

It's Not Always So Glamorous

The television image of the paramedic — the man for all seasons who handles any emergency quickly and efficiently and who never loses a life — unfortunately does not hold true in Baltimore. In fact, the majority of 75,000 emergency calls answered annually by the Fire Department's ambulance service is not nearly so glamorous as television would have it. Many of them require instant decisions about a patient's mental state, as alcoholism and mental disease are complicating factors in the majority of city ambulance calls.

That statistic came to the fore tragically last May, when a 52-year-old patient apparently suffering from alcohol withdrawal was refused treatment by a city paramedic who classified him as a "violent mental patient" and turned him over to police. He lapsed into a fatal coma while lying unattended in the back of a paddy wagon.

This newspaper's investigation of that case and of the operation of the city ambulance

Italicisms

Anyone who understands the Supreme Court decision in the Bakke case is automatically admitted to law school.

The mail was Needed, but Needle was malled.

OPEC is freezing prices for now so that the next time the sheikhs shock the West, the West will be strong enough to take it.

service has disclosed some glaring weaknesses. Rookie policemen, for example, get 100 hours of college-level training in such fields as psychology and crisis intervention, while paramedics get only three hours of such training. The Maryland Institute for Emergency Medical Services happily is setting up a crash program to train paramedics in the handling of alcoholics, drug addicts and mental patients.

On another front, Dr. John DeHoff, the city health commissioner, has proposed new guidelines that place the responsibility for patient care squarely on the paramedic, who would assume that responsibility upon arriving at the scene and relinquish it when relieved by a physician, normally at the nearest emergency room. This would make it more difficult for the medics to turn patients over to police, which has been, sadly, common practice.

These improvements, however, will not solve the basic problem, which is that the medics, well-meaning though they may be, are firefighters who take orders from firefighters, not from medical doctors trained to recognize the symptoms of alcoholism, drug abuse and mental disorders. Ironically, while the city's Fire Department has achieved national praise for keeping up with the times, the ambulance service attached to the department has fallen years behind other cities, most notably Seattle. Mayor Schaefer should appoint an official commission to study ways to improve the ambulance service. Perhaps that may require entirely removing it from the Fire Department.