

EMS IN PARADISE



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LOOKING AT the map, the Virgin Islands are three tiny dots in the Atlantic only a few inches from the U.S. coastline. In reality, however, they are three verdant isles of lush tropical growth some 1,200 miles south by southeast from Miami International Airport. A U.S. territory, the Virgin Islands, consisting of St. John, St. Thomas and St. Croix islands, are as American as Mom's apple pie but with a Caribbean flavor of fried plantain and green turtle steak. Nicknamed "America's Paradise" the islands are, at present, a somewhat troubled paradise, a little short of federal funding for their newly organized EMS system.

EMS came to the islands in January, 1976, when Kirk Grybowski, assistant

regional health planning coordinator, was promoted to EMS coordinator by Virgin Islands Commissioner of Health Dr. Roy K. Schneider.

Grybowski is a transplanted Californian who admits it took him until July, 1976, to find out what EMS was. Yet under Grybowski's leadership, the EMS program has developed at a rapid rate with well over 100 Virgin Islanders now qualified as nationally registered EMT-As. Those registered include RNs, LPNs, police officers, public officials, volunteers and Grybowski himself, who devotes a part of his hectic schedule to maintaining his skills by working odd hours in an emergency room and making an occasional ambulance run.

Grybowski's office is located on the first floor of the Department of Health building in the port city of Charlotte Amalie on St. Thomas. From here he administers his program, works out requests for funding, and continually

complains about the length of time it takes to get supplies from the continental U.S. Recently Grybowski and others were trying to find textbooks that were misplaced while en route from the U.S. mainland through air freight service. Grybowski took it in stride, admitted he was glad they had not come parcel post which can be even more unpredictable, and tried to explain the missing books to expectant students in classes on St. Croix.

Prior to the inception of the EMS program, individuals interested in working on an ambulance in the Virgin Islands only needed a ninth grade education and a Virgin Islands driver's license. While these were certainly minimal requirements, by looking at the old ambulances, it is easy to see that ambulance requirements were even less rigid. Grybowski stated, as he looked at one of the old vans with a cot inside, "It had the oxygen bottle but no regulator or connecting tubing when



our program began." These old units, one on St. Thomas and two on St. Croix, have been updated somewhat and are pressed into service only for non-emergency, routine patient transfers.

Far more impressive and serviceable are the two new van-type units on St. Thomas, a similar unit on St. John, and the two modular units in use on St. Croix. All five ambulances are built to DOT standards and are fully equipped as basic life support units.

Virgin Islanders follow the British custom of driving on the left side of the road. The roads are narrow, pot holed strips of pavement that wind their way precariously over the terrain. Grybowski holds the terrain responsible for the recent public vote not to change over and drive on the right side of the road for the convenience of the incoming tourist trade. "You have to be able to see the road's edge or chance going over the side and down the hill," Grybowski explained.

These same narrow roadways through the heart of Charlotte Amalie undoubtedly helped make the decision to use the narrower van-type ambulances on St. Thomas. During rainstorms, road conditions become even worse as raging torrents of water wind their way down from the mountain tops, chewing away portions of hillside and pavement on their way to the sea.

Being an EMT on the Virgin Islands is not all orchids and passion fruit. The training program adopted for the islands is the same 81-hour DOT program used throughout the U.S. plus a few extra requirements. In order to become registered, it is necessary to pass the National Registry examination which has been adopted by the Virgin Islands Department of Health. Nearly all of the qualifications of the National Registry have been included in the Proposed Virgin Islands Ambulance Control Act which should be signed for final approval by Commissioner Schneider at the time of publication. All Virgin Island EMTs must be recertified every two years in accordance with National Registry point system and guidelines.

Under the Proposed Virgin Islands Ambulance Control Act there are two designations of EMT for the islands. The first is the EMT-Ambulance, a basic life support technicians. The second is that of EMT-Hospital, which consists of training in advanced procedures including IV therapy, drug administration, cardiac defibrillation and endotracheal intubation. Additionally, these paramedic-level EMTs are being trained in x-ray, basic lab procedures and suturing of skin lacerations.

The original concept that the EMT should be an extension of the hospital emergency department has not been lost in the shuffle while setting up the Virgin Island's EMS system. All EMTs running the ambulances are employees of the hospital where the ambulance is stationed. They spend their time working in the hospital emergency department when not making emergency or transfer runs. The EMT-H is a primary hospital staffer along with the registered nurses and physicians of the emergency department. He also is available for field work when it is known that advanced procedures will be needed. The use of standing orders for drugs and IV therapy as well as treatment of cardiac arrest and cardiac defibrillation allow the EMT-H to work even when he is unable to make or maintain radio contact with a medical facility. Having standing orders available for use in such circumstances is important to the EMT, especially if he happens to be at sea with a critically ill or injured patient.

Sea rescue procedures are part of EMT training, particularly to the EMTs working in sparsely settled St. John, the smallest of the three islands. The sea-going rescue vessel, the Star of Life II, is stationed at St. John to ferry patients from the small island medical clinic to the larger facilities on St. Thomas and St. Croix.

A five-day clinic of intensive training was held for the EMTs working on Star of Life II by Dr. Miceal Sabia of the Connecticut Star of Life Fleet, Lou Jordan, chief training officer of the Maryland Institute of Emergency Medicine, and Ernst Schindele, president of Fairfield Medical Products. Schindele's firm supplied the rescue pacs carried aboard the vessel. Each of the pacs contains a high suction unit, pulse tach, sphygmomanometer, oxygen nebulizer/humidifier unit, IV pole assembly, manual bag mask resuscitator and stop clock. Other equipment includes a Stokes stretcher, other types of stretchers, and a flotation type backboard. Continuous monthly training sessions are being carried out in conjunction with the U.S. Coast Guard Cutter "Point Whitehorn" out of St. Thomas.

The Star of Life II is a special 42-foot Uniflite boat powered by twin 225 horsepower diesels with a hull that was originally developed by the U.S. Navy for use as a patrol vessel. A special bintype transcom door at the stern allows for ease in transferring patients from water to boat, boat to boat, or boat to dockside. The vessel carries a complete compliment of VHF communications gear and Citizens Band radio to

receive reports from CB spotters and smaller pleasure crafts that may not have expensive VHF gear on board while operating in the islands.

The Virgin Islands EMS system, according to Grybowski, "is people." He went to great lengths to credit his EMTs and paid particularly high tributes to his Chief Training Officer, Charles Roper, and to EMT Supervisor, William Farmer. Grybowski also credited EMS supporter Herman Richardson, director of the Division of Hospitals and Medical Services of the Department of Health, and John Hardy, Director of the Governor's Office of Manpower Planning (CETA) who has backed the EMS effort by funding EMT positions through the Manpower program. "Without these people, we wouldn't be anywhere," Grybowski said.

For any EMS program to exist it takes money. Grybowski said he has received excellent federal funding through DOT's National Highway Traffic Safety Administration. However, Grybowski is quick to point out most of the funds for the program have come through the Virgin Island Governor's Office of Highway Traffic Safety.

Where then is the problem with funding for the Virgin Islands EMS program? Grybowski said it lies with the U.S. Department of HEW which failed to appropriate any funds for island EMS. The three islands, with over 140 square miles of land area, constitute a populace of 100,000 Americans who are apparently being denied desperately needed funds to fully implement an advanced life support system. Like Grybowski one can only scratch his head and wonder why.

"We are rapidly breaking down barriers," said Grybowski. "Our people have an amazing ability to rise to the occasion. We have 50-year-old ambulance drivers with little or no schooling, unable to read or write, who care enough to work day and night when given the challenge and opportunity. These persons have been able to overcome half a century of deprivation to honestly qualify skillwise in basic life support. Their understanding of patient needs and caring for patients, coupled with basic life support skills, make them invaluable to EMS."

Another amazing attribute is the dedication with which the people are fighting to bring a new dawn in health care to their islands. In the months that lie ahead, it will be interesting to watch the blossoming of an already drafted Good Samaritan Act, the Virgin Islands EMT Association, and with just a sprinkle of funds, the bursting forth of a fully advanced life support system. ❀

MARYLAND EMS GOES TO THE CARIBBEAN

1 Marylanders traveling to the
2 U.S. territory of the Virgin Islands
3 may remark on the lush vegetation,
4 palm trees, and Caribbean sun. What
5 they may not notice, however, is the
6 new emergency medical services system
7 being developed. And what very few
8 would know is that the Maryland EMS
9 system played a significant role--shar-
10 ing resources, experiences, and per-
11 sonnel--in helping the Islands devel-
12 op a functional EMS system.

13 In May 1976, Kirk Grybowski,
14 EMS coordinator for the Islands, at-
15 tended the Bicentennial Emergency
16 Medical Services and Traumatology
17 Conference in Baltimore. He was par-
18 ticularly looking at the Maryland EMS
19 system and hoping to adapt ideas to
20 establish a model system for the
21 100,000 inhabitants of St. Thomas,
22 St. Croix, and St. John.

23 At that time there was no train-
24 ing for emergency medical technicians
25 (EMTs) in the Virgin Islands. Ambu-
26 lance drivers and attendants some-
27 times had only the minimal require-
28 ments of a driver's license. Cardio-
29 pulmonary resuscitation (CPR) was vir-
30 tually unknown. Ambulances were

more

1 dilapidated vehicles with broken win-
 2 dows, supplied with stretchers but
 3 no life-support equipment. However,
 4 there are now more than 100 Islanders
 5 (ranging from ambulance attendants
 6 with little formal education to Ph.D.'s)
 7 who have completed the 81-hour EMT
 8 course and are certified according
 9 to the guidelines set forth by the
 10 Department of Transportation (DOT) and
 11 the National Registry of EMTs. In
 12 addition, five new ambulances that
 13 are DOT-equipped and approved are now
 14 manned 24 hours a day by certified
 15 EMTs.

16 The initial training of the EMTs
 17 was done by a group of Marylanders.
 18 At the request of Mr. Grybowski, Lou
 19 Jordan, paramedical training special-
 20 ist at MIEMS, assembled a training
 21 cadre composed of himself as EMT in-
 22 structor; a CPR instructor; and ~~se-~~
~~veral~~ physicians and nurses.

23 As the training program progressed,
 24 potential EMT instructors were trained
 25 and did intern instructorships under
 26 Mr. Jordan in order to ensure that the
 27 Island's EMT training program would
 28 be self-sufficient. Special empha-
 29 sis was also placed on CPR, with
 30 many CPR courses given to ^{both} ~~both~~ hos-

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hital and non-medical groups.

The EMT course taught in the Virgin Islands consisted of the traditional instruction in controlling bleeding, testing for vital signs, treating shock, etc.--with two "extras" required.

Virgin Island EMTs are taught rappelling and water-rescue operations. ^{Both are helpful in rescue work.} Thousands of tourists as well as native Islanders participate in water sports or explore the rugged Island terrain where outcroppings of bare rock are common and elevations range from a few hundred to 2000 feet above sea level.

Training in sea rescues is also important because of the isolation of the Islands. The Star of Life II, the world's largest sea ambulance, is stationed at St. John and ferries patients from the smaller islands or patients who become injured or ill at sea to the large hospitals on St. Thomas. The 43-foot, unflight sea ambulance with a speed capability of 27 knots, is equipped for life-support operations and rescue in the often treacherous Caribbean waters. Equipped with rescue packs, a Stokes stretcher, other types of stretchers, and a flo-

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1 tation-type backboard, the Star of
2 Life II is staffed by an Island phy-
3 sician, ^{nurse,} and trained EMTs.

4 Utilizing the resources of Star
5 of Life II, EMTs were given special
6 training to handle water-related emer-
7 gencies by Mr. Jordan; Mike Sabia,
8 M.D., of the Star Of Life I (stationed
9 in Stamford, Connecticut); and Ernst
10 Schindele, president of Fairfield
11 Medical Products and owner/operator
12 of Star of Life I.

13 Mr. Grybowski is also working to
14 assure that Virgin Island EMTs will
15 have the opportunity to be trained
16 to the CRT level. Last summer two
17 EMTs from the Islands were trained in
18 Maryland through the cooperative ef-
19 forts of MIEMS; John Stafford, M.D.,
20 Director of EMS Programs for MIEMS;
21 the Baltimore City and County Fire
22 Departments; and Sinai Hospital. Al-
23 though they do not function as full
24 CRTs in the Virgin Islands, they are
25 utilized in hospitals to provide
26 training in taking ECGs and to assist
27 emergency department physicians.

28 When a communications system with
29 telemetric capabilities is operational,
30 they will be able to utilize their
CRT training in the field.

in [unclear]
took CRT training

1 Plans are also underway for a
2 cardiac life-support program for phy-
3 sicians, along with CPR-instructor and
4 trauma-nursing programs.

5 Discussing the Virgin Island
6 EMS program for which he continues to
7 act as consultant, ~~Mr.~~ Jordan continu-
8 ally interjects comments of praise for
9 the EMTs and for cooperating agencies
10 These include the Governor's Office,
11 Health Department, Highway Safety De-
12 partment, and the Community College of
13 the Virgin Islands.

14 that provided equipment, training sites,
15 and funding. And he remarks that
16 "if anyone wants to see what EMS is
17 all about, they should go to the Vir-
18 gin Islands to see how with no equip-
19 ment or experience they have developed
20 a spirit, pride, and ability that far
21 exceeds the initial dreams of anyone.
22 They have developed from an area that
23 had a level of EMS training that did
24 not include CPR to a tight-knit or-
25 ganization of nationally registered
26 EMTs working in hospitals, on new
27 ambulances, and on the world's largest
28 ambulance boat to utilize new ambulance
29 techniques and training."

30 The spirit and pride he talks
about are reflected in the comments

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His words remind one that EMS is quickly becoming an integral part of the Virgin Islands--as much a part as its tropical sun, palm trees, and lush vegetation.

The spirit and pride he talks about are reflected in the comments of a 52-year-old ambulance driver Carlos Wood: "The four days I've spent here have meant more to me than the 16 years I spent around the hospital. . . . I used to check in for duty, put in my eight hours, and collect a paycheck, but now I feel I'm capable of something to help a patient. I feel I can be of help to the community, my family, and myself in case of any emergency."

If Carlos Woods and other Virgin Island EMTs have their way, the Islands will soon be known for their progressive EMS system as well as for lush vegetation, palm trees, and the Caribbean sun.