

Captain's Statement
March 29, 2026
Flight 115
SFO to PPT
B-787-9 (N23994)

During the dispatch briefing, the dispatcher advised that we were flight planned to remain at FL300 until approximately 20N, in order to remain below and avoid turbulence which was forecast to begin at FL320. We kept the flight attendants seated until cruise, and then determined it was safe for them to begin their service.

It was mostly smooth for the first half hour or so, encountering only occasional light turbulence. Dispatch was notified of the light turbulence, and they responded that the biggest risk was from 34 –30N. Approximately one half hour later, another message was sent to Dispatch stating that we were encountering occasional light chop FL300. The seatbelt sign was both off and on during that time, but flight attendant service continued safely and without issue. Approximately one half hour after that, there was a sudden jolt of moderate turbulence. The flight attendants were seated immediately, with the appropriate "Flight Attendants be seated immediately" PA being made. The flight attendants complied fully and sat in their jump seats, the aisle, and in open seats. It was approximately 2200Z, and about 20 minutes after 30N128W. Dispatch was notified of the turbulence encounter, and they responded that we had just crossed a jet stream. We were not aware of that. Our iPads had no GPS ownship position or WiFi capability in the cockpit, which is common in the 787. The iPad provided no updates, prior notice, or a look ahead capability. The onboard weather radar system was on, but there were no returns displayed.

We subsequently received notice from the Purser of a flight attendant injury. We contacted dispatch and they patched in Medlink. They advised medication, (which was administered), stabilization, and for the flight attendant to be seen by medical professionals upon arrival.

The remainder of the flight consisted of periodic communication with dispatch for station coordination, medic and ambulance availability, transportation, etc., along with continued updates from the doctor and nurse concerning the flight attendant's condition.

Dispatch communication and coordination was excellent from beginning to end. Both first officers excelled not only in their normal duties, but also in the planning, coordination and execution of additional tasks that needed to be met.

FO's Statement
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During preflight, we were briefed by our dispatcher that we could expect turbulence off the coast of California, due to which we stayed at FL300 (projected turbulence was FL320-380). We encountered occasional pockets of light turbulence after the coast of California. According to our charts (which were updated prior to departure but not after due to internet not working in the cockpit) the projected turbulence should've been halfway between 30N128W and 25N130W after which it was projected to be mostly smooth. In cruise, dispatch further informed us that we should be exiting the forecast area of turbulence at 30N.

The turbulence was occasional, but light, and the first service in the cabin proceeded normally. About 1 hour and 35 minutes into the flight (approximately 2200z, and approximately 15 minutes prior to 25N130W) we hit a patch of moderate clear air turbulence which resulted in 2 flight attendants falling into each other, ultimately injuring one of the flight attendant's ankle. A medical doctor, who was on board as a passenger, assessed the flight attendants injury, and did not believe it to be broken, but advised X-rays should ultimately be taken. MedLink was contacted, and we arranged for medical care with operations in Tahiti. The rest of the flight was uneventful.

IRO's Statement
March 29, 2026
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Upon completion of my break in the overhead crew bunk, I was informed of the unfortunate incident of encountering clear air turbulence while in said rest. This turbulence encounter resulted in a flight attendant injuring their ankle. As I was resting at the time, I have no recollection of the turbulence intensity, or any PA's, and the status of the seatbelt sign.