LifeFlight

Career Pathway

Take your career to new heights with LifeFlight Retrieval Medicine



lifeflight.org.au

Who we are

45 years of aeromedical excellence

LifeFlight is the largest, most advanced aeromedical service in the southern hemisphere. Our rapid-response fleet of helicopters and jets bring critical care closer to home, with end-to-end aeromedical and air ambulance services.

We're ready to mobilise in the moment – for anyone, anywhere, anytime. We perform emergency rescues, natural disaster response, patient transfers, international medical evacuations, and aerial protection and surveillance. It's about connecting patients to the best medical and rescue specialists, no matter where they are.



LifeFlight Retrieval Medicine

LifeFlight Retrieval Medicine (LRM), provides critical care doctors across all LifeFlight services and to all retrieval services in Queensland. This ensures consistent, high level medical care for all communities, no matter where they are.

Our aircraft connect patients to the care they need, but it's the people on board that truly set us apart. Our team of specialist doctors has grown to 180, making us the largest employer of pre-hospital emergency care doctors in Australia.

LRM Opportunities

Exciting opportunities are available for 6-12 month placements starting in February and August each year, with a mandatory intensive training week immediately prior to commencement. If you are working in the Australian healthcare system, this will be the last week of your medical term and arrangements for leave will need to be organised.

Positions are accredited for six months in Pre-hospital & Retrieval Medicine Special Skills Placement by the Australasian College for Emergency Medicine (ACEM) and recognised / supported by the Australian and New Zealand College of Anaesthetists (ANZCA) and the College of Intensive Care Medicine (CICM). Retrieval Registrar posts with LRM are accredited by the CCPHRM for the Associateship in Pre-Hospital and Retrieval Medicine.

Our Core Values



Trustworthy
We pride ourselves on 'doing what's right'. We act with honesty and integrity in everything we do.

Safety First
Without exception or hesitation, we are committed to the health, safety, and welfare of all. We do things safely or not at all.

Committed to Excellence
We promote best practice in safety, education, innovation, and sustainability. We challenge ourselves daily.

Respectful
We accept that we must treat everyone with respect. We acknowledge and value each other's contribution in achieving our mission.

Community Spirited
We care about and support the communities within which we work and live.

Accountable
Working together, we are each responsible for our decisions, performance, and actions.

Financial Year 25-26 at a glance:

4,003
missions completed by LifeFlight's rescue helicopters

896
people helped by LifeFlight's air ambulance jets

6,438
helicopter mission flying hours

58
minutes – how often a person is helped by LifeFlight

Top mission categories by people helped:

1,190
cardiac issues

823
motor vehicle incidents

206
animal related

70
search and rescues



LifeFlight

ASSETS, BASES, AND FACILITIES



23 ROTARY WING ASSETS*
AW139, Bell 412, BK117

04 FIXED WING ASSETS*
Challenger 604

10 BASE FACILITIES

01 HEAVY MAINTENANCE FACILITY

14 LIFEFLIGHT RETRIEVAL MEDICINE (LRM) BASES

02 VISITOR EXPERIENCE CENTRES

LIFEFLIGHT TRAINING ACADEMY (LTA)

LIFEFLIGHT HEADQUARTERS (HQ)

LIFEFLIGHT FOUNDATION (LFF)

SINGAPORE
Challenger 604

TASMANIA
Bell 412 x3

VIC POL
AW139 x3

*Assets are rotated through bases as required

LifeFlight Medical Officer

A career as a LifeFlight Medical Officer is a career like no other. Every one of our doctors, nurses, and paramedics are highly skilled in their field of expertise. They bring a broad range of experience in pre-hospital retrieval medical care directly to our patients.

Our medical staff receive clinical supervision and specialised training throughout their time with LRM, including at our internationally recognised LifeFlight Training Academy (LTA). They also experience unique clinical settings and diverse caseloads that can include:



Primary Response Missions:

These include trauma and medical tasks, usually on Rotary Wing and road based platforms.

Inter-facility Transfers (IFTs):

Also referred to as inter-hospital transfers, these retrievals primarily assist rural and regional patients to access hospital care in larger cities for definitive care.

Search and Rescues (SARs):

Assisting with the search and rescue of missing / injured persons.

Air Ambulance Transfers:

Long-distance domestic transfers to secondary / tertiary hospitals, as well as international missions.

Modified Primary Response Missions:

A modified primary is where a patient has effectively had a "scoop and run" by road ambulance to the closest regional or remote health facility to begin stabilisation, however, needs critical care intervention and transfer to a larger metropolitan hospital for treatment. These are counted in the IFT transfer numbers.

Regional Highlights

North West

LifeFlight airlifted nearly double the number of patients in the North West this year compared to last, with the addition of a new AW139 helicopter strengthening aeromedical capability across the region. The aircraft is based at the new joint facility with the Royal Flying Doctor Service (Queensland Section) in Mount Isa, further extending LifeFlight's reach and capacity to provide critical care to remote communities.



181
people helped



257
hours flown

South West

Notable missions included the rescue of a female hiker who fell 15 metres down a gorge. A LifeFlight aircrew officer walked into the gorge to provide support to the patient overnight and deliver essential supplies, including pain medication, food and water. The following morning, she was winched out of the gorge and airlifted to the LifeFlight Roma base before being road transported by Queensland Ambulance Service (QAS) to hospital.



119
people helped



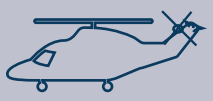
337
hours flown

Darling Downs

The Toowoomba-based aeromedical crew continued to provide critical care across the Darling Downs and beyond, helping 948 people throughout the year. The increased volume of missions reflected the growing demand for aeromedical services across the area.



948
people helped



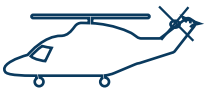
1,152
hours flown

Sunshine Coast

Our crews on the Sunshine Coast responded to 602 missions this year, including a complex rescue winch after a boat carrying four people overturned off Inskip Point. A LifeFlight rescue crew officer was winched down to the stranded boaties before each patient was safely recovered into the aircraft.



672
people helped



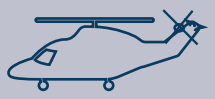
882
hours flown

Wide Bay-Burnett

The Bundaberg-based aeromedical crew responded to a diverse range of emergencies throughout the year, with more than 500 people helped – up by 69.2 per cent from the previous year.



518
people helped



852
hours flown

South East

Notable missions included airlifting a young girl who sustained a broken leg while using a slip-n-slide at Christmas Creek in the Scenic Rim region. Her family called Triple Zero (000), with a LifeFlight rescue helicopter tasked alongside Queensland Ambulance Service (QAS) paramedics.



732
people helped



1,206
hours flown

Alternative Career Path

Fixed Wing Physician

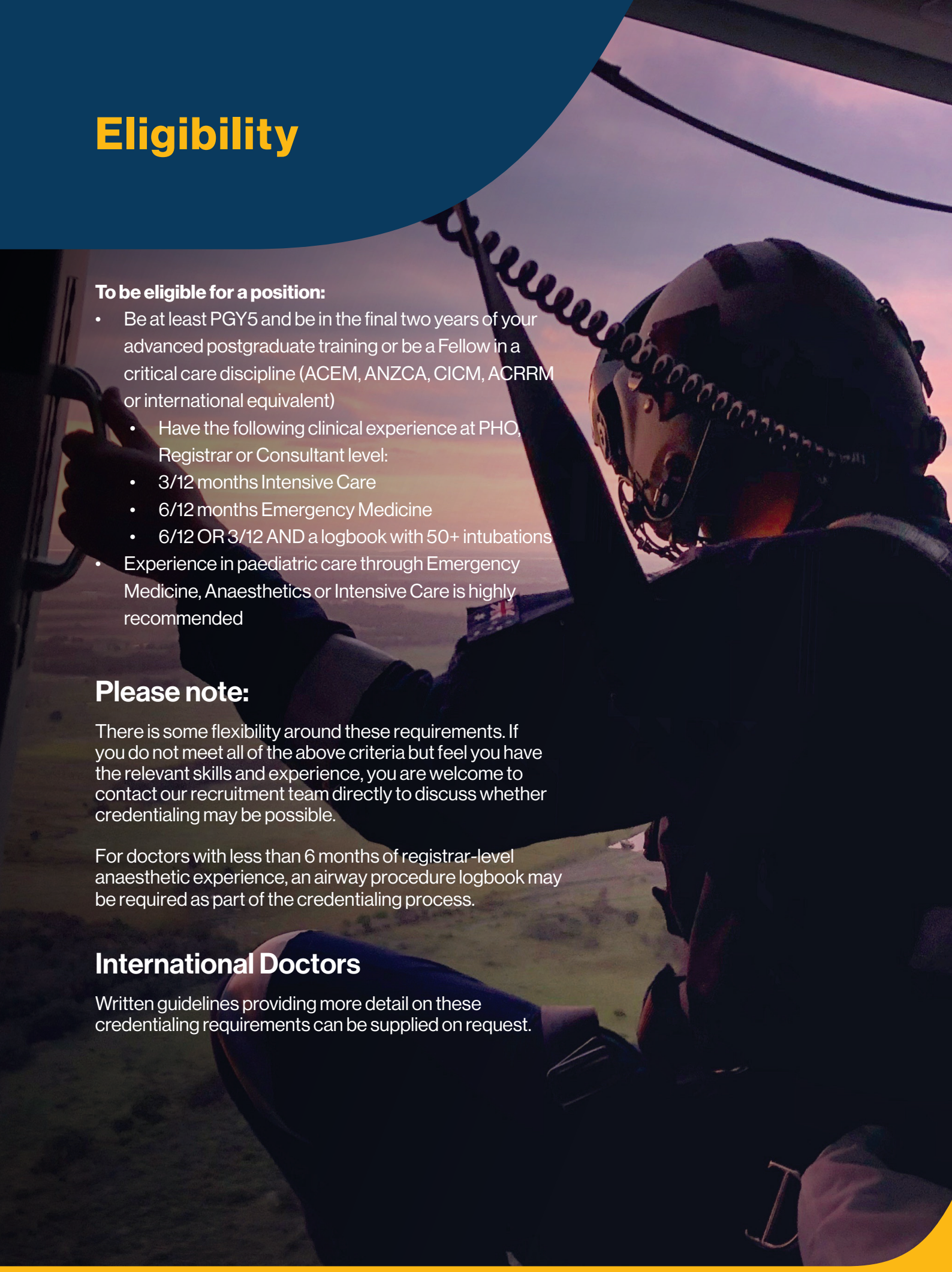
LRM Fixed Wing Physician work alongside Flight Nurses as part of the clinical team, providing a high level of care to all patients retrieved by a dedicated fleet of medically configured air ambulance jets.

Our current fleet includes four Challenger 604s across the Brisbane, Townsville, and Singapore bases. Fixed Wing Physicians are dedicated to our air ambulance jet fleet. You will provide both rapid response and scheduled medical transports for sick and injured patients throughout the country and around the world.

Explore available positions
www.lifeflight.org.au/careers



Eligibility



To be eligible for a position:

- Be at least PGY5 and be in the final two years of your advanced postgraduate training or be a Fellow in a critical care discipline (ACEM, ANZCA, CICM, ACRRM or international equivalent)
  - Have the following clinical experience at PHO, Registrar or Consultant level:
  - 3/12 months Intensive Care
  - 6/12 months Emergency Medicine
  - 6/12 OR 3/12 AND a logbook with 50+ intubations
- Experience in paediatric care through Emergency Medicine, Anaesthetics or Intensive Care is highly recommended

Please note:

There is some flexibility around these requirements. If you do not meet all of the above criteria but feel you have the relevant skills and experience, you are welcome to contact our recruitment team directly to discuss whether credentialing may be possible.

For doctors with less than 6 months of registrar-level anaesthetic experience, an airway procedure logbook may be required as part of the credentialing process.

International Doctors

Written guidelines providing more detail on these credentialing requirements can be supplied on request.

Minimum Clinical Requirements for a Retrieval Registrar

Medical Officers who participate in PHRM require a specific range of skills and experience to safely practice in this arena. They will be required to work in a dynamic environment that offers a broad range of caseload including search and rescue, primary responses, and inter-facility transfers across multiple transport platforms (road and air).

The Department recognises and supports a two-tiered staffing medical model comprising supervised PHRM Registrars (or equivalent) and PHRM Specialists (unsupervised).

PHRM Registrar Positions

Minimum eligibility requirements for PHRM Registrar positions specifically include:

- advanced trainee (in final 2 years of training at college) or fellow of:
  - Australasian College for Emergency Medicine (ACEM)
  - Australian and New Zealand College of Anaesthetists (ANZCA)
  - Australian College of Rural and Remote Medicine (ACRRM)
  - College of Intensive Care Medicine (CICM)
- or overseas equivalent

- at least Postgraduate (PGY) Year 5
- 6 months experience in Intensive Care, Anaesthetics, and Emergency as detailed below
- all of the following (at Principal House Officer (PHO)/Registrar/Specialist level unless stated otherwise)
  - **Intensive care experience:**
    - 6/12 experience in Intensive Care; or
    - 3/12 Intensive Care and a further 3/12 made up of any combination of Emergency Medicine, PHRM, or Anaesthetics

    (see explanatory notes 1, 2, 3, 5, 8, and 10)
  - **Anaesthetic experience:**
    - 6/12 experience in Anaesthesia; or
    - 12/12 experience in procedural General Practice (Anaesthesia)

    (see explanatory notes 3, 7, and 8)
  - **Emergency experience:**
    - 6/12 experience in Emergency Medicine; or
    - 12/12 experience in procedural General Practice (Emergency Medicine)

    (see explanatory notes 1,6,8, and 9)
  - **Paediatric experience (preferred but not essential):**
    - 6/12 experience in Paediatrics; or
    - 12/12 experience in a mixed Adult/Paediatric Emergency Department; or
    - 12112 in procedural General Practice (Emergency Medicine) in a mixed Adult/Paediatric Emergency Department

    (see explanatory notes 4, 5, 6, and 8)

Explanatory Notes

1. Experience in PHRM must be obtained in a post accredited by an Australian Specialist College.
2. Experience in Intensive Care must be obtained in a post accredited by CICM.
3. Experience in Anaesthetics must be obtained in a post accredited by the ANZCA.
4. Experience in Paediatrics must be obtained in a post accredited by the Royal Australian College of Physicians - Paediatrics and Child Health Division (Terms in Paediatric Intensive Care Unit (ICU), Neonatal ICU, Paediatric Emergency Department (ED), Paediatric Anaesthetics or General Paediatrics will be accepted).
5. Experience in Emergency Medicine must be obtained in a department accredited by the ACEM and at a minimum level of PGY 3.
6. Procedural General Practice (Emergency Medicine) refers to a practitioner who is credentialed by a hospital and has received a Scope of Clinical Practice (SoCP) to provide unsupervised medical care within the ED of that hospital. As Queensland Health and ACEM develop formal non specialty training programmes and qualifications they will become a part of the minimum requirements.
7. Procedural General Practice (Anaesthetics) refers to a practitioner who is credentialed by a hospital and has received a SoCP to provide unsupervised anaesthetic care. To meet the requirements for this category the medical practitioner must have undertaken a formal 12 month training position in Anaesthesia supported through the Joint Consultative Committee in Anaesthesia which includes representation from the ANZCA.
8. Overseas experience will be considered if equivalency is recognised by the relevant Australasian College. Final determination will be made by RSQ.
9. Where the medical practitioner has not completed the minimum 6/12 of Emergency Medicine at Registrar or Specialist level, RSQ may, at its discretion, grant approval if the medical practitioner can demonstrate adequate experience in the management of undifferentiated patients. This may include, but is not limited to, previous pre hospital civilian or military clinical experience and inter-facility Retrieval Service experience supporting rural and remote populations.
10. Equivalent experience in Intensive Care can be demonstrated through logbooks, training records and other relevant documentation.



How we Prepare You

LRM conducts an intensive training week. This includes hands on clincal training and teaching from a cross section of internationally respected consultant staff from across the state who come together to assist you in preparing for this challenging role.

Aviation specific training is also provided including winching, Helicopter Underwater Escape Training (HUET), and Emergency Breathing Systems (EBS). This is held at our state of the art Brisbane-based LTA.

Post training week in Brisbane, recruits relocate to their primary base for further local base orientation. LRM continues to support and educate Medical Officers throughout their term with weekly teaching, simulation based training, debriefs, and clinical audits.





Please Note: All doctors working with LifeFlight are employed to work across the state-wide retrieval service. This means that while everyone has a home base / team and the majority of your rostered shifts will be at your home location, there will be a requirement to rotate to cover rostered shifts at other bases as needed.

Rotating has the dual benefit of ensuring adequate resources to serve the community with top level clinical care, as well as giving you the experience of adapting to different locations and clinical environments. LRM organise and pay for the cost of sending you to other bases outside of your primary location. This usually includes car hire, accommodation, flights, and meal allowance.

LifeFlight



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