation for Low Flight Network

Rega receives special authorisation to use key intersections of the nationwide network of IFR flight routes on missions virtually around the clock.



2018

Three new ambulance jets

The new Challenger 650 jets from Bombardier fly patients from all over the world back to Switzerland. The Rega jets replace the three CL-604s that have been in operation since 2002.



2018

New generation Rega helicopters

The first two H145 helicopters from Airbus Helicopters are stationed at the Berne and Basel bases as high-performance successors of the EC 145 fleet, which repatriated over 60,000 patients.



2019

The Rega drone,

which is to be used to search for missing or injured persons, is presented for the first time. The newly developed drone system will expand Rega's scope of operations from 2021.



2020

456 Covid-19 patients

are transported on board Rega's aircraft during the coronavirus pandemic, 316 of them by rescue helicopter and 140 in an ambulance jet.



2020

Emergency doctor vehicles

at the Rega bases in Mollis and Erstfeld enable the emergency physician and paramedic to also be called out if, for example, the rescue helicopter cannot fly due to bad weather.



2020

Support for Switzerland

Rega supports the Confederation, the cantons and the Swiss population in their efforts to deal with the coronavirus pandemic with its expertise and infrastructure.



Rega 1414

regal

H145

HB-ZGN



Annual Report 2020

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Activities in 2020

Rega can look back on an extremely busy year. In 2020, the Rega Operations Centre organised 16,273 missions (–3.0%) at home and abroad, which is equivalent to an average of one mission every 30 minutes. While the rescue helicopters were in the air more frequently than in 2019, the ambulance jets recorded a considerable drop in missions. The number of medically escorted patients remained virtually unchanged: the Rega crews transported a total of 11,134 patients (–0.3%) on board their aircraft. Therefore, on average, they came to the assistance of 31 people per day.

Helicopters

Never before has the Helicopter Operations Centre organised so many missions (13,253, +8.1%) as in the past year. Also registering an increase were both the primary missions (7,774, +5.6%) and the secondary missions

(2,614, +9.8%). The figures reflect, among other things, the fine weather in summer and autumn 2020, as well as the leisure activities of the Swiss population. The Rega helicopters were also in the air more often at night than in the previous year (2,620, +11.4%), which corresponds to every fourth mission performed by a Rega helicopter. The amount of “contadino” missions organised by Rega’s Operations Centre rose to 1,383 (+10.3%). Rega commissions commercial helicopter transport firms to carry out these transports to recover injured or dead cattle on behalf of mountain farmers.

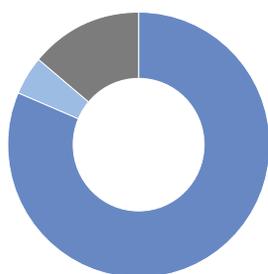
Fixed-wing aircraft

In 2020, the coronavirus pandemic brought international travel in various regions of the world to a virtual standstill. As a result, Rega repatriated significantly fewer patients from abroad than in 2019 (758, –43.6 %).

Its three ambulance jets took off on 649 missions and flew 647 patients back home (–33.4 %). Although the Rega jets flew fewer missions, overall they spent longer in the air than in the previous year. This increase in the number of flight hours of the three Rega jets (4,589, +3.2 %), which was the second highest amount after that recorded in 2018, was attributable to more long-distance missions to far-off countries.

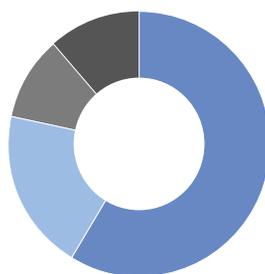
Rega also repatriated considerably fewer patients on board commercial aircraft (111, –70.2%) than in 2019. This economically and environmentally sound alternative to the ambulance jet is employed provided that the patient’s medical condition is sufficiently stable, that this form of transport is not expected to have a negative impact on the patient or other passengers, and that enough seats are available on board the plane. In total, 41 patients (–4.9%)

Number of missions



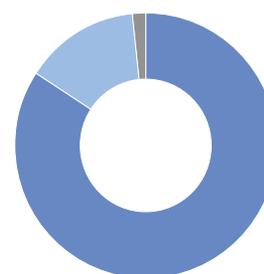
	2020	2019	+/-
Total missions	16,273	16,782	–3.0%
■ Helicopters	13,253	12,257	+8.1%
■ Jets/Scheduled aircraft	770	1,382	–44.3%
■ Other missions ¹	2,250	3,143	–28.4%

Missions by helicopter



	2020	2019	+/-
Total missions	13,253	12,257	+8.1%
of which are performed at night	2,620	2,352	+11.4%
■ Primary missions ²	7,774	7,362	+5.6%
■ Secondary missions ³	2,614	2,381	+9.8%
■ Assistance to mountain farmers	1,383	1,254	+10.3%
■ Special missions ⁴	1,482	1,260	+17.6%

Missions by fixed-wing aircraft



	2020	2019	+/-
Total missions	770	1,382	–44.3%
■ Ambulance jets	649	972	–33.2%
■ Scheduled aircraft	109	371	–70.6%
■ Chartered aircraft	12	39	–69.2%

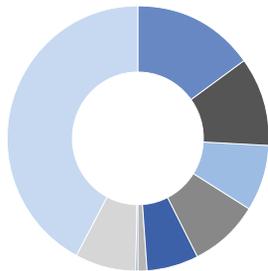
¹ Other missions: transports by ambulance, missions on behalf of the Swiss Alpine Club SAC, Spéléo-Secours, Redog, etc.

² Primary missions: emergency missions directly at the scene of the incident

³ Secondary missions: inter-hospital transfers, neonatology, organ transports

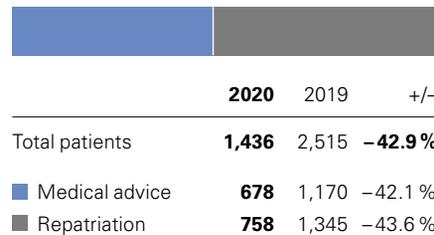
⁴ Special missions: non-medical Rega missions (search, route securing and reconnaissance flights on behalf of operation partners) and missions performed by other helicopters

Transported patients – primary/secondary missions by helicopter



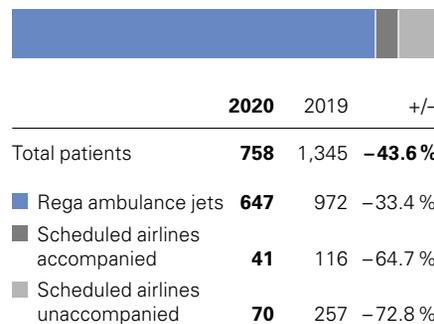
	2020	2019	+/-
Total patients	10,376	9,822	+5.6%
Winter sports accidents	1,580	1,750	-9.7%
Occupational accidents	1,117	1,126	-0.8%
Road accidents	835	862	-3.1%
Alpine accidents	902	704	+28.1%
Sports accidents	642	498	+28.9%
Aviation accidents	130	102	+27.5%
Avalanche accidents	13	38	-65.8%
Other causes	794	646	+22.9%
Illnesses	4,363	4,096	+6.5%

Medical emergencies abroad



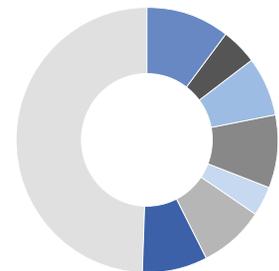
	2020	2019	+/-
Total patients	1,436	2,515	-42.9%
Medical advice	678	1,170	-42.1%
Repatriation	758	1,345	-43.6%

Repatriations



	2020	2019	+/-
Total patients	758	1,345	-43.6%
Rega ambulance jets	647	972	-33.4%
Scheduled airlines accompanied	41	116	-64.7%
Scheduled airlines unaccompanied	70	257	-72.8%

Transported/accompanied patients – missions by fixed-wing aircraft



	2020	2019	+/-
Total patients	688	1,088	-36.8%
Limb injuries	72		
Cranio-cerebral trauma	30		
Other injuries	49		
Cardiovascular diseases	62		
Strokes	56		
Gastrointestinal diseases	24		
Malignant tumours	55		
Other illnesses	340		

were repatriated on scheduled flights accompanied by a Rega flight physician or intensive care nurse. The amount of unaccompanied repatriations totalled 70 (-72.8%). In such cases, the Rega Operations Centre organises the return journey for patients who are able to travel without a medical escort.

Medical advice and assistance by Rega physicians

Prior to each repatriation mission, thorough medical clarifications are carried out by one of Rega's medical consultants. In liaison with the Operations Centre, the physician on duty decides whether repatriation is necessary and sensible, and if so, in what form it should take place. As with the flight coordinators, Rega's medical consultants work in shifts around the clock. Last year, the latter provided a total of 1,436 people (-42.9%) suffering from medical problems abroad with competent advice. In 758 cases,

the medical clarifications led to the patient being repatriated on board a Rega ambulance jet or a commercial airline. Individual insurance companies ask Rega's physicians to clarify the medical condition of their policy holders who have become seriously injured or ill abroad, even if they are not Rega patrons. Rega makes a recommendation as to whether from a medical point of view the patient needs or is fit enough to travel, and the insurance company then decides if and how repatriation should take place.

Fluctuation in mission and patient numbers

The number of transported patients and missions do not always concur, because either several patients are transported at the same time or flights are performed without any patients at all – for example, if a search flight conducted by a Rega helicopter proves unsuccessful. The mission statistics

relating to the Rega helicopters are subject to natural fluctuations and reflect the meteorological conditions, as well as the leisure activities and travel behaviour of both the Swiss population and foreign tourists in Switzerland. The number of repatriations also fluctuates and the deployment of the Rega jets varies depending on the travel- and work-related activities of Swiss people abroad.

Financial development and investments

In the 2020 business year, Rega's operating income totalled CHF 175.0 million, while the operating expenses came to CHF 163.7 million. This resulted in a positive operating result of CHF 11.4 million. The annual result amounted to CHF 13.5 million. Rega basically funds itself through two channels: 60 percent of the budget is covered by Rega patrons through their patronage contributions and

donations, while the remaining 40 percent comprises payments by cost bearers for services rendered. In line with its strategic goals, Rega is almost 100 percent self-financed and does not need outside capital to finance its investments.

More than 3.6 million patrons support Rega

Thanks to the solidarity contributions by its patrons, Rega is able to provide nationwide medical assistance by air – without receiving any subsidies from the State. This support allows Switzerland to benefit from an air rescue service that sets standards and is held in great esteem all over the world.

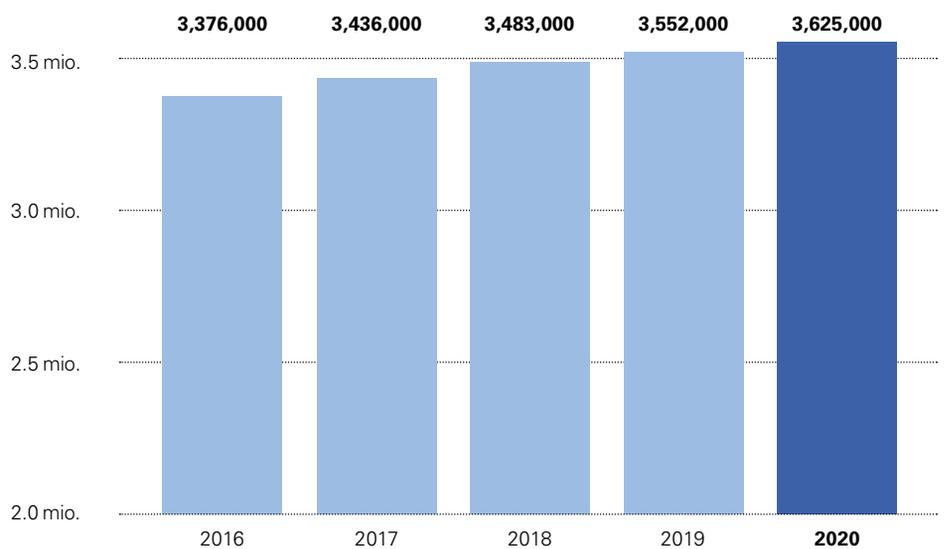
In the year under review, Rega once again registered a growth in support: as of 31 December 2020, a total of 3,625,000 patrons were recorded on the computer system. This represents almost 73,000 additional patronages or a net increase of 2 percent compared to the previous year. In 2020, Rega’s patrons supported the air rescue organisation with annual contributions, donations and bequests totalling CHF 107.4 million (2019: CHF 107.2), thus bearing around 60 percent of the overall costs.

According to its Conditions of Patronage, Rega can waive the cost of part or all of its mission costs if these are not covered by the patrons’ own insurance policies, as a token of thanks for their support.

Transport of Covid-19 patients

At the beginning of 2020, Rega started for the first time to look more closely at the new coronavirus and the possible impact it could have on its activities. The transport of highly contagious patients already belonged to Rega’s standard scope of operations before the coronavirus pandemic, but in view of the expected increase in transports of this kind, in February the Rega crews attended refresher courses to specifically prepare them for the requirements of Covid-19 patients and procedures were adapted where necessary. On 11 March 2020, a confirmed Covid-19

Development in the number of patrons



patient was transported by Rega helicopter for the first time in Ticino. By the end of the year, Rega had transported a total of 456 patients infected with Covid-19 on board its aircraft, 316 of them in a rescue helicopter and 140 in an ambulance jet. When transporting Covid-19 patients on board its ambulance jets, Rega used the patient isolation unit (PIU), which it had developed in 2015. The PIU, together with the corresponding transport concept, allows Rega to transport patients with known or unidentified contagious diseases on board its own ambulance jets relatively easily yet safely and with a minimum of extra work.

Rega’s Operation Centre as the national coordination centre

In spring, Rega was asked by the Coordinated Medical Services (CMS) of the Swiss Armed Forces if Rega’s Operations Centre could coordinate the distribution of patients among the various intensive care units during the coronavirus pandemic in order to ensure that the intensive care capacities across Switzerland were utilised as best as possible. Rega was asked to perform this task as, according to a statement by the CMS, “it is the only emergency call centre operating

countrywide, and it has at its disposal decades of experience in coordinating patient transfers nationwide and a profound knowledge of Swiss hospitals.”

After Rega had accepted this task, the “National coordination in the event of a massive influx of patients to ICUs during the Covid-19 pandemic” concept was drawn up by the CMS and other bodies from the healthcare sector and officially put into force in the middle of June 2020. Among other things, this defines Rega’s task as the “national coordination centre”. Where necessary, Rega is to support the hospitals in the search for empty intensive care beds and to coordinate between the hospitals. The decision relating to the mode of transport – by road or air – is made by the hospitals. This support was requested by the hospitals from November 2020 onwards, when the second wave of the pandemic hit Switzerland and intensive care bed occupancy rose sharply. The hospitals are also able to call on the assistance of Rega’s Helicopter Operations Centre in its role as the national coordination centre for the entire duration of the pandemic. The operation of the national coordination centre is under the supervision of a professionally qualified steering committee.

Emergency doctor vehicles in use at Rega bases

In Canton Uri, since 1 September 2020, Rega has also been in operation on the ground in order to transport an emergency physician to the scene of the accident. Thanks to the emergency doctor vehicle stationed at the Rega base, the Rega emergency physician on duty can also be called out when it is not possible to use the rescue helicopter, for example, due to bad weather. As a result, the personnel resources available can be utilised even better for the benefit of the patients. Erstfeld is after Mollis (Canton Glarus) the second Rega base to have an emergency doctor vehicle. In Canton Glarus, the vehicle was used 32 times during the one-year pilot phase, and due to the positive experience, the project was, in liaison with the local authorities, adopted as a permanent, regular service as from 3 December 2020.

Rescue in all weathers: political support

For many years, Rega has been pursuing its vision of all-weather air rescue so that in future it can come to the aid of even more people in distress. Together with the Swiss Air Force and the Skyguide air navigation service, it is working on setting up and putting into operation the so-called Low Flight Network (LFN). This network of instrument flight routes links airports, airfields, hospitals and Rega bases with each other and allows flights to also be carried out in poor visibility under instrument flight rules (IFR). The project is also supported at a political level: a motion in the Council of States, which directed the Federal Council to regulate the legal framework for the completion of the LFN and its funding, was approved by the Council of States at the beginning of June 2020 with 41:0 votes, after the Upper Chamber had already approved the proposal. The Confederation and the cantons, in liaison with the Swiss Air Force, Rega and Skyguide, are now drawing up the legal framework under which the LFN can be completed with the support of the Swiss Confederation.

In view of the coronavirus pandemic, at the end of March 2020, Rega was granted special temporary permits by the Federal Office of Civil Aviation (FOCA) to perform instrument flights in Ticino. These were valid for the entire duration of the “extraordinary situation” declared by the Confederation and concerned, among other things, the approach and departure procedures at the airports in Agno and Locarno, as well as the unrestricted use of an instrument flight route over the Gotthard Pass. As a result, Rega was also able to provide medical care by air in Ticino in poor visibility and, in the event of a shortage of available hospital beds, to fly patients to a hospital in German-speaking Switzerland. Rega will continue to do everything in its power to be permitted to fly according to the IFR procedure at all times in order to provide the inhabitants of Ticino with medical assistance by air.

Project Icebird AW169-FIPS

Helicopter manufacturer Leonardo is currently in the process of developing Rega’s new all-weather helicopter, the AW169-FIPS, complete with de-icing system. However, due to the coronavirus pandemic, the first series of test flights with the prototype in North America in February 2020 had to be prematurely curtailed until further notice after just a few flights. This means that delivery will be delayed and is now scheduled for 2023.

Nevertheless, last year Rega was still able to make some progress in this project: in summer, the project team conducted a test week in Switzerland using a loaned AW169 helicopter. While this was not equipped with a de-icing system, it was the same as Rega’s future AW169-FIPS helicopter in terms of size and avionics and is thus somewhat larger and heavier than the current Rega helicopter types, H145 and Da Vinci. During the test week, a Rega crew simulated various mission types, including missions with the rescue hoist in mountainous regions and over forested areas. The tests also included flying according to instrument flight rules and hangaring at a Rega base.

With the new findings, the project team can now begin, parallel with the development of the helicopter, to define and determine mission-specific procedures for the new rescue helicopter, such as the procedure during a rescue hoist mission.

Further development of the Rega drone

In future, Rega will have an additional device at its disposal to search for people in distress: the Rega drone. Last year, the various components of the system were further developed and intensively trialled in all kinds of different conditions. The coronavirus pandemic has hampered the collaboration with external partners. Nevertheless, the drone prototype, the communication link between the ground control station and the drone, and the flight planning and flight steering software were further improved. The sensors used to locate missing persons, the mobile radio detection equipment and the thermal imaging camera, too, were further developed. Still at the design stage is the mission concept, which specifies, among other things, where the first drone should be stationed and how it should be utilised in order to optimally supplement the existing rescue resources. Once this concept has been finalised, the Rega drone will be used to support the mission activities in 2021.

Modern ultrasound machine in the ambulance jet

Since the beginning of 2020, each of the three Rega jets has been equipped with a portable ultrasound machine. This extremely compact and thus space- and weight-saving device can be connected to a tablet by means of a cable. The ultrasound images that are transmitted to the tablet can then be viewed via an app. The new device makes it possible to perform an ultrasound examination quickly and immediately – whether in an ambulance vehicle on the way to the airport or during the flight – and gives the flight physician an even more accurate picture of the patient’s state of health.

Mission Statement

1 Our purpose

We provide an around-the-clock service offering swift, expert assistance by air. In particular, we transport medical care to the casualty and help in emergency situations.

This assistance also takes the form of medical advice and the use of our infrastructure.

Our operations are characterised by our highly qualified, professional members of staff and the very best equipment available in the fields of rescue, medical and flight technology.

2 Our fundamental concept

We are a non-profit organisation that is funded by its patrons. Our services are primarily geared towards the needs of the Swiss population.

We are financed by means of private funding. This enables us to operate independently in the service of our patients.

In the interest of the patient, we take an active stand against the commercialisation of air rescue.

Emergency missions and other operations carried out on behalf of the general public are not conditional upon whether or not the ensuing costs are covered.

Our rescue activities are based on the Fundamental Principles of the Red Cross.

3 Our patrons

Thanks to their annual contributions, our patrons enable us to build up and operate a suitable infrastructure to perform air rescue operations on behalf of the Swiss population.

The services rendered by Rega to its patrons are not of a contractual nature and are therefore not deemed to be insurance benefits.

4 Our partners

We are fully aware of the importance of working in close collaboration with our partner organisations, and actively foster a successful working relationship with them.

We act as a fair and reliable partner.

We focus our activities on the fields of air rescue, air-ambulance repatriation services and medical advice.

In order to maintain and further improve the top level of expertise of our medical staff, we also perform medically indicated flights on behalf of international clients.

5 Our staff

Our members of staff play a decisive role in fulfilling our purpose. The following factors are of particular importance in this respect:

- personal identification with the organisation and its purpose;
- independence and responsibility;
- willingness to perform, flexibility and motivation.

We aim to achieve this by means of:

- on-going training appropriate to the various hierarchical levels;
- progressive working conditions;
- appropriate salaries and attractive social benefits.

We foster a style of behaviour among our staff that is open, cooperative and characterised by mutual respect.

6 Our values

We strive to provide around-the-clock services of first-class quality and safety, as well as to cultivate a conscious, structured manner of dealing with risks.

Our organisational structures are characterised by a clear-cut delineation of tasks, competences and responsibilities. These are implemented and respected at all hierarchical levels, from ordinary employees right up to the members of the Foundation Board.

We act and communicate in an open and transparent way, both within our organisation and towards the outside.

We are conscious of a potential conflict between performing our work and protecting the environment, and take this into account in everything we do.

Foundation Board

Foundation Board of Swiss Air-Rescue Rega

Michael Hobmeier, Bäch, since 2007, Chairman and Member of the Executive Committee

Christian Kern, Prof. Dr. med., Geneva, since 2009, Vice-Chairman and Member of the Executive Committee

Patrizia Pesenti, Zollikon, since 2009, Member of the Executive Committee

Gabi Huber, Dr. iur., Altdorf, since 2015, Member of the Executive Committee

Josef Meier, Wettingen, since 2013, Member of the Executive Committee

Heidi Hanselmann, Walenstadt, since 2010

Thomas P. Emmerich, Riehen, since 2011

Marco Maggiorini, Prof. Dr. med., Schindellegi, since 2011

Adrian Amstutz, Schwanden, since 2013

Franz Stämpfli, Innertkirchen, since 2015

Gerold Biner, Zermatt, since 2015

Thomas Holderegger, Waldstatt, since 2015

Markus Furrer, Prof. Dr. med., Felsberg, since 2019

Paul Hälgi, Dr. sc. techn., Wollerau, since 2019

Thomas von Wyl, Dr. med., Unterseen, from 2021

Medical Commission

Christian Kern, Prof. Dr. med., Chairman

Marco Maggiorini, Prof. Dr. med.

Markus Furrer, Prof. Dr. med.

Thomas von Wyl, Dr. med.

Finance Commission

Josef Meier, Chairman

Michael Hobmeier

Paul Hälgi, Dr. sc. techn.

Advisory Committee Partner Organisations

Franz Stämpfli, Member of the Rega Foundation Board, Chairman

Thomas P. Emmerich, Member of the Rega Foundation Board

Françoise Jaquet, Dr. sc. nat., Swiss Alpine Rescue representative

Philipp Perren, Dr. iur., Canton Valais representative

Andy Scheurer, Spéléo-Secours representative

Markus Denzler, police commanders representative

Marc Ziegler, Swiss Cable Cars Association representative

Sibylle Frey, Swiss Air Force representative

Günter Bildstein, Medical Emergency Call Centres 144 representative

Renato Belloli, Swiss Helicopter Association (SHA) representative

Daniel Weisskopf, Swiss Fire Service Coordination (FKS) representative

Auditors

KPMG AG, Zurich

as of 1 January 2021



Michael Hobmeier



Christian Kern



Patrizia Pesenti



Gabi Huber



Josef Meier



Heidi Hanselmann



Thomas P. Emmerich



Marco Maggiorini



Adrian Amstutz



Franz Stämpfli



Gerold Biner



Thomas Holderegger



Markus Furrer



Paul Hälgi



Thomas von Wyl

Governance and Compliance

The purpose of the Swiss Air-Rescue Rega Foundation is above all to help people in distress and in need of assistance, in accordance with the Fundamental Principles of the Red Cross. It provides its services without discrimination as to person, financial circumstances, social status, nationality, race, religious beliefs or political opinions.

Rega is fully committed to conducting its business according to the principles of good corporate governance. It upholds the guiding principles of non-profit governance: checks and balances, responsibility and efficiency, transparency, safeguarding the interests of patrons, and safeguarding the interests of donors. Rega's guiding principles relating to corporate governance are embedded in its Foundation Deed and Regulations, its organisation and management regulations, its Mission Statement and its Code of Conduct. The Foundation Board monitors these principles on a regular basis.

Foundation Board

The Foundation Board is Rega's supreme body. It lays down the guiding principles of the organisation in accordance with the Foundation Deed. It draws up the Mission Statement and pertinent regulations, and adopts the strategy and the budget. It approves the Annual Report and the annual financial statements. It defines the supervision and monitoring of the business activities. It also authorises the principles relating to the remuneration of the members of the Foundation Board and the Management Board.

The Foundation Board comprises a maximum of 15 members. The term of office is four years. Members are eligible for re-election up to their 70th birthday. There is no limitation on the length of service of the members of the Foundation Board. The Foundation Board elects from among its members a Chairman, as well as the five members of the Executive Committee, and also defines the Committee's tasks and competences.

Executive Committee of the Foundation Board

The Executive Committee comprises five members of the Foundation Board: the Chairman, the Vice-Chairman, the Chairman of the Medical Commission, the Chairman of the Finance Commission, and one other member of the Foundation Board.

The Executive Committee of the Foundation Board is responsible for carrying out the tasks delegated to it. It coordinates the permanent commissions of the Foundation Board. Furthermore, on behalf of the Foundation Board, it supervises and monitors the Management Board and issues it with the necessary instructions.

The members of the Executive Committee also serve on the Board of Directors of the subsidiaries, Swiss Air Ambulance Ltd. and Airmed AG.

Management Board

The Chairman of the Management Board is charged with managing the operative business, implementing the resolutions adopted by the Foundation Board and the Executive Committee, and delegating the various tasks and competences within the organisation.

Tasks and procedures of the permanent commissions and the Advisory Committee

Each specialist body is governed by a set of regulations specifying its various tasks and competences, and is headed by a chairperson elected by the Foundation Board. The commissions meet on a regular basis to discuss specialist matters, which are specified by the relevant chairperson.

Prior to the meeting, the commission members receive the relevant documents so that they can prepare for the various items on the agenda.

Medical Commission

The Medical Commission comprises the Chairman, Prof. Dr. med. Christian Kern, and three physicians, all of whom are members of the Foundation Board.

The meetings are also attended by the Chairman of the Management Board, the Medical Director and, where necessary, other specialists, who are present in an advisory capacity and have the right to propose motions.

The Medical Commission is an advisory body to the Foundation Board and the Medical Director. It deals with and considers specialist matters relating to emergency and rescue medicine that fall within the competence of the Foundation Board, prior to the latter taking any decisions. When drawing up medical guidelines and quality controls, the Commission is assisted by Rega's Medical Service.

Finance Commission

The Finance Commission comprises its Chairman, Josef Meier, and other members of the Foundation Board. The meetings are also attended by the Chairman of the Management Board, the Chief Financial Officer and, where necessary, other specialists, who are present in an advisory capacity and have the right to propose motions.

The Finance Commission is an advisory body to the Foundation Board. It deals with matters relating to financial planning, budgeting, investment policy and the internal control system, and periodically examines the form and scope of financial reporting.

Advisory Committee Partner Organisations

Under the chairmanship of Franz Stämpfli, the Advisory Committee comprises members of Rega's Foundation Board together with representatives from the following partner organisations: Swiss Alpine Rescue, commercial helicopter firms, the Canton of Valais Air-Rescue Service, the Swiss Air Force, the Swiss Cable Cars Association, police commanders, Spéléo-Secours Switzerland, Swiss Fire Service Coordination (FKS) and the Medical Emergency Call Centres 144.

The Advisory Committee is concerned with tasks relating to the collaboration between the partner organisations and promotes the

exchange of information between the various network members.

Accounting and auditing

The financial statements of the Swiss Air-Rescue Rega Foundation and its subsidiaries are prepared in accordance with the principles of Swiss GAAP FER accounting and reporting recommendations (in particular, GAAP FER 21), and give a true and fair view of its net assets, financial position and earnings performance.

At Rega, the “four eyes” principle is applied. This means that fundamentally two joint signatures are required at all levels. The Foundation Board has drawn up a set of regulations governing competences and signatory rights. Both internal and external control bodies periodically check that these regulations are being complied with.

Risk Management – Internal Control System, IKS

The highly complex nature of emergency medical rescue, coupled with the strict requirements of aviation law and the demands of the Code of Obligations, make it necessary to take a structured approach to risks. Rega has combined demands from the Internal Control System and Safety and Quality Management to create integrated risk management in order to identify and view risks holistically and make use of available synergies.

As Rega’s supreme body, the Foundation Board is responsible for risk management at Rega and all its subsidiaries. The key risks are systematically identified and evaluated every year, and appropriate risk control measures are taken. The identified risks are additionally monitored on an ongoing basis.

Rega’s interests

Rega has interests in various companies domiciled in Switzerland. Strategic interests in companies and foundations in which Swiss Air-Rescue Rega directly or indirectly holds over 50 percent of the voting rights or which are controlled by the Foundation Board are consolidated in the annual financial statements.

An overview of these interests is provided in Rega’s consolidated annual financial statements.

Rega further holds operative and functional minority interests in helicopter companies, airfield companies and cooperatives, and assistance companies in Switzerland. This portfolio is maintained in order to fulfil the purpose of the Foundation.

Rega also has interests/investments which are managed by external asset managers according to a portfolio management agreement.

Foundation Board compensation

Compensation of the Foundation Board is based on the set of regulations approved by the Swiss Federal Supervisory Board for Foundations. Compensation (fixed sums, attendance fees and expenses) covers part of the expenses of Foundation Board members for preparing meetings, reviewing documents and attending meetings of the Foundation Board, Foundation Board Committee, specialist and ad hoc committees, Advisory Committee, partner organisations, pension foundations and other companies in which Rega has an interest. All compensation made to the Foundation Board and its Chairman is reported in detail in Rega’s consolidated annual financial statements.

Foundation supervisory authority

As a non-profit foundation, Rega is subject to the supervision of the Swiss Federal Supervisory Board for Foundations in Berne, to which it is required to submit a management report each year. The last assessment and review by the Federal Supervisory Board was conducted on 17 November 2020; no objections of any kind were raised.

Rega in 2020

23 January: On the return flight after a mission, the Rega crew from the Lausanne base receive a distress signal from a small aircraft that has crashed. They immediately start searching for the point of origin of the signal and notify the Rega Operations Centre. The Operations Centre calls out the Rega helicopter from the Wilderswil base as support, which is equipped with the IR/EOS multi-sensor search system. With the aid of a direction finder and the ultra-sensitive thermal imaging camera, the crew succeed in locating the crashed aircraft in the middle of a forest near Saint-Légier-La Chiésaz (Canton Vaud).

11 March: The Rega crew from the Locarno base transports Rega's first confirmed Covid-19 patient on board a Rega helicopter. The patient needs to be transferred from the hospital in Mendrisio to Locarno Regional Hospital. By the end of the year, the helicopter crews will have transported a total of 316 Covid-19 patients on board their aircraft.

2 April: For the first time, a Rega crew transports two patients simultaneously on board an ambulance jet in separate patient isolation units (PIU). A Swiss married couple who contracted Covid-19 during a cruise need to be repatriated from the Caribbean island of St. Martin. The mission goes off without a hitch and the patients are admitted to a Swiss hospital for further treatment.

1 September: Rega stations an emergency doctor vehicle at its Erstfeld base. Now the Rega emergency physician on duty can also be called out when a mission with the rescue helicopter is not possible, for example, due to bad weather. A similar vehicle is already being successfully used at the Mollis base in Canton Glarus.

22 September: Rega invites representatives from the Air Force, employees from various police forces and mountain rescuers from home and abroad to the training event, "Ricerca – emergency search for missing persons", at its

Wilderswil base. The main focus is placed on concrete mission examples and the exchange of experiences between the various organisations. Diverse rescue resources are presented, including the Rega drone. Also on location are the SAR helicopter operated by the Swiss Air Force, the helicopter of the Zurich Cantonal Police, and a Rega helicopter equipped with the IR/EOS multi-sensor search system.

28 September: For the first time, Rega makes a guest appearance at a shopping centre with its own information stand. Among the highlights of Rega's new public appearance at "Volkiland" in Volketswil (Canton Zurich) are a mannequin dressed as an emergency physician, which is suspended from the ceiling on the end of a rescue hoist together with a patient in the recovery bag. Following the success of this first event, Rega is planning to appear at other shopping centres in future.

30 October: The Swiss Confederation issues a press release informing the general public that Rega's Helicopter Operations Centre has been entrusted with the task of acting as the "national coordination centre for intensive care units". As a result, the flight coordinators will, where necessary, help Swiss hospitals to find empty intensive care beds. This additional task of coordinating the ICU beds across Switzerland in order to relieve the hospitals can be performed within the Operation Centre's normal scope of activities. As the only emergency call centre operating countrywide, and with profound knowledge of the country's hospitals, the Rega Helicopter Operations Centre is ideally suited to this task.

2 December: Rega registers its 3.6 millionth patron. It is only thanks to the solidarity and support of its patrons that Rega is able to provide medical assistance by air around the clock for the benefit of the Swiss population and to constantly develop and improve its air rescue services.



23 January



2 April



1 September



22 September



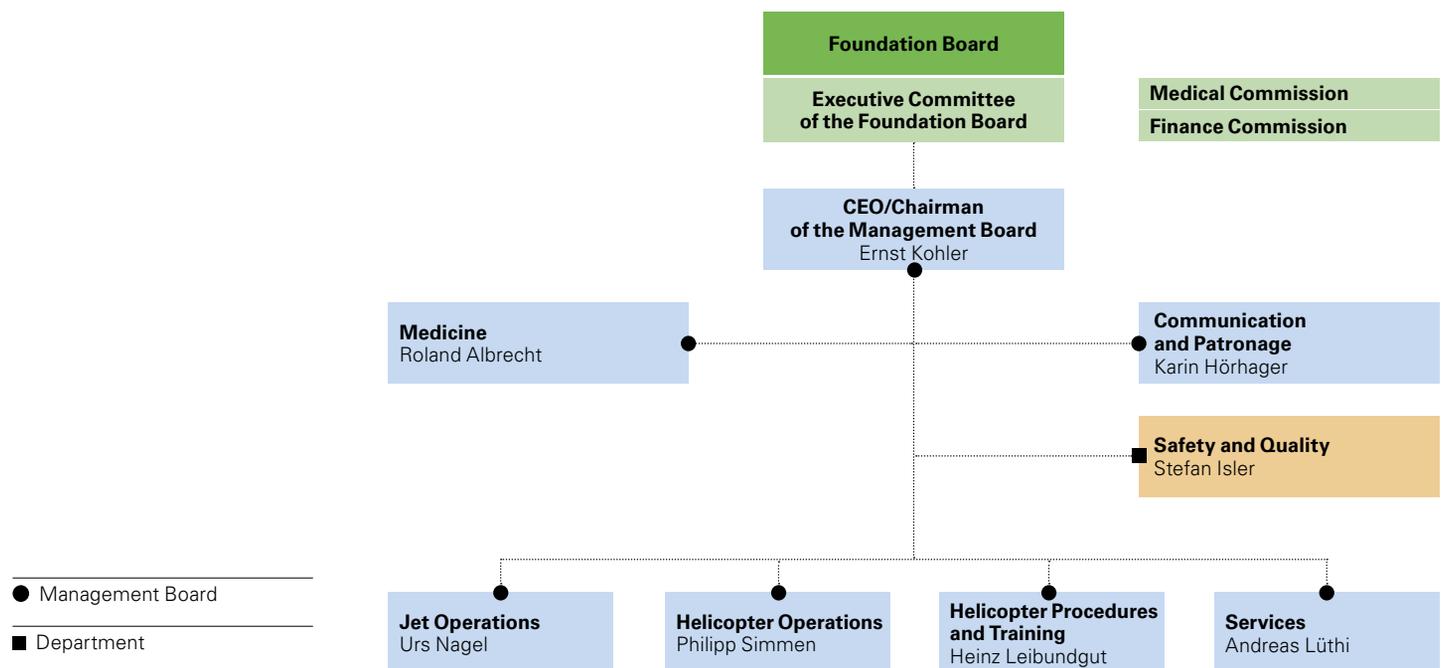
28 September



30 October

Management Board

Organigram as of 1 January 2021



From left: Roland Albrecht, Karin Hörhager, Urs Nagel, Ernst Kohler, Heinz Leibundgut, Andreas Lüthi, Philipp Simmen



Conditions of Rega Patronage

In order to be able to provide a professional, round-the-clock and suitably equipped air rescue service in accordance with its purpose as a non-profit foundation, Rega is dependent on the financial support of its patrons.

You can become a Rega patron by paying the following minimum contributions:

- CHF 40.– for individuals
- CHF 80.– for couples (married/cohabiting couples or registered partners)
- CHF 80.– for families (parents with children who are under 18 years of age on the date of payment)
- CHF 40.– for one-parent families (single parents with children who are under 18 years of age on the date of payment)

Patronage is valid for the current calendar year and takes effect on the date of payment. If patronage is not renewed, it expires on 15 May of the following year.

In grateful acknowledgement of patrons' support, Rega can, at its own discretion and within the bounds of its resources, waive or reduce the costs of any emergency services listed below that it has provided or organised on their behalf, in the event that insurance companies or any other third party are not liable to pay and thus not required to reimburse the costs of the rescue operation, whether wholly or in part. In all cases, Rega provides its rescue services and also, where appropriate, waives or reduces the costs thereof without any legal obligation. Rega may be hindered or prevented from carrying out rescue missions in particular due to operational, medical or meteorological reasons.



1. Switzerland and the Principality of Liechtenstein

- Rescue flights and medically indicated transports by helicopter to the nearest suitable hospital
- Rescue operations conducted by rescue teams from the Swiss Alpine Club SAC
- Search operations in collaboration with the police and other competent organisations, provided that there is reasonable hope of being able to help missing persons
- Evacuations and preventive missions where a threat to life and limb exists
- Flights to recover dead persons, after consultation with the authorities responsible
- Flights to recover injured, sick or dead livestock and transport them to the nearest location that is accessible by another means of transport, provided that the animals can only be recovered by helicopter and that the livestock owners are natural persons and Family patrons

2. Worldwide

- Medical advice by Rega's Operations Centre in the event of medical problems arising abroad
- Medically indicated repatriation flights to Switzerland for patrons domiciled in Switzerland or the Principality of Liechtenstein, as well as for Swiss nationals living abroad

Rega decides whether emergency assistance should be provided based on medical, social and operational considerations, and is responsible for determining how and when the mission should be carried out. Rega may commission other organisations to perform missions on its behalf. In order to have the required leeway in providing this assistance, the patron concerned authorises Rega wherever necessary to pass on personal and medical data to other parties directly involved (operation partners, physicians, insurance companies etc.), both in Switzerland and abroad.

Rega's Operations Centre (emergency number from within Switzerland 1414, from abroad +41 333 333 333) is available around the clock to anyone in distress and in need of assistance due to a serious accident or acute illness.

Rega Centre

PO Box 1414
8058 Zurich Airport
Tel. 044 654 33 11

Rega 1, Zurich

Überlandstrasse 299
8600 Dübendorf
Tel. 044 802 20 20

Rega 2, Basel

PO Box
4030 Basel
Tel. 061 325 29 66

Rega 3, Berne

Flugplatzstrasse 1
3123 Belp
Tel. 031 819 65 11

Rega 4, Lausanne

Route de Romanel 33
1018 Lausanne
Tel. 021 644 22 66

Rega 5, Untervaz

Polenlöserweg 30a
7204 Untervaz
Tel. 081 300 09 99

Rega 6, Locarno

Via Aeroporto 15
6596 Gordola
Tel. 091 820 50 00

Rega 7, St. Gallen

Wehrstrasse 8
9015 St. Gallen
Tel. 071 313 99 33

Rega 8, Erstfeld

Reussstrasse 40
6472 Erstfeld
Tel. 041 882 03 33

Rega 9, Samedan

Plazza Aviatica 6
7503 Samedan
Tel. 081 851 04 04

Rega 10, Wilderswil

Bönigstrasse 17
3812 Wilderswil
Tel. 033 828 90 30

Rega 12, Mollis

Airport
8753 Mollis
Tel. 055 614 55 55

Rega 14, Zweisimmen

Lischerengasse 5
3770 Zweisimmen
Tel. 033 729 10 30

Training base, Grenchen

Airport Grenchen
Flughafenstrasse 117
2540 Grenchen
Tel. 032 654 90 00

Partner helicopter base

Rega 15, Geneva
Hôpitaux Universitaires
de Genève
Base hélicoptère
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