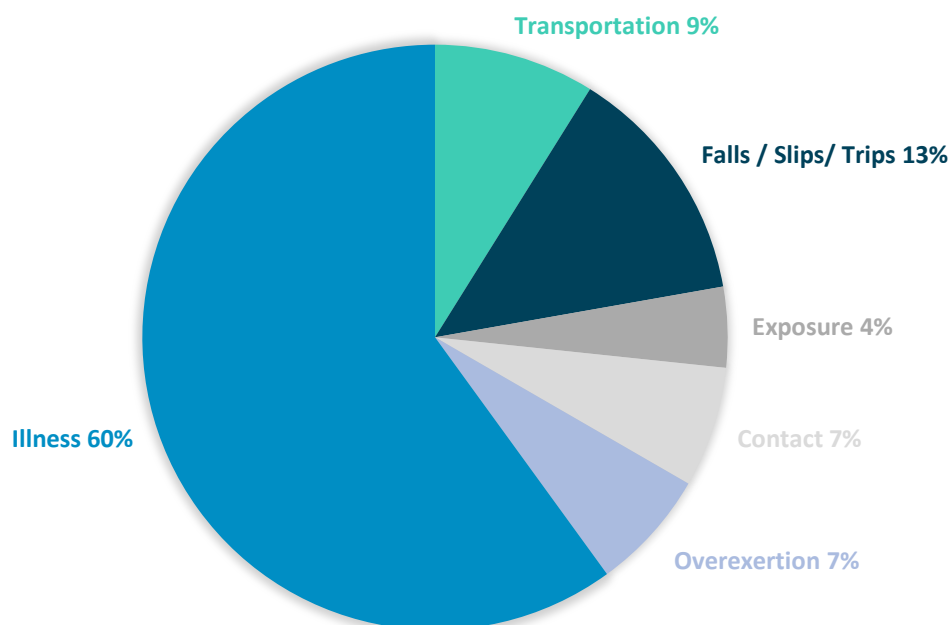




Academic Research Fleet Safety Statistics Report

Year: 2026 Quarter: 2 Number of Ships Reporting: 15/16

SAFETY INCIDENTS



Incidents (at Sea and In Port)

Violence and Other Injuries by Persons or Animals	0
Transportation Incidents	4
Fires / Explosions	0
Falls / Slips/ Trips	6
Exposure to Harmful Substances or Environments	2
Contact with Object / Equipment	3
Overexertion / Bodily Reactions	3
Illness (Including Heart Conditions, Diseases, etc.)	27
Total Number of Incidents	45

Total Crew Days Reported (At Sea and In Port)	16392
Number of Accidents Resulting in Lost Time for Crew Members	5
Total Crew Days Lost	8
Number of Medical Evacuations	0
Number of Ship Days Lost Due to Medical Evacuations	0



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A crewmember developed a skin infection. They were able to seek shoreside medical assistance.	
Crewmember had difficulty urinating due to an enlarged prostate.	
Crewmember had either welder's eye or had something in the eye. Eye was flushed and examined. Eye treated upon advice from GWMMA and recovered in a few days.	
Crewmember had loose dental caps. Sent ashore for treatment by a dentist.	
Crewmember reported shoulder pain of unknown origin. Treated on advice from GWMMA with pain management and exercises.	
Crewmember suffered skin rash after working on the sewage system. Crew reminded of personal hygiene and PPE use. Treated on advice from GWMMA.	
Crewmember had a sudden onset case of vertigo and loss of balance. Treated on advice from GWMMA with anti-vertigo positional movements to reset inner ear.	
Mariner reported high anxiety. No medication was administered. Person was given bed rest and felt better.	
Mariner's left ear was hurting for a couple of days. Medicated drops administered and pain improved.	
Crewmember suffering from cold virus and was out for a couple days, sore throat, headache and cough. Turned into a sinus infection and took antibiotics for 10 days.	
LIST CAUSED BY FLOODING - Deck hatch cover for Port Ballast Tank No. 3 not sufficiently secured which allowed slow ingress of sea water into tank during bad weather causing vessel to slowly develop a port list over time. Cause for list ignored at first given how "minor" it seemed and crew compensating for list by adjusting tankages to level out vessel. Problem eventually resolved by crew investigating list and finding several thousand gallons of sea water in supposedly "empty" ballast tank. Further troubleshooting by crew resulted in finding hatch cover for Port Ballast Tank No. 3 was not securely tightened.	
ENGINE CASUALTY - Blew injector which, in turn, led to damaged piston and cylinder head on Port Main Engine for no obvious reason. At time of casualty, vessel headed home following month-long international voyage (and two days from port). Vessel limped home on one (STBD)	



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engine. Following arrival, engineering team examined engine, removed all damaged components and installed new cylinder liner, piston, cylinder head and injector. Following repairs, engine tested dockside and functioned fine.	
ENGINE CASUALTY - Port Main Engine threw a rod in Cylinder No. 8 causing catastrophic damage to engine and rendering it irreparable. Damage included two holes in the block, a broken push rod, and internal damage to the water gallery (water passages) within the block. Vessel completed science cruise on one engine, returned to port and removed from service. Vessel headed to shipyard for replacement of engine.	
Received delayed report of crewmember having slipped going down stairwell to engine room and "tweaking" their right shoulder. Upon vessel's arrival in port, crewmember sent to diagnostic clinic for MRI scan; the results of which indicated no internal injuries. Crewmember continued working through their scheduled rotation. However, crewmember disagreed with finding and is seeking second opinion during their time off. No further information available at this time.	Proper and timely reporting of injuries is essential to maintaining a good safety culture and to protecting both persons and vessel operators (institutions)
Member of science team slipped and struck their head while out on main deck during rough weather engaged in research-related activity. Deck was rolling and awash with waves at time of incident. It is noted that their footwear was not suitable for conditions. Scientist immediately brought inside to infirmary for follow-up evaluation by vessel's MPIC and monitoring of their condition. Following a period of rest and observation, scientist indicated they were fine and resumed normal activity.	Enforce requirement of proper footwear to be worn by all on deck at all times - NO EXCEPTIONS!
Member of science team slipped and fell to their knees while out on main deck during rough weather engaged in research-related activity. Deck was rolling and awash with waves at time of incident. It is noted that their footwear was not suitable for application. Scientist immediately brought inside to infirmary for follow-up evaluation by vessel's MPIC. Examination revealed scrapes and bruises to both knees. Treatment consisted of wound care involving cleaning abrasion sites with anti-infectant and wrapping knees with bandages. No further treatment requested by or provided to scientist and they resumed normal activity.	



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Vessel grounded while arriving through the Woods Hole Channel. There were no injuries, pollution, flooding, or loss of propulsion. Vessel was able to free herself and return to homeport with no issues to propulsion or running gear. WHOI and commercial divers, with ABS oversight, completed an underwater inspection that identified damage to the science gondola and sonar equipment, but no hull or propulsion damage were found. Atlantis successfully completed ABS inspections and returned to service on July 2 with limited sonar capability. Repair options are currently being evaluated with the goal of minimizing impacts to the 2026 and 2027 operating schedules.	The investigation into the incident is ongoing. An independent third-party investigation report will be provided to ONR and NSF upon completion. Preliminary lessons learned so far: • Maintain heightened bridge team awareness during all restricted-water transits, including familiar waters. • Promote a strong Bridge Resource Management culture where all team members actively communicate concerns. • Verify vessel position using all available navigation tools and avoid reliance on a single source. We are sharing this event to help strengthen operational awareness and prevent similar incidents across the UNOLS fleet.
Crewmember had high blood pressure at sea. GWMMA was contacted and medication was prescribed.	It is important to make sure people are following up with their primary care physicians for their health issues before boarding the vessel.
Crewmember had intense pain to left trapezius/deltoid which was not letting him lower his arm after liftin items over his head. GWMMA was contacted and medication and limited duty was prescribed.	Proper lifting methods and asking for help should be brought up at every safety meeting onboard.
Cook fell in the galley during a turn through rough seas.	
During the deployment of a REMUS, the ship made a turn to starboard during deployment. The vessel hit the REMUS (near neutral buoyancy) which sank to the bottom after which we lost contact. The REMUS was later recovered a few days later with a submarine robot from the Beyster and was recovered for repairs.	Every deployment (series) should have a risk analysis in place that contains points of contacts, communication protocols, and agreed upon parameters (course, speed, etc.), sequence of actions. Walkthrough at sea deployments of gear during mobilization day
Crewmember stepped on an uneven platform under the ER stairs and fell into equipment.	To avoid trips over uneven surfaces; ensure that these surfaces are painted in bright signal yellow (or similar). These "camouflage hazards" significantly increase the risk of slip, trip, and fall injuries and need to be periodically searched for / reapplied.
Crewmember got debris in their eye	
Crewmember reported chronic knee pain and required radio medical advice and painkillers	
An old biopsy wound became infected on an individual.	
Mariner had a severe cold that required antibiotics to clear up.	We emphasize general hygiene during boarding processes with crew and scientists.
Crewmember required a dentist visit for tooth pain.	Crew are encouraged to visit their dentist prior to boarding the vessel.
Mariner's tooth crown came off while eating	



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Mariner had kidney pain and required doctor's advice.	
Crewmember had a seizure on and off the ship and was able to seek shoreside medical attention.	
Sinus infection, crewmember was able to see shoreside medical for treatment.	
While in dry dock a crew member scraped back of calf on diamond deck-span tread dry dock steps. Scrap needed bandage and antibiotic as a precaution.	Take precaution when walking down diamond deck-span tread steps.
During dry dock, four crewmembers came down with a bad cold within a few days of each other. Symptoms were fever, chills and aches. Over the counter medicine and rest were taken and done. Masks were worn after feeling under the weather.	Dry docks are close quarters and living in confined space for extended period of time. Cold bugs happen and get passed around. Try to wash hands often and take precautions if starting to feel under the weather.
Crew working on pipe replacement suffered small laceration on arm when valve came loose.	
Crewmember had blood in stool and stomach cramps caused by his colitis flare up. Sent home for rest and treatment.	
Crewmember not feeling well and took the day off to rest.	
Crewmember was out sick, went to urgent care to get checked.	