

APPENDIX B

INSIDE THIS ISSUE:

VIP Willem van Lankvelt

Virtual care trial takes
place in SK

STARS hosts Transport
Physicians Conference

 STARS®

HORIZONS

We provide critical care, **anywhere.**



CARE



PEOPLE



MISSION



INNOVATION

“The STARS team had skill sets that were not available to the rural medics who responded to me. I believe those skill sets made a significant difference in how I was able to overcome the trauma that I faced.”

– Willem van Lankvelt, STARS VERY IMPORTANT PATIENT



STARS flight nurse Melvin Yumang chats with STARS Very Important Patient Willem van Lankvelt at the Winnipeg STARS base.

From paramedic to patient: Willem's story

Being out in nature, on his bike, has always been one of Willem van Lankvelt's favourite activities. So, when summer arrived, he was excited to get up to his family cabin in a remote area and start peddling. During what Willem thought was going to be a pleasant afternoon on his bike, his ride took a life-threatening turn when he was struck by a truck.

The impact caused significant head trauma and severe internal bleeding.

"STARS was important because the degree of injuries that I received made me very difficult to manage," he said. "They had skill sets that were not available to the rural medics who responded to me. I believe those skill sets made a significant difference in how I was able to overcome the trauma that I faced."

Well before his accident, Willem already had a deep appreciation for STARS, having served as a paramedic for more than 16 years. He had seen firsthand the everyday difference STARS makes in the lives of critically ill and injured patients.

He had even worked and socialized with the crew that rescued him.

Those factors made it one of the most difficult missions that STARS flight nurse Melvin Yumang has ever been on.

"The extent of his injuries were such that neither myself nor my partner Ray recognized Willem at the time," said Melvin. "He had sustained such horrific injuries to his head and face."

Upon STARS' arrival at the scene, the air medical crew had to work quickly to stabilize Willem.

"He needed an advanced level of resuscitation before we could actually provide any of the interventions such as airway management," said flight paramedic Ray Rempel. He needed blood, which we were able to give him. He needed some interventions done with his chest, so we were able to decompress the flail chest that he

had, to allow him to breathe a little bit better. And then his jaw was tight, and he needed medications to help loosen that up so that we could safely intubate him and clear his airway in order to help give him vital oxygen."

Thanks to the rapid provision of critical care alongside the work of our allies on the ground and at the trauma centre where Willem was taken, he has been able to make a successful recovery.

Willem credits STARS with his survival. Since his recovery, he has returned to work as a paramedic. He encourages everyone he meets to support STARS.

"To anybody who has sponsored or supported STARS, I just want to say thank you," said Willem. "I can't put into words the impact your support has had on me and my family. Thank you."



ARC Resources has been a generous supporter of STARS for the last 28 years. As Canada's third-largest natural gas producer and largest producer of condensate, ARC considers safety a core value — and so does STARS. We have a shared goal to ensure our teams come back safely every day — whether it's out working to contribute to Canada's resource development, or providing critical care, anywhere. Thank you to ARC Resources for supporting STARS' mission and ensuring we are there for Canadians when they need us most. Because it shouldn't matter where you live, work, or play, you should be able to receive critical care.

2023/24

YEAR IN REVIEW



STARS EMERGENCY
LINK CENTRE



37,365

EMERGENCY REQUESTS HANDLED



MISSIONS



3,732

YEARLY MISSIONS

102

AVERAGE EMERGENCY
REQUESTS A DAY



1,633

AB

946

SK

1,153

MB



60K+

MISSIONS TO DATE SINCE 1985

10

AVERAGE DAILY MISSIONS

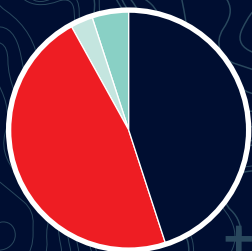


FUNDING

\$11.4M

APPROXIMATE ANNUAL
COST PER BASE

STARS FUNDING SOURCES



- NET FUNDRAISING
- GOVERNMENT CONTRIBUTIONS*
- INDUSTRY SERVICES
- OTHER

* cash received in year

37,345

ANNUAL DONORS



INCIDENT TYPES

STARS RESPONDS TO A VARIETY OF CRITICAL CARE CALLS



CARDIAC **18.27%**



ENVIRONMENTAL **0.32%**



NEUROLOGICAL **12.53%**



OBSTETRICAL **1.41%**



PULMONARY **12.58%**



VEHICLE INCIDENT **18.21%**



OTHER MEDICAL **19.42%**



OTHER TRAUMA **17.24%**



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Baby Adler Hazen visits the STARS base with his family.

NICU patient flown in SK

STARS completes its first-ever helicopter NICU patient transport in Saskatchewan

A Saskatchewan newborn baby needing critical care was recently helped by STARS as the organization completed its first-ever helicopter neonatal intensive care (NICU) transport in the province.

A major accomplishment for STARS, the new equipment used in the mission received approval late last year, and when the need arose in December 2023, STARS crews were able to respond.

As described by baby Adler's mom, Dani Tendler, Dani and her husband Zach could not reach the hospital in time when Dani went into labour two months early. Their house was an hour and a half drive away from the nearest hospital. This resulted in Adler being born in their driveway. He was only 1.7 kg.

An ambulance arrived soon after to take them to the nearest hospital while STARS was dispatched to transport them. From there STARS took Adler and Zach to a major hospital for additional observation and treatment.

"It was a very traumatic event for us. You never want to watch your baby get taken away from you, especially by helicopter, but he was in such good hands. After meeting the crew that took him, we got to know just how amazing they are and how passionate they are about what they do. They took such good care of our baby boy. We will forever be grateful for STARS and everything they did. You just don't realize what a vital service STARS is until you need it. Now that he's home

and healthy, it's pretty cool to say he was the first baby in the STARS helicopter in Saskatchewan."

"The unique aspect of this child being born out of hospital was there were a lot of logistical challenges to overcome, with a lot of moving parts behind the scenes," said STARS flight paramedic Ryan MacMillan. "All of the various care providers involved really worked hard to reach that end goal of getting baby safely and quickly to the Regina General Hospital NICU Department. It was inspiring."

Before implementing this new innovation, STARS was able to provide transport for the NICU team and their isolette, dropping them off at the patient's side, after which they would return home by ground ambulance. During these previous missions the isolette was considered "cargo," and was never used for transporting the infant in the helicopter.

Knowing the need would arise to transport an infant eventually, in 2021 STARS began the many preparations to ensure crews could safely undergo the process.

When the most recent fleet upgrade was occurring, a new interface was designed within the helicopter to ensure that the isolette, including the infant and their medical team, would be safe and secure for transport.

Once designed, STARS sought approval by Transport Canada in

order to use it on missions. While that process was occurring, STARS also worked closely with NICU teams so they could gain time and experience in the helicopter, including running practice missions.

"STARS is always looking for new ways to provide the highest level of care to our youngest patients," said STARS President and CEO Katherine Emberly. "When a joyous moment like the birth of a child takes a scary turn, families across the prairies can rest assured that a team of STARS critical care specialists are on their way with the best equipment possible."

This first-of-its-kind mission was carried out by veteran STARS flight crew members Mike Rogers, Greg Chorney, and Ryan MacMillan and the NICU specialty team from the Regina General Hospital. The specialized helicopter configuration needed to transport the isolette was implemented by STARS transport physician Dr. Tom Elliott and flight nurse Colleen McGeough.

STARS thanks the Saskatchewan Health Authority, local health care providers – including the Regina NICU team – and community members whose ongoing support ensures that this technology is available to all STARS patients. Our partnerships enhance and improve current processes by leveraging each organization's strength to create collective, positive outcomes.

“Our enhanced ability to provide quick and efficient treatment will ultimately save time and lives.”

— **Cindy Seidl**, STARS CHIEF CLINICAL OFFICER AND FLIGHT NURSE



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ELC

STARS Virtual Care connects team with patients faster

Critical patients may now receive care quicker than ever before thanks to the launch of a virtual care trial by STARS in partnership with Saskatchewan Health Authority.

STARS Virtual Care allows transport physicians to be connected to local providers during active missions via a secure video connection. The trial is underway across the province of Saskatchewan.

More specifically, the program allows STARS transport physicians to use a video link to support providers treating critically ill or injured patients, providing immediate assessment, stabilization and treatment support. STARS has chosen to use the GoodSAM platform based on its proven infrastructure, robust privacy standards, and ease of use. It is already in use in Canada and around the world by organizations including British Columbia Emergency Health Services and London Helicopter Emergency Medical Services.

“This new tool is allowing us to provide care more precisely and timely, because when I am consulted I can see the problem directly rather than having someone describe it to me over the phone, especially when they can often be in the midst of dealing with a very critical situation,” said STARS

base medical director for Regina and Saskatoon, Dr. Dallas Pearson.

When a local physician connects with STARS through a phone call to our Emergency Link Centre (ELC), their call can be immediately transferred to our transport physicians who are on call 24/7. In addition to providing critical care consultation to local providers, STARS transport physicians also support transport logistics and provide medical support to STARS air medical crews while on missions.

With the call underway, a STARS transport physician can then offer to launch a video consult with the local physician to “see” the patient and provide more nuanced support, diagnosis, and guidance. The transport physician can then send the gathered information to both STARS air medical crews and specialists at the receiving hospital, who can then prepare for the best course of treatment.

“Our commitment to the highest quality of critical care includes always looking for innovative ways to provide

care to our patients,” said STARS Chief Clinical Officer and Flight Nurse Cindy Seidl. “This new tool will help our transport physicians and medical crews quickly diagnose the patient and provide stabilization advice while our transport teams are en route. Our enhanced ability to provide quick and efficient treatment will ultimately save time and lives.”

STARS has worked closely with the Saskatchewan Health Authority to ensure that this new tool conforms to the provincial health standards governing virtual care and looks forward to working with them to continue improving this program.

“The Saskatchewan Health Authority is actively expanding virtual services across the health-care system in a connected and cohesive manner,” said Dr. Vern Behl, outgoing senior medical information officer with SHA Digital Health focused on virtual care. “The partnership with STARS is a natural next step in ensuring patients can get the timely care they need, regardless of their circumstances or location.”



“We taught (procedures) which might be things that will happen once in a physician’s career.”

— Dr. Paul Tourigny, STARS TRANSPORT PHYSICIAN



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ELC



EDUCATION



Transport physicians from across STARS' six bases gathered in Calgary for the first time to train together to prepare for scenarios they may face.

STARS hosts Transport Physician Conference

First-ever event of its kind elevates patient care practices



“There’s a lot to gain by having lots of highly educated and well-trained people in the same room to share ideas.”

– Dr. Chase Krook, STARS TRANSPORT PHYSICIAN

Given the nature of the profession and the unpredictable world of first responders, transport physicians have seen everything. Well, nearly everything.

So, STARS took measures to expand the already considerable experience base of our doctors.

In November 2023, as part of the first-ever Transport Physicians Conference, representatives from all of the STARS bases – Grande Prairie, Edmonton, Calgary, Saskatoon, Regina, Winnipeg – participated in seminars at the University of Calgary’s cadaver lab. Local experts ran the sessions, with the aim of “elevating the game of our transport physicians,” said Dr. Paul Tourigny.

Quickly, the value of the program was established.

Dr. John Froh, chief medical officer of STARS, indicated that there are already plans to organize future get-togethers, emphasizing the upside of education that is tailored to the skills of medical crews.

“Having something we can build in-house that is world-class and addresses all of those needs,” he says, “it really does align with STARS’ commitment to education, innovation, and research.”

Of the STARS roster of physicians, nearly 60 were able to attend, taking

advantage of the unique learning opportunity, the focus of which had been gaining familiarity with emergency situations that are uncommon – but not unheard of – in the field.

This knowledge-broadening approach is expected to enhance in-person and virtual delivery of emergency health care.

“What we taught might be things that will happen once in a physician’s career,” said Tourigny, who is based in Calgary. “Some of us have had the misfortune to do these things several times. And these are rare procedures – drilling through bone to relieve pressure inside a brain, doing things to relieve the pressure on an eyeball, performing a surgical airway when we can’t access someone’s airway through their nose or their mouth.

“(At the conference) I got to see all of these people who have just got an immense amount of respect for doing incredible things, teaching each other, learning from each other, telling stories.”

For the critical procedures training, the lab offered a variety of stations and, crucial to the hands-on aspect of the lessons, the presence of cadavers.

“Which we don’t always have available to practise on,” said Dr. Jocelyn Andruko, who works out of the Winnipeg base. “Doing all of these procedures on real human bodies was extra special and extra helpful because then you can talk to someone who has genuinely done it before and get their tips in real time as you’re practising.”

This marked the first time an event had been staged for the transport physicians of STARS. That, too, was meaningful for participants – not only to learn as a group, but also to get to know each other. “There’s a lot to gain by having lots of highly educated and well-trained people in the same room to share ideas,” said Dr. Chase Krook, part of the STARS crew in Calgary.

While the names of peers from across Western Canada were familiar – from emails, phone calls, medical charts – the weekend’s activities, in a lot of cases, served as the official real-life introduction.

“It fosters a lot more organization-wide unity,” Andruko said of the conference. “It’ll certainly feel easier to hand off patients or unite in projects or do other things together with people from the other places after something like this.”

Finger thoracostomy pilot project trains STARS teams to perform life-saving procedure



In the world of critical care, the medical experts at STARS are always looking for new opportunities to save lives. Innovations like ultrasound and blood on board our aircraft have made a real difference for patients. Now, another life-saving tool is being trialed by STARS.

Thoracostomy is a potentially life-saving procedure used to relieve tension pneumothorax – a buildup of air in the cavity between the lungs and the chest wall. This condition, which can develop in severely injured patients, causes the lung to collapse, putting pressure on the heart and other vital organs. Without prompt intervention, this condition can lead to cardiac arrest and even death.

Historically, “needle thoracostomy” was used by paramedics to relieve the pressure in this life-threatening circumstance. However, current evidence suggests that needle thoracostomy is not always successful. A better solution was needed. For this reason, a small group of nurse and paramedic air medical crew members have now been trained to use the more definitive procedure, which is called “finger thoracostomy.”

Identical to the way it would be performed by a surgeon in a hospital, the procedure involves making a small incision to allow for the insertion of a gloved finger, followed by a sweep of the finger in the chest cavity, allowing the air to escape and the pressure on vital organs to be relieved.

“In addition to its speed and ease of use, the main benefit of finger thoracostomy is that it definitively addresses the problem of increased pressure in the chest,” explained Dr. Doug Martin, STARS medical director for Manitoba. “The crew can also proceed to insert a chest tube, in order to ensure that the problem does not recur during transport. This can absolutely be life-saving for a critically injured patient.”

Launched in the summer of 2023, this pilot project provided a group of STARS nurses and paramedics

in Manitoba with physician-led training on how to perform finger thoracostomies as well as the more traditional chest tube thoracostomies. Trained STARS medical crews have since performed both procedures on severely injured patients.

As part of STARS’ commitment to innovation, the results of this pilot project will be evaluated with the possibility of expanding training for thoracostomy procedures to additional STARS bases and medical crew members.

“Looking critically at our care and identifying ways to make it more effective is central to our mission at STARS,” added Dr. Martin. “If this procedure helps even a few people survive their injuries, that’s more than enough reason to invest in being able to provide it.”



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INNOVATION

“The weight saved with the new pack rack allows us to allocate additional payload elsewhere.”

— Ray Grenkow, STARS CAPTAIN



STARS flight nurse Stuart Grant demonstrates the clip-in, clip-out functionality of the new pack rack.

New stretcher pack rack improves patient care

In 2019, STARS welcomed the next generation to our fleet with the introduction of the brand-new Airbus H145 helicopter. With these new aircraft, we also introduced a new state-of-the-art medical interior. Supplied by Swiss manufacturer Aerolite, the medical interior of the STARS H145 is designed to be lightweight and functional.

This medical interior is also designed to be adaptable, allowing STARS to stay on the cutting edge of critical care transport. These characteristics are all evident in one of the latest innovations found on-board the STARS helicopter, a redesigned equipment bridge fitted to our on-board stretcher.

The stretcher bridge, also known as a “pack rack,” is a specialized piece of equipment that attaches directly to the sides of the stretcher, with a flat surface to secure equipment across the top of the patient. The new design, initiated by STARS, allows independent removal of either vertical side, eliminating the need to completely remove the assembly when transferring a patient.

Although the pack rack weighs just 3.6kg, it can hold a significant amount of life-saving medical equipment such as oxygen systems, defibrillators, and monitors. Because it is attached directly to the stretcher, medical equipment attached to the pack rack can move with the patient while they are being transferred to or from the aircraft.

STARS crews began training on the use of the new pack rack in January, and it is now in use at every base.

Angela Mazzolini, STARS clinical operations manager in Edmonton, shared how this new tool is helping crews deliver care.

“When preparing a critically ill or injured patient for transport on-board the helicopter, time is of the essence. The ease of transferring the patient onto our stretcher and access to medical equipment is so important for our crews,” said Mazzolini.

“The new pack rack allows us to keep the tools we need right on the stretcher instead of unloading all our equipment and re-attaching it once the patient is secured for flight. This simple but important change is a more efficient use of resources and time. We believe it will lead to more efficient patient care and contribute to better patient outcomes.”

The new pack rack is certified for all phases of flight and is an integral

part of the on-board equipment used during a STARS mission. Thanks to the “clip-in, clip-out” design of the equipment and the fact that it is very lightweight, the sidewall of the pack rack can be removed to allow an easy transition from the STARS stretcher once the patient has arrived at a major trauma centre.

In addition to being a useful tool for patient care, the new pack rack is also popular with STARS pilots.

“We account for the weight of everything we carry on-board, so our equipment needs to be as light as possible,” explained STARS captain Ray Grenkow. “The weight saved with the new pack rack allows us to allocate additional payload elsewhere or simply fly lighter. It’s a great design.”

ELC upgrades a boon for patients

Renos and tech boosts improve workflow

Above: STARS ELC director John Griffiths speaks in front of a doorway filled with portraits of VIPs.

Left: The STARS ELC has recently received upgraded equipment and technology connecting the team even more to the patients we serve.

A few dozen smiles greeting you is one thing. When all 85 are STARS Very Important Patients gleaming with gratitude – it’s incredible. Welcome to the STARS Emergency Link Centre (ELC) and its portal of portraits beside the ethos “It’s about the patient.”

When upgrades to the ELC – the logistics coordination hub located at our Calgary base – began four years ago, we knew that phrase emblazoned on the doors since 1996 would not only remain but also anchor every planned improvement inside.

“When the team walk through those doors, it’s a very concrete reinforcement of their ‘why’ and the Link Centre’s rationale,” said ELC director John Griffiths.

He stood beside a new ergonomic desk, outfitted with independent height and climate control to improve our emergency communications specialists’ comfort and performance throughout their 12-hour shifts.

The biggest upgrade, though, is visible in the new ultra-wide displays on top: a modernized computer-aided dispatch (CAD) system custom-designed for STARS.

“Our CAD is patient-centred,” said Griffiths. “Sometimes CADs can be about the resource, but our CAD is

really about the patient’s interaction. It’s built around the patient and how we can utilize resources like helicopters, transport physicians, local geographic awareness, and virtual care for them. That’s why STARS has been so successful. We build our systems around our core mission. The values are consistent in the culture and in the technology.”

The new platform is quicker, more efficient, and streamlined, he said, and vastly improves data capture and future-readiness. It’s also the final step in the overall modernization project.

“It all began with our radios,” said Griffiths, noting an industry shift to digital infrastructure and the deep cooperation involved in mutual system integration. “STARS is connected into that network, and that gives improved interoperability with RCMP, fire, EMS, conservation officers, park rangers, government employees – everyone.”

Other upgrades include a dedicated workstation for STARS transport physicians, who have been sitting

in the ELC since 2021, and an isolated training laboratory to better prepare new hires before they start dispatching real helicopters.


In his 10 years with STARS, Griffiths has seen a lot of changes. The most recent ones make him beam with pride and excitement.

“The mission has always remained the same. It’s always been all about the patient and the culture here at STARS is, ‘What can we do for these patients?’ People have continually found innovative ways to push the boundaries and harness technology; and so that baseline mantra ‘It’s about the patient’ has spurred us to ensure our technology, communication, and dispatch tools remain equal to the task.”

The new CAD system is expected to be fully online by Fall 2024. The system upgrades are thanks to generous donor funding.

STARS celebrates 30 years of partnership with Enserva

The energy industry has rallied behind STARS' mission since the beginning, helping ensure people across Western Canada – no matter where they live, work, or play – have access to lifesaving care when it's needed.



"We are immensely proud and grateful of the partnership we have built with Enserva."

– Katherine Emberly, STARS PRESIDENT & CEO

This year's Enserva gala raised \$1.6 million for STARS.

This April, STARS celebrated a major milestone in partnership with Enserva, formerly the Petroleum Services Association of Canada (PSAC), with the 30th anniversary of the Enserva STARS & Spurs Gala.

The STARS & Spurs Gala is one of our longest-running and largest fundraisers – bringing industry and community leaders together to raise over \$20 million in support of STARS' operations since its inception in 1994.

"STARS was built by the community, for the community, and has relied on the support of our allies to help us fulfill

our mission of providing critical care, anywhere since the very beginning," says STARS President and CEO Katherine Emberly. "For the last three decades, Enserva has been one of our most committed and generous allies, going above and beyond to ensure STARS can continue being there for the next patient."

The signature event, which was held at the Telus Convention Centre in downtown Calgary, raised an astonishing \$1.6 million during the 30th anniversary celebrations, all of which will support STARS in providing lifesaving care, wherever it's needed.

"We are immensely proud and grateful of the partnership we have built with Enserva," says Emberly. "The unwavering support we have received from the energy sector has allowed us to stand at the forefront of critical care in Canada, and enabled us to grow, innovate, and implement new technologies that help us save lives everyday."



Dr. Greg Powell, founder of STARS, and his partner Linda, continue to be incredible STARS supporters.

STARS founder leaves a legacy

“Donations save lives. Saving a life supports family and community. Your donations have a big impact that can be seen and felt.”

– Dr. Greg Powell, STARS FOUNDER

Not long after STARS was created, founder Dr. Greg Powell was invited to a fundraising event in a rural Alberta. When he walked into the small town’s community hall, he was surprised to see 400 people singing songs, playing bingo, and holding a silent auction to raise money in support of STARS. The community raised \$60,000 that evening and went on to donate \$100,000 more over the next few years.

Truly, STARS was built by the community, for the community.

Nearly 40 years later, STARS still relies on this kind of support and generosity to carry out roughly 3,000 missions a year from six different bases across the prairies and provide critical care, anywhere it’s needed.

To this day, Dr. Powell and his wife Linda believe so strongly in what they’ve created that they made the decision to support the community well beyond their lifetime – by opting

to leave a gift in their will, along with an insurance policy in STARS’ name.

For the Powells, one life lost is too many, and there are countless more lives to be saved. When asked what a gift to STARS means, Dr. Powell says, “Donations save lives. Saving a life supports family and community. Your donations have a big impact that can be seen and felt.”

Estate gifts to STARS are possible for anyone who wishes to leave a legacy that will make a difference and have

lasting community impacts for years to come.

There are many ways to include STARS in estate plans. It’s a big decision and an important one to communicate with family, financial advisors, and planned giving experts who can assist you in choosing the type of gift that best supports STARS and works best for you.

For more information, please reach out to legacy@stars.ca to get in touch with a STARS Foundation representative.

Benefits of gifts of life insurance:

- Allows you to leave a significant legacy gift at relatively little cost.
- The gift can be made on the “instalment” plan.
- The gift is not subject to probate as the death benefit is payable to STARS.
- Depending on how your life insurance policy is set up, you can either receive a charitable tax receipt for the premiums paid or your estate will receive a tax receipt for the amount of insurance that is gifted to STARS.
- If your estate receives a taxable receipt for the full insurance amount gifted to STARS, this could positively impact your estate taxes.



Since 1985, STARS has flown more than **60,000 missions** across Western Canada. Below are **3,732 missions** carried out from our six bases in Alberta, Saskatchewan, and Manitoba in the past year.

ALBERTA Acme 3, Airdrie 3, Alberta Beach, Alcomdale 2, Alder Flats, Aldersyde 3, Alexis Nakota Sioux Nation, Ardrossan, Ashmont, Athabasca 10, Atikameg 6, Balzac 2, Banff 14, Barrhead 18, Bassano 4, Bawlf 2, Beaumont, Beaverlodge 6, Beiseker, Bezanson 5, Black Diamond 10, Blackfalds 2, Blackie, Blairmore 22, Bluesky, Bonanza 2, Bonnyville 20, Bow Island 2, Bowden 3, Boyle, Bragg Creek 5, Brooks 25, Bruderheim 2, Buck Lake 2, Busby 2, Cadotte Lake 2, Calahoo 2, Calgary 5, Calling Lake, Calmar, Camrose 39, Canal Flats, Canmore 17, Cardston 6, Caroline 4, Carseland 2, Carstairs, Carvel, Caslan 3, Castor 4, Cavendish, Chauvin 2, Chestermere, Chetwynd 3, Chip Lake, Chipman 2, Clairmont 2, Claresholm 9, Cline River, Coal Valley 2, Coalhurst, Cochrane 4, Cold Lake 16, Colinton, Condor 3, Cooking Lake, Coronation 5, Cowley 4, Cranbrook 9, Cremona 2, Crooked Creek, Crystal City, Dalmuir, Dawson Creek 3, Daysland 3, De Winton 2, Debolt 3, Delburne, Delia, Demmitt 3, Didsbury 12, Donalda, Drayton Valley 14, Driftpile, Drumheller 21, Duchess 2, Duffield 3, Eckville, Eden Valley First Nation 4, Edgewater, Edson 10, Elbow Falls PRA 4, Elk Point 9, Elkford 2, Elko, Elnora, Enilda 2, Enoch Cree Nation 2, Entwistle, Evansburg 2, Exshaw, Fairview 14, Falher 2, Fallis 2, Faust, Fernie 8, Field 5, Flatbush, Fort Assiniboine 2, Fort Macleod 10, Fort McMurray, Fort Saskatchewan 4, Fort St. John 5, Fox Creek 5, Frog Lake, Gadsby, Ghost Lake, Gibbons, Gift Lake 3, Girouxville, Gleichen 8, Glendon, Glentworth, Golden 7, Goodfare, Goodfish Lake 4, Gordondale 2, Grande Cache 16, Grande Prairie 29, Grasmere, Grimshaw 2, Grouard, Grovedale 9, Gull Lake, Gunn, Hanna 11, Hardisty 6, Heisler, High Prairie 26, High River 15, Hinton 8, Hondo, Horse Lake First Nation 4, Hythe 2, Indus, Innisfail 9, Invermere 2, Irricana, Jasper 4, Josephsburg, Jossard, Kananaskis Village 2, Kapsiwin 2, Kathryn, Kavanagh, Keephills 3, Kelvington, Keoma 2, Kikino, Killam 6, Kinuso, La Glace 4, Lac La Biche 7, Lac la Nonne, Lac Ste. Anne, Lacombe 8, Lake Louise 10, Lamont 7, Lavoy, Leduc 3, Legal 3, Lethbridge 80, Linden 2, Little Buffalo, Little Smoky 2, Lloydminster 2, Lodgepole, Lomond, Longview 6, Loon Lake 2, Lymburn 2, Madden, Ma-Me-O Beach 4, Marshall 9, Maskwacis 3, Mayerthorpe 12, McBride, McLennan 9, Medicine Hat 6, Meeting Creek, Millarville 2, Millet, Mini Thni (Morley) 3, Mirror, Mission Beach 2, Mossleigh 4, Mulhurst, Mundare, Munson, Muskeg River 6, Namao, Nanton 2, New Norway, New Sarepta, Newbrook, Nisku, Nordegg 4, North Cooking Lake 2, O'Chiese First Nation, Okotoks 2, Olds 17, Onoway, Oyen 2, Paul First Nation, Peace River 19, Peavine, Penhold 4, Pincher Creek 11, Pink Mountain, Pipestone Creek 2, Ponoka 13, Provost 4, Purple Springs, Radium Hot Springs, Rainbow Lake, Raymond 3, Red Deer 94, Red Earth Creek, Redwater 6, Redwood Meadows 3, Rimbey 4, Rivière Qui Barre, Rochester, Rocky Mountain House 17, Rogers Pass, Rosalind, Round Hill, Rycroft 2, Ryley, Saddle Lake Cree Nation 2, Sandy Beach, Saskatchewan River Crossing 5, Seba Beach 2, Sedgewick, Sexsmith 9, Sherwood Park, Siksika Nation, Slave Lake 5, Smith 2, Smoky Lake 15, Sparwood 2, Spillimacheen 2, Spirit River 14, Spring Coulee, Spring Lake 3, Spruce Grove 3, St. Albert 2, St. Paul 36, Standard, Stavely, Steeper, Stettler 12, Stoney Nakoda First Nation 6, Stony Plain 2, Strachan, Strathmore 28, Sturgeon Heights 2, Sturgeon Lake Cree Nation 3, Sucker Creek First Nation, Sunchild First Nation 5, Sundre 17, Sunnybrook, Sunset House 2, Swan Hills, Sylvan Lake 2, Taber 9, Taylor, Teepee Creek 6, Thorhild 3, Thorsby 3, Three Hills 14, Tilley, Tofield 5, Tomahawk, Tomslake, Torrington 2, Travers 2, Trout Lake, Turner Valley 4, Two Hills 7, Valemont, Valleyview 22, Vegreville 15, Vermilion 15, Veteran, Viking 2, Vilna 2, Vulcan 16, Wabamun, Wainwright 10, Wandering River 2, Wanham, Warburg, Wasa, Water Valley 3, Wembley, Westrose 2, Westlock 27, Wetaskiwin 70, Whitecourt 11, Winfield 2, Woking 2, Wonowon 2, Worsley, Ya Ha Tinda Ranch 2

SASKATCHEWAN Abbey, Aberdeen, Ahtahkakoop Cree Nation 2, Alameda, Alice Beach, Arcola 13, Asquith 2, Assiniboia 10, Avonhurst, Avonlea, Baldwin, Battleford, Beechy, Bengough, Big River 2, Big River First Nation 6, Biggar 14, Birch Hills, Bjorkdale 2, Borden 3, Broadview 6, Broderick, Buffalo Pound Park, Cadillac, Candle Lake 2, Cando, Canora 6, Carberry, Central Butte, Chamberlain, Chaplin 3, Chitek Lake 8, Christopher Lake, Churchbridge, Clair, Clairmont, Clavet, Cochin 3, Colonsay, Coronach 3, Coteau Beach, Cowessess First Nation, Craik, Cut Knife, Dafeo, Dalmeny, Davidson 3, Davin 2, Debden 3, Delisle 3, Delmas, Denzil, Dinsmore 2, Domremy, Drake, Ebenezer, Edam 3, Edgeley, Elrose, Emma Lake, Endeavour, Esterhazy 3, Estevan 39, Fillmore, Fishing Lake First Nation 2, Fort Qu'Appelle 23, George Gordon First Nation 2, Girvin, Gladmar, Glentworth, Goodwater, Gravelbourg, Grenfell 2, Gruenthal, Hafford, Hague, Halbrite, Hanley 2, Happy Valley No. 10 RM, Harris, Hazlet, Hepburn 3, Hillmond 2, Humboldt 11, Indian Head 14, James Smith Cree Nation 4, Jasper, Kamsack 2, Kelvington 11, Kenaston 3, Kendal, Kerrobert 4, Kindersley 7, Kinley 2, Kipling 10, Kivimaa-Moonlight Bay, Kronau 2, Kyle, La Ronge, Landis, Langham, Lanigan, Leader, Leask, Leoville, Lestock 3, Little Bear Lake, Little Pine First Nation 6, Little River Cree Nation, Loon Lake, Luseland, Macklin, Maidstone, Makwa Sahgaiehan First Nation, Manitou Beach, Manor, Maple Creek 4, Maren, Marshall 19, Marwayne, Maymont, Meadow Lake 16, Medstead, Melfort 11, Melville 8, Meota, Midale, Milestone, Mistawasis First Nation 2, Mistusinne, Montmartre, Montreal Lake Cree Nation 5, Moose Jaw 43, Moosomin 16, Moosomin First Nation, Mosquito First Nation 4, Mossbank, Mount Hope No. 279 RM 2, Muenster, Muskowekwan First Nation 2, Netherhill, Nipawin 11, Norquay, North Battleford 34, Ochapowace Nation, Odessa, One Arrow First Nation 2, Osage, Outlook 9, Outram, Oxbow 4, Pamburn, Paradise Hill, Pasqua First Nation 2, Pense, Perdue 3, Pike Lake 2, Pilot Butte 2, Pleasant Valley No. 288 RM 2, Plunkett 2, Porcupine Plain 4, Poundmaker Cree Nation 3, Preeceville, Prince Albert 49, Provost, Punnychy, Qu'Appelle, Quinton, Radisson 2, Radville, Raymore 2, Red Earth Cree Nation 2, Redvers 8, Regina 37, Regina Beach, Richardson, Rosetown 3, Rosthern 5, Rush Lake, Saint-Front, Saskatoon 8, Saulteaux First Nation, Shaunavon 5, Shell Lake 4, Shellbrook 37, Simpson, Sintaiula 2, Smiley, Southey 2, Spiritwood 2, Springside, Spruce Home, St. Denis, Stoughton, Strasbourg 2, Sturgeon Lake First Nation, Sweetgrass First Nation 3, Swift Current 39, Tessier, Theodore, Thunderchild First Nation, Tisdale 15, Tobin Lake, Touchwood No. 248 RM 2, Tramping Lake, Turtleford 12, Tyvan, Unity 9, Vanscoy 4, Victoire 2, Vonda, Wadena 3, Wakaw, Waldheim, Warman 2, Waskesiu Lake, Watrous 14, Watson, Weldon 2, Weyburn 23, White Bear Lake 2, White City, Whitewood 2, Wishart, Witchekan First Nation 2, Wolseley 3, Wynyard 8, Yorkton 35

MANITOBA Alonsa 2, Altona 11, Amaranth, Anola 2, Arborg 5, Ashern 22, Austin 2, Bacon Ridge, Barren Lands First Nation, Beaconia, Beausejour 10, Birds Hill 3, Birdtail Sioux 2, Bloodvein First Nation 8, Blumenort 2, Brandon 67, Brereton Lake, Brokenhead Ojibway Nation 2, Bunibonibee Cree Nation 7, Caddy Lake 3, Carberry 2, Carman 5, Cloverleaf, Cracknell, Crane River 3, Cross Lake First Nation 12, Crystal City 4, Dacotah, Darlingford, Dauphin 57, Deloraine 2, Dog Creek 6, Dominion City, Dugald, East Braintree 2, East Selkirk, Easterville 5, Ebb and Flow First Nation 5, Elie 2, Emerson 2, Erickson 2, Eriksdale 11, Fairford, Fannystelle, Faulkner, Fisher Branch 2, Fisher River Cree Nation 4, Flin Flon 13, Fort Alexander 5, Fox Lake Cree Nation, Fraserwood, Garden Hill First Nation 29, Gardenton, Gimli 14, , Glenboro 2, God's Lake First Nation 5, Grahamdale, Grand Rapids 3, Grande Pointe, Grandview 3, Great Falls, Grunthal 3, Gypsumville 2, Hadashville, Hamiota, Haywood, Headingley, Hecla, Hodgson 22, Hollow Water First Nation 2, Horndean 2, Kenora 2, Keyes, Killarney 11, Kinonjeoshtegon First Nation 14, Kleefeld, Komarno, La Broquerie, La Salle, Lac du Bonnet 3, Langruth, Letellier, Little Grand Rapids 5, Little Saskatchewan First Nation 4, Long Plain First Nation 3, Lorette 4, Lowe Farm, Lynn Lake 4, Lyonshall, Manigotagan, Manitou, Manto Sipi Cree Nation 2, Mariapolis 2, Mathias Colomb First Nation 11, McCreary 2, Meadow Portage, Miami, Middlebro, Minnedosa 5, Mitchell 2, Morden 12, Morris, Mulvihill, Navin 3, Neepawa 8, Niverville 4, Norway House Cree Nation 19, Notre-Dame-de-Lourdes, Nutimik Lake, Oak Bluff, Oakbank 2, Oakville 3, Onanole 2, O-Pipon-Na-Piwin Cree Nation 5, Paupingassi, Peguis 3, Petersfield, Pinawa 6, Pinaymootang First Nation 4, Pine Creek 2, Pine Dock, Pine Falls 19, Piney 2, Pipestone 2, Plum Coulee, Plumias, Pointe du Bois 2, Poplar River 4, Poplarfield 2, Portage la Prairie 50, Rackham, Rathwell, Red Sucker Lake First Nation 3, Richer 2, Rivers, Riverton, Roblin 5, Roland, Roseau River 2, Roseau River Anishinabe First Nation 3, Roseisle, Ross, Russell 17, Sandy Bay Ojibway First Nation 8, Sandy Hook 2, Sanford 2, Sarto, Selkirk 63, Shamattawa First Nation 7, Sidney, Silver Falls, Silver Plains, Sioux Valley Dakota Nation, Skownan First Nation, Snow Lake, Somerset, Sprague, Sprucewoods 2, St. Adolphe, St. Andrews 2, St. Eustache, St. Jean Baptiste, St. Laurent 6, St. Malo 2, St. Martin 2, Ste. Agathe, Ste. Anne 13, Ste. Rita, Ste. Rose du Lac 4, Stead, Steinbach 38, Stonewall 9, Stony Mountain 7, St-Pierre-Jolys 5, Swan Lake 2, Swan River 32, Tataskweyak Cree Nation 2, Teulon 3, The Pas 60, Thompson 78, Treherne 4, Tyndall, Victoria Beach, Virden 19, Vita, Vogar, Warren 2, Wasagamack First Nation 11, Wellwood, West Hawk Lake 2, West St. Paul 2, Whitemouth 2, Winkler 24, Winnipeg 18, Winnipeg Beach, Woodridge 3, Zhoda

Our fiscal year runs from April 1–March 31. Missions may have been scene calls in the area closest to the listed communities. Missions flown to eastern British Columbia are included in the mission record for Alberta. Missions flown to western Ontario are included in the mission record for Manitoba. Locations with no number indicate a single mission responded to in or near that area.



Capt. Steve Curilla recently flew his 3,000th mission, and his family surprised him in the middle of the night to mark the moment.

Scan the QR code to see Capt. Curilla's warm reception following his mission.



STARS Horizons | Spring 2024
Return undeliverable items to:
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