

EMS ACTION

Emergency Medical Services

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D.O.T. PARAMEDIC PROGRAM DEBUTS

After nearly seven years of program development, major portions of the U.S. Department of Transportation (DOT) National Training Course for the EMT-Paramedic have been made available through the Government Printing Office. The Course Guide and Instructor Lesson Plans for the new course are now available, although the Textbook, Student Workbook, and Instructor Training Slides will not be available until January, 1978.

It was in September, 1970 that the National Academy of Sciences' Task Force on EMTs issued its recommendations concerning the minimum set of competencies to be required of advanced life support personnel known as "paramedics." Shortly thereafter, DOT contracted with Springfield (Mass.) Medical Center, and Dunlap and Associates to develop an Advanced EMT Training Course in accord with the NAS recommendations. That contract was completed in October, 1972.

Between January, 1973 and July, 1975, the Springfield/Dunlap course was pilot tested by approximately 25 agencies throughout the U.S. Those pilot tests produced a number of recommendations for improvement in the training course. Responding to those recommendations, DOT contracted with the University of Pittsburgh to revise the course.

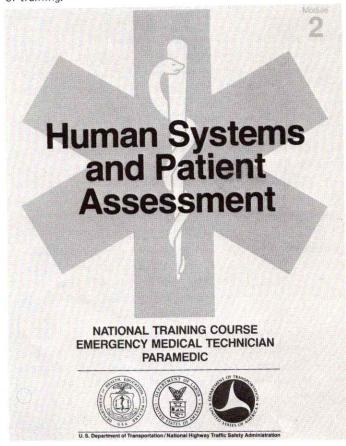
Pittsburgh's Dr. Nancy Caroline conducted a study of 30 ongoing paramedic programs as part of that contract. Her conclusion was that only about 10% of those programs prepared paramedics in the complete set of competencies recommended by the NAS Task Force five years earlier.

The University of Pittsburgh contract was completed in September, 1975. The following February, a medical group was assembled in Chicago by DOT for review of the new materials. A month later, state and local representatives assembled in Pittsburgh to review and comment on the training package.

In response to the comments of these groups, DOT contracted with the University of Kansas Medical Center to expand on the Student Text. Another DOT contract with Georgetown University Medical Center called for medical editorial review of Instructor Lesson Plans.

The new paramedic training course treats the training of paramedics in terms of behavioral and performance objectives (as opposed to the time/hours orientation of earlier courses). For planning purposes, it is estimated that completion of the course

will require 500-800 hours, depending on patient flow and frequency of exposure during clinical and field internship phases of training.



One of 16 modules in the new National Training Course for the EMT—Paramedic.

In its rough-draft form, the new program was approved and endorsed by the federal government's Interagency Committee on EMS. The U.S. Navy has formally adopted the program for training of military personnel. Eight foreign nations have expressed interest in the program for adoption in their health care systems. The National Registry of EMTs has developed an examination for the program and numerous states have adopted it in statutes and/or regulations.

\$12.39

By James O. Page, J.D. Executive Director ACT Foundation

Lane County is about as rural as rural can be. 2,858 people occupy this flat piece of western Kansas, coaxing the soil to produce wheat that is likely to sell for less than the cost of production. 1977 has brought more than the usual share of hardships, as drought and wind have combined to parch the soil and expose the seeds planted with optimism last fall.

Despite the depressing prospect of another year of fruitless work and no profit, Lane County has been preoccupied in recent months with another matter — EMS. It all started last January when Roy Martin was aboard a road grader that was struck by a Santa Fe locomotive.

An ambulance was hailed from Dighton (the county seat) to aid the badly injured Martin. Although the ambulance was staffed by volunteers who had completed training in basic life support (EMT), the vehicle was all the County could afford — a '68 Olds station wagon. Furthermore, it carried no equipment other than bandages. The frustrated EMTs loaded the injured man and took him to the Lane County Hospital for emergency treatment.

A local physician quickly concluded that extensive surgery would be necessary to save Martin's life. He arranged for a transfer to Garden City and for Garden City's paramedics to rendezvous with the woeful station wagon en-route. Although IV's had been established, the EMT's found that the ceiling in the "horizontal taxi" was too low to make the fluid flow. As they raced toward the meeting with the Garden City unit, they watched in frustration as Martin's life ebbed away. Just as they were about to kick the stretcher out the back door (to get enough head room for IVs and CPR), the Garden City paramedics loomed up in the distance.

Inside Garden City's modern ambulance, the Lane County EMTs joined the paramedics in applying anti-shock trousers and hanging four IVs. At St. Catherine's Hospital, Martin was taken to surgery and a call went out for blood. In short order, 55 Lane County residents car-pooled to the hospital to donate blood. Despite spleen and liver surgery, Roy Martin survived and is doing fine.

Martin's survival was not the last chapter of the episode, however. The local EMTs wanted a vehicle in which they could practice the full range of their skills. Their plea to County Commissioners for funds to buy an ambulance was met with a "no money" response.

An ambulance fund drive was organized by the EMTs and a local nurse was named as chairperson. In the first week — with a lot of talking, explaining and asking — the EMTs had gathered \$18,000 in pledges. The American Legion held a Benefit Bingo. A local bowling alley donated three days' proceeds. A cafe had a coffee day for the ambulance fund.

The Dighton Herald picked up the banner and publicized the fund drive. Four ambulance vendors cooperated by bringing display models to exhibit for the populace in the IGA store parking lot. Eventually, \$35,421.19 was raised. That represents \$12.39 for every man, woman and child in Lane County.

This little corner of America's bread basket still faces severe hardship. It remains hot and dry and wheat prices are set at 1952 levels. But there is a new modular ambulance vehicle in Dighton, poised and ready to serve Lane County residents with trained and motivated volunteer EMTs. In the process of gathering capital for that new vehicle, the whole topic of emergency care was raised to new levels of awareness.

Under different circumstances, Lane County's ambulance might have been purchased with public funds. But it is doubtful that such a purchase would have generated the community involvement that embraced the ambulance fund drive. As it stands, the per-capita EMS awareness level for this little Kansas county exceeds that to be found in virtually every big city in America. No amount of public money can buy that kind of intangible asset.

SAFAR AND NAGEL TAPPED FOR INTERNATIONAL DISASTER MEET

EMS pioneers Peter Safar, M.D. and Eugene L. Nagel, M.D., have been scheduled to speak at the forthcoming International Disaster Congress in Mainz, Germany (September 30-October 3, 1977). Dr. Safar is Professor at the School of Medicine and Chairman of the Department of Critical Care Medicine, University of Pittsburgh. Dr. Nagel is Professor and Anesthesiologistin-chief at the Johns Hopkins Medical Institutions in Baltimore.

As explained by Dr. Safar, the planned International Disaster Congress is receiving considerable attention throughout the world. "We expect 500 health professionals and others from around the world to teach us resuscitoligists what disasters really look like," said Dr. Safar. "The possible impact of modern resuscitation and critical care in disaster situations remains to be determined. This is part of the objectives of this Congress."

In their presentation, scheduled for October 2nd., Safar and Nagel will discuss basic life support at the scene by bystanders, advanced life support by members of the system, and medical and technical/medical equipment.

Dr. Safar's pioneering role in EMS commenced in the 1950's. In a 1958 paper published in the New England Journal of Medicine (258:671-677-April, 1958), he published a comparison of mouth-to-mouth methods of artificial respiration with the thencurrent chest-pressure arm-lift methods. This critical analysis led to widespread abandonment of the older procedure for the mouth-to-mouth method. In the early 1960's, Dr. Safar was instrumental in development of the nationally accepted technique of the combination of external heart compressions and artificial ventilation (CPR).

Dr. Nagel, who is also an electrical engineer, is credited with development of the nation's first true paramedic system (in Miami). In connection with his training of Miami firefighters as pre-hospital care resuscitation specialists, he combined the electrical components of a device which could transmit electrocardiograms by radio to a distant hospital receiver. Dr. Nagel serves as a member of the National Committee for Emergency Coronary Care, the ACT Foundation's body of medical advisors.

Information concerning the International Disaster Congress is available from Dr. Safar, University of Pittsburgh, 1060-C Scaife Hall, Pittsburgh, PA 15261 (412/624-2955).

ORTHO PHARMACEUTICAL CORPORATION SUPPORTS ACT

Since 1973, Ortho Pharmaceutical Corporation has been a part of the ACT Foundation family of financial supporters. Gary V. Parlin, Vice President, Marketing, at Ortho Pharmaceuticals Corporation serves as a Member of the Board of Directors of the ACT Foundation.

"We see our support of the ACT Foundation as something much more important than a mere donation of funds." says Mr. Parlin. "As a major corporation, we feel we have a responsibility to help improve emergency medical care throughout the United States, and our support of and participation in the ACT Foundation is toward that end,"

Ortho Pharmaceutical Corporation, located near Raritan, New Jersey is a leading manufacturer of gynecic medicines, diagnostic agents and products for family planning. While historically concentrating on the women's health care field, Ortho recently began a diversification program to expand its existing product lines to encompass therapeutic products for the whole family.

In keeping with its commitment to ACT Foundation goals, Ortho Pharmaceutical Corporation recently initiated a CPR training program for its employees. According to Mr. Parlin, 51 employees participated in the CPR Basic II Course and achieved certification by the American Heart Association, Hunterdon County. "We are sold on the program, and we hope that our support of



Gary V. Parlin

ACT will serve to encourage other industries to provide this training for their employees," he said.

D.O.T. PARAMEDIC PROGRAM (Cont. from Page 1)

Although official documents have become available only this month, unofficial program materials have been circulating for more than a year. In several locations, paramedic trainees have already graduated from training programs based on the new DOT materials. Generally, the program has met with praise from course coordinators, medical lecturers, program administrators and trainees.

Delay in release of the Textbook and Student Workbook is attributed to editing problems. Numerous writers contributed to these materials and wide variations have been detected in writing styles and reading levels. Current review and editing is intended to make those materials consistent throughout.

According to Bob Motley, representing DOT's EMS Branch in Washington, his office has been swamped with requests for information concerning the program. In order to facilitate distribution of information and materials, the EMS Divisions of all State Health Departments have been briefed on the program. Motley urges all interested parties to seek information or materials through their State EMS Agency or their State Highway Safety Representatives.

EMT SPECIAL SKILLS PROJECT UNDERWAY IN SIERRAS

California's Sierra mountains are the site of an experimental emergency care project involving 90 students and seven hospitals. Authorized by the Experimental Manpower Committee of the California Department of Health, the project is sponsored by the Sierra-Sacramento Valley Regional EMS Project.

Purpose of the project is to train existing rural EMS personnel in selected advanced skills. Those skills are: advanced airway management, IV therapy, defibrillation and use of certain cardiac drugs in specific instances. In addition, communications skills, extrication and special transporting procedures are being taught.

Trainees in the project are currently licensed as EMTs (Basic Life Support). However, under provisions of the pilot project, they will be permitted to utilize their new skills beyond the limits of their existing licenses. It is anticipated that new permissive legislation will be forthcoming from the California legislature as a result of the project. Utilization of the advanced skills is to continue after the two-year project is completed.

Strict requirements have been established as a pre-requisite for participation in the project. These requirements affect hospitals, nursing personnel, and EMT trainees. According to Dr. Harold L. Renollet, Medical Director at Sierra-Sacramento EMS, "our goal was an acceptable alternative advanced life support program in terms that were acceptable to the local populace. Our problems in the rural, largely mountainous areas include limited financial means and manpower, many of whom are volunteers."

Training time involved in the Sierra project is considerably less than that required for EMT-paramedic personnel. However, skill maintenance measures are much stricter. For example, formal recertification of skills is required on a monthly basis. And, according to George Moorhead, Sierra-Sacramento's Regional Administrator, "Personnel can be decertified in any of the modules if they begin to play doctor in the field."

Due to the mountainous terrain and cost factors, the program is to operate without telemetry although two-way radio communication is required. In addition to monthly testing of practical skills, practical and written retesting will occur at three-month intervals.

According to Moorhead, his office is conducting an in-depth analysis of the medical control aspects of the project, as well as the type and number of patients who can be adequately treated in the field with this limited program. "We are also keeping a close watch on morale, costs, and job satisfaction," he said.

Moorhead plans to present a paper on the project at next Fall's Meeting of the American Public Health Association in Washington, D.C. Meanwhile, information concerning this experimental project (legally permissible only under California's Health & Safety Code) can be obtained from Sierra-Sacramento Valley Regional EMS Project, 717 K Street, Sacramento, CA. 95814.

NEW YORK SOLONS RELIEVE CRISIS

As reported in the May issue of EMS Action, the combination of antiquated statutes and arbitrary insurance premium increases brought advanced life support services to a halt in several areas of New York recently. However, the recent passage of a legislative bill by the New York Legislature may present a solution to the problem.

Assemblyman Robin Schimminger, representing Western New York's Erie County, responded to the health care crisis by introducing an Act which would authorize municipalities to include paramedics in their medical liability plans. Assembly Bill 8468-A would not require paramedics covered under such a plan to be employees of the municipality, although they must be certified under the current State EMS laws.



New York State Assemblyman Robin Schimminger

In a press release issued by his office, Schimminger said, "The problem of malpractice liability insurance for EMTs and Advanced EMTs has caused a crisis for paramedic programs in Erie County. As reported in the May issue of EMS Action, spiraling insurance premiums have forced one paramedic service out of business and now threaten the county hospital's training program. These and similar occurrences throughout the state have influenced me to introduce a bill to help reduce this pressure on paramedic programs."

HEW ANNOUNCES 77-78 MEETING SCHEDULE

Section 1206 of the Emergency Medical Services Systems Act of 1973 (as amended by the EMS Amendments of 1976) calls for the Secretary (of HEW) to provide technical assistance in connection with administering the national initiative for improvement of EMS. Since the beginning of the federal program, this technical assistance has included regional workshops and national symposia.

Recently, HEW's Division of EMS announced the meeting sched-

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ule for its 1977-1978 National EMS Technical Assistance Program. As in the prior year, federal regions will be combined for purposes of conducting three Multi-Regional EMS Workshops. The Workshops have been scheduled for Chicago (October 4-5, 1977), Columbia, South Carolina (October 11-12, 1977) and Phoenix, Arizona (October 25-26, 1977).

The National Symposia for this fiscal year will begin with the EMS Policy Makers Symposium, scheduled for Fort Worth, Texas in November (see article in July issue of EMS Action). Minneapolis will be the site of next December's Symposium on Facility Categorization/Regionalization and Areawide Planning.

EMS Páramedical Personnel will be the topic of a national meeting in Kansas City in February, 1978. A National Symposium on Evaluation Methodology and Scientific Reporting of EMS Systems will be held in Seattle in July, 1978. The National Symposia will conclude with a national meeting in New York City in September, 1978. Scheduled topic for that meeting is Public Information/Education.

A new technical assistance concept will be added to the forthcoming program, which will span the 15 month fiscal period. Clinical Physician Forums are to be formulated for the major target categories. Details of this program are to be released in the near future.

CPR FILM LIST AVAILABLE

In addition to the ACT Foundation CPR motivational film, A Life in Your Hands, a number of other CPR-related films are available for rent and/or purchase from other agencies or organizations. In response to many requests for such information, the ACT Foundation has prepared a list of nine films (both motivational and training films).

Although the list may not include all such films that are available for sale or rent, it represents a listing of all films that are a familiar to the ACT Foundation staff. The list describes the various films as either training or motivational materials. Names and addresses of distributors are included, as well as price information and rental (or free-loan) availability. Prices listed for rental and purchase are subject to chage without notice.

To obtain a free copy of the film list, write: ACT Foundation, Basking Ridge, N.J. 07920.

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