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Texas EMS

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Air bag safety

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Serving Texas Emergency Care Professionals

Texas Department of Health

March/April 1998

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_____	"When Minutes Count—A Citizen's Guide to Medical Emergencies" brochure. A foldout first aid guide. Can be personalized by the EMS service. (EMS-014)
_____	"Don't Guess, Call EMS" brochure. A reprint of a Department of Transportation brochure updated with Texas photos and logo. Back panel listing of public health region offices and a "For more information, call" box. (EMS-013)
_____	"EMS Lifesavers—Career Information" brochure. Gives types of jobs, paid and volunteer, in various settings and salary ranges. (EMS-007)
_____	"EMS Questions and Answers About Citizen Participation" brochure. Answers questions about how to call, what to do and how the community can help EMS. (EMS-008)
_____	"EMS—A System to Save a Life" brochure. A 1970s title with a 1990s text, it has public health region office info and "For more information, call" box. Explains BLS and ALS. (EMS-012)
_____	"Who Who" Coloring Book. Activity book features 12 pages of injury prevention and EMS awareness tips by Who Who the safety clown. (EMS-022)
_____	(Updated) "I'm an EMS Friend" sticker. Ready Teddy in a 2-½ inch, 3-color sticker.
_____	Send information on borrowing the Ready Teddy EMS Mascot suit, available from Austin or the regional offices. Kids love him! And they learn to stay safe.
_____	Send a sample of all public information and education materials—a PIE pack. (limit 1)

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 1100 West 49th Street, Austin, TX 78756-3199
 or fax to (512) 834-6736

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Cover photo: Lewisville Fire Department responds to a car crash where air bags have deployed. Photo by Linda Gheen, Dallas, Texas.



TEXAS DEPARTMENT OF HEALTH MISSION

*To protect and promote the health of
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community systems that provide emergency
and health care for all individuals.*

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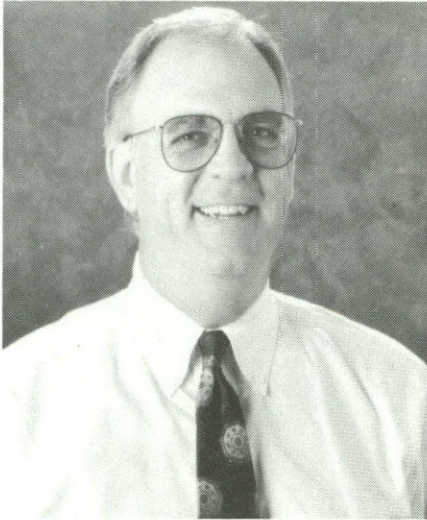
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EHCAC's new task force to take a closer look at Project Alpha rules



GENE WEATHERALL, CHIEF OF
THE BUREAU OF EMERGENCY
MANAGEMENT

It is always interesting to see what happens within the state EMS community when changes are proposed. Most response to change is predictable and in the case of Project Alpha, most of the response was predictable. What was not predictable to me was the intensity that this battle seemed to generate between two primary groups, the educators and the medical directors. The bottom line of this great debate is that the Emergency Health Care Advisory Committee decided at our conference in November that enough was enough. They took action to end the debate and establish the future of Project Alpha.

The Emergency Health Care Advisory Committee took control of the issue by appointing a Project Alpha Task Force. The purpose of this task force will be to develop a solution to the debate over continuing education and make recommendations for the future of Project Alpha to EHCAC. As soon as I saw the large number of highly-qualified people who want to serve on this committee, it became apparent to me that they would work for a positive solution for Texas. That has always been one of the fascinating aspects of EMS public debate over the years: the extreme dedication of EMS people to do the right thing for their patients. It just seems as if we have a lot of trouble agreeing on how best to do that.

Another thought comes to my mind in reference to Project Alpha: we continue to recycle some of the same issues in emergency medical service. I have heard people joke over the years that they could make a career on about four issues in emergency medical service. Continuing education would certainly have to be one of those issues. Project Alpha proposes to eliminate state-required continuing education. I don't think Texas EMS is ready to make this step and I am sure that state-mandated continuing education will be a large part of the solution to this issue.

Right now it's pretty much anyone's guess as to the final outcome of the proposed Project Alpha rules. Because of the great controversy raised over several key issues, it is certain that significant changes will have to be made before any rule changes are officially proposed to the Texas Board of Health. You can be assured that with the quality of individuals on the task force and on the Emergency Health Care Advisory Committee, a valid solution will be developed that is in the best interest of our state. 🐾

L e t t e r s

To *Texas EMS Magazine*:

RE: Joseph Bousquet, EMT
Oak Hill Vol. Fire Dept.
Jan Johnson, EMT-P
Austin EMS
Allen Latour, EMT-P
Austin EMS
Tom Holman, EMT-I
Elizabeth Payne, EMT-P
Austin EMS

On October 18 at about 9:45 p.m., the team identified in this letter saved my life. I had a sudden death heart attack, having gone into ventricular fibrillation. While I have spoken to one member, Allen Latour, I wish to thank each one of them individually. It has taken until now for me to feel up to getting this together.

Without their skilled professional response, I am certain that I would not have seen the light of another day. Even so, there were five days that were touch-and-go, and I still have to be careful. I am currently in a rehab program and am gaining strength incrementally each day.

Col. James R. Frei (Ret.)
Austin

The Siren Sounds

*The siren sounds and the lights go off
And on again
Until you arrive at their side.
Desperate for air, struggling for life,
They search your face, take your hand,
And say, not so nicely, "Help me, oh
God, help me."*

*And in a moment not counted by time,
You realize that gut-wrenching sixth-
sense
Feeling you had before you arrived is
true;
That THIS is one of THOSE calls.*

*So you go to work, working stead-
fastly,
Calmly with reassurance in your voice,
Setting a game plan and executing it
properly,
Accepting that it's impossible to
always win
For everyone lives....
And everyone dies.*

*But the game gets played every night,
And win or lose, there's always a fight,
And for that prayer of a dying pa-
tient's soul....
Please, don't call me God.*

Christina C. Bennett, EMT-P
Medstar-Fort Worth

The Bureau of Emergency
Management
mourns the passing of these
EMS friends

Roger Micheal (Mike) Helbert, of Mount Pleasant, died at home on January 7, 1998. Helbert worked for Titus County EMS as a paramedic in the 1970s and 1980s until an on-duty back injury forced him to retire from EMS. Helbert was working for Information Systems at Titus Regional Medical Center. Helbert is survived by his wife, Peggy Helbert, RN, EMT-P; and other relatives and friends at TRMC.


Danial Tharp, 22, of Dallas, died on September 13, 1997, due to injuries received during a motor vehicle crash. A paramedic, Tharp was on his way to work at Rockwall EMS at the time of the crash. Tharp is survived by his parents, a sister and other friends and relatives in Rockwall EMS.

Danny Bruce Welch, 50, of Mount Pleasant, died on January 6, 1998, from injuries received during a motor vehicle crash. An EMT, Welch had formerly served as fire marshal for the city of Mount Pleasant and was currently employed by Materials Management at Titus Regional Medical Center. Welch is survived by his wife Phyllis, daughter Dana and many other relatives and friends.

Answers

Continuing education test
in January/February
Texas EMS Magazine:

- | | | |
|------|-------|-------|
| 1. B | 8. C | 15. B |
| 2. C | 9. C | 16. D |
| 3. C | 10. B | 17. D |
| 4. C | 11. C | 18. A |
| 5. A | 12. D | 19. B |
| 6. B | 13. C | 20. C |
| 7. A | 14. C | |

 **EMS Fact:** Battering is the single largest cause of injury to women in the U.S. It exceeds cancer deaths, muggings and auto wrecks combined.

By David Pearse, EMT-P

Partnerships between firms and education benefit both

Kilgore College in Longview recently received a used ambulance from Advanced Ambulance Services of San Antonio. This ambulance will be used to teach students how to load and unload patients, work in the confined space of a high-top van and operate various switches and radios associated with ambulance operations.

This recent donation made me wonder why more ambulance services do not cooperate more fully with academic programs.

When I first starting teaching the paramedic program, I had to teach using a Life-Pak 5. The local EMS services were using Life-Pak 10s and then converted to Zoll 1400s. This meant all students were trained one way in class and then taught another way in the field. Another example: our program has used a two-person stretcher to teach patient loading and unloading, while local services were using Ferno 93s, a one-person stretcher.

Local ambulance services need to be in constant contact with EMS education programs to ensure techniques and protocols for a given area are being taught to students.

A joint partnership for education can benefit both entities. For instance, if a service decides to buy some new 12-lead monitor/defibrillators, they might order

one or two extras. The service could then donate the equipment to the community college EMS program. This donation serves as a tax-deductible gift, allows students to learn on modern equipment, and gives excellent regional publicity for the local EMS service. All outdated drugs and IV fluids can easily be utilized for training. Backboards that have been replaced, and oxygen apparatus and endotracheal tubes that have been opened but not used are perfect for the college teaching scenarios. These tax-deductible donations also serve to keep college costs down for students wanting to learn about EMS or those wanting to further their careers. Since the college doesn't have to budget for new equipment, the students don't have to pay the price.

Many community colleges and local EMS services are working together in this partnership, but far too many are not. I hope that all EMS services can contact their local EMS education entity and find out how they can help shape young minds and new students in the ever-changing field of EMS. 🌱

David R. Pearse is the EMS program coordinator for Kilgore College in Longview. He was named EMS Educator of the Year at Texas EMS Conference '96.

Web pages

For an interesting read about how the business concepts of supply and demand have drastically changed the course of EMS, click on <http://www.merginet.com/tgp/9702/color.htm>.

Click on <http://www.tdh.state.tx.us/hcqs/ems/certqry.htm> if you need to check the status of an EMS certification.

Finding the names and addresses for the Texas Board of Health is as easy as clicking on <http://www.tdh.state.tx.us/comm/board/Boardmem.htm>. The Texas Board of Health, the lead committee for TDH, approves rules for TDH.

Looking for national or regional information about diseases and injuries? Take a look at the Centers for Disease Control and Prevention web page at <http://www.cdc.gov>. For Texas-specific mortality information, click on TDH Bureau of Vital Statistics web page at <http://www.tdh.state.tx.us/bvs> and find Publications.

The Commission on Accreditation of Ambulance Services (CAAS) has accreditation standards on-line at <http://www.caas.org>. The CAAS newsletter, *Commission Review*, is also accessible through the web site.

The National Highway Traffic Safety Administration has posted the latest news about Drunk and Drugged Driving (3D) Prevention Month (December) on the web at <http://www.3dmonth.org>.

The Safe Communities Service Center web site has information and resources for people involved in Safe Communities programs and other traffic safety efforts. It can be found at <http://www.nhtsa.dot.gov/people/outreach/safecomm/ServiceCenter/default.asp>.

Safe Ride News, a quarterly newsletter covering child occupant, bicycle and pedestrian safety issues, is available for \$39 a year from Safe Ride News, 117 E. Louisa Street, Box 290, Seattle, WA, 98102, telephone (206) 364-5696, or email saferide@twbc.com.

TEXAS EMS CERTIFICATIONS AS OF JANUARY 12, 1998

ECA	6,984
EMT	23,935
EMT-I	3,807
EMT-P	11,373
TOTAL	46,099
COORDINATOR	399
INSTRUCTOR	1,959
EXAMINER	2,281

EMS news

A compilation of news from around the state and nation



Gary Warren, chief, Austin Fire Department

CTTC announces new address

Central Texas Trauma Council moved to a new location in January. The new address is CTTC, 703 N. Main, Suite A, Belton, Texas 76513. Their new phone number is (254) 933-8762; the fax number is (254) 933-2280.

New Austin fire chief appointed

In December, the City of Austin appointed Gary G. Warren to be fire chief for the Austin Fire Department. Warren started his firefighting career in Austin in 1973, and has served as acting fire chief since July 1997.

Hospital restocking of ambulance supplies may be illegal

According to the December issue of the *Journal of Emergency Medical Services*, the U.S. Department of Health and Human Services Office of Inspector General issued an advisory opinion that a hospital could be violating the "anti-kickback" statute if it restocks ambulances with supplies and medications. Such an arrangement poses the risk for improper steering of patients and unfair competition. According to the OIG: "Patients in need of ambulance services are often in a vulnerable state, and their choice of emergency room may be influenced by ambulance service personnel. In these

circumstances, where the payments relate directly to the delivery of patients, remuneration paid by a hospital to an ambulance service, including the provision of free goods, would be highly suspect." Services that have or are considering restocking agreements with hospitals should seek legal or expert advice concerning the agreements.

Wellness program developed by IAFC, IAFF

The Fire Service Joint Labor Management Wellness-Fitness Initiative, a new comprehensive wellness program, aims to maintain the physical fitness of fire service personnel. Developed by the International Association of Fire Chiefs and the International Association of Fire Fighters, the program focuses on overall fitness and rehabilitation and models the major components of medical exams, physical fitness programs, rehabilitation, behavioral health and data collection. The program's goal is to maintain the life-long physical and mental capabilities of fire fighters, which can also lead to significant cost savings in lost work time, worker's compensation and disability claims. The program package includes a manual and an introductory videotape. Both IAFC members and nonmembers can purchase the program by calling (703) 273-9815 ext. 2; IAFF members may obtain a copy through the IAFF headquarters in Washington, D.C.

EMS Fact: Universal bicycle helmet use by children ages 4 to 15 would prevent 39,000 to 45,000 head injuries, and 18,000 to 55,000 scalp and face injuries annually.
—National Highway Traffic Safety Administration

Williamson County EMS gets operations director

Jeff Hayes of Austin recently joined Williamson County EMS as the director of operations. Hayes has worked with Lexington EMS and Austin EMS. Prior to joining Williamson County EMS, he spent five years as the director of EMS Education at Austin Community College.

NAEMT elects officers

The National Association of EMTs elected officers for the 1997-98 fiscal year at OUTLOOK, NAEMT's annual conference, in October. Deborah Knight-Smith of Camden, Arkansas, was elected vice-president; John Fitzsimmons of Fayetteville, Tennessee, was elected secretary; and Bruce Shade was elected treasurer.

Calling all authors....

A collection of stories about the caring and strength seen daily by EMS personnel is currently being assembled. If you have a short story to submit to the collection, contact Gregg S. Margolis, 103 Laurel Court, Pittsburgh, PA, 15202-1156, or email gmargoli@pitt.edu.

National hotline developed for clinicians treating exposures to blood-borne pathogens

By calling (888) 448-4911 from anywhere in the U.S., health care workers can gain access to the National Clinicians' Post-Exposure Prophylaxis Hotline, or the PEPLine. Staffed 24 hours a day, the PEPLine is answered by physicians prepared to give clinicians information, counseling and treatment recommendations for workers who have

suffered needle-stick injuries and other occupational exposures to blood-borne pathogens that can lead to serious infections or diseases.

EMS Medical Director patch developed

A patch that EMS medical directors can wear to identify themselves on scene has been designed by James Shamard, educational development coordinator, Austin EMS. Similar in shape to the EMS patches designed by TDH, the patch has a bright yellow background with a caduceus in the center of a blue Texas. The words "Emergency Medical Director" surround the design.



New EMS medical directors patch developed by Austin EMS

Partnership for a Walkable America created

The Partnership for a Walkable America program, an alliance of the National Safety Council and organizations, agencies, businesses and individuals, was created to reduce the number of pedestrians killed or injured in collisions with motor vehicles. The PWA is aimed at making walking safer, creating "walkable" communities and promoting walking as a way of improving health and lowering health care costs. For information, contact the Partnership for a Walkable America, c/o National Safety Council, 1121 Spring Lake Dr., Itasca, IL 60143, or call (630) 285-1121.



Suspect family violence?

Statute requires that *you* take action

By
Mark Huckaby,
EMT-P

PHOTO ILLUSTRATION BY
CHUCK GEFFEN/Texas
DEPT. OF HUMAN SERVICES



One night our unit responded to a person who had fallen in a house at the end of a lonely stretch of county road. There was no one flagging down the ambulance as the unit turned to enter the yard in front of the house. We knocked on the door and heard a faint whimper from inside repeating, "Help me. Someone please help me." When we opened the door, we saw a weathered-looking woman sitting on the floor, leaning against a couch. Her face was bruised and swollen and she was sobbing. Blood poured from her nose. She said she had fallen down the steps on the front porch, but we noticed there was only one step leading to the porch from the soft grassy yard.

Did you know that Chapter 91 of the Texas Family Code requires medical professionals such as EMS personnel to notify of legal rights persons whose injuries medics believe were caused by family violence? This statute requires you as an EMS professional to do three things. They are:

1. Immediately provide the person with information regarding the nearest family violence shelter center; and
2. Document in your patient care report that you gave the patient the above information and why you suspect the injuries were caused by family violence; and
3. Give the person a written notice in both English and Spanish. (*see next page*)

Mark A. Huckaby has been involved in EMS since 1979 in Nashville, Tenn., and San Antonio. He joined TDH in 1996.

The notice must be substantially in this form:

Notice To Adult Victims Of Family Violence

It is a crime for any person to cause you any physical injury or harm **even if that person is a member or former member of your family or household.**

You may report family violence to a law enforcement officer by calling the following numbers:

_____ (fill in telephone number of nearest law enforcement offices, usually 9-1-1)

If you, your child or any other household resident has been injured or if you feel you are going to be in danger after a law enforcement officer investigating family violence leaves your residence or at later time, you have a right to:

Ask the local prosecutor to file a criminal complaint against the person committing family violence; and

Apply to a court for an order to protect you. You may want to consult with a legal aid office, a prosecuting attorney or a private attorney.

A court can enter an order that:

- (1) Prohibits the abuser from committing further acts of violence;
- (2) Prohibits the abuser from threatening, harassing or contacting you at home;
- (3) Directs the abuser to leave your household;
- (4) Establishes temporary custody of the children or any property.

A violation of certain provisions of court-ordered protection may be a felony. Call the following violence shelters or social organizations if you need protection:

(Fill in name and number of local organization, or put the number of the National Domestic Abuse Hotline at 800/799-SAFE (7233) or for TDD, 800/787-3224.)

The statute also provides immunity from civil liability for persons reporting suspected family violence. The exception to this immunity clause is a person who reports his or her own conduct or who otherwise reports family violence in bad faith. I encour-

age each EMS provider to learn about the resources available in their community. The information learned and shared with others may save a life.

The National Domestic Violence Hotline has a website at: ndvh@www.inetport.com.

Looking for the signs of abuse

Is your patient being emotionally or physically abused? If you answer yes to several of the following questions, advocates at the National Domestic Violence Hotline urge you to let your patient know about the hotline's 24-hour, toll-free number: 800/799-SAFE.

- Does he/she appear anxious, depressed, withdrawn and reluctant to talk?
- Does his/her partner criticize him/her in front of you, making remarks that make you uncomfortable?
- Do you see or hear about repeated bruises, broken bones or other injuries that reportedly result from "accidents"?
- Have there been suicide or homicide attempts in this family?
- Does his/her partner try to control his/her every move, make his/her account for his/her time and accuse him/her of having affairs?
- Is there alcohol or drug abuse in the family?

For more information or for a list of free brochures on family violence, contact the Texas Council on Family Violence, 8701 N. Mopac Expressway, Suite 450, Austin, Texas 78759; (512) 794-1133; fax, (512) 794-1199.

Texas EMS Conference '98

November 22-25, 1998

Austin Convention Center
Austin, Texas



- Choose from more than 100 excellent continuing education workshops over three days taught by the leaders in EMS in Texas. You'll learn the latest advances in prehospital patient care, as well as having the opportunity to brush up on the basics.
- Top-quality preconference classes such as a two-day high angle rescue class, a two-day cave class, plus many of the favorites from past years.
- Learn about the latest in the 80,000 square feet of exhibit space filled with state-of-the-art information and products.
- Your chance to network with 2,500 of your EMS friends!
- Look for more information, including a registration form, in the May/June issue of *Texas EMS Magazine*. If you have questions, please call us at (512) 834-6700 or visit our web site at <http://www.tdh.state.tx.us/hcqs/ems/98conf.htm>.

Conference Hotels

Radisson \$70/\$95 (512) 478-9611	Embassy Suites \$95/\$99 (512) 469-9000	Omni Hotel \$70/\$95 (512) 476-3700	
Hyatt \$70/\$95 (Host Hotel) (512) 477-1234	Four Seasons \$95/\$105 (512) 478-4500	Marriott Capitol \$70/\$85 (512) 478-1111	Sheraton \$70/\$95 (512) 480-8181

Rates listed are single/double

Look for registration information and a listing of the preconference classes in the May/June issue of *Texas EMS Magazine*.

Learning the ropes

Students get tied up in knots at Texas EMS Conference class

By
Maria Minaar, EMT

Do you know how to tie a bowline? When it's best to use a steel carabiner? How do you rescue someone, literally, by the seat of your pants?

I didn't either—that is, not until one crisp and sunny weekend in Austin, when I attended a high angle rescue class and discovered a whole new way to get an adrenaline fix—not to mention some really good training, and some really sore muscles. (Well, YOU try rappelling down the Austin Fire Tower several times in one day, and see how you feel).

Of course, it may seem quite ridiculous for someone from East Texas to take a course like this—after all, our steepest cliffs are the ones that lead down to the drainage ditches on either side of the highway—but in EMS you may as well be prepared for everything. Besides, I try to do something a little scary every two months, just to “stretch” a little, and I am very definitely not comfortable with heights. Still, thanks to the patience of the instructors, I was rappelling out of the seventh-story window of the fire tower by the end of the first day, and dragging “patients” (fellow students), trussed up like chickens, in Stokes baskets up almost-vertical cliffs in between rocks and underbrush on the second day.

It will take a few more classes before I am able to retain even half of what I learned during this memorable weekend in November (at least, that will be my excuse for going back and doing this all over again), but here are a few things I remember:

1. “This is not my emergency” (quote from Rick Lind, instructor). By reminding yourself at all times that this is the victim's problem—not your own personal one—you should be able to

stay cool and be objective enough to THINK first and make the right decisions, rather than rushing into something that will jeopardize your own safety as well as the patient's. After all, both of your lives may be, quite literally, hanging by a thread.

2. How you tie your knots is all-important, and can also make the difference between life and death (or serious injury). A good knot should also be “pretty”—if it looks like a mess, it probably is.
3. Technique, rather than brute strength, is what gets the job done.
4. More weight needs more resistance against gravity. Therefore, if you're going to have a double weight on the rope (moving someone from their line to yours), also double the amount of rope going through your “figure-eight” for better friction to prevent a runaway descent.
5. Always protect a patient's face from falling debris.
6. An insignificant-looking loop of cord called a “prussic cord” can actually hold your weight and save your life.
7. Always have a backup line on everything.
8. Safety first, safety first, and safety first.

Maria Minaar, an EMT with Groveton Volunteer Fire Department, took the basic and advanced high angle rescue classes at Texas EMS Conference '97. The high angle classes will be combined into a two-day, 16-hour course at Texas EMS Conference '98.



Maria Minaar, left, says she overcame her fear of heights to take the high angle rescue classes offered at Texas EMS Conference '97.

Keeping rescuers healthy

Statistically, more than 100 Texas medics will die this year from heart-related diseases. Are you at risk?

By
Barry Sharp, BS, EMT, CHES

As street-savvy emergency care providers, we have all faced the loved ones left behind when CPR fails, picked up cancer patients for what we (and they) know will probably be their last trip to the hospital, and seen diabetics with their blood sugar out of control.

And most of us probably think these health problems won't happen to us. After all, we know the signs and symptoms for early detection and can recognize our own health problems before it becomes too late.

But do we really? Are we proactive in our efforts to promote our own health?

Assuming that Texas' 47,000 EMS personnel reflect the state's population and average health status, about 352 Texas medics will die this year. Of those, about a third (108) will die of heart-related diseases, nearly a fourth (82) will die from cancer, and another 70 will die from other preventable chronic and lifestyle-related diseases.

A 1992 survey of a volunteer fire department in Travis County showed that as a group, members of volunteer emergency services have much of the same health problems as the general public. They suffer or are at risk for cardiovascular diseases (particularly hypertension and high cholesterol), cancer and diabetes. They abuse tobacco and consider themselves overweight and don't participate in regular physical activity either on their job or during their leisure time.

Last summer, the National Fire Protection Association (NFPA), who tracks the deaths of firefighters annually, released the 1996 statistics. The good news is that for the fourth straight year, less than 100 firefighters suffered line-of-duty-related deaths. Of those, approximately one-third occurred responding to or returning from a call, another third were on the fire ground and nearly eight percent were at a non-fire emergency. The cause for nearly half of the deaths was heart attacks.

Cardiac arrest was an equal-opportunity killer, striking regardless of the type of department or age. Heart attacks were the leading cause of death for both career and volunteer firefighters, with the youngest death reported being a volunteer under the age of 30. Heart attacks frequently struck those in the

40s and 50s, but most occurred to firefighters over 60 years of age.

So is it safe to assume that we as emergency personnel are just as likely to suffer chronic health problems? Obviously, yes. Just as we need to protect ourselves from injuries and bloodborne pathogens, we should strive to protect ourselves from the chronic and disabling diseases by taking steps to promote the health of emergency personnel before they go down.

The goal of having a healthy workforce is growing nationwide as more and more worksites, from large corporations to small companies, are investing in worksite health promotion efforts. The emergency services became involved in this effort in the late 1980s when various groups, from the National Fire Academy to professional associations, began developing "how-to" manuals. An emphasis on health promotion came in 1987 when the National Fire Protection Association developed standards for the fire service. The NFPA 1500 guidelines go into great detail about developing and managing comprehensive wellness programs.

The process for developing a comprehensive wellness/health promotion program involves getting input and buy-in from all levels of the organization. While the programs may differ to meet the specific needs of a department's workforce, the basic concepts focus on increasing physical activity to 30 minutes of moderate activity most days of the week; developing and maintaining good nutritional habits; identifying (and controlling) lifestyle risk factors for various diseases; and helping participants reach an optimal state of physical and mental health.

Health, by definition, is more than just being free from disease and pain. Good health allows us to thrive, not just survive. Promoting your own health and physical well being isn't just for movie stars and models, it's for you.

References:

1995 Texas Vital Statistics, Bureau of Vital Statistics, Texas Department of Health, 1996.

NFPA Journal, National Fire Protection Association, July/August 1997, (91), 4, 46-60.

Texas EMS Magazine, Bureau of Emergency Management, Texas Department of Health, September/October 1997.



Sharp, a nationally-certified health educator with the Texas Department of Health, is a senior firefighter/EMT with Travis County Fire Control in Austin. This article is the first of a number of articles that will focus on health promotion activities for emergency personnel. Upcoming topics will cover physical activity, nutrition, risk factors, stress management and tobacco abuse, and activities emergency responders can do to remain healthy. For more information, call Sharp at (512) 458-7111, ext. 2665.

Basic recommendations for good health:

- **Be physically active.** The U.S. Surgeon General's office recommends at least 30 minutes of moderate physical activity on most days of the week. Instead of watching TV, shoot some hoops or go for a walk!
- **Eat right.** Try to get five servings of fruits or vegetables at least five days a week, and eat meat and other high fat foods in small amounts. Try an apple instead of a cookie.
- **If you use tobacco, stop.** If you haven't started using tobacco, don't. Tobacco in all forms has been linked to numerous health problems.
- **Know your disease and lifestyle risk factors** and take steps to minimize your risk of developing a chronic health problem. If you don't know your risks or what steps to take, talk to a doctor, nurse or health educator.

Is your EMS service mentioned in Local and Regional EMS News?

It needs to be! Are you planning a fundraiser? A training class? A public education program? Do you have new people on board? Have you elected new officers?

Send your news to:
Texas EMS Magazine
Kelly Harrell, Editor
Bureau of Emergency
Management
1100 West 49th Street
Austin, Texas 78756-3199
(512) 834-6700

We welcome letters to the editor on EMS issues, magazine articles or other topics of interest. We print letters to the editor as we have space.

Normangee receives donation from recipe contest

The Normangee Star reported that the Normangee EMS and Volunteer Fire Department received \$5,000 from Kay and Steve Parisi in November. Kay Parisi won \$5,000 as a runner-up in the grand championship of the 1997 Newman's Own and Good Housekeeping Recipe Contest. Newman's Own, a specialty-food company owned by actor-director Paul Newman, requires that all contest winnings be donated to charity. Parisi and her husband donated the money to NEMS and NVFD. The two departments will equally share the donation.

Kilgore College receives donated ambulance

Kilgore College Emergency Medical Technology Program in Longview received an ambulance donated for training purposes. The 1984 Ford van will be used to

show students proper techniques for loading and unloading patients and how to work with patients in the ambulance. The ambulance was donated by Advanced Ambulance Services in San Antonio.

King's Daughters Hospital participates in AHA Heartwalk

Employees of King's Daughters Hospital in Temple, along with Ready Teddy, participated in the American Heart Association's Heartwalk in November. Because of the good employee participation, King's Daughters Hospital contributed a large donation to AHA.

Paris "Think Child Safety" wins safety award

The City of Paris and the "Think Child Safety" program were awarded the 1997 Allstate Safety Leadership Award for Allstate's Texas Region in October 1997. The city received a

This ambulance was donated to Kilgore College EMT Program by Advanced Ambulance Services, Inc., of San Antonio. The ambulance will be used to teach students proper loading and unloading techniques, and how to work with patients inside an ambulance.



LOCAL AND REGIONAL EMS NEWS

A large group of King's Daughters Hospital employees, along with Ready Teddy, walked in the American Heart Association Heartwalk in Temple. The AHA Heartwalk raises funding for AHA's mission of educating the public about cardiovascular diseases.



special award and a \$2,000 grant. Allstate Safety Leadership Awards are annually given for a national safety program and a community safety program, and to an Allstate agent who conducts a successful home, auto or personal safety program for the public.

Rural/Metro - Waco sponsors Don Woods' Memorial Tour of Lights

Rural/Metro-Waco sponsored its Don Woods' Memorial Tour of Lights program for local retirement centers during December. Rural/Metro personnel assisted nursing home and retirement center residents onto buses and drove them through local holiday lighting displays. The residents received refreshments and flowers at the tour's conclusion. Rural/Metro renamed the tour this year in honor of Don Woods, a Rural/Metro-Waco employee who was fatally injured in a motor vehicle crash two years ago.

The following news items happened during Texas EMS Week 1997. These events can be used as inspiration for your community activities during Texas EMS Week, May 17-23, 1998.

Waskom VFD/EMS educates elementary students

Waskom VFD/EMS took an ambulance and a rescue truck to the elementary school and allowed the children to tour the ambulance. EMS personnel explained the uses of the equipment in the ambulance and distributed coloring books and pencils to the children.

Wimberley EMS holds cartoon contest

Wimberley EMS celebrated Texas EMS Week 1997 by holding a cartoon contest highlighting safety and introducing a new safety citation program. Winners of the cartoon contest were honored in each elementa-

ry grade and presented with a ticket for a complimentary snow cone or small yogurt. The cartoons were displayed at area banks, at the EMS station and in the Wimberley View. The new safety citation program allows EMS personnel to reward children who pay attention to safety rules. The citation is a business-size card that says "You were caught being a safe kid" and can be redeemed for a snow cone or a small yogurt.

La Porte EMS recognized for service to community

The City of La Porte EMS was recognized by the *Bayshore Sun* for service to the community, with articles and photos about EMS and Texas EMS Week.

Little Elm FD gives vehicle tours

Little Elm FD sponsored an open house during Texas EMS Week, allowing the public to tour the ambulances and fire

LOCAL AND REGIONAL EMS NEWS



From right, White Deer VEMS personnel Grady Milton, Rod Immel, and Dean Wheeler put the final touches on a covered area at the local pool. This area was built to allow parents to be more comfortable while watching their children in the pool.

vehicles. Red E. Fox made several appearances around the Little Elm area and the *Little Elm Journal* recognized LEFD for its community service.

White Deer VEMS increases safety, comfort for local pool

White Deer VEMS, in the Panhandle, designed and built a shade area beside the local pool. The shade area allowed parents and adults to stay comfortable while watching their children in the pool area.

Belton FD sponsors EMS/Rescue Expo

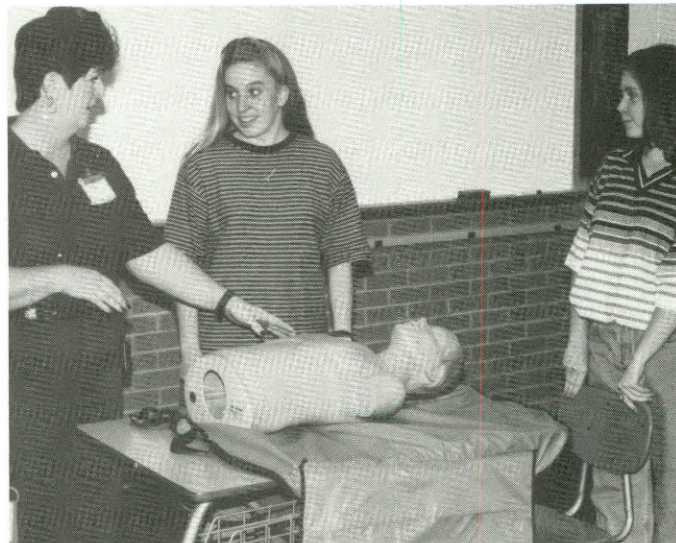
Belton FD, Belton Firefighters Association and Wal-Mart sponsored an EMS/Rescue Expo during Texas EMS Week 1997. Approxi-

mately 300 people attended the exposition and learned about the 9-1-1 system, child passenger safety seats and seat belts, CPR, and many other first aid demonstrations. A mock extrication, AED demonstrations, intubation demonstrations and blood pressure screenings were also performed.

Hardeman County EMS promotes 9-1-1 to community

Hardeman County EMS, in Quanah, held a KidCare ID photo event at a local grocery store. While identifying more

Dana Hendrix, EMS director, Friona Ambulance Service, left, teaches CPR to two high school students in Friona. FAS taught CPR to high school students and injury prevention to elementary students during Texas EMS Week 1997.



LOCAL AND REGIONAL EMS NEWS



Hardeman County EMS gave out EMS and 9-1-1 information to the community and made photo IDs of more than 100 children. Pictured with Red E. Fox, the 9-1-1 mascot, are Jim McIntier and Sonya Richardson.

than 100 children, HCEMS handed out Ready Teddy coloring books, 9-1-1 materials and other freebies. Red E. Fox handed out balloons and taught the children about calling 9-1-1.

Kirby EMS visits shoppers and seniors

Kirby EMS held blood pressure screenings at local grocery stores and at the senior citizen center. They also presented EMS, CPR and 9-1-1 education programs at area schools.

Port Aransas EMS accompanies physically-challenged on fishing trip

Port Aransas EMS personnel accompanied two fishing trips for physically-challenged people in conjunction with a Safe Boating Day held at the Port Aransas Coast Guard Sta-

tion. PAEMS also held CPR classes for the public, passed out EMS and first aid brochures and performed blood pressure screenings during Texas EMS

Week. PAEMS, along with Port Aransas Police Department and the Port Aransas animal control officer, taught area sixth grade children about bicycle safety,

Linda Gillespie, EMT, watches as two sixth grade students strap another student to a backboard. Port Aransas EMS moulaged the students, showed the students how those particular injuries would be treated, and then allowed them to treat the "injured."



LOCAL AND REGIONAL EMS NEWS



Two members of Nolanville Fire/EMS demonstrate how a child can be immobilized on a backboard. Nolanville Fire/EMS participated in a display of fire trucks, ambulances, school buses and air ambulances during Texas EMS Week 1997.

seat belts and animal safety. The children were then mouled and sent through different stations, where they learned how to care for those injuries and saw demonstrations of EMS equipment.

Frona Ambulance Service teaches CPR and safety

Frona Ambulance Service taught CPR to the juniors and

seniors in the high school and, with Ready Teddy, taught injury prevention and proper use of 9-1-1 to area elementary students. FAS also presented perennial bedding plants to a local nursing home and gave flowers to the oldest residents of the home. FAS and EXCEL Corp., a manufacturing facility, met to coordinate hazmat and evacuation policies to enable faster response within the plant.

The city of Friona also held a banquet to honor EMS volunteers.

Nolanville Fire/EMS displays rescue vehicles

Nolanville Fire/EMS participated in a display of fire trucks, ambulances, school buses and air ambulances. Emergency personnel discussed safety topics such as bus safety, bicycle safety, fire prevention and smoke detectors, and performed blood pressure screenings. The public also toured the vehicles while emergency personnel demonstrated equipment.

Temple Fire Department recognized for training

Temple Fire Department was recognized for paramedic training by the *Temple Telegram*, which printed a proclamation of Texas EMS Week. TFD also participated in a multi-casualty incident drill.

Belton FD and other local providers demonstrate extrication techniques during a mock extrication as part of an EMS week celebration.



LOCAL AND REGIONAL EMS NEWS

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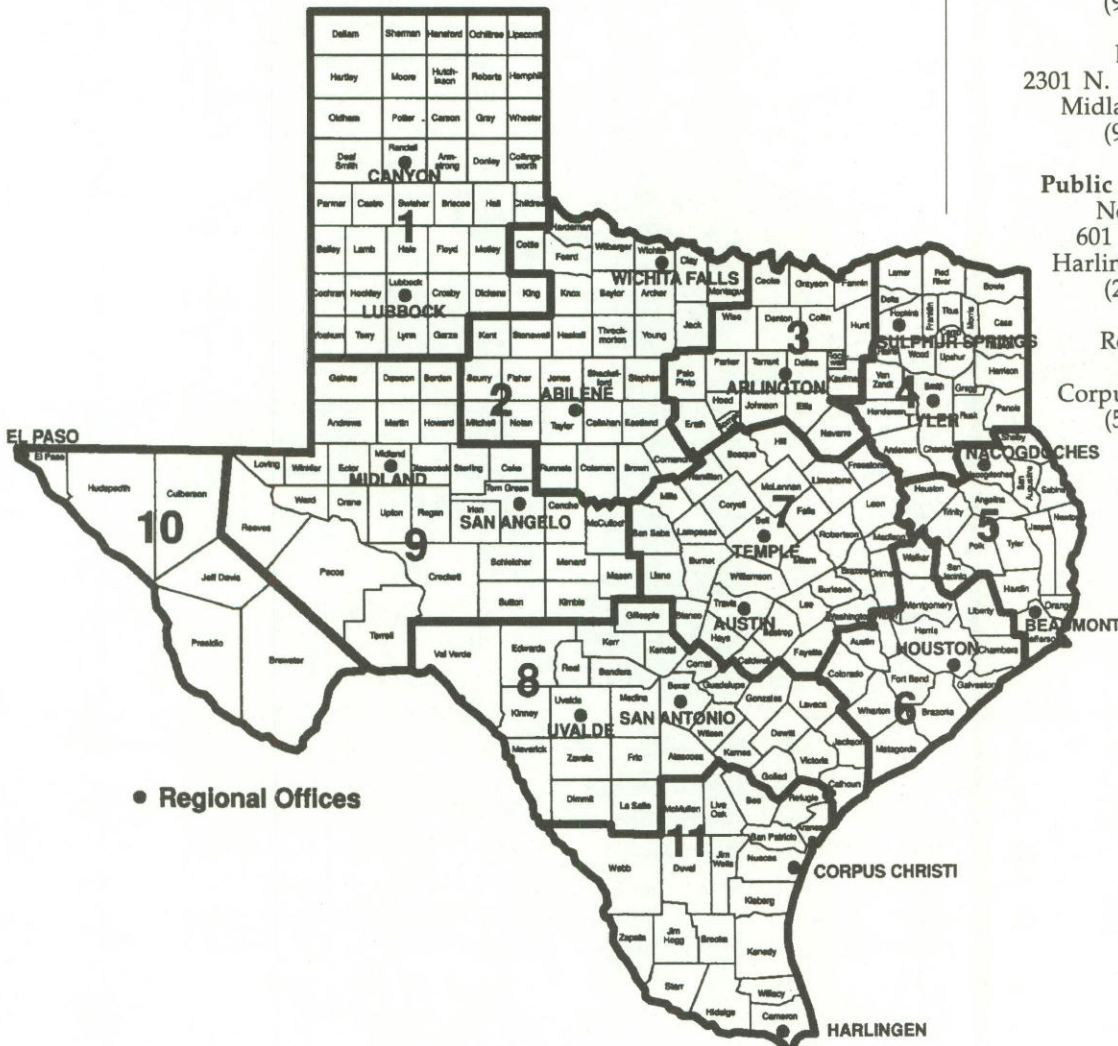
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By
Neil Coker, BS,
EMT-P

Frequently asked questions about EMS Education

Neil Coker is the state EMS training coordinator. Call him at (806) 743-3218 or email him at ALHNBC@TTUHSC.EDU

Q. *I'm teaching an EMT-Basic course which includes 120 classroom hours. Since this is the minimum amount of time required by the rules, does this mean that a student who misses a class cannot become certified?*

A. Not necessarily. The clock hour requirements at each training level establish the minimum time which must be included in the course for it to be approved. However, criteria for successful course completion are set by course coordinators and medical directors. Based on the attendance policy you establish as course coordinator, a student might be permitted some absences before being ineligible to complete the course. Successful course completion should never be based on "seat time." It should be based on evidence that the student possesses the knowledge, skills and attitudes necessary to function effectively as an entry-level EMS practitioner.

Q. *I've heard I may be able to get CE credit for college courses. If this is true, what should I do to earn the credit?*

A. You can receive credit for relevant academic courses completed during your current CE reporting period with a grade of "C" or higher. If you have course work that you would like evaluated, send a copy of the transcript showing grades and credit awarded to: John Rinard, EMS Program, TTUHSC, 3601 Fourth Street, Lubbock, TX 79430. With the transcript provide:

- A brief description of the course content like the ones found in a college catalog. Please do **not** include copies of course schedules or syllabi;
- Your expiration date or CE reporting date; and
- Your return mailing address and your telephone number.


Within two weeks you will receive


a letter documenting the CE credit awarded. It will be your responsibility to assign the hours to the appropriate content areas.

Q. *I've heard that there is a Basic EMT course available by CD-ROM. Is this program available in Texas?*

A. The American College of Pre-hospital Medicine (ACPM) has developed an EMT course that can be taught using a combination of computer-assisted instruction and hands-on skills teaching and testing sessions. However, ACPM has not yet submitted the self-study and completed the review process required for approval to offer this course in Texas. Until the course has been approved, individuals completing it will **not** be eligible to become certified as Texas EMTs.

Q. *Is there any way I can earn continuing education credit using the Internet?*

A. Two organizations currently have been approved to offer Texas EMS continuing education credit using the World Wide Web: Emergency Medicine Internetwork (www.eminet.com), 1002 Gemini, Suite 130, Houston, TX 77058, (713) 488-5461; and Public Safety Consultants, 2105 North D Street, Midland, TX 79705, (915) 683-7826. On-line activities approved for EMS continuing education credit by other states also will be accepted. For example, if you are surfing the Web and discover an on-line CE program approved by the North Carolina Office of EMS, you may apply credit from this program to your Texas requirements. Please be sure that any documentation you receive from the CE provider indicates the name of the agency that approved the program. 

 **EMS Fact:** On an average night, 1,104 women and children seek refuge in shelters across Texas because home is not a safe place to be.

By
Linda Reyes

Frequently asked questions about EMS Standards

Q: *I have been a Texas-certified paramedic for eight years. How will paramedic licensing affect my paramedic certification?*

A: Paramedic certification will not be affected by licensing. Paramedic certification and licensing are two different credentials. Certification may be a prerequisite for licensing but you can continue to be a certified paramedic without applying for license. Paramedic licensing will be an option for those who meet qualification criteria.

Q: *I need information on how to become a licensed paramedic. What do I need to do and how do I apply?*

A: In 1997, the 75th Legislature passed a statute to license paramedics in Texas. The statute dictates that the licensed paramedic must complete a curriculum that includes college-level course work. The Texas Board of Health is charged with adopting the rules that will govern licensed paramedics in Texas. Currently, these rules are in draft stage and can be viewed via Internet at: www.tdh.state.tx.us/hcqs/ems/alpha.htm. Until the rules have been finalized and adopted, there is no application process for licensure. We

expect finalization of the rules in the fall of 1998.

Q: *I read that Texas will accept the National Registry exam when someone is applying for initial Texas EMS certification. I am up for recertification in Texas and I am also planning to sit for the National Registry exam soon. Can the National Registry exam substitute for the written CE Evaluation?*

A: While you can use the National Registry test for the initial certification exam, the certification rule does not specify that the National Registry exam can substitute for the recertification CE Evaluation. Everyone applying for timely recertification in Texas must take the written recertification CE Evaluation to complete recertification requirements.

Since you will be taking the National Registry exam, passing the exam can count towards your Texas continuing education (CE) hours. CE credit for passing the National Registry examination is an option only once during the four-year certification period. The CE content area breakdown for the National Registry exam is as follows:

Exam Level	Preparatory	Trauma	Cardio	Medical Emerg.	Special Patients	Add'l Elective	Total Hours
EMT	3	4		8	5		20
EMT-I	4	6		11	6	3	30
EMT-P	5	7	9	9	6	4	40



March/April 2000 CE Summary Report Due

If your certification expires in March or April 2000, your CE summary report is due now.

EMS Standards
Internet certification
verification now on our
web site: <http://www.tdh.state.tx.us/hcqs/ems/certqry.htm>

Certification verification
phone line:
(512) 834-6769; Fax
number: (512) 834-6736

Web home page
address: <http://www.tdh.state.tx.us/hcqs/ems/stndhome.htm>

Not full of hot air

Responding to an incident with an air bag

What if an air bag has deployed?

Deployed air bags are not dangerous. They are not hot, or about to catch fire. What looks like "smoke" is a powder that keeps the air bag from sticking together while it's stored away in the steering wheel, instrument panel/dashboard, or seat side panel. The powder can spread when the air bag deploys.

- Do not delay medical attention.
- Use normal rescue procedures and equipment.
- Wear hand and eye protection to prevent minor skin and eye irritation that may be caused by the powder.

What if an air bag has *not* deployed?

Undeployed air bags can suddenly deploy during rescue operations, and this can be dangerous to crash victims and rescue personnel. Should circumstances permit, deactivate the air bag system:

- Turn off the engine, and carefully disconnect both battery cables. Disconnect the negative cable first. The U.S. Fire Administration advises rescue personnel to disconnect the cables whenever possible, since cutting them can cause an electrical arc and fire. In a severe crash, make certain the battery case has not been penetrated with metal body parts that could recomplete the electrical circuit. Battery disconnect can be verified by attempting to turn on the headlamps and tail lights.
- Wait until the air bag system is deactivated. Some vehicles may take up to 30 minutes to deactivate, but most vehicles take 10 minutes or less.
- If there is a fire at the scene, use normal fire-extinguishing procedures. Then follow the guidelines above.

Photo by Linda Gheen



The last few years have brought a new wrinkle to emergency response involving vehicles: the air bag. Do you know exactly what's in an air bag? Do you know how to respond if the air bag has not deployed? The National Highway Traffic Safety Administration has published some information and guidelines about responding to incidents with air bags.

Look Beyond the Obvious - Check the S.C.E.N.E.

Prior to the introduction of air bags and lap-shoulder belts, seriously injured occupants involved in crashes usually had visible injuries (such as bleeding, facial lacerations, abrasions, bruises and broken facial bones) that were obvious to rescue personnel. Now, occupants protected by these devices do not have as many of the injuries previously visible, but still may need medical attention for internal injuries.

In crashes, serious internal injuries may be present but not be externally apparent. To address this situation and increase the chances that these crash victims receive timely and appropriate emergency care, look beyond the obvious. The following information should be collected and reported to medical personnel to alert them to check for internal injuries:


- Steering wheel deformation. Lift the air bag and look for a bent steering wheel rim. This could indicate internal injuries.
- Close proximity of the driver to the steering wheel. Occupants of small stature or large girth sitting close to the steering wheel are at greater


risk of internal injuries.

- Energy of the crash. Twenty or more inches of vehicle crush indicates high crash forces that can cause serious internal injuries.
- Non-use of seat belts. Non-use of lap or lap/shoulder belts could result in multiple impacts and greater probability of internal injuries.
- Eyewitness reports. Verbal reports, photos and video images of the interior and exterior of the crash vehicle graphically conveys the severity of the crash, and can indicate the probability and type of internal trauma.

Relay all information gathered at the crash site to the attending physician at the hospital.

More information

The National Highway Traffic Safety Administration has a web site with safety information, information about air bags and links to other safety pages at <http://www.nhtsa.dot.gov>. The Insurance Institute for Highway Safety, at <http://www.hwysafety.org>, has more air bag information, new press releases about car crash safety and a list of injury prevention videos for sale. 

 **EMS Fact:** More than 9,000 lives are saved each year by seatbelts.

Questions and answers about automobile air bags

How does an air bag work?

When a frontal, or near-frontal, side-impact crash occurs at speeds comparable to a 10-to-14 mile per hour frontal crash into a solid wall, sensors trigger a chemical reaction inside the air bag module, causing inflation of the air bag (which is folded and packed like a parachute inside the steering wheel, dashboard, or seat side panel). The rapidly-inflating bag splits open the cover on the steering wheel, dashboard seat or side panel, and fully inflates to help protect the driver and passenger(s). This entire inflation sequence takes place in less than 1/10 of a second. Less than one second after inflation, the air bag begins to deflate automatically.

Side air bags are smaller than frontal ones. They're designed to produce energy-absorbing buffers between people and the vehicle doors that are driven into them in side impacts.

How do I know if a vehicle has an air bag?

If an air bag has deployed, you will see it drooping from the steering wheel, the dashboard or the side of the driver's and passenger's seats. If there is no visible air bag, look for the words Supplemental Inflatable Restraint or Air Bag, or the initials, SIR, SRS or SIPS printed on the steering wheel hub, instrument panel, dashboard, windshield, driver's side B-post, or the side or back of the seat when the car is equipped with side air bags. If you still can't tell whether the vehicle has an air bag or not, you should assume it has one, especially if the vehicle is a newer model.


Is a deployed air bag dangerous?

No. Many people think that a recently-deployed air bag is hot, or "smoking," or about to catch fire. The "smoke" is actually a powdery substance (like talcum powder or corn starch) that is used to keep the air bag from sticking together while it is packed away in the steering wheel, dashboard or side seat panel. When the air bag inflates, this powder can vent into the passenger compartment, and the airborne particles may be deposited as a powdery dust on and around the bag.

Is it safe to breathe the passenger compartment air after an air bag has deployed?

Yes. There have been no cases of acute or long-lasting respiratory distress reported by rescue workers attending to crash victims who were exposed to air bag deployment by-products. There have been a few complaints of minor distress, such as brief coughing spells.

However, simulated tests were conducted with chronic asthmatics who were subjected to long-term exposure (20 minutes) to the atmosphere inside a vehicle with the windows rolled up, after the driver and passenger-side air bags had deployed. In this type of environment, test results revealed that prolonged exposure can cause significant asthmatic reactions in some people. Therefore, if a crash victim appears to be suffering from acute respiratory distress, rescue workers should consider the possibility of an asthmatic attack, and treat the victim accordingly.

 **EMS Fact:** In 1995, alcohol was a factor in 41.3 percent of all fatal car crashes. The percentage jumps even higher on holidays and special occasions. The highest was on St. Patrick's Day with 68.1 percent, followed by Superbowl Sunday at 56.1 percent. —General Motors Safe Driving Program

Do undeployed air bags pose a danger to rescue personnel and victims?

Although it's rare, an air bag can deploy during rescue operations and create a hazardous condition. This can result in injury to rescue personnel and cause further injury and delay in medical assistance to occupants.

Why deactivate the vehicle's electrical system?

Deactivating the vehicle's electrical system prevents deployment of all electrically-initiated air bags after a specific time period.

What if there is a fire at the scene?

An air bag is designed to inflate in a normal manner if the chemicals sealed inside the air bag module reach a temperature above 350 degrees. In case of a severe fire, the gas generators, after several minutes, may reach 350 degrees and ignite, causing the air bag to deploy. The chemicals or air bags will not explode.

In case of a fire in an air bag-equipped vehicle, any effective fire fighting medium, including water, can be used to extinguish the fire. Use normal fire-extinguishing procedures, and proceed with normal rescue guidelines.

How do air bags injure people? Who's at greatest risk?

The energy required to inflate air bags can injure people on top of, or very close to, air bags as they begin to inflate. In the first few milliseconds of inflation, the forces can seriously injure anyone struck by an inflating bag. It's important to understand that serious inflation injuries occur because of people's positions—not because of people's sizes or ages. Anyone on top of, or very close to, an air bag as it begins to inflate is at risk. This is why most air bag deaths involve people who weren't using seatbelts, were improv-

erly belted, or were positioned improperly.

What about children? Are they at special risk?

Most deaths from inflating air bags have been children. A number of these were infants in rear-facing restraints in the front seat. A child safety seat in the rear-facing direction shouldn't be used in the front seat with a passenger air bag because it puts an infant's head too close to the bag. Almost all older children killed by air bags were either unbelted or improperly belted. But even belted children can be at risk if they lean forward to fiddle, for example, with the radio dials, because this can put a child's head too close to the air bag.

What about short drivers? Elderly people?

Media reports mislead people when they claim short drivers and elderly ones are especially vulnerable to inflation injuries. Most drivers, even short ones, can get ten inches back from the center of the steering wheel and still reach the pedals. The few who cannot get far enough away need to get pedal extenders.

What are "smart" air bags?

Future air bags will incorporate so-called "smart" technology that will reduce inflation injury risk even among people who have moved forward before their air bags inflate. For example, some vehicles already have sensors in specially-designed restraints and passenger seats to detect rear-facing infant restraints and automatically switch off air bags on the passenger side. Rates of air bag inflation might also be tailored to crash severity so inflation forces will be lower in less serious crashes.

—Taken from the *National Highway Traffic Administration (www.nhtsa.dot.gov)* and the *Insurance Institute for Highway Safety (www.hwysafety.org)*.



It is our job:

The role of EMS at hazardous incidents

By Jeff Rubin, EMT-I, PhD

ILLUSTRATION PHOTO
BY PAULA GUERRA

The fire department responds to a report of an unpleasant odor at a residence. Two firefighters enter the garage/storage area from which the odor is emanating. Where the odor is strongest, they spot a cardboard box sitting on a shelf. One firefighter reaches up to grab the box, jostling it slightly in the process. As he takes it down, he catches a strong, nauseating odor. He hands the box to his

partner, who becomes nauseated as well and puts the box down. Both leave the storage area. They are wearing no respiratory protection. The combination of chemicals to which they have been exposed includes fungicides and organophosphate pesticides.

Introduction

The traditional place for medical responders at hazardous materials

(hazmat) incidents has been far removed from the action area, waiting for patients to be brought to them for transport. Most EMS personnel remember one rule about hazmat from their first EMT class: the “rule of thumb” (stay far enough back to be able to “cover” the entire scene with one’s thumb; in case of multiple responders, the smallest thumb wins). Although discretion unquestionably is the better part of valor, and those without specialized training should avoid straying beyond their limits, EMS responders—municipal, private, and industrial—play an important role at hazmat scenes.

Training Standards

Federal law (29 CFR 1910.120) specifies competency standards for responders to hazmat incidents. These competencies and training levels were incorporated into the consensus standards of the National Fire Prevention Association (Standards 471 and 472; 1997), which also adopted the terminology of the different levels: Awareness, Operations, Technician, Incident Commander and Specialist. NFPA standard 473 (1997) also specifies competencies and training levels for medical responders to hazmat incidents, a group unspecified by the Occupational Safety and Health Administration. NFPA 473 designates **EMS Levels I and II**. Although hazmat training levels for EMS have considerable overlap with Operations and Technician training, they represent a separate training track. Recent publications (e.g., ATSDR, v. I, 1995; NFPA, 1997) can serve as useful references for training development.


Roles & Responsibilities

Hazmat scenes are divided into three zones: hot, warm, and cold. The **Hot Zone** includes uncontained hazmat and contaminated victims and equipment; it is the destination for an

entry team wearing appropriate personal protective equipment (PPE). The **Cold Zone** should be free of any above-background levels of contamination; it hosts the command post, dressing and rehab areas, staging and transport resources. The **Warm Zone** is the barrier between the two: the decontamination corridor, where contaminated victims, rescuers and equipment enter from the Hot Zone to be decontaminated for entry into the Cold Zone (or, in the case of some equipment, isolated and packaged for eventual disposal). EMS Level I and other responders (NFPA 473) are restricted to the **Cold Zone**; Level II responders may operate in the Warm Zone as well.

With appropriate training, medical responders to hazmat scenes have the following roles and responsibilities, most of which can be effectively accomplished in the Cold Zone:

- Awareness
- Patient assessment and treatment
- Assistance with decontamination
- Medical monitoring
- Rehab
- Research/information
- Work within Incident Command System
- Communication with hospitals

 **EMS Fact:** Sixty percent of fatal or injury crashes occur on roads with posted speed limits of 40 miles per hour or less. —National Highway Traffic Safety Administration

Objectives

At the conclusion of this article, the reader should be able to:

- Define roles and responsibilities for medical responders at hazmat incidents
- Describe components of pre- and post-entry medical monitoring of entry teams at hazmat incidents
- Recognize common field medications as potential “antidotes” to certain chemicals
- Describe information necessary to communicate to area hospitals from hazmat scenes



Awareness

Federal law requires any potential first-responder to a hazmat incident, including anyone with an EMS certification, to have awareness training that provides for safe (i.e., uphill, upwind, at a proper distance) incident analysis; it also is a prerequisite for further hazmat training. Awareness training includes recognition and identification of hazardous materials by means of placards, labels, markings, containers, locations and other visible or audible clues that do not require the responder to be too close. Responders with awareness training should be able to initiate appropriate protective measures for themselves (positioning and PPE), others in the vicinity (initiating scene-control measures that restrict access and egress), and hospitals (alerting them early of potentially contaminated walk-in patients who may have left the scene). In addition, awareness-trained responders should be able to communicate appropriate information and request appropriate resources (e.g., "We have an overturned tanker with a 'Corrosive' placard that's leaking a large amount of fuming liquid. We need a full hazmat response, law enforcement to close the road, and a notification to all hospitals").

Patient Assessment & Treatment

Perhaps the role with which we're most familiar is assessment, treatment and, if necessary, transport. Hazmat calls, however, are different from others: they tend to be lengthy affairs with unseen hazards whose effects may be dormant for years and may produce chronic health problems. If that doesn't catch your attention, consider that you may be in the middle of a hazmat scene before you know it. A call that is dispatched as a traffic injury, generalized sickness, respiratory distress, or unknown, may end up as a hazmat call. Although this is rarely due to poor telephone triage or dis-

patch, sharp communications personnel, like sharp response personnel, should keep the possibility of hazmat on their mental "scene-safety checklist," and maintain a high index of suspicion on motor-vehicle collisions and multi-patient medicine calls, even if they don't come in as "hazmat." Rescuer safety is paramount. Although it is important to remember that hazmat patients have the same assessment and treatment priorities as any other patients, it is also important to remember that providing that assessment and treatment may require greater caution on the part of the provider. Responders who fail to exercise due caution and become contaminated along with their patient jeopardize themselves and their patient, as well as making things more difficult for their fellow responders.

As with most call-types, solid triage/assessment skills and BLS techniques are extremely effective for hazmat patients. In the Hot Zone, assessment is cursory, and treatment minimal. Anything that extends patients' or rescuers' time in the Hot Zone without significant benefit should be avoided. Invasive techniques applied to a contaminated patient may create or increase internal contamination. Hazmat incidents may create numerous patients; effective triage is essential. Two important components to differential assessment and triage at a hazmat incident are: 1) exposure vs. contamination, and 2) the effects of chemical exposure vs. possibly underlying (or concomitant) trauma or medical problems.

Hazmat rescue and decontamination are not rapid processes. Just as CPR may have to be forgone on multiple casualty incidents, an immediate patient with significant contamination may have to be classified as Expectant if there are numerous other patients requiring treatment and transport. On the other hand, a patient who has

EMS Fact: Want an air bag on/off switch? Make sure your seatbelts are not the force-limiting type optimized to work with air bags. Otherwise, your seatbelt may not hold you tightly enough keep you from hitting the steering wheel.
—Insurance Institute for Highway Safety

been exposed to toxic levels of a chemical but has not been contaminated (i.e., poses no threat of exposure to anyone else who comes in contact with patient) may require no special procedures prior to treatment and transport. In addition, signs and symptoms of chemical exposure may mask those of underlying trauma and/or pre-existing medical conditions. Did the patients' injuries happen as a result of the chemical release, or did they cause it? Has an open wound allowed internal contamination? Is the patient pulseless and apneic due to chemical exposure or a non-chemically induced myocardial infarction?

Assist with Decontamination

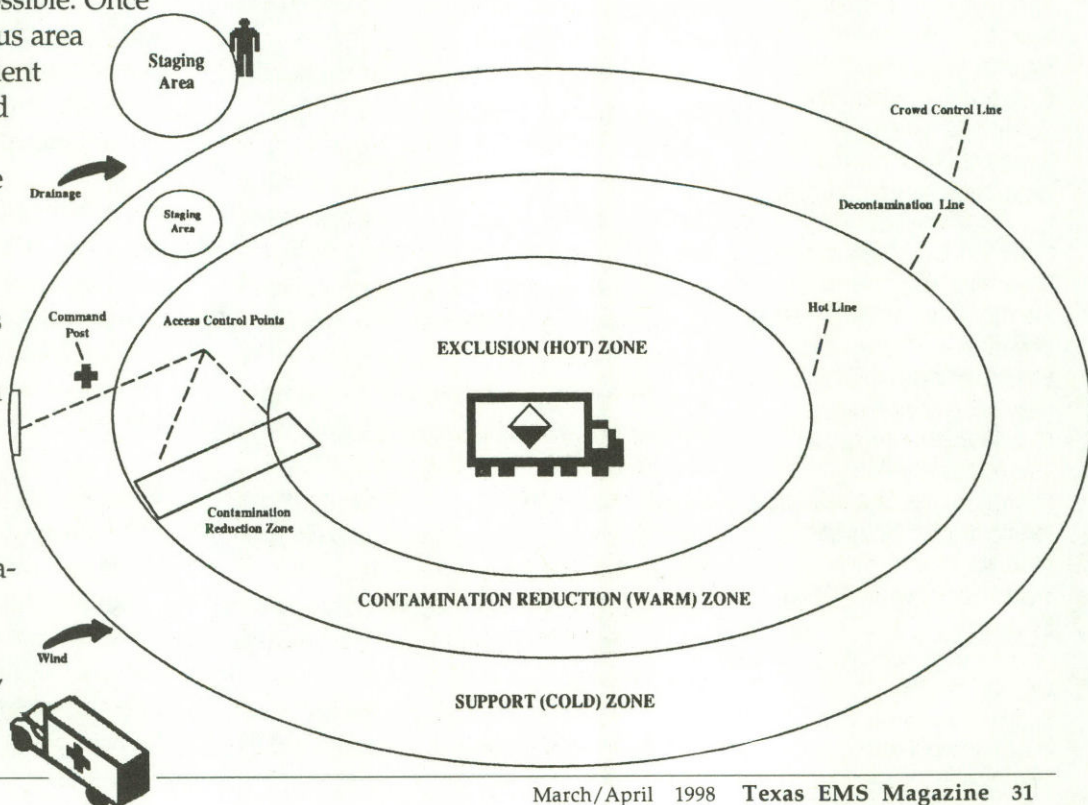
Travis County Medical Director, E. M. Racht, MD, has likened hazmat contamination to "contagious poisoning." This captures the essence of both the risks presented by contaminated patient and the purpose of "decon." A patient who has been contaminated by one or more chemicals first must be removed from the area of exposure—as quickly as possible. Once removed from the hazardous area (i.e., the Hot Zone), the patient must be thoroughly cleaned (decontaminated) in order to prevent further exposure to the substance with associated ill effects. Removal from the Hot Zone, followed by effective decon, is summed up by the phrase, "Get the patient away from the poison, and the poison away from the patient."

Decontamination also reduces the risks faced by rescuers and subsequent patient-care providers (e.g., hospital personnel) from secondary contamination, or indirect contamination: transfer of an undesirable

substance via contact with a contaminated person or piece of equipment. Touching a contaminated patient contaminates the "toucher," who further spreads contamination by touching equipment, etc. (Changed your gloves lately?)

A properly trained medical responder (Level II) may provide assistance in the decon corridor. Training EMS personnel to Level II offers several advantages, including:

- Patients may require advanced airway or other invasive techniques during decon (after the relevant part(s) of the patient have been decontaminated)
- Rapid intervention may be necessary if someone on the entry of decon teams is experiencing a problem (e.g., heat exhaustion) and requires medical attention before full decon has been completed
- Medical personnel may need to perform basic decon on patients, equipment or themselves following exposure to certain biohazards on "regular" calls
- Hazmat teams with limited staffing





may need additional personnel to perform decon on large operations.

Medical Monitoring

One of the most important medical tasks on a hazmat scene is medical monitoring of the entry teams. An established medical surveillance program, consisting of annual physical exams, standardized on-scene monitoring and careful documentation, is required by OSHA and specified by NFPA 471 and 473. Medical monitoring should be viewed as an important safety and injury-prevention function. Prior to dressing and entry into the Hot Zone, each entry-team member must be assessed according to a standardized set of parameters that are designed to identify conditions that could hamper or debilitate entry-team members. The same assessment performed after entry (also a requirement) can identify effects of possible chemical exposure as well as heat exposure and dehydration. Chemical-protective clothing is not only restrictive, it is designed to be non-breathable; prolonged activity in such equipment during hot Texas weather can lead to rapid dehydration and hyperthermia.

Standardized assessment should be performed before and after each entry into the Hot Zone. Results from each assessment should be carefully documented, both for on-scene reference and inclusion into the medical records that must be kept on each team member. Personnel performing medical monitoring should work closely with the safety officer, who must be advised immediately if anyone should be excluded from Hot Zone entry due to assessment results. Complete on-scene medical monitoring consists of the following:

Vital signs, including temperature (rectal is ideal (good luck!); tympanic or oral okay)

Body weight-dry (pre-entry = baseline; subject should be towed dry

and weighed in same clothing as pre-entry weighing; decrease in weight should be due to fluid loss)

General health (pre-existing acute or chronic conditions; susceptibility to dehydration)

Neurological status EKG (optional: only if provider has capability and access to subject's baseline EKG, which is part of the mandatory annual physical exam).

A team member who must be excluded from entry need not be sent home, or even barred from performing useful tasks at the scene—only Hot Zone entry is prohibited. Should a prospective entry-team member exceed exclusion levels, readings should be retaken after approximately five minutes and the safety officer notified that a replacement may be necessary. If the results are reproducible, the team member should be excluded from entry.

Rehab

As with structure fires and other long incidents that require strenuous work in restrictive PPE, rehab is important for entry- and decon-team members, as well as anyone else who might need it. Entry-team members, particularly those in fully-encapsulating suits, can lose several percent body weight in fluids; they also can experience rising core temperature even after PPE is removed (Menze et al., 1996). Rehab is another component of on-scene injury prevention, consisting of rest, rehydration (water and isotonic beverages), aggressive and effective cooling and nutrition (e.g., Rubin, 1997).

Research/Information

Many hazmat references provide physical and chemical information about containment, firefighting, or cleanup operations (e.g., NIOSH, 1994, Quigley, 1994). Medical responders should evaluate and carry appropriate *medical* references (e.g.,

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He was recently appointed to the Austin's EMS Quality Assurance Team.

Bronstein and Currance, 1994; ATS-DR, v. III, 1995). Medical personnel should be able to identify signs and symptoms of high- and low-level chemical exposure in patients and rescuers, and assist in identifying unknown chemicals (or at least classes, such as acids) based on reference materials and signs and symptoms that patients are displaying. Proper use of reference material can help determine specific risks to response personnel, type and degree of decon necessary, specific treatments, and personal protective procedures for those providing post-decon care.

Specific treatments

Although an antidote kit or "tox-box" is expensive and impractical (and unlikely to be used in the field), there are some medications commonly carried by providers that may be used to counteract the effects of some chemicals. By far the most useful is oxygen.

Asphyxiants prevent the cells from using oxygen, either by displacing it in the atmosphere that the patient is inhaling, or at the cellular level. Common asphyxiants include carbon monoxide (the most common inhaled killer) and hydrogen sulfide. High-flow O₂ increases the partial pressure of O₂ in the bloodstream (PO₂); for some asphyxiants, appropriate application of O₂ through a patent airway may be all the treatment necessary for a hazmat patient. Bear in mind that application of a nonre-breather mask may not be sufficient.

Although this may effectively treat simple hypoxia, it will not provide for rapid gas exchange. A hypercarbic patient, for example, requires positive-pressure ventilation (PPV) by bag-valve mask to reduce CO₂ to tolerable levels, while providing higher PO₂. In this case, PPV "decontaminates" the lungs.

Organophosphates and carbamates are the active ingredients in many

pesticides and herbicides, as well as chemical weapons (nerve gas). They are acetylcholinesterase inhibitors that produce an extreme parasympathomimetic effect. **Atropine sulfate** (2 mg IV every 5-15 minutes, to be repeated until signs of "atropinization" occur; i.e., drying of secretions, flushed skin, tachycardia, mydriasis) can remediate some of the symptoms, but must be given often and, for severe cases, in very large quantities to produce the desired anticholinergic effect. Large multi-dose vials are preferred due to convenience and the desire to reduce the amount of preservative that the patient will receive with each dose. Atropine treatment may be started in the field, and most likely will have to

Exclusion Criteria for Hot Zone Entry*

- Pulse > 120/min
- BP: Systolic > 160 or Diastolic > 100
- Respirations > 24/min
- Temperature (tympanic or oral) > 100°F
- Skin lesions, rashes, significant sunburn
- Respiratory congestion, infection, irritation
- History of fever, N/V/D, cough, heavy ethanol intake within last 72 hours
- EKG displaying irregularity *not previously documented*
- Altered mentation
- Recent medication change that could affect ability to work in chemical protective gear

Re-Entry Exclusion Criteria (for subsequent entries at same incident)*

- All criteria for initial entry
- Body weight loss (fluid) > 2% following entry
- Failure of post-entry vital signs to return to within 10% of pre-entry levels within 10 minutes

**Standards adopted by Austin EMS and Austin Fire Dept., July, 1987. Standards developed by Hazmat Team, Special Operations Section, Austin EMS; Special Operations Section, Austin Fire Dept.; approved by Dr. E. M. Racht, Medical Director, Austin/Travis County EMS System. Standards based on OSHA 29 CFR 1910.120, NFPA 471 and 473, and Austin/Travis County EMS System Standards of Medical Care.*



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be continued in the hospital, along with pralidoxime, the true "cure" for organophosphate/carbamate poisoning. It is important to remember that, even if they go through initial decontamination, severely symptomatic patients pose a high risk of secondary contamination due to the "excretory overdrive" associated with organophosphate poisoning. Not only are the various secretions and wastes biohazardous, they are contaminated with the toxicant as well. Prehospital and hospital personnel should exercise care in personal protection; some modification of transport units may be necessary (e.g., draping the module interior with plastic).

Hydrofluoric acid (HF) is used to etch glass, clean aluminum and magnesium, clean semiconductor material in chip manufacturing plants, and produce fluorocarbons in petroleum refineries. Cutaneous exposure to HF causes deep burns as the highly reactive fluoride ion penetrates to the bone, where it forms complexes with calcium. **Calcium gluconate** (or calcium chloride), mixed with lubricant and applied topically, provides calcium to bind the fluoride ion and render it inert. Following thorough patient decontamination, the topical gel can be mixed to a concentration of 2.5% calcium gluconate at the scene using calcium gluconate injection and any sterile, water-soluble gel, or purchased pre-mixed (e.g., Trevino et al., 1983; Upfal and Doyle, 1990). If the exposure is to a hand, the gel may be placed in a latex glove and the glove placed over the hand to maintain beneficial contact with the affected area.

Incident Command System

As may be obvious at this point, many aspects of hazmat response are regulated by federal law; incident management is no exception. A standardized incident management system (e.g., the Incident Command

System - ICS), must be used. As almost all hazmat calls are multi-agency, multi-jurisdictional, or both, the Unified Command System (UCS) is the most appropriate. EMS personnel should be trained in ICS/UCS (useful for far more than just hazmat) and be able to assume appropriate roles, including medical command, medical branch director, group supervisor or unit leader for triage, treatment, and transport, and medical unit leader. All EMS personnel should be able to function within an ICS/UCS system; those occupying command positions at a scene should work closely with representatives of the agencies that EMS is supporting, particularly the hazmat group supervisor and safety officer.

Communicating with Hospitals

Hospitals are more likely to receive a contaminated walk-in patient than they are a contaminated EMS transport; many are caught by surprise, and many may not have personnel with proper training and equipment even if they are alerted (ATSDR, v. II, 1995; Cone and Davidson, 1997). It is the responsibility of medical providers at a hazmat incident to ensure that area hospitals receive sufficient warning to activate whatever plans they have. An alert security and triage staff can prevent inadvertent (and possibly undiscovered) contamination of Emergency Department staff, equipment and spaces (and other patients).

Area hospitals should be notified (preferably simultaneously) of a hazmat incident *immediately* upon confirmation of the incident or high index of suspicion (i.e., "reliable" 9-1-1 calls). This is a task best performed by communications personnel, and response agencies should make this standard practice. Regular updates should be provided from the scene until completion of transport, or

confirmation from the scene that there will be no transports and that no potentially contaminated patients have left on their own. The following information should be provided to hospitals:

- Location, type of incident
- Chemical identification, form, amount (if known)
- Number, severity of patients
- Exposure vs. contamination
- Injury/illness vs. exposure
- Duration/degree of exposure
- On-scene and transport times
- Care given (at scene, en route)

Conclusions

Although the role filled by EMS responders to hazmat incidents is one of support, it is nonetheless integral to successful management of the incident. As with all incidents to which we respond, self-protection is essential. We owe ourselves, our patients, and the agencies which we support the commitment to develop and maintain the appropriate skills and knowledge to be of use at hazmat scenes. We also owe our prudence, so that we will be able to practice our skills without increasing the patient count.

If you don't know, don't go!

The two firefighters in the opening scenario are assessed at the scene and transported by an EMS crew trained to Hazmat Level II. The Emergency Department is alerted of the pending transport of two potential organophosphate-exposure patients who are not contaminated. Although the EMS crew has multi-dose vials of atropine at the ready, the firefighters are asymptomatic. Following transport, the ED staff confirms the EMS crew's assessment: the firefighters did not receive a significant exposure, but were nauseated by the strong odor. They are released that night, knowing that they were lucky—and determined to be more careful on their next hazmat call.

For each question, choose the best answer. Choose only one per question.

1. _____ prevents(s) cellular uptake of oxygen.
 - a) Acids
 - b) Asphyxiants
 - c) Organophosphates
 - d) Carbamates
 - e) Congress

2. An NFPA EMS Level I hazmat responder is qualified to work in the _____ Zone; a Level II responder is qualified to work in the _____ Zone.
 - a) Warm/Hot
 - b) Cold/Warm
 - c) Cold/Hot
 - d) Warm/Warm
 - e) Warm/Cold

3. What is the principal activity occurring in the Warm Zone of a hazmat incident?
 - a) Triage
 - b) Invasive treatment
 - c) Decontamination
 - d) Hazmat research


4. Area hospitals should be notified of a hazmat incident:
 - a) Immediately upon confirmation or high probability of actual occurrence.
 - b) Upon establishment of a command post at the incident.
 - c) Upon confirmation that there will be patients transported.
 - d) Upon initiation of transport from the scene.

5. After decontamination, cutaneous exposure to hydrofluoric acid may be treated with _____ calcium gluconate gel, either premixed or mixed on-site.
 - a) 1%
 - b) 2%
 - c) 2.5%
 - d) 5%

1.5 hours of CE/Medical emergencies

e) 10%

6. Having properly trained and equipped EMS personnel in the decontamination corridor may be useful for what reason?
 - a) Advanced techniques may be needed before the patient is fully decontaminated.
 - b) Members of the entry or decon teams may need rapid medical intervention.
 - c) Decontamination skills may be used to manage biohazard on "routine" calls.
 - d) All of the above
7. Why is it important to notify area hospitals about hazmat incidents?
 - a) So that hospital personnel can respond rapidly to the scene.
 - b) To give admissions staff a head start on "pre-approval" paper work for HMO patients.
 - c) To alert Emergency Department staff to potentially contaminated walk-in patients.
 - d) To give Emergency Department staff time to request "emergency vacation."
8. The purpose of determining body weight in the pre-entry component of on-scene medical monitoring is to:
 - a) Ensure that the responder is not more than 11 lbs (5 kg) over the appropriate weight for the relevant height and age group.
 - b) Ensure that the responder is not dehydrated before initial Hot Zone entry.
 - c) Provide a baseline measurement that, when compared to post-entry weighing, can be used to estimate responder's fluid loss during work in chemical protective gear.
 - d) All of the above
9. National Protection Association (NFA) Standard 473 specifies competencies for medical responders to hazmat incidents.
 - a) True
 - b) False
10. Patients suffering from organophosphate/carbamate poisoning:
 - a) Pose a high risk of secondary contamination to rescuers.
 - b) May be given atropine sulfate (2 mg IV, every 5-15 min) in the prehospital setting.
 - c) May be given epinephrine (1:1000, 0.3 mg SQ, every 20 min) if the atropine runs out.
 - d) A and B only
11. For some types of toxic inhalation a _____ may be more effective in "decontaminating the lungs" than a nonrebreather mask.
 - a) Cricothyrotomy
 - b) Dose of nebulized albuterol
 - c) Chest thrust
 - d) Bag-valve mask
12. On-scene medical monitoring of responders before and after they enter the Hot Zone is mandated by federal law.
 - a) True
 - b) False
13. A patient who has been exposed to a hazardous substance, but is not contaminated, poses no risk of contaminating rescuers with that substance.
 - a) True
 - b) False
14. Awareness training qualifies a responder to assess the scene, request resources, and establish/perform decontamination.
 - a) True
 - b) False
15. On-scene EKG acquisition on a member of the hazmat team before entry into the Hot Zone is useful only if that team member's baseline EKG (from the annual physical) is available for comparison.
 - a) True
 - b) False

 **EMS Fact:** Airbags reduce driver fatalities in head-on collisions 23 percent.



This answer sheet must be postmarked by April 22, 1998

CE Answer Sheet # __ *Texas EMS Magazine*

Name _____ SSN _____

Certification Level _____ Expiration Date _____

Organization _____ Work Phone _____
area code

Address _____ City _____
street

State _____ Zip _____ Home Phone _____
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Note: Due to the cost of processing CE, each answer sheet must be accompanied by a check or money order for \$5, made out to UT Southwestern.

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Answer Form

Check the appropriate box for each question.

- | | | | | | | | | | |
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| 1. a. <input type="checkbox"/> | b. <input type="checkbox"/> | c. <input type="checkbox"/> | d. <input type="checkbox"/> | e. <input type="checkbox"/> | 8. a. <input type="checkbox"/> | b. <input type="checkbox"/> | c. <input type="checkbox"/> | d. <input type="checkbox"/> | e. <input type="checkbox"/> |
| 2. a. <input type="checkbox"/> | b. <input type="checkbox"/> | c. <input type="checkbox"/> | d. <input type="checkbox"/> | e. <input type="checkbox"/> | 9. a. <input type="checkbox"/> | b. <input type="checkbox"/> | c. <input type="checkbox"/> | d. <input type="checkbox"/> | e. <input type="checkbox"/> |
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| 5. a. <input type="checkbox"/> | b. <input type="checkbox"/> | c. <input type="checkbox"/> | d. <input type="checkbox"/> | e. <input type="checkbox"/> | 12. a. <input type="checkbox"/> | b. <input type="checkbox"/> | c. <input type="checkbox"/> | d. <input type="checkbox"/> | e. <input type="checkbox"/> |
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| 7. a. <input type="checkbox"/> | b. <input type="checkbox"/> | c. <input type="checkbox"/> | d. <input type="checkbox"/> | e. <input type="checkbox"/> | 14. a. <input type="checkbox"/> | b. <input type="checkbox"/> | c. <input type="checkbox"/> | d. <input type="checkbox"/> | e. <input type="checkbox"/> |
| | | | | | 15. a. <input type="checkbox"/> | b. <input type="checkbox"/> | c. <input type="checkbox"/> | d. <input type="checkbox"/> | e. <input type="checkbox"/> |

Did you enclose your \$5 check or money order?

By Lt. Sam R. Cary, EMT-P

Classes introduce high school students to EMS

Reading, writing and arrhythmias

Can you remember walking the halls of your high school? For those of us who can remember when disco was popular, it might take a little more effort: conversations with friends, jokes about cafeteria food and noise. Plenty of noise. Trying to get from your school's gym to the next classroom before the tardy bell. I have a clear image of those days, but it's not because I have a good memory. I was there just last week—not as a student but as an EMT instructor.

EMT classes as part of a high school curriculum were not something available to me when I was in school but it is for the students Grand Prairie High School. Last year I met with Sharon Allen, deputy superintendent of the Grand Prairie Independent School District, and we began discussing the possibility of providing an EMT class for the high school students. There was already a Certified Nurses Assistant (CNA) program in place that was being taught to health occupations students, and the school district was looking for different classes in that career field. The program

looked like a good fit for an EMT class.

The possibility of being back in high school made me nervous at first, but then I realized that I hadn't gone to this high school and there was no way they could hold what I did in my old school against me. We started the process of planning the class and submitting the proposal to the Texas Department of Health. Without going into much detail, the process went smoothly thanks to help from Mike Hudson and Randal Martin from the regional TDH office here in Arlington. We were granted approval to hold two classes starting in November.

The support of the GPISD has also made a real difference in our success. They purchased the training equipment necessary to put on a first-class program: new CPR manikins, oxygen therapy, equipment, textbooks, slides and AED trainers. With this equipment we were able to meet the requirements of TDH and our instructors took pride in the program. Equipment that works is always a real plus in teaching. Manikins whose



**NATIONAL
EMERGENCY
MEDICAL
SERVICES
W E E K**



**EMS Week
May 17-23,
1998**

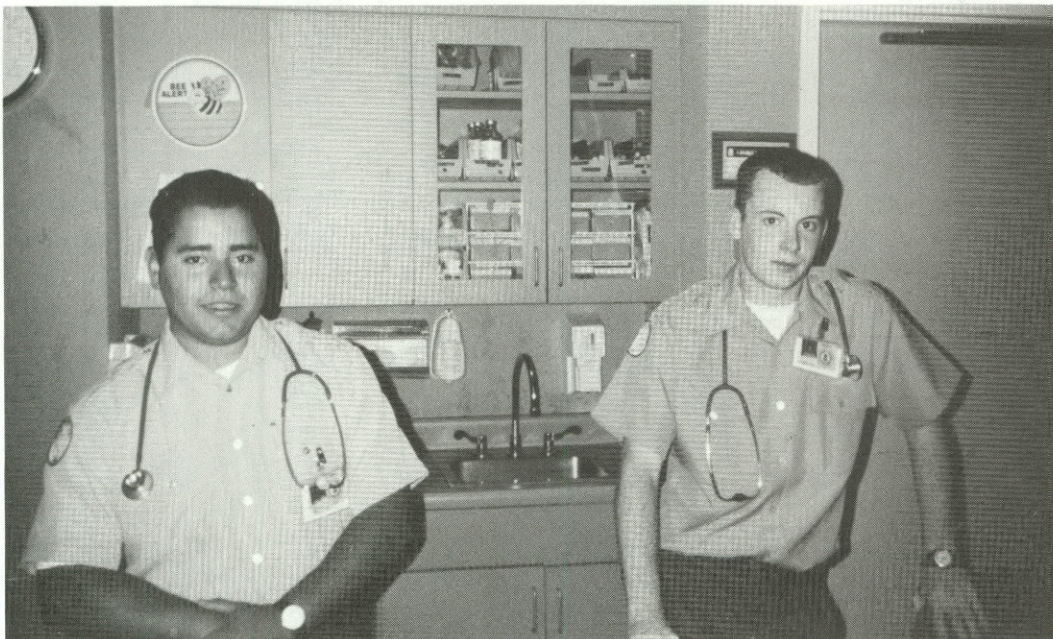
arms fall off and furry KEDs can traumatize students and instructors.

Our instructors are off-duty firefighters from the Grand Prairie Fire Department. They have taught with me for years and were anxious for the opportunity to go back and torture, I mean teach, students in the school system. And we were very excited about the opportunity to place our firefighters in the local school district. For years we have done programs to teach younger students about fire safety; this gave us a chance to reach the older students with information about what we do for the community in which we work. We also hoped to encourage some interest in firefighting and paramedic careers. And then there's the fact that as I get older I want to make sure there are plenty of well-trained people around to take care of me.

In trying to keep this a community-based program, we contacted our medical director, Dr. John Gwin and

our local ambulance provider service, Rural/Metro of Grand Prairie, and our local hospital, D/FW Medical Center. All three were cooperative in scheduling training for our students. Working these schedules into a busy teenager lifestyle proved to be a real challenge and would not have been possible without a lot of flexibility in that scheduling. Marcia Kahle, with D/FW Medical Center, even took the time to give the students an orientation class for the hospital. We toured the different departments the students would be working in while Kahle answered their questions about the hospital.

The students from the schools involved, Grand Prairie High School and South Grand Prairie High School, have been terrific. When we first began the program we had concerns about the maturity level needed to complete the course and pass the state test. That concern was quickly eliminated when we saw that the stu-



Joe Palacios, left, of South Grand Prairie High School, and Casey Wilman of Grand Prairie High School toured the ICU at D/FW Medical Center as part of the class. The hospital, along with provider Rural/Metro and Medical Director John Gwin, worked together to help schedule clinical rotations and rideouts.

dents were ready to get down to business. A real plus were those students who had already attended the CNA program and had a working knowledge of patient care. I think student selection is an important part of the training process. Those students who already have an interest in the EMS or medical field are more likely to succeed. Not all of our students have gone on to take the state test, but those who have tested have done well. I hope they will be able to use the training to further their careers in the medical field or go on to become public safety employees. I hope that they will be able to recall in their old—well maybe middle age—fond memories of coming to class wondering what new skill they would be learning, and bringing their EMT instructor a shiny apple. Well, they haven't really brought apples, but I did get a cupcake one day.

A South Grand Prairie High School EMT student holds a course completion certificate from the EMT class offered as part of her high school curriculum.



Firefighters, paramedics, nurses, physician assistants, administrators and doctors from many agencies have made the students feel welcome and have shown genuine concern about what the students learn. With the need for career training and ideas, this program can help students to identify those areas they may be interested in. Even if the students find they no longer have a desire to pursue a medical career, at least they will have the knowledge and training that could possibly impact the community where they live and work.

I would encourage anyone interested in adding this curriculum to their school system to do so. It has been an exciting addition to the training classes that we do and the enthusiasm from the students is infectious. Along with helping the students choose a possible career path, I am getting more qualified instructors to help teach in our fire department programs. All instructors look for new ways to make their curriculum more appealing and easy to understand, no matter who they are teaching. Whether it is a bright-eyed teenager or an experienced firefighter, if you can help students learn something new or understand something better, you have succeeded as an instructor. And as I am finding out, you will learn all kinds of new things from your students as well. 🍌

Lt. Sam Cary is an EMS coordinator and the EMS officer for the Grand Prairie Fire Department in Grand Prairie, Texas.

Plan activities now for **EMS Week** **May 17-23, 1998**

Have you started planning for National/Texas EMS Week, May 17-23? The week that honors those in EMS is a perfect way to tell people in your community about what you do. It's also a perfect opportunity to bring the message of safety to your community. If you have questions or comments about EMS Week, or simply want some help in planning some activities, call us at (512) 834-6700.

Here are a few things that might help you plan:

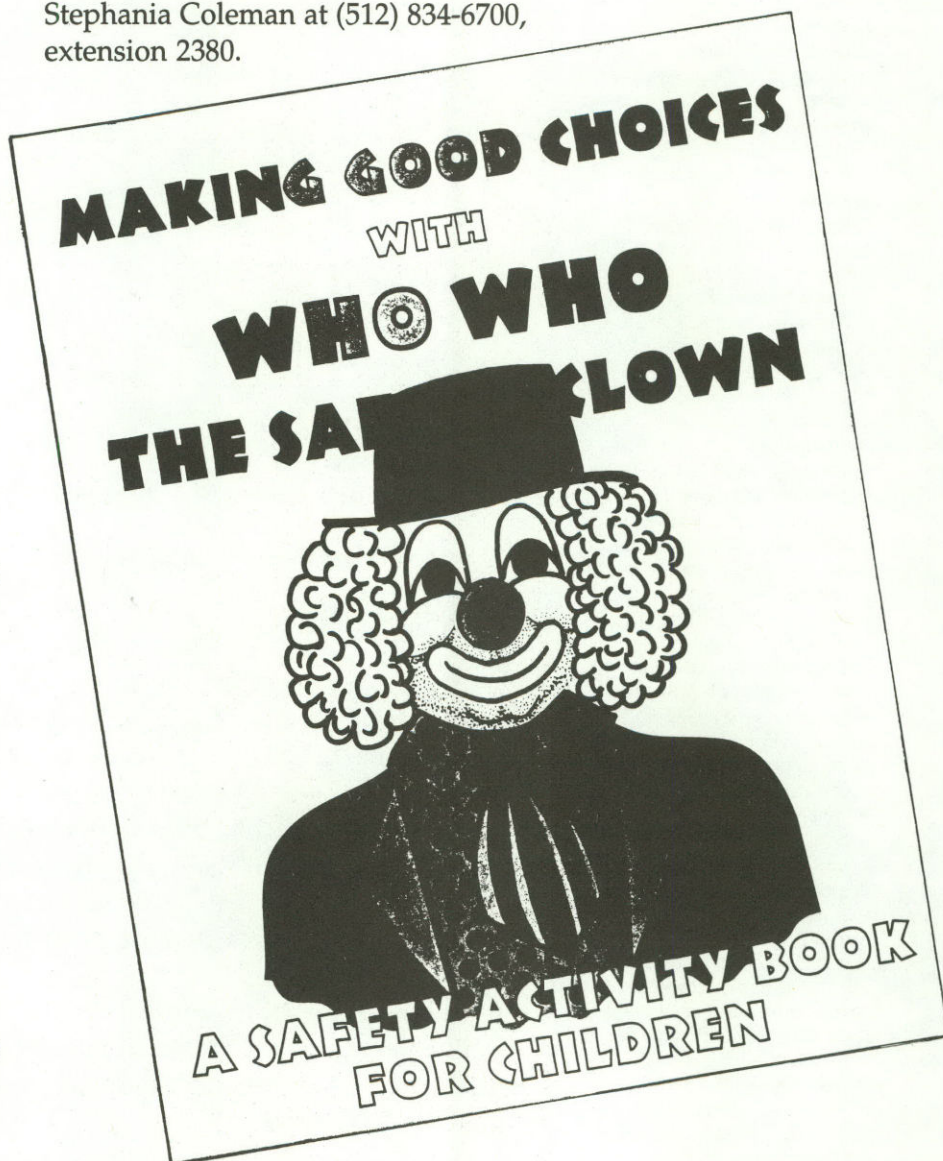
The American College of Emergency Physicians is once again sending out planning packets for EMS Week. The theme of this year is: EMS: The Vital Link. We will mail out packets in April to every EMS provider and first responder group. Packets can also be ordered directly from ACEP by calling (800) 798-1822, then pressing 6 for publications when prompted by automated voice mail.

We will add our own Texas EMS Week information to those packets, which will have press releases, radio spots, sample resolutions and ideas for EMS Week activities.

Newly-revised Ready Teddy coloring books, Who Who coloring books and stickers are now available. Please use the order form on page 2 of this issue to order coloring books and oth-

er materials you'll need for EMS Week activities. And remember, order early!

For more information, call Stephaniea Coleman at (512) 834-6700, extension 2380.



EMS Awards Categories

EMS Educator Award honors a state-certified EMS Instructor or Course Coordinator who has advanced EMS education in Texas.

EMS Medical Director Award honors a physician who has served as a medical director, on-line or off-line, for an EMS organization.

EMS Administrator Award honors an administrator, researcher, or manager on the local, city, county, regional, or state level who has made a positive contribution to EMS.

Public Information Award honors an EMS group or individual for outstanding achievement in public education, injury prevention, or health promotion.

Citizen Award honors a private citizen for heroic lifesaving act or unique advocacy of EMS.

Private Provider Award honors a privately-owned commercial organization which assumed a leadership role in EMS by achievement in areas of patient care, public access, medical control, disaster preparedness, public education, and training.

Public Provider Award honors an organization operated by a county, municipality, tax-based hospital, or state or local government agency which assumed a leadership role in EMS by achievement in areas of patient care, public access, medical control, disaster preparedness, public education, and training.

Volunteer Provider Award honors an organization staffed by volunteers which assumed a leadership role in EMS by achievement in areas of patient care, public access, medical control, disaster preparedness, public education, and training.

First Responder Award honors a first responder organization which assumed a leadership role in EMS by achievement in areas of patient care, public access, medical control, disaster preparedness, public education, and training.

Air Medical Service Award honors a public or private air medical service in Texas, a leader in the field, who has demonstrated the highest standards in providing patient care to the citizens of Texas.

Outstanding EMS Person of the Year honors an EMS-certified person who has demonstrated uncommon leadership and courage in providing emergency medical service to the citizens of Texas.

1998 Texas EMS Award Nomination Application

This nomination is for:

- | | |
|---|--|
| <input type="checkbox"/> EMS Educator Award | <input type="checkbox"/> Private Provider Award |
| <input type="checkbox"/> EMS Medical Director Award | <input type="checkbox"/> Public Provider Award |
| <input type="checkbox"/> EMS Administrator Award | <input type="checkbox"/> Volunteer Provider Award |
| <input type="checkbox"/> Public Information Award | <input type="checkbox"/> First Responder Award |
| <input type="checkbox"/> Citizen Award | <input type="checkbox"/> Air Medical Service Award |
| | <input type="checkbox"/> EMS Person of the Year |

Name of nominee _____

Street address of nominee _____

City _____ State _____ Zip _____

Telephone number of nominee _____
Area code

Your name _____

Your street address _____

City _____ State _____ Zip _____

Your level of certification _____

Your daytime telephone number _____
Area code

Your service or other affiliation _____

Your signature _____ Date _____

Send awards to:

Texas EMS Awards, Texas Department of Health, 1100 West 49th Street,
Austin, TX 78756-3199, or fax to (512) 834-6736.

Nomination should not have more than 3 typewritten pages of background information. You may also include documentation or examples.

Nominations must be postmarked by October 1, 1998.

If you have questions, contact your public health region EMS office or the Bureau of Emergency Management at (512) 834-6700.

We will announce award winners at Texas EMS Conference '98 during the Awards Luncheon on November 24, 1998.

Does your service need money?

Then read this and start planning to write an EMS grant proposal

Is your organization looking for more money? If your organization is like many others, the answer is yes. This is where the Texas Department of Health's EMS Local Projects Grants Program may be able to help. In 1998-99, approximately \$1.5 million will be available for EMS grants. The tentative deadline for submitting your proposal is June 3, 1998, so now is the time to start thinking about your needs.

Grant information should be published in the *Texas Register* no later than March. We will also be mailing application packets to those firms that request them. To insure that you are on our mailing list, send a letter to:

Texas Department of Health
Bureau of Emergency Management
Local Projects
1100 W. 49th Street
Austin, TX 78756-3199

This letter should include your name, the name of your organization, your mailing address and phone number. You can also be added to the list by calling Terri Vernon at (512)834-6700.

The first step you should take is to **identify a project**. This should be based on an identified need, not just something that would be nice to have. Previously funded projects have included all phases of prehospital care from initial certification to community education programs. Approved equipment has included computers, monitors/defibrillators, AEDs, and ambulances, and patient treatment and training equipment. Re-

member that no disposable supplies, operating expenses, salaries or indirect expenses will be funded.

The second step is to identify **matching funds**. Look for other sources of funds as soon as possible. Local Projects grants require matching funds for communications and computer equipment costing more than \$500 and medical equipment over \$1,000. While your project may not require matching funds under these guidelines, greater consideration is generally given to those proposals that demonstrate local involvement.

The third step is to locate **local sources of support**. These sources should include commendation letters, letters of support from the source of your matching funds, and letters of support from local or state officials for the project.

Every **nonprofit** organization involved in prehospital emergency care is eligible and encouraged to participate in this program whether you are a licensed provider, volunteer or paid, a registered first responder organization or an educator.—*Amos Hunter*



La Feria Volunteer Fire Department receives a Local Projects check from Commissioner of Health William R. Archer, III, MD.

Did you READ...

By PENNY WORKMAN

A study found more than 300,000 dog bites occur per year in the U.S. Ninety-nine percent of dog bites were judged to be "of low severity," but about 20 Americans each year die from the wounds.

Beta-carotene pills have been shown to increase the risk of lung cancer and cardiovascular disease in smokers.

An educational art exhibit in Germany has an interesting anatomical twist: approximately 200 plasticized human corpses. Created by a medical doctor and lecturer at the University of Heidelberg School of Medicine, the exhibit aims to give people greater respect for the human body by allowing them to examine the complexities of the human body and to inspect damage done to the body by smoking and drinking. Medical students from the University of Heidelberg were paid to explain the anatomical ideas behind the exhibits. The Runner, frozen mid-stride, has only muscles and bones displayed. The outer muscles are pulled backwards, as if being blown by the wind, to allow visitors to see the many different layers of muscle. The Expanded Body has its skeleton pulled apart so people can see what lies beneath the skull and the rib cage. The bodies were donated by individuals who were aware that their bodies would be used in a public educational display. The process of plastination replaces the water in body cells with plastic material and does not change the color or shape of the organ, even though some organs look like plastic.

From *Austin American-Statesman*, "Corpse art proves to be as shocking as revealing," by Edmund L. Andrews, January 11, 1998.

According to one of the first comprehensive studies of dog bites in the U.S., dog bites are responsible for an average of more than 900 injuries each day. Researchers exam-

ined emergency department records from 1992 through 1994 and concluded that most injuries are among children, especially boys ages 5 to 9, and more than half occurred at the home. The head, face and neck were the most common body parts affected. Ninety-nine percent of dog bites were judged to be "of low severity," but about 20 Americans each year die from the wounds.

From *Dallas Morning News*, "Sweeping study of dog bites counts over 300,000 per year," by Laura Beil, January 12, 1998.

Boston researchers recently reported findings that heart attacks in apparently healthy men may be the result of a decades-long inflammatory process. The study used blood from middle-aged men with no history of heart disease who later had a heart attack. The heart attack victims were 80 percent more likely than other study participants to have high levels of ICAM-1, or intercellular adhesion molecule, type 1. ICAM-1 makes certain immune system cells stick to the blood vessel lining, enabling them to penetrate the vessels and fight chronic infections. ICAM-1 is part of a family of molecules that might be directly involved in the beginnings of atherosclerosis, according to current research. Researchers believe this finding might point to possible early detection of potential heart disease.

From *Houston Chronicle*, "Discovery may help battle heart attacks," by Richard A. Knox, January 10, 1998.

The World Health Organization recently urged that people eat fresh fruits and vegetables to help prevent cancer, rather than using beta-carotene pills. The agency studied all published data on the health effects of carotenoids, including beta-carotene, and its findings agree with U.S. and Finnish studies that found beta-carotene pills to not be effective in fighting cancer. Beta-carotene, the vegetable form of vitamin A found in carrots, has been touted as a cancer-prevention remedy. Researchers think that pills lack the fiber and other elements found in carrots that may account for the cancer-fighting potential difference between the vegetable and the pill. According to WHO, the pills have even been shown to increase the risk of lung cancer and cardiovascular disease in smokers.

From *San Antonio Express*, "Veggies, not pill, touted in cancer fight," by Alexander Higgins, January 13, 1998.

A sculpture of a drunk-driving crime scene was removed from the Nassau County Courthouse lawn in Mineola, New York, after lawyers argued that the artwork could influence jurors in drunk driving cases. Ten feet long and seven feet tall, the sculpture, *Stand Up and Speak Out*, depicts three large figures following a fatal drunk driving crash. The victim's head is cradled by a young woman, who represents the good Samaritans in society. The third figure stands with outstretched hands, mouth open in a cry for help. The sculpture will be placed outside the Nassau County Medical Center's trauma facility.

From *Houston Chronicle*, "DWI

artwork, attorneys collide," by Pat Milton, January 13, 1998.

Researchers at Massachusetts General Hospital are hoping that by using super-speed magnetic resonance imaging to watch the effects of cocaine on the human brain, the mechanisms involved with drug addiction can become better understood, and more effective treatments developed. At a rate of one image per second, these two-hour-long MRI scans showed exactly what brain activity was taking place while the volunteer was sober and after the drug had been administered. During the process, the volunteers rated their feelings of euphoria and then again during the crash. Two years were spent designing the experiment and risks were minimized as much as possible by having a team of doctors on standby during each injection; recruiting only heavy, chronic cocaine users; and rewarding the volunteers with drug awareness education, an offer for drug rehab and a \$260 credit at a local grocery store.

From *Austin American-Statesman*, "MRI reveals cocaine effect on user's brain," by Daniel Q. Haney, January 10, 1998.

A man who had been pronounced dead regained consciousness after having been in a Cairo, Egypt, morgue refrigerator for 12 hours. Responding to the man's shouts for help, a medic opened the refrigerator, and then collapsed and died. The man, who had been hospitalized for chronic liver disease and pronounced dead at a hospital north of Cairo, was revived by the cold.

From the Associated Press, July 14, 1997.

A study of 90,000 responses to 9-1-1 calls in California determined that there was no connection between a full moon and an increase in 9-1-1 calls. The study showed that many trauma call numbers are the same regardless of the moon.

A man who had been pronounced dead regained consciousness after having been in a Cairo, Egypt, morgue refrigerator for 12 hours.

Rohypnol, an odorless, colorless, tasteless tranquilizer, has been reformulated so that it dissolves slower and releases a blue color. The drug, which has been linked with date-rape cases will be more visible when placed in a drink.

An unidentified cab driver helped Anchorage, Alaska, police locate an ambulance after it was stolen from an Alaskan hospital. The cab driver followed the vehicle while reporting its location to the police. Police arrested the driver, who had taken the ambulance after missing his bus. The driver was charged with first-degree vehicle theft, second-degree criminal mischief and driving while intoxicated.

From *Anchorage Daily News*, "Cabie helps find stolen ambulance," by Rachel D'Oro and Tom Bell, October 20, 1997.

American Medical Response recently studied almost 90,000 data records from AMR responses to

9-1-1 calls in California to see if there was a connection between a full moon and an increase in 9-1-1 calls. The study showed that many trauma call numbers are the same regardless of the moon. Acts of violence were 13 percent of AMR's calls and motorcycle collisions were one percent during both full moon and non-full-moon days. Some incidents did appear to be more common during full moon dates: 33 percent of the calls for fall victims happened during full moon days as opposed to 31 percent during non-full-moon days. But other types of incidents were more common during non-full-moon days, such as motor vehicle collisions, which were 38 percent of the calls during a non-full-moon day as compared to 35 percent during full moon days.

From "A Full Moon: Does it Mean More Weird Emergency Calls?", October 30, 1997, <http://members.aol.com/RHKeltz/Moon.htm>.

Hoffman-LaRoche pharmaceutical company has developed a way for a drug that has been linked with date-rape to be more visible when placed in a drink. Rohypnol, an odorless, colorless, tasteless tranquilizer 10 to 20 times more potent than Valium, has been dropped into victims' drinks, causing them to pass out and to have little memory of what happens after they ingest the drug. The drug has been reformulated so that it dissolves slower and releases a blue color into the drink. In dark beverages, pieces of the tablet will float.

From *San Antonio Express*, "Drink linked to date-rape will become more visible," October 19, 1997.

Medicaid changes for nonemergency transports

Because of recent legislative changes in the Human Resources Code, TDH now requires nonemergency ambulance transports of Medicaid clients to be prior authorized by the National Heritage Insurance Company. Medicaid recipients whose condition meets the severely disabled criteria may be issued a prior authorization number on a short-term (up to 60 days) or annual basis. The prior authorization number may be requested by a physician, nursing facility, health care provider, or other responsible party. For details concerning this policy, please contact NHIC Customer Service at (800) 873-6768 or your local NHIC provider representative.

Two-year continuing education Emergency Suspensions

The following is a list of EMS personnel with certification expiration dates of 8/99 and 9/99, who have been emergency suspended for failure to comply with the two-year continuing education (CE) reporting requirement mandated in EMS Rule §157.38, Section k.

EMS personnel who are emergency suspended will be promptly reinstated when they complete the required CE hours and submit the completed CE Summary Report form to TDH. The CE Summary Report form will be accepted by mail or by fax at (512) 834-6736, or you can hand-carry it to your local public health region office. An official notice of reinstatement will be mailed to EMS personnel who comply with the CE requirement prior to their expiration date.

Though the emergency suspension may extend to the expiration date of the certificate, names will appear in this magazine for only one issue. Providers should require presentation of the original reinstatement document (with water mark) from the employee who has been emergency suspended and claims to be reinstated. No notice of reinstatement will appear in the *Texas EMS Magazine*.

Current certificate status is available on the internet at: www.tdh.state.tx.us/hcqs/ems/certquery.htm. The page is directly linked to our live database so information is up-to-the-minute.

Due to press deadlines, names may appear in the magazine after personnel are reinstated.

Texas Department of Health

Bureau of Emergency Management
Emergency Medical Services Rule

§157.38, Section k

(1)- *Failure to complete required CE: A certificant who has failed to complete the requirements for the initial two-year CE time period will be granted a 90-day extension period to complete and submit the required CE. Failure to complete and submit the CE requirements within that time frame shall be cause for emergency suspension until CE requirements are met.*

Emergency Suspensions

81171	BRAD	ABELL	GREENVILLE	EMT	69702	MICHAEL	BILLINGSLEY	BAYTOWN	ECA	21368	RICHARD	CARTER JR	HEMPSTEAD	EMT
89101	SHARON	ABERNETHY	EDDY	EMT	7331	GREGORY	BISHOP	LUBBOCK	EMT-P	13722	EDWARD	CASAREZ	CORP CHRISTI	EMT
58592	DANIEL	ACOSTA JR	EL PASO	EMT	86473	MELISSA	BLACK	TYLER	EMT-I	99996	JORGE	CASMIRO	HOUSTON	EMT
71359	JANIS	ADAIR	WIMBERLEY	EMT	71063	BRANT	BLAIR	CARROLLTON	EMT	9656	ORLANDO	CASTILLEJA	N BRAUNFELS	EMT
22134	CLAY	ADAM	HOUSTON	EMT-P	97194	GREGORY	BLAIR	MT PLEASANT	ECA	86862	ALICE	CATES	AUSTIN	ECA
84274	BRANDY	ADAMS	PADUCAH	EMT	89934	JASON	BLAIR	IOWA PARK	ECA	86027	KENNETH	CATES SR	CHILLICOTHE	ECA
88648	DONNA	ADAMS	MART	EMT	5770	JOHN	BLAIR	RICHMOND	EMT	44852	JUDY	CATHEY	GORDON	EMT
84573	JOY	ADAMS	STANTON	ECA	75723	REBECCA	BLAIR	KINGSBURY	EMT	91202	ALEJANDRO	CAVAZOS	PROGRESO	EMT
97719	RONALD	ADAMS	EL PASO	EMT	27510	ALFONSO	BLANCO JR	LAREDO	EMT-P	85465	ALFONSO	CAVAZOS	PASADENA	ECA
41840	DENSON	ADAMS JR	DUBLIN	EMT-P	48171	FREDDY	BLANKS	HOUSTON	EMT	38838	MICHAEL	CAVE	PORTLAND	ECA
67536	TERESE	ADCOCK	HOPE	EMT-P	12549	JAMES	BOEHLER	CARROLLTON	EMT-P	59634	JEFFREY	CAVINS	GRAND PRAIRIE	EMT
80940	SIMON	AGUIRRE	SAN BENITO	ECA	66052	MICHAEL	BOLTON	BURLESON	EMT	56782	ROBERT	CERECEREZ	EL PASO	EMT-I
8439	JACHLENE	AJLANI	HOUSTON	EMT	28312	JOHN	BOND	HUMBLE	EMT-I	63750	DAVID	CHAMBERLIN	FRIENDSWOOD	ECA
1480	ROBERT	AKERSTROM	CLUTE	EMT	91250	CARL	BONE	COMMERCE	ECA	56825	PATRICK	CHAMBERS	CANROE	EMT-P
37687	JOSE	ALBA JR	EL PASO	EMT	72570	VINCENT	BONANO	HOUSTON	ECA	38681	KEVIN	CHANCE	SANTA FE	EMT
99259	JESSE	ALCOSE	CORP CHRISTI	ECA	68156	PAMELA	BOONE	ARCHER CITY	EMT	51946	JAMES	CHARRON	HOUSTON	EMT
13053	JESUS	ALCOSER	CORP CHRISTI	EMT	44575	GARY	BOOTH	SOMERSET	ECA	70978	MICHAEL	CHESHIRE	HARLINGEN	ECA
25391	OMAR	ALEGRIA	OLMITO	ECA	88457	KATHERINE	BORDELAN	BLUM	EMT	50435	JOHN	CHOATE	HOUSTON	EMT-P
49711	DANNY	ALEMANIA JR	CORP CHRISTI	EMT	79549	DAVID	BOREN	ALVIN	ECA	99055	JACK	CHRISTENSEN	JEFFERSON	EMT
65730	ERIC	ALFUTH	DALLAS	EMT	66729	JENNIFER	BOSLER	LINDEN	ECA	54154	EUGENE	CHRISTIANSEN JR	THE COLONY	EMT-P
100134	HESHAM	ALGURG	AUSTIN	ECA	33727	JOHNNY	BOULET	THE COLONY	EMT	63897	MARC	CHUANG	DALLAS	EMT
70435	JEFFREY	ALLBRITTON	AUSTIN	EMT	36668	PATRICK	BOURCIER	DEVINE	EMT-P	50481	CHARLES	CLANTON	QUITMAN	EMT-P
64983	KAREY	ALLEN	AUSTIN	EMT	49660	GLADYS	BOURGOIS	MARBLE FALLS	EMT-I	64446	CHRISTOPHER	CLARK	HOUSTON	ECA
61711	RICKY	ALLEN	DEER PARK	ECA	38438	DONNA	BOWERS	FLINT	EMT-P	58147	MICHELLE	CLARK	LUBBOCK	EMT
97888	CHRISTY	ALLISON	SWEETWATER	EMT	84397	DONALD	BOX	CHANNELVIEW	ECA	93571	STEVEN	CLARK	CYPRESS	ECA
68230	PAMELA	ALMANZA	HIGHLANDS	EMT	7575	JAMES	BOYD	HOUSTON	EMT	55324	EULEMA	CLARKE	SANFORD	EMT-I
18579	MICHAEL	ALTON	MOODY	ECA	69260	REGINA	BOYD	HOUSTON	EMT	90718	JAMES	CLARY	EAGLE PASS	EMT
92656	ALMA	ALVARADO	LUBBOCK	EMT	59881	RHONDA	BOYENGA	HOUSTON	EMT	94015	LARRY	CLAVETTE	CORP CHRISTI	ECA
59447	BEVERLY	ANDERSON	LONGVIEW	EMT	73092	AMANDA	BRADLEY	LEAKEY	ECA	43272	KENNY	CLINE	BAYTOWN	ECA
89872	CHRISTOPHER	ANDERSON	LUFKIN	EMT	23267	BRIAN	BRADLEY	MT PLEASANT	EMT	21167	JOHN	CLONINGER	CARROLLTON	EMT-P
51485	SCOTT	ANDERSON	SOMERVILLE	EMT	70689	PATRICIA	BRADLEY	HOUSTON	EMT	33725	MARTIN	COHN	AUSTIN	EMT
16198	STEPHEN	ANDERSON	BAYTOWN	EMT-P	80328	JOHNNY	BRADSHAW JR	PAINT ROCK	EMT	85071	JUDSON	COLE	PEARLAND	ECA
14216	MARK	ANDRESS	SAGINAW	EMT	100044	ROBBY	BRAGG	MT PLEASANT	ECA	35036	WILLIAM	COLE	HOUSTON	EMT-P
13926	ROGER	ANDREWS	ANDREWS	EMT	38032	DAVID	BRANDT	AUSTIN	EMT-P	59713	MARK	COLLINS	LIBERTY	EMT
41299	MICHAEL	ANGEL	ANDREWS	EMT	29680	ALAN	BREWER	BRIDGEPORT	EMT-P	7324	SANDRA	COLLINS	HOUSTON	EMT
7592	SHARILENE	ANGELO	HIGH ISLAND	EMT-P	47928	GARY	BREWER	MONAHANS	EMT-P	43701	WENDELL	COLLINS	LINDALE	EMT-P
32801	JONATHAN	ANSEMI	WACO	EMT	59264	LEA	BREWER	PORT LAVACA	ECA	5480	ADRIAN	COLLINSON	HOUSTON	EMT-P
20604	WILLIAM	ANZ	N BRAUNFELS	EMT	88053	THOMAS	BREWER	UVALDE	ECA	68948	CARL	COMBS	KEMAH	EMT
58709	VICTORIA	ANZALDUA	YUMA	EMT-P	74505	KATHI	BRIDGES	GRAPELAND	ECA	82626	JANITA	COOPER	AUSTIN	EMT
28828	JOSEPH	ARCHER	MCALLEN	EMT-P	94843	PATRICIA	BRIDGES	GRAPELAND	ECA	59167	JILL	COPELAND	SEATTLE	EMT-P
38427	SUZI	ARMSTRONG	BANDERA	EMT	92583	PAUL	BRIDLE	AUSTIN	EMT	60682	MATTHEW	COPELAND	CANROE	EMT-I
97513	WILLIAM	ARMSTRONG	FT BLISS	EMT	100120	BRANDON	BRIGGS	SACHSE	EMT	13797	LOUIS	CORBEIL	BROWNSVILLE	EMT-P
43536	DARLENE	ARNOLD	BELLAIRE	EMT-P	87785	JEROME	BRINKMANN	LEANDER	EMT	78344	HOLLY	CORNWELL	HELOTES	EMT
86698	JESUS	ARRAMBIDE III	LAREDO	EMT	70440	CANDACE	BRITTAIN	WODEN	EMT	30072	YVONNE	CORSON	SANTA FE	EMT-I
100194	ANGEL	ARREDONDO	KYLE	ECA	59265	KELLY	BROD	HOUSTON	EMT	21915	LEONARD	CORTEMELIA	FREEPORT	EMT
60560	ROY	ARRIAGA	LAREDO	EMT	70331	JAY	BROOKS	SEMONOLE	EMT	29767	RAFAEL	CORTEZ	SAN JUAN	EMT-I
68849	PAMELA	ASHCRAFT	EMORY	EMT	85964	WILLIAM	BROOM	AMARILLO	EMT	7275	KENDAL	COUTORIE	SANTA FE	EMT-P
29312	CRAIG	ASHTON	NASSAU BAY	EMT	40598	AMANDA	BROOM	AMARILLO	EMT	92579	SHELLI	COWAN	AUSTIN	EMT
98934	NEIL	ATHAVALEY	HOUSTON	EMT	415	DENISE	BROWN	HOUSTON	EMT-I	7572	ERVIN	COX	HOUSTON	EMT
7762	EMMETT	ATHERTON	KELLER	EMT	76525	JAMES	BROWN	AMARILLO	EMT	89547	ROBERT	COX	LAKE JACKSON	EMT
22457	DENNIS	ATKINS JR	GRAND PRAIRIE	EMT	62881	JULIE	BROWN	AUSTIN	EMT	63139	JESSIE	COX JR	FLORENCE	EMT
82764	JEFFREY	ATKINSON	NEW CANEY	ECA	74606	KRISTI	BROWN	AMARILLO	EMT	1269	KAREN	COYLE	HUMBLE	EMT-P
95689	TIMOTHY	AUGUST	HOUSTON	EMT	93749	MARY	BROWN	EVANT	ECA	85671	LEESA	CORB	KARNES CITY	EMT
85376	SUSAN	AUSTELL	COLLEGE STA	EMT	15204	MICHELE	BROWN	CHINA SPRING	EMT	85138	MORGAN	CORB	GILMER	EMT
86706	PEDRO	AVILA JR	BROWNSVILLE	ECA	7914	TAMMY	BROWN	BEDFORD	EMT-P	99463	JACQUELINE	CRAFT	FORT WORTH	ECA
80831	BRANDON	AWBREY	LEVELLAND	EMT	21793	THOMAS	BROWN	FORT DAVIS	EMT-P	74633	LAURA	CRAIG	FORT WORTH	EMT
73881	STEPHANIE	AYALA	N BRAUNFELS	EMT	68337	DENNIS	BROWNING	VIDOR	ECA	1308	LAURA	CRONIN	DALLAS	EMT-P
91465	LAURA	AYERS	FORT WORTH	EMT	88219	PHILIP	BROWNING	GALVESTON	ECA	18110	JANET	CRUM	MT ENTERPRISE	EMT-P
97064	LLOYD	BACHMAN	HARDIN	EMT	67498	KENNETH	BRUNSWIG	CEDAR PARK	EMT	32027	ROLANDO	CUELLAR	WESLACO	EMT-I
95463	NORY	BAGGETT	SHERIDAN	EMT	100202	BOBBY	BUCKLAND	ROSHARON	EMT	51578	JOSEPH	CUMMINGS	ROUND ROCK	EMT
73194	JENNIFER	BAILEY	BOERNE	EMT	81207	KERI	BUG	SANFORD	EMT	59969	STACEY	CUMMINS	MARIETTA	EMT-P
92997	NIXIE	BAILEY	PLANO	EMT	61786	ELIZABETH	BULLARD	MANCHACA	ECA	6062	IAN	CURNOW	CLEBURNE	EMT-P
85704	STEVEN	BAILEY	MIAMI	EMT	20628	RICHARD	BULLOCK	SHERMAN	EMT-P	31396	JOSEPHINE	CYPERT	GARDEN CITY	EMT-I
11896	CODY	BAKER	MCALLEN	ECA	28010	RONALD	BURK	HOUSTON	EMT	81232	PAUL	DAHMS	AUSTIN	EMT
81463	PHILIP	BAKER	BAYTOWN	ECA	63624	JOSEPH	BURKE	SPLENDORA	EMT	78781	PATREES	DAIGLE	LULING	EMT
68216	SAUL	BALDERAS JR	LEAGUE	EMT-I	16570	JAMES	BURKHALTER	TYLER	EMT-P	76070	ERIC	DAMEWOOD	PLANO	EMT
37109	WENDOLYN	BALFANZ	VICTORIA	EMT	96856	ELISA	BURSON	KELLER	ECA	95458	MATTHEWS	DANIEL	SUGAR LAND	EMT
67342	KAREN	BALLARD	IOWA PARK	ECA	21987	JONATHAN	BURTON	SNYDER	ECA	9487	SIDNEY	DANIEL	BURLESON	EMT
51304	REBECCA	BALLEW	RUSK	EMT-I	36122	EDWARD	BUSBY	HOUSTON	ECA	96434	FAITH	DANIELS	KATY	EMT
60273	JOHN	BANNO	MESQUITE	EMT	67174	W	BUSH	HOUSTON	ECA	41337	WILLIAM	DARTHARD JR	MISSOURI CITY	ECA
58916	RICHARD	BAREFIELD JR	OVERTON	EMT-I	24696	BRIAN	BUSTILLOZ	BELTON	EMT	70958	ALTON	DAVIS	HIGHLANDS	EMT
91087	DONNA	BARLETTA	FORT MEADE	EMT	20258	LARRY	BUTLER	BROWNWOOD	EMT	69131	BRYAN	DAVIS	BUDA	EMT
39563	CHAD	BARNES	DEPORT	EMT-P	49583	ROBERT	BUTTS	PIPE CREEK	EMT	96725	JAMES	DAVIS	ARCHER CITY	EMT
77649	RICHARD	BARNES	ABILENE	EMT	30246	KIMBERLY	BUXKEMPER	EAST BERNARD	ECA	64388	JESSICA	DAVIS	BUDA	EMT
71779	MATTHEW	BAROODY	LITTLETON	EMT	15280	SANDY	BYERS	NACOGDOCHES	EMT	57451	LAVERNE	DAVIS	KILLEEN	EMT-P
60020	GUSTAVO	BARRON	HOUSTON	EMT	65246	DWAYNE	BYRD	EDINBURG	EMT	100103	RICKY	DAVIS	COOLIDGE	ECA
17609	HUBERT	BARROW	DALLAS	EMT-I	100187	ABRAHAM	CABELLO	AUSTIN	EMT	75826	LUNA	DE	BROWNSVILLE	ECA
34766	JAMES	BARTA	VICTORIA	EMT-I	90988	EDDIE	CALAHAN	FORT WORTH	EMT	29354	KATHERINE	DEADERICK	DALLAS	EMT-P
100161	BRANDY	BASS	LUFKIN	ECA	82311	BETTY	CALLAWAY	RISING STAR	ECA	81230	DAVID	DEAN	CORP CHRISTI	ECA
88090	THOMAS	BATES	CADDO MILLS	ECA	43157	RICHARD	CALLAWAY	SPURGER	EMT-I	94357	ROBERT	DEASES	WOODSBORO	ECA
71933	JILL	BATSON	COLLEGE STA	EMT	52709	CAROLINA	CALZADA	CORP CHRISTI	EMT	87771	COURTENAY	DEGINDER	AUSTIN	EMT
48847	BILLY	BATTS II	THORNDALE	EMT-P	69222	KEVIN	CAMERON	HARLETON	ECA	29599	JOSE	DELAPAZ	BISHOP	ECA
78862	APRIL	BAXTER	UVALDE	ECA	66669	DANIEL	CAMP	ALTANTA	EMT	58098	CINDY	DELON	CHANNELVIEW	EMT-I
85457	MARIAN	BAXTER	HOUSTON	EMT	10659	BRENDA	CAMPBELL	MIDLAND	EMT-P	32319	DANIEL	DELGADO	DUBLIN	EMT
48631	JAMES	BEACHAM	HOUSTON	EMT	100213	FRED	CAMPBELL	PAINT ROCK	EMT	25825	SARA	DELGADO-LOPEZ	FT WORTH	EMT
4711	KISTI	BECKWITH	LOS FRESNOS	EMT-P	48753	KENT	CAMPBELL	MAYPEARL	EMT-P	96238	R	DENNIS	AUSTIN	ECA
72358	MATTHEW	BELL	ORANGE	EMT	17057	GILBERT	CAMPOS JR	N BRAUNFELS	EMT	87178	MELANIE	DENNISON	ORANGE	EMT
60685	LLOYD	BELROSE	CENTER	EMT-I	21892	ABEL	CORP CHRISTI	CANALES	ECA	57822	ALICE	DENTON	ROUND ROCK	EMT
31933	CHRIS	BELTO	KATY	EMT	42422	ARMANDO	CANO	EL PASO	EMT-P	813	DEBRA	DESENS	TEMPLE	EMT-P
93569	MANUEL	BENAVIDEZ	BROWNSVILLE	ECA	8124	RANDY	CANTRELL	WEST COLUMBIA	ECA	5421	THOMAS	DEVINE	FORNEY	EMT-P
97846	MICHELLE	BERGERON	LAKE JACKSON	EMT	90761	IGNACIO	CANTU	GRULLA	ECA	90775	MONIQUE	DEVRIES	SAN ANTONIO	EMT
31097	DEAN	BERGMANN	FORT DAVIS	EMT-I	10829	OSCAR	CANTU	LIBERTY	EMT	68068	STEFANIE	DEWEY	AGUA DULCE	EMT
76760	JOSEPH	BERNAL	SAN ANTONIO	EMT	77886	LORA	CAPPS	JEFFERSON	EMT	91301	CHRISTOPHER	DIAMOND	DALLAS	EMT
81170	JAMES	BERRYHILL	SEAGOVILLE	EMT	21181	KELLY	CARDIN	NACOGDOCHES	EMT-P	71770	MANDY	DICKERSON	LOCKHART	EMT
89086	MINERVA	BERTOLINO	BURNET	ECA	78646	MONICA	CARDONA	PORT ARTHUR	EMT	34080	ROBERT	DIXON	TOM BEAN	EMT-P
22748	ARTHUR	BETANCUR	LUBBOCK	EMT	80155	BRYAN	CARGILL II	RIVER OAKS	ECA	90722	CYNTHIA	DOLEN	HOUSTON	EMT
99043	SHIRLE	BETTS	SAN ANTONIO	EMT	474	PAMELA	CARIAN	LAKEHILLS	EMT	75215	CANDELARIO	DOMINGUEZ	ROUND ROCK	EMT
64610	TONYA	BICKEL	BELTON	EMT	65816	KEVIN	CARLSON	WICHITA FALLS	EMT	33557	RICHARD	DONALD	LUMBERTON	EMT
14012	RICHARD	BICKLEY	LUFKIN	EMT-P	37658	TAMMY	CARMICAL	CRANDALL	EMT-P	92532	PATRICK	DONOVAN	HUNTSVILLE	EMT
52485	ROBERT	BIGGS	RICH HILLS	EMT										

Emergency Suspensions

78930	HEATHER	DORSETT	AUSTIN	EMT	61147	GREGORIO	GAXIOLA	EL PASO	EMT	82050	RANDALL	HIGGINS	WAKE VILLAGE	ECA
85319	BILLIE	DOSS	COPPERAS	EMT	60328	KEVIN	GHEHRIG	SAN ANTONIO	EMT-I	72024	CALLEN	HIGHT	CORP CHRISTI	ECA
80650	RASTREVA	DOTSEY	CEDAR HILL	EMT	88771	KATERI	GEMPERLE	AUSTIN	ECA	98387	PHRONIA	HILBURN	DELL CITY	EMT
1906	MARATHA	DRIVER	ROUND ROCK	EMT	98501	LOLA	GENTLES	MANCHACA	ECA	13614	REGINALD	HILL	SPRING TOWN	EMT-P
4536	VICTOR	DUBROVIN	BENBROOK	EMT	83875	KEVIN	GENZ	NADA	ECA	59186	SYLVIA	HILL	KILLEEN	EMT-P
85135	JASON	DUDLEY	WICHITA FALLS	ECA	41598	ANDREW	GEORGE	GARLAND	EMT	91645	JOE	HINESLEY	BOERNE	EMT
9490	CURTIS	DUDLEY JR	COMANCHE	EMT	90656	VERONICA	GEORGE	COMFORT	EMT	49303	JAMES	HINTON	ANGLETON	EMT
75597	BARBARA	DUGGANS	PARADISE	ECA	52305	TRACY	GIBSON	GERNHART	EMT-I	52051	TONDA	HINTON	HOUSTON	EMT-I
10592	GEORGE	DUNN	BRYAN	EMT-I	4137	ALAN	ALAN	MCKINNEY	EMT-P	62263	KYLE	HODGES	PLANO	EMT
73875	MELINDA	DUNN	DUNCANVILLE	EMT	48257	JEFFREY	GILBERT	GOLDTHWAITE	EMT-I	72044	SHAWN	HODGKINSON	BEAUMONT	ECA
88728	CHRISTOPHER	DUNNAHOOD	COLLEGE STA	EMT	97521	JOHN	GILBERT	NAVASOTA	EMT	13956	ANASTASIA	HODGSON	AZLE	EMT-P
12756	ERIC	DUPLANT	SUGARLAND	EMT	56102	NANCY	GILCHREST	EULESS	EMT	82698	TOMMY	HOELSCHER	GARDEN CITY	EMT
75376	ANTONIO	DURAND JR	SAN ANTONIO	EMT	87358	RICKY	GILMORE	CLYDE	ECA	18449	BOBBY	HOFFMAN	ALPINE	EMT-P
91395	IDA	DUSEK	MILES	EMT	23438	STAN	GISLER	GARLAND	EMT-P	82490	SUSAN	HOGG	SWEETWATER	EMT
13250	MICHAEL	DZIUKE	FALLS CITY	EMT	87251	TRACY	GIVENS	AUSTIN	EMT	7443	JEFFREY	HOLLEY	PALESTINE	EMT
48164	RAYMOND	DZIUKE	FALLS CITY	EMT	62418	MAURA	GLOVER	SPRING	EMT	90975	JAMES	HOLLINGSWORTH	NACOGDOCHES	EMT
57438	DOUGLAS	EASTWOOD	ROUND ROCK	EMT-P	87316	MICHAEL	GLOVER	HUNTINGTON	ECA	34532	RONALD	HOLLOMAN	LONGVIEW	EMT
86854	MATTHEW	ECKERMANN	AUSTIN	EMT	85772	SAAM	GOLGOON	GARLAND	ECA	21820	JERRY	HOLLOWAY	FERRIS	EMT
98848	MARSHA	EDELHEIT	HOUSTON	EMT	53297	BARBARA	GOLLAHER	BENBROOK	EMT-P	73428	DAVID	HOLMES	TEMPLE	EMT
8133	CORRY	EDWARDS	GARLAND	EMT-P	85407	TRACIE	GOMERSALL	EL PASO	EMT	100083	ERIN	HOLSTROM	ROCKWALL	EMT
78438	WILLIAM	EDWARDS	NOTREES	EMT	8754	JESSE	GOMEZ	BROWNSVILLE	ECA	93182	TIM	HOLTkamp	WACO	EMT
100077	JONI	EGAN	CHAPARRAL	EMT	55250	RUBEN	GOMEZ	DALLAS	EMT-P	92395	CONNIE	HOLUB	HURST	EMT
24932	DANIEL	EGERT	SPRING	EMT	33141	VALERIE	GONZALES	BRYAN	EMT	77565	JAMES	HOMMEL	WACO	ECA
56938	KENNETH	EGLI	DENTON	EMT-P	87405	ANGELITA	GONZALEZ	PREMONT	EMT	65901	JOSEPH	HORN	BROWNSVILLE	ECA
65031	IFEANYI	EHILOBU	DALLAS	EMT	79111	HENRY	GONZALEZ	CORP CHRISTI	ECA	68878	RICK	HOWARD	LEWISVILLE	ECA
94132	SHAWN	ELDREDGE	PFLUGERVILLE	ECA	58436	MARTIN	GONZALEZ	BROWNSVILLE	EMT-I	65978	ROSS	HOWE	KEENE	EMT
82242	DEBORAH	ELIAS	COLLEGE STA	EMT	13638	PALMIRA	GONZALEZ	MATHIS	EMT	87842	KEVIN	HOWERTON	FORT WORTH	EMT
62798	ERNEST	ELIZONDO	ALICE	EMT	60103	PHILLIP	GONZALEZ	CORP CHRISTI	ECA	8455	WILLIAM	HUDGINS	COLUMBUS	EMT-P
73376	IVONNE	ELIZONDO	SAN ANTONIO	EMT	95146	EVARISTO	GONZALEZ JR	ALICE	EMT	95680	BILLIEJO	HUDSON	CLIFTON	ECA
73761	REBEKAH	ELKINS	HOUSTON	EMT	100203	CHENOA	GOOD	ARLINGTON	EMT	6182	MANA	HUDSON	RICHARDSON	EMT
69160	DAVID	ELLIOTT	PECOS	ECA	55874	PAUL	GOOD	PORTLAND	EMT	1771	PAMELA	HUDSON	AUSTIN	EMT
76109	REGGIE	ELLIOTT	BAYTOWN	EMT	62134	CYNTHIA	GORDON	CARROLLTON	EMT	70851	RAJAH	HUFF	GRAPELAND	ECA
10534	WILLIAM	ELLIOTT	GRANDBURY	EMT	70356	ELSIE	GORI	AUSTIN	ECA	8305	JUDY	HUFFMAN	HOUSTON	EMT
2262	PATRICIA	ELLISON	EL PASO	EMT-P	95818	CHRISTOPHER	GOUGE	AUSTIN	EMT	2562	MICHAEL	HUGHES	SAGINAW	EMT
14235	ROBYN	ELLISON	HILLTOP LAKES	EMT	95820	DIANE	GOUGE	AUSTIN	EMT	94768	SUSAN	HUGHES	BLUE RIDGE	ECA
85577	DIANNE	EMLER	MAGNOLIA	EMT	88923	JOSEPH	GOULDING	BROWNSVILLE	ECA	97047	SUZANN	HUGHES	BLEIBLERVILLE	EMT
97523	DENNIS	ERVINE	GARLAND	ECA	42589	JAMES	GOWEN	ELECTRA	EMT	26632	LINDA	HULAN	AUSTIN	EMT
51381	JOHN	ESTES	PORTLAND	EMT	65145	GARY	GRASPO	COPELL	EMT	27611	KEVIN	HULL	PAMPA	EMT-P
99594	MANUEL	ESTRADA	PLAINS	EMT	91893	CHARLES	GREEN	WICHITA FALLS	ECA	37634	KEITH	HUMPHRIES	MESQUITE	EMT-P
59762	DAVID	ESTRADA JR	PORT ARTHUR	EMT	88368	COOPER	GREENWOOD	AUSTIN	EMT	85383	WILLIE	HUNSAKER	DALLAS	ECA
86492	CHARLES	EVANS	BENBROOK	EMT	87109	MARC	GRETHER	COLLEGE STA	EMT	61913	PETER	HUR	LUBBOCK	EMT
91683	JEFFERY	EVANS	GARLAND	ECA	63685	SCOTT	GRIBBLE	MCALLEN	EMT	68433	STEVEN	HURWITZ	HOUSTON	EMT
91047	JULIE	EVANS	SUGARLAND	EMT	4193	GRANDVILLE	GRUBBS	HOOKS	EMT	60948	STACY	HUSKEY	HOUSTON	EMT-I
65899	KATHLEEN	EVANS	CYPRESS	ECA	21250	DANIEL	GUERRA	CORSICANA	EMT-P	53041	JERRY	HUSSONG	DALLAS	EMT-P
92956	LINDA	EVANS	RISING STAR	ECA	97762	ANGELA	GUERRERO	AUSTIN	EMT	61359	JEANINE	INMAN	KELLER	ECA
48267	PERRY	EVANS	ARLINGTON	EMT-P	27622	DALE	GUNNELS	PORTLAND	EMT-P	88504	AMY	IVRY	W COLUMBIA	ECA
76632	NADINE	FARID	HOUSTON	EMT	80854	MARK	GUST	HOUSTON	ECA	75221	ROBERT	IZATT	AMARILLO	EMT
25596	KENNY	FARRAR	COMMERCE	EMT-P	75857	JAMES	GUYTON	WAKE VILLAGE	ECA	65787	ANNE	JACKOVICH	AMARILLO	EMT
54936	CHRISTOPHER	FASSEL	OCEANSIDE	EMT	86514	ADAN	GUZMAN	SAN BENITO	EMT	41686	THOMAS	JACKOVICH	HOUSTON	EMT
25494	RICKY	FALKNER	ALVIN	EMT-I	8706	NEHEMIAS	GUZMAN	CORP CHRISTI	EMT-P	83788	BRYAN	JACKSON	DUNCANVILLE	EMT
98933	RUBY	FAVELA	TEMPLE	EMT	58421	KEITH	GWALTNEY	TYLER	EMT-I	76459	MELISSA	JACKSON	HOUSTON	EMT
62777	JOSEPH	FELKEL	DRIPPING SPGS	ECA	98836	TAMANH	HA	KATY	EMT	67113	WILLIAM	JACOB	CORP CHRISTI	ECA
89877	CHERI	FERGUSON	COPPERAS COVE	EMT	48989	DENNIS	HAGAN	SHERMAN	EMT-P	6007	MILDRED	JAMES	LAPORTE	ECA
8499	MICHAEL	FERGUSON	HENDERSON	EMT-I	75226	JEFFERSON	HAILEY	CHANNELVIEW	EMT	81591	ALLEN	JANSA	MIDLAND	EMT
65248	WILLIAM	FERNSTAEDT	EL PASO	EMT	74622	RANJAY	HALDER	PLANO	EMT	43874	DON	JANSEN	GEORGETOWN	EMT-P
27209	JOSEPH	FIEDLER	TERLINGUA	EMT-P	82429	DOUGLAS	HALE	WALLER	EMT	11995	ANGELA	JASPER	HOUSTON	EMT
1270	BARBARA	FINCH	AUSTIN	EMT	58685	SUSAN	HALEY	MANVEL	EMT-I	84019	PATRICK	JAYE	PLANO	EMT
90849	JOHN	FINN	GRAND PRAIRE	EMT	69684	LOREE	HAMBRICE	MIDLAND	EMT	50493	MICHAEL	JEANS	MARSHALL	EMT
100169	CARL	FIRTH	HOUSTON	EMT	10658	ROBERT	HAMILTON	CISCO	EMT-I	73156	CARL	JENKINS	SEGUIN	EMT
85483	JIMMIE	FLEMING	CENTER	EMT	98155	MARY	HAMNER	ELGIN	ECA	55658	STEVEN	JENKINSON	LANCASTER	EMT-P
26434	M	FLEURY	SAN ANTONIO	EMT-I	89266	GEORGE	HANCOCK	HOUSTON	EMT	64492	ANGELA	JENNINGS	EMORY	ECA
71199	RAFAEL	FLORES	DUMAS	EMT	10698	MOZELLE	HANCOCK	SOMERVILLE	EMT-P	56988	BENITA	JENNINGS	PENELOPE	EMT-P
11333	TOMMY	FLORES	EL PASO	ECA	71710	ANA	HAND	AMARILLO	EMT	72393	CLAUDIA	JOHNSON	AUSTIN	ECA
98999	BETTY	FLOYD	RISING STAR	ECA	33678	ROGER	HAND	TEXARKANA	EMT	40457	KENNETH	JOHNSON	LANEVILLE	EMT
59238	ANDREW	FLYE III	LEAGUE CITY	ECA	39608	ALAN	HANES	RED OAK	EMT-P	35316	MATTHEW	JOHNSON	DALLAS	EMT-P
59199	ALLEN	FOLLIS	TEMPLE	EMT	11831	TRISH	HANNA	SAN ANGELO	EMT	87250	SUMMER	JOHNSON	FARWELL	ECA
6664	ELISABETH	FORVILLE	HOUSTON	EMT-P	78051	RHONDA	HANNAMAN	SAN ANGELO	EMT	12977	VIRGINIA	JOHNSON	JASPER	EMT-P
37568	PHILLIP	FORBUS	FRISCO	EMT-P	69959	CINDY	HANSON	AUSTIN	EMT	71333	ENEMENCIO	JOHNSON JR	PREMONT	EMT
54377	LORI	FORD	FORT WORTH	EMT-P	22731	RHONDA	HARDIN	ABERNATHY	EMT	37862	GLEN	JOHNSTON	BAYTOWN	EMT
69969	DAPHNE	FOSTER	TYLER	EMT	84921	HARLIN	HARGIS	SULPHUR SPGS	EMT	63236	KIRKWOOD	JOHNSTON	HOUSTON	EMT
58714	DONALD	FOSTER	TYLER	EMT	27947	JOHN	HARMON	HICKORY CREEK	EMT	90901	ALAN	JONES	GRANIT SHOALS	EMT
81785	ELZORA	FOSTER	ORANGE	EMT	68886	MICHAEL	HARNISCH	MOODY	ECA	25378	DANNY	JONES	COLBERT	EMT-P
23077	RICK	FOSTER	GARLAND	EMT	41797	JENNIFER	HARPER	LAMPASAS	EMT-I	60027	JERRY	JONES	GRAHAM	EMT
51234	CRYSTAL	FOUNTAIN	PORTER	EMT-I	20705	LAURA	HARPER	VAN HORN	EMT-I	22816	JOHNNY	JONES	LA PORTE	ECA
92688	ERIC	FOWLER	ODESSA	EMT	56229	JEAN	HARRIGAN	HOUSTON	EMT	25897	LISA	JONES	SAN ANGELO	EMT
35651	JOE	FOWLER	DALLAS	EMT-P	2783	DANIEL	HARRIS	HOUSTON	EMT	70082	MARK	JONES	MANVEL	EMT
92457	JAMES	FOX	COLLEGE STA	EMT	13651	JAMIE	HARRIS	WAXAHACHIE	EMT-P	18396	MAX	JONES	HOUSTON	ECA
65890	CLIFFORD	FRALICK	BROWNSVILLE	ECA	97622	SEPH	HARRIS	HOUSTON	EMT	2970	PAT	JONES	CORP CHRISTI	EMT
73924	ANDREA	FRANCO	DALLAS	EMT	93629	DAVID	HARTWICK	N BRAUNFELS	EMT	13295	RANDALL	JONES	DALLAS	EMT-P
47700	GENA	FREEMAN	NEWTON	EMT-P	92543	LORI	HARVEY	DECATUR	EMT	63289	SHERRI	JONES	LAWARD	EMT
86348	TIMOTHY	FREGIA	DAISETTA	EMT	61978	GEORGE	HASSELL	BIG SPRING	ECA	73570	THOMAS	JONES	LA FERIA	ECA
36082	MARK	FRYSAK	GARDEN CITY	EMT	75396	ROBERT	HATLEY	ARLINGTON	EMT	2519	DOLPHUS	JONES JR	ANDREWS	EMT
82295	VICTORIA	FUENTES	MATHIS	EMT	49572	CAMMIE	HAUSER	CEDAR PARK	EMT-I	10323	DAVID	JORDAN	TYLER	EMT
73602	BARRY	FULFER	DUNCANVILLE	EMT	68278	TOMMY	HAVELKA	ROSENBERG	EMT	81749	CHARLES	JUST	AUSTIN	EMT
12443	TIM	FULKS	ANDREWS	EMT	67466	ROBERT	HAVENS	LOS FRESNOS	ECA	76511	HUI	KANG	HOUSTON	EMT
69552	ANGELA	FULLER	DALLAS	EMT	34905	HOWARD	HAWBAKER	MISSION	EMT-P	21415	THOMAS	KANTZOS	FT WORTH	EMT
67773	JACK	FULSOM	BROWNSVILLE	ECA	95661	FELICIA	HAWKINS	DALLAS	EMT	64744	RONNIE	KARLIN	FORT WORTH	EMT
75116	ANITA	FULTON	SHALLOWATER	EMT	42302	KENNETH	HAYDEN	SPLENDORA	EMT	15245	JOHN	KASP BAUER II	ARLINGTON	EMT-I
57606	MICHAEL	FUNK	EULESS	EMT	86249	JILL	HAYES	VALLEY MILLS	ECA	54859	JAMES	KAUFFMAN	BANDERA	EMT
86815	DAVID	FYFE	CADDO MILLS	EMT	66494	KENNETH	HEALY	ROWLETT	ECA	74128	JUDY	KAYS	ACKERLY	EMT
6764	PORTIA	GAITHER	EL PASO	EMT-P	69445	MICHAEL	HEIDEMANN	LEAGUE CITY	ECA	68910	TINA	KEATHLEY	COLLIDGE	ECA
43784	CHARLES	GAITZ	HOUSTON	EMT-P	17561	PEGGY	HELBERT	MT PLEASANT	EMT-P	99946	MICHELLE	KEEN	NOLANVILLE	EMT
68663	ABELARDO	GALVAN	BROWNSVILLE	ECA	26168	JAMES	HELTON	FULTON	EMT-P	18202	WANDA	KEENE	BAYTOWN	ECA
17089	CARLOS	GARCIA	PEARSALL	EMT-I	26397	JAMES	HENDRICKS	VAN ALSTYNE	EMT	19853	BILLY	KELLY	SO HOUSTON	ECA
97167	DOMINGO	GARCIA	LEANDER	EMT	99456	JUAN	HERNANDEZ	COLLEGE STA	EMT	97441	KIMBERLY	KELLY	AMARILLO	EMT
46471	JAIME	GARCIA	MERCEDES	EMT	34119	MICHAEL	HERNANDEZ	CORP CHRISTI	EMT	97532	THERESA	KENWORTHY	SAN ANTONIO	EMT
22287	LUCI	GARDNER	BURNET	EMT-P	98266	RAYMOND	HERNANDEZ	CORP CHRISTI	EMT	28260	KEITH	KERCHO	HOUSTON	EMT
79767	WILLIAM	GARNER	SPRING	EMT	50941	JESSE	HERNANDEZ	JR SAN ANTONIO	EMT-P	10770	RONALD	KEYS	CENTER	EMT-P
39876	WILLIAM	GARRETT	BRIDGEPORT	EMT	68833	PAULA	HERRING	FORT WORTH	EMT	98542	ALICIA	KIEFER	RICHARDSON	EMT
73292	ELIZABETH	GARZA	CORP CHRISTI	EMT	48658	JANIE	HIGGINBOTHAM							

Emergency Suspensions

59560	SAMUEL	KILPATRICK	PRINCETON	EMT	95998	JESSE	MCGRAW	SANTA FE	EMT	76265	ROGER	PARK	HOUSTON	ECA
91515	MICHAEL	KOJIS	PECO	ECA	47323	WILLIAM	MCINNISH	HICKORY CREEK	EMT	80446	ANITA	PARKER	ARLINGTON	ECA
64498	JASON	KOLTER	HOUSTON	EMT	54309	JAMES	MCCINTIER	QUANAH	ECA	100019	CHRISTINE	PARKER	SEGUIN	EMT
15179	EUGENE	KOSTKA	DICKINSON	EMT	100201	RICHARD	MCKEOWN	CORP CHRISTI	EMT	81376	PAMELA	PARKER	CORP CHRISTI	ECA
13951	CHRISTOPHER	KRAM	HOUSTON	EMT	99976	DEBORAH	MCKNIGHT	BRIDGE CITY	EMT	57093	RAY	PARKER	FT WORTH	EMT
52144	ROBERT	KRUM	INDEPENDENCE	EMT-I	52207	JOHN	MCLURE JR	FREPORT	EMT	75533	NELDA	PARRILL	JEFFERSON	EMT
70609	CHARLIE	KUTIL	SAN ANTONIO	EMT	44422	DOUGLAS	MCMELLON	HOUSTON	EMT-P	60118	DEREK	PARRIS	CORP CHRISTI	ECA
44125	RUE	LA	SAGINAW	EMT-I	86308	JAMES	MCNEELY	COLLEGE STA	EMT	81911	CLAIRE	PARSONS	AUSTIN	EMT
93510	PATRICIA	LAHAYE	ORANGE	ECA	81571	MICHAEL	MCNEELY	NEEDVILLE	EMT	61449	AMY	PASCOE	HOUSTON	EMT
100107	DAVID	LALONDE	KIRBYVILLE	EMT	9137	RICHARD	MCNIBCE	WILLIS	EMT	88571	JAMES	PATE	CLUTE	ECA
88561	MICHAEL	LAMBERT	MIDLAND	EMT	22629	DARYL	MCWHORTER	LAPORTE	ECA	72762	CHRIS	PATRICK	GRAND PRAIRIE	EMT
88948	LAURA	LANDERS	IOWA PARK	ECA	82632	JASON	MCWILLIAMS	ROUND ROCK	EMT	98991	PATRICE	PATTERSON	PEMBROKE	EMT
94909	RICHARD	LARSEN	PLANO	EMT	43744	MANUEL	MEDEL	HOUSTON	EMT-P	14701	KIMBERLY	PAYNE	MARQUEZ	EMT
85884	MARY	LARSON	PIPE CREEK	ECA	21809	ROBERT	MEEKS	HOUSTON	EMT	68048	JULIE	PEARSON	HOUSTON	EMT
66404	JON	LAUGHLIN	AUSTIN	EMT	69911	CARLOS	MENDEZ	BROWNSVILLE	ECA	76915	CHRISTOPHER	PENSHORN	BLANCO	EMT
44373	RICHARD	LAVERY JR	GAIL	EMT-I	70396	BENITO	MENDOZA III	CORP CHRISTI	EMT	1126	ROYCE	PENSKI	N BRAUNFELS	EMT
99971	MARYNA	LAWRENSON	COPEVILLE	EMT	80482	DANIEL	MEREDITH	BELTON	EMT	59736	FRANK	PEREZ	HOUSTON	EMT
7304	ZEB	LE VASSEUR JR	BAYTOWN	EMT-P	33400	THELMA	MERRYMAN	FRANKLIN	EMT	50368	JESUS	PEREZ	BROWNSVILLE	EMT-I
27752	KENNETH	LENART	PENELOPE	ECA	55143	DOUGLAS	MESTEL	BISMARCK	EMT-P	71619	DEANNA	PERKINS	DALLAS	EMT
80679	JACKIE	LENDERMON	STERLING CITY	EMT	84479	ALLEN	MEYER II	PIPE CREEK	ECA	287	DELLA	PERRY	FORT WORTH	EMT
72124	CHERYL	LENGEFELD	JOHNSON CITY	EMT	66396	ROBERT	MHOON	ARLINGTON	EMT	44009	KRISTI	PERRY	KAUFMAN	EMT-P
81099	KIM	LEONARD	DALLAS	EMT	96901	DONNA	MICHAL	HOUSTON	EMT	81370	SUZANNE	PERRY	AUSTIN	EMT
66914	TIMOTHY	LEWIS	SAN ANTONIO	EMT	63563	DAVID	MICHALK	TEMPLE	EMT	72575	VICTORIA	PERRY	HOUSTON	EMT
65214	WILLIAM	LEWIS JR	KILLEEN	EMT	51962	JEFFREY	MICULKA	PORTLAND	EMT	71068	PAM	PETERSON	KATY	EMT
66044	CHARLES	LIBBY	CONVERSE	EMT	68963	MICHAEL	MIDAY	LIVINGSTON	ECA	63234	PATRICIA	PETERSON	KILLEEN	EMT
94240	GEORGE	LINDSEY	DEER PARK	ECA	72712	BILLY	MILLER	LA RUE	ECA	71579	PRESTON	PETERSON	SUGARLAND	EMT
79139	TOM	LINDSEY	WICKETT	ECA	28288	GARRETT	MILLER	HOUSTON	ECA	67805	THINH	PHAN	MISSOURI CITY	EMT
97499	MATT	LINGER	CHEYENNE	EMT	59260	RICHARD	MILLER	BAY CITY	ECA	58749	HUBERT	PHARR	DENTON	EMT-P
65274	GEORGE	LINHART	GALVESTON	EMT	66000	NANCY	MILLINER	DENTON	ECA	3275	DAVID	PHILLIPS	HOUSTON	EMT-P
74091	DIXIE	LIVELY	MIAMI	EMT	54781	SHELLY	MILLS	KATY	EMT-P	44165	DOUGLAS	PHILLIPS	WOODVILLE	EMT
83897	EVA	LOCKLIER	EAGLE LAKE	EMT	80032	GARY	MILUM	LOS FRESNOS	ECA	91982	DONALD	PHILLIPS JR	SANTA FE	ECA
13812	JOHNNY	LOFTIN	ARLINGTON	EMT	60053	EDDY	MINOR	RICHMOND	ECA	90825	WILLIAM	PICKENS	KELLER	ECA
11414	JUDY	LONG	SPRING	EMT-I	81108	PAUL	MINOR	PIPECREEK	ECA	79221	DARYL	PIEPRZYCA	GARWOOD	ECA
45016	REBECCA	LONGLEY	UNIVERSAL CITY	EMT-P	92653	ABEL	MIRANDA	SAN ANTONIO	EMT	92294	CHRISTA	PIERCE	AUSTIN	ECA
39689	MARCO	LONGORIA	BROWNSVILLE	ECA	85440	BRENDA	MITCHELL	ALVARADO	EMT	97576	TOMMY	PIERCE JR	DENVER CITY	ECA
43387	RANDY	LOONEY	DENTON	EMT-P	15292	LARRY	MITCHELL	QUITMAN	EMT-P	10428	BENITA	PIPER	ROCKSPGS	ECA
57989	THOMAS	LOPATOWSKI	KINGWOOD	EMT	59771	MICHAEL	MITCHELL	HOUSTON	ECA	95460	MELISSA	PIPER	BRYAN	EMT
68951	ERIC	LOPEZ	CORP CHRISTI	ECA	41075	JOE	MOBLEY	CEDAR HILL	EMT-P	66963	ALLEN	PITRE	HOUSTON	EMT
76535	JOE	LOPEZ	DALLAS	EMT	72699	SHERRI	MOFFATT	AMARILLO	EMT	3161	LINDA	PITTS	KATY	EMT-P
59244	CLARENCE	LOTT	BAY CITY	ECA	82042	KIRK	MOLLOY SR	TYLER	ECA	49607	ANDREA	PIWONKA	MIDLOTHIAN	EMT-P
3576	KAREN	LOTT	MARION	EMT	82635	LOUIS	MONCIVAIS	ROUND ROCK	EMT	58902	GREGORY	PLATT	GALVESTON	EMT-I
16782	DONALD	LOUDON	DENTON	EMT	90482	RAFAEL	MONCIVAZ	BROWNSVILLE	ECA	100067	CHRIS	PLUMLEE	GARLAND	EMT
97708	MELISSA	LOVEJOY	PIPECREEK	ECA	27519	KRISTOPHER	MOODY	HOUSTON	EMT-P	45597	GARY	POE	SNYDER	EMT-I
88567	MICHAEL	LOVING	LA MARQUE	EMT	71316	WILLIAM	MOORE	CARROLLTON	EMT	6168	MITCHELL	POE JR	CORP CHRISTI	EMT
89773	JOHN	LOWE	CORP CHRISTI	ECA	75676	MARTHA	MORALES	KILLEEN	EMT	57876	KRISTINE	POINDEXTER	PLANO	EMT-P
19961	JOSEPH	LOWERY	HOUSTON	EMT-I	48071	SAMUEL	MORALES	AMARILLO	EMT	65013	WILLIAM	POKORNY	HOUSTON	EMT
28624	RUBY	LOZOYA	SOCORRO	EMT-P	65186	KATHLEEN	MORELAND	DALLAS	EMT	93086	SHELLEY	POLK	PFLUGERVILLE	ECA
56366	CLIFFORD	LUSK	HOUSTON	EMT-P	32262	BONNIE	MORGAN	CROWLEY	EMT-I	45499	MICHAEL	POPE	MT BELVIEU	EMT-I
45134	JOSHUA	LUSTER	VEGA	EMT	13452	LINDY	MORGAN	COMANCHE	EMT-I	14469	JOSEPH	PORTER	CHANNELVIEW	EMT-P
26280	BRIAN	LYNN	FRISCO	EMT-P	66916	MICHAEL	MORGAN	AUSTIN	ECA	1575	KARAN	PORTER	CHANNELVIEW	EMT
76708	CARL	MACOMB	LOS FRESNOS	ECA	86541	WILLIE	MORGAN	MIDLAND	ECA	96921	PHILIP	PORTER	AUSTIN	EMT
66210	CHRISTY	MADL	HARKER HGTS	EMT	69422	BRYAN	MORRISON	HOLLIDAY	ECA	73927	SUSAN	POUNDS	BELTON	EMT
51985	JEFFREY	MADRID	ARLINGTON	EMT	56497	DONALD	MORROW	SULPHUR SPRING	EMT-P	96004	ELIZABETH	POWELL	PLANO	EMT
66577	RYAN	MAJOURS	COLLEGE STA	EMT	59894	JASON	MORROW	SAN ANTONIO	EMT	72514	NINA	POWELL	BRIDGE CITY	EMT
2865	KATHRYN	MAJORS	KATY	EMT	62932	MICHAEL	MORROW	IRVING	EMT	27444	WILLIAM	POWERS	ALVIN	ECA
79186	NIMISHA	MAKAN	LEAGUE CITY	EMT	13524	EVA	MOSER	KATY	EMT-I	43673	KEN	PRATT	CORP CHRISTI	ECA
33543	CLARA	MALEKIAN	EL PASO	EMT	6746	GEORGE	MOSS	HARDIN	ECA	70590	RHONDA	PREZZAK	EAGLE LAKE	ECA
63959	DANIEL	MALLOY	LUBBOCK	EMT	99127	MICHAEL	MULLEN	CLARENDON	EMT	60084	JAMES	PRESSON JR	SAN ANTONIO	EMT
71694	KATHRYN	MANCHESTER	ROSENBERG	EMT	24970	JAMES	MULLER	KATY	EMT	9457	GENE	PRESTON JR	SEZYHR	EMT
91664	EULOGIO	MARBIBI	AUSTIN	EMT	59569	ERIC	MUNSON	HOUSTON	EMT	79381	COREY	PRIBBLE	HORTON	EMT
59914	LISA	MARCHITTO	LAGO VISTA	EMT	10302	JEFF	MURRAY	CANYON LAKE	EMT-P	36715	ANDREA	PRICE	CHANDLER	EMT-P
68918	CHRISTINE	MARCEL	MEDINN	EMT	59926	RAYMOND	MURRELL	HALLSVILLE	EMT	17536	BRADLEY	PRICE	SANTA FE	EMT
12157	WILLIAM	MARKHAM	CONROE	EMT-P	83745	ERIK	MYERS	PIPECREEK	ECA	13875	BRET	PRICHARD	HOUSTON	EMT-I
32683	ADOLFO	MARKS	BROWNSVILLE	ECA	62426	JAMES	NACE JR	KEMPNER	EMT	9472	ROXANN	PRIHODA	HIGHLAND VILL	EMT-P
87066	YADIRA	MARQUEZ	EL PASO	EMT	69118	MARCOS	NARVAEZ JR	SAN ANTONIO	ECA	97098	NANCY	PRINCE	COMBINE	EMT
76430	JESUS	MARROQUIN JR	HOUSTON	EMT	62177	THOMAS	NASSER	HOUSTON	EMT	59026	DOUGLAS	PRITCHETT	PAMPA	EMT
91184	TRAVIS	MARSHALL	KNOTT	EMT	36653	JAMES	NEAL JR	PEARSALL	EMT	46039	DAVID	PRUITT	AZLE	EMT
46833	ALYCE	MARTIN	VICTORIA	EMT-P	29027	JAMES	NEALE	BENBROOK	EMT	62104	HOWELL	PUGH	ARLINGTON	EMT
40908	BRIAN	MARTIN	DEER PARK	EMT-I	6936	WRENDELL	NEALY	HOUSTON	EMT-P	75909	TOMMY	QUINN	VICTORIA	EMT
57523	CHERYL	MARTIN	ANDREWS	EMT	75965	KAYLA	NEUHAUS	SALT FLAT	EMT	4379	JASON	RADLA	CHANDLER	EMT-I
86173	PHILLIP	MARTIN	CHANNELVIEW	ECA	23053	DONALD	NICHOLS	HOUSTON	EMT	72503	DAVID	RAIFORD	BEAUMONT	ECA
42747	RANDY	MARTIN	COLLEGE STA	EMT	18071	GWEN	NICHOLS	ACKERLY	EMT	59373	MATTHEW	RAILEAN	HOUSTON	ECA
44174	DEBORAH	MARTINEZ	LAREDO	EMT	3251	LAURA	NICHOLS	HOUSTON	EMT	49334	JOHN	RAINEY	AUSTIN	EMT-P
68717	JOE	MARTINEZ	CORP CHRISTI	ECA	2097	LAURENCE	NICHOLS	BOERNE	EMT	92087	ARLENE	RAMIREZ	SAN ANTONIO	EMT
33827	RUDY	MARTINEZ	CORP CHRISTI	ECA	70545	JENNI	NICKELSON	AUSTIN	EMT	81981	ROBERT	RAMIREZ	VICTORIA	EMT
93068	MAX	MARTINEZ JR	HOUSTON	EMT	82494	TIMOTHY	NOLD	PECOS	ECA	85150	CHRISTOPHER	RAMOS	PLANO	ECA
42410	DOUGLAS	MASTERS	SUGARLAND	EMT	54232	CECELIA	NOLL	KATY	EMT-I	9029	GILBERTO	RAMOS	LAREDO	EMT-P
72749	ELSA	MATA	DILLEY	EMT	96447	DAVID	NORRIS	HOUSTON	EMT	51905	JULIAN	RAMOS III	AUSTIN	EMT
963	DORISANNE	MATHEWS	R WORTH	EMT-P	99121	JERRY	NORRIS	VIDOR	ECA	78919	JAMES	RAMEY	EMORY	EMT
73763	ERIC	MATHIS	SANGER	ECA	92514	LYNNE	NOVACK	SEGUIN	EMT	28100	ROLANDO	RANGEL	LAREDO	EMT-P
59286	GARY	MATHIS	BAY CITY	ECA	44446	OLA	NOWLIN	THREE RIVERS	EMT-I	49519	JARED	READ	AMARILLO	EMT-P
82891	JOHN	MATHIS	MESQUITE	ECA	69516	JEFFREY	OAKFORD	WIMBERLY	EMT	97605	JAY	REAGAN	FRIENDSWOOD	ECA
66083	DAVID	MAYES	CONROE	EMT	82873	FLORENCE	OBIKE	IRVING	EMT	59976	RASHELL	REAVES	MT PLEASANT	ECA
74945	MARTY	MAYES	FORT WORTH	ECA	62180	AMY	O'BRIEN	HOUSTON	EMT	96064	CHARLES	RECKAWAY	EDNA	EMT
63081	STEVEN	MAYES	PLANO	ECA	59342	ANDREA	OKERBLOM	GARLAND	EMT-P	35605	REBA	REDDER	MUNDAY	EMT-I
89082	NICK	MAYFIELD	LONGVIEW	EMT	95721	JESSICA	OLIVE	AUSTIN	EMT	89701	BRUCE	REED	BRAZORIA	ECA
14401	STEVEN	MAYFIELD	GREENVILLE	EMT	48441	CHARLES	OLSEN	GALVESTON	EMT	13850	PAMELA	REED	MUNDAY	EMT
87899	JOSEPH	MAZZA	ARLINGTON	EMT	65117	JEFFREY	ORDONEZ	SAGINAW	EMT	81856	RONNY	REED	CORP CHRISTI	ECA
19815	CLARK	MCELLISTER	CORP CHRISTI	EMT	61677	JENNIFER	ORONA	KILLEEN	EMT	59902	EDWIN	REYES	SAN ANTONIO	ECA
80691	CHRISTOPHER	MCCARTY	AMARILLO	EMT	84004	FRANK	OROZCO	AUSTIN	ECA	38099	MARGOT	REYES	BULVERDE	EMT
10338	RONNY	MCCARVER	ANDREWS	EMT	59231	DAVID	ORR	CEDAR LANE	ECA	11988	JAMES	RHEA	ANNONA	EMT-P
53318	AMANDA	MCCLEIN	ROTAN	EMT-I	47395	LEWIS	OSBORN	HOUSTON	EMT	11298	STEVEN	RHOADS	LAPORTE	EMT
66658	LEONA	MCCLESKEY	PASADENA	ECA	92207	DOUGLAS	OSBURN	COLLEGE STA	EMT	15127	HAROLD	RICHARDSON	OAKWOOD	EMT
98984	BIJUNKA	MCCOWIN	LONGVIEW	EMT	68825	MICHELLE	OTTO	AUSTIN	EMT	22547	JOEY	RICHARDSON	MESQUITE	EMT-P
843	ROLLA	MCCRARY	AUSTIN	EMT	81538	JIM	OUSLEY	LONGVIEW	ECA	79626	MAX	RICHARDSON	MART	EMT
66515	CARESSA	MCDANIEL	EL PASO	EMT	4087	ANGELA	OWEN	GARLAND	EMT-P	95125	BRENDA	RICHARSON	BRADY	ECA
78049	CHRISTY	MCDONALD	GARDENDALE	EMT	45118	MICHAEL	PACE	HOUSTON	EMT-P	66614	JAYMIE	RICKETSON	SALADO	EMT
49465	KEVIN	MCDONALD	HOUSTON	EMT-I	28195	SHARON	PAGE	COLLEGE STA	EMT-P	6603	ALICIA	RIDGE	HOPE	EMT-P
75378	KIRK	MCDOWELL	GROVES	ECA	90980	SCOTT	PAINÉ	GNITE SHOALS	ECA	30083	TIM	RIGSBY	PLANO	EMT
9133	JOHN	MCGEE JR	HOUSTON	EMT	74799	LELAND	PANNELL	PASADENA	ECA					

Emergency Suspensions

92463	JOEL	RIVAS	PASADENA	EMT	74934	TAMMY	SPOON	FORT WORTH	EMT	57938	THOMAS	WAGNER	KATY	EMT
19715	BARRY	ROARK	SOUTHLAKE	EMT	9407	W	SPRAGGINS	TROUP	EMT-P	69205	ALICE	WALKER	GILCHRIST	ECA
13789	DANNY	ROBERTS	PLANO	EMT-P	61411	MEGAN	SQUIBB	AUSTIN	EMT	99124	ALICE	WALKER	FERRIS	EMT
51275	MICHAEL	ROBERTS	TOM BEAM	EMT-P	81535	EMIL	STAFF	EL CAMPO	ECA	75017	CHARLES	WALKER	CORP CHRISTI	ECA
49919	EDUARDO	ROBERTSON	BROWNSVILLE	ECA	78567	KATHLEEN	STANFORD	SAN ANTONIO	EMT	88866	DAVID	WALKER	SAN ANTONIO	EMT
84977	MICHAEL	ROBERTSON	SEYMOUR	EMT	11094	JERRELL	STANLEY	MIDLAND	EMT-I	59345	LANA	WALKER	MORGAN MILL	ECA
91059	RONALD	ROBERTSON	HOUSTON	EMT	60660	EMILY	STAPLES	MILLIEAN	EMT	41674	RANDAL	WALKER	SUNSET	EMT
3159	ABBY	ROBINSON	CORP CHRISTI	EMT	2129	SUSAN	STARCK	PECOS	EMT-P	76304	ALLISON	WALL	DALLAS	EMT
75561	MELANY	ROBINSON	AMARILLO	EMT	78524	CHARLSEY	STARNS	GILCHRIST	ECA	10774	JOHNNY	WALLACE	MCKINNEY	EMT
92271	PATRICIA	ROCHESTER	ALICE	EMT	99390	JAMES	STEPHENS	DELL CITY	EMT	39991	CHARLES	WALSH	GALVESTON	EMT
92389	PATRICIA	ROCKA	HUNTINGTON	ECA	16682	NORMA	STEPHENS	ABERNATHY	EMT	96407	RICHARD	WARREN	SAN ANTONIO	EMT
38811	FRANCES	RODGERS	HUMBLE	EMT	74081	CHARLES	STEVENS	GROVETON	EMT	28888	WYATT	WATKINS	HUMBLE	EMT-I
29700	PHILLIP	RODGERS	BAY CITY	ECA	95675	RON	STEVENS	ROWLETT	ECA	51714	JAMES	WATSON	LA GRANGE	EMT-P
90072	CONCHITA	RODRIGUEZ	ACKERLY	EMT	60912	MICHAEL	STEWART	HOUSTON	EMT-I	58432	KENNETH	WEBB	VICTORIA	EMT-I
89395	MARIA	RODRIGUEZ	EAGLE PASS	EMT	36546	WILLIAM	STEWART	LUBBOCK	EMT	24327	DANNY	WEBER	GALVESTON	EMT-P
89358	RODOLFO	RODRIGUEZ	SAN ANTONIO	EMT	97672	EVA	STINSON	TRABUCO CANYON	EMT	62520	BARBARA	WEINSCHEK	HOUSTON	EMT
59957	CYMINTHIA	ROGERS	ORANGE	EMT	47264	LISA	STINSON	HUTCHINS	EMT	97778	MARK	WEISS	AURORA	EMT
45460	REBECCA	ROLLING	FORT WORTH	EMT-I	40577	BETTY	STOCKBRIDGE	MASON	EMT	69945	MITZI	WELCH	DENVER CITY	EMT
59730	SAMUEL	ROMANO	LIVINGSTON	ECA	78338	MISTY	STONE	GEORGETOWN	EMT	69585	RYAN	WELCH	DRIFTWOOD	EMT
30613	PENNY	ROOTE	NEW HOPE	EMT	41111	WORTH	STONEHAM	FRESNO	EMT	87146	ROBERT	WELLS	POINT	EMT
70569	JANCI	ROQUEMORE	BAYTOWN	EMT	80203	BETTY	STOTTS	NACOGDOCHES	ECA	78402	ROBERT	WEST JR	SOUTHMAYD	EMT
68538	JOSE	ROSALES	CORP CHRISTI	ECA	75782	HOMER	STOTTS JR	NACOGDOCHES	ECA	23047	GWYNELL	WESTERVELT	CORP CHRISTI	ECA
66045	BEVERLY	ROSSON	CANYON LAKE	EMT	66625	MELISSA	STRATTON	CHINA SPRING	EMT	27384	GARY	WHEELER	BAYTOWN	ECA
18711	ROSE	ROWLAND	LUMBERTON	EMT	91963	ALBERT	STRAUSS	GANADO	ECA	67593	RONALD	WHINERY SR	TEXARKANA	ECA
30068	BARRY	RUDNICK	TEMPLE	EMT	83441	RON	STRIMPLE	POR TOLIVAR	ECA	4513	ANTHONY	WHITE	FORT HOOD	EMT-I
94893	RANDY	RUSSELL	BROWNSVILLE	ECA	62531	DARYL	STROBLE	NOLANVILLE	ECA	8146	NEIL	WHITE	ABILENE	EMT
493	MICHAEL	SACCOMANDO	KATY	EMT	93889	JACKSON	SU	SUGARLAND	EMT	95954	ROY	WHITE	LAKE DALLAS	ECA
46921	JEFF	SADLER	THE COLONY	ECA	59224	PAUL	SWEET	PASADENA	ECA	49155	SHAWN	WHITE	FORT WORTH	EMT-P
85837	PHILIP	SALAS	BROWNFIELD	EMT	85412	LUKE	SWENSON	SAN ANTONIO	ECA	99953	TINA	WHITE	ORANGE	EMT
66253	JOHN	SALLEY	GARLAND	ECA	5251	TERESA	SWONKE	HOUSTON	EMT-I	54557	RICKY	WHITED	LA GRANGE	EMT-I
86681	ALBERTO	SANCHEZ	LOS FRESNOS	ECA	45259	ANTHONY	SYKORA	CORP CHRISTI	EMT	94081	RODNEY	WHITLEY	DRIPPING SPGS	ECA
59896	JOHN	SANCHEZ	FREDERICKBURG	EMT	94067	SCOTT	SYKORA	COOLIDGE	ECA	71293	JULIE	WIER	BLANCO	EMT
53610	MICHAEL	SANDERS	FRIENDSWOOD	ECA	82272	FERNANDO	TAGLE JR	CORP CHRISTI	ECA	85566	JENNIFER	WIESJAHN	HOUSTON	EMT
35178	DOUGLAS	SANFORD	CANTON	EMT	81435	LEON	TAMEZ JR	LOZANO	ECA	98191	CASEY	WILKS	MERIDIAN	EMT
96899	CHRISTOPHER	SAPPINGTON	CANYON	EMT	39018	ARNOLD	TANGUMA	HOUSTON	EMT	68380	JIMMY	WILLETT	PAMPA	EMT
60237	TRACEY	SARTOR	TEAGUE	EMT	93686	RUSTY	TANTILLO	HOUSTON	EMT	3102	BRUCE	WILLIAMS	TYLER	EMT
75050	SHANE	SATTERFIELD	HOOKS	ECA	6286	DAVID	TAYLOR	HOUSTON	EMT-P	24770	DAVID	WILLIAMS	KRESS	EMT
63348	JAMES	SAVAGE	PLANO	EMT	72508	BELINDA	TEAGUE	JEFFERSON	EMT	61062	GWENDOLYN	WILLIAMS	CEDAR HILL	EMT
24523	STEPHEN	SAYLER	COVINGTON	ECA	59284	DARRELL	TEDDER	PALACIOS	ECA	75206	SUNNY	WILLIAMS	MANOR	ECA
30468	GLENN	SCARBROUGH JR	GODLEY	EMT	96176	JILL	TEMPERO	AUSTIN	EMT	99130	KELLI	WILLIAMSON	HOUSTON	EMT
96633	ALDEN	SCHAEZT III	LUBBOCK	EMT	85257	GERALD	TEMPLETON	DAYTON	ECA	95821	DANIEL	WILLIS	BUDA	ECA
38226	CHARLIE	SCHENCK	DENTON	EMT-P	9394	EDWARD	TERAN	AUSTIN	EMT	93813	ROYCE	WILLMON	LUFKIN	ECA
9666	MICHELLE	SCHEPPLER	GRAND PRAIRIE	EMT-P	97666	DENNIS	TETREAULT	SANTA ROSA	ECA	81940	MICHAEL	WILMOT	CORP CHRISTI	ECA
85694	REBECCA	SCHLEGEL	SEGUIN	EMT	85144	EPHRAIM	THALLER	HOUSTON	EMT	6607	EDNA	WILSON	WEBSTER	EMT
32874	GEORGE	SCHMELZ	GRANBURY	EMT-P	79424	NEAL	THIBODAUX	BAYTOWN	ECA	87105	ELIZABETH	WILSON	RICHMOND	EMT
80139	DELBERT	SCHNEIDER	BRAZORIA	EMT	95717	ROBERT	THOENEN	EL PASO	EMT	88776	JARRETT	WILSON	AMARILLO	EMT
72215	SANDRA	SCHULTZ	ORANGE	EMT	67390	CLEVELAND	THOMAS	CORP CHRISTI	EMT	38050	JOANN	WILSON	ORANGE GROVE	EMT
85993	JAMES	SCHWARTZ	GARDEN CITY	EMT	42755	DAWN	THOMAS	DALHART	EMT	72761	KEVIN	WILSON	RICHARDSON	EMT
15699	BEVERLY	SCOTT	AUSTIN	EMT	60064	DOUGLAS	THOMAS	CORP CHRISTI	ECA	66966	MICHAEL	WILSON	EL PASO	EMT
46656	RONALD	SCOTT	LIVE OAK	EMT-P	86397	JEREMIAH	THOMAS	DRIFTWOOD	EMT	80138	RAYMOND	WILSON	CRYSTAL BEACH	ECA
77182	JOSHUA	SEALE	NACOGDOCHES	EMT	60174	KENNETH	THOMAS	KERVILLE	EMT	93636	WYATT	WILSON	COOLIDGE	ECA
27403	FRANK	SEALS	BROWNSVILLE	ECA	5133	RENAE	THOMAS	SAN ANTONIO	EMT	66236	FRED	WINCHESTER III	LUBBOCK	EMT
59539	FRED	SEARCY	FOUKE	EMT	91462	WENDY	THOMAS	KEMPNER	EMT	85076	MARK	WINGFIELD	FORT WORTH	EMT
10068	JOSE	SEDAS	MCALEEN	EMT	88273	BRENDA	THOMPSON	GROVETON	EMT	61945	KATHRYN	WINICK	GRAND PRAIRIE	ECA
73832	MATTHEW	SEELY	KINGWOOD	EMT	95339	CHARLES	THOMPSON	TEXAS CITY	ECA	43335	PAUL	WISCHENSKY	KINGWOOD	EMT
11577	DARYL	SELLERS	ROSENBERG	EMT-P	75712	DEBORAH	THOMPSON	MAGNOLIA	ECA	31825	DELL	WISEMAN	DUNCANVILLE	EMT-P
92480	THOMAS	SETTLE	KOUNTZE	ECA	73082	ROBERT	THORP	GATESVILLE	EMT	51700	LYDIA	WITT	HOUSTON	EMT-I
63757	PATRICK	SEXTON	LONGVIEW	EMT	26140	JAMES	THURMAN	JACKSBORO	EMT-P	3912	GEORGE	WOLF	GRAND PRAIRIE	EMT
25439	KATHRYN	SHADDIX	FT WORTH	EMT-P	90376	DAVID	TJERINA	CORP CHRISTI	ECA	56630	CHARLENE	WOLFE	AUSTIN	EMT
24831	TERRY	SHAFFER	HOUSTON	EMT-P	73810	MICHAEL	TIMMINS	SAN ANTONIO	EMT	3792	HARRY	WOLFE JR	HOUSTON	EMT-P
36371	JOSEPH	SHAK	LA PORTE	EMT	54624	CANDANCE	TIPPIE	JACKSBORO	EMT-P	58934	ROKA	WOLGAMOTT	ENTERPRISE	EMT
89157	NEKKI	SHANNON	WOLFFORTH	EMT	23002	PAUL	TITTOR	PARADISE	EMT	44129	JAMES	WOOD	BRIDGEPORT	EMT-P
79482	JAMES	SHARP	PIPECREEK	ECA	89356	JOSE	TORRES	CORP CHRISTI	ECA	72675	BILL	WOODS	WAKE VILLAGE	ECA
10089	JOSEPH	SHARP	PASADENA	EMT-P	97656	TRACEY	TOWNDROW	AMARILLO	EMT	80835	TODD	WORMSBAKER	AMARILLO	EMT
74495	GLENN	SHAW	SANGER	ECA	7951	STANLEY	TRAMMELL	WAURIKA	EMT-P	75992	JAMES	WRIGHT	S HOUSTON	EMT
98812	TAADEH	SHERIFF	SUGARLAND	EMT	66631	JASSEN	TRAVIS	HARKER HGTS	EMT	8559	ROBERT	WYATT	HOUSTON	EMT-P
90871	DUANE	SHERILL	CLEBURNE	EMT	12084	DONNA	TREADWELL	DIXON	EMT	85567	BRIAN	WYCHE	INEZ	EMT
989	KURT	SHOEMAKER	BLANCO	EMT	75173	RALPH	TREIBER	WARING	ECA	82841	KATHERINE	YEPEZ	HOUSTON	EMT
71314	SHARON	SHOOP	KELLER	ECA	38989	MARCOS	TREVINO	CORP CHRISTI	EMT-P	24173	DAILE	YOUNG	IRVING	EMT-P
22414	WADE	SHOOP	BRYAN	EMT-P	37718	GUY	TRIBBLE	CROSBY	EMT-I	96175	JULIE	YOUNG	HOUSTON	EMT
10899	ESTELLA	SIMMONS	DEER PARK	EMT	21704	TONY	TUCKER	ABILENE	EMT-I	91329	MARIA	YOUNG	RICHARDSON	EMT
32074	LEONARD	SIMMONS	DEER PARK	EMT	14293	KENNETH	TUEL	AUSTIN	EMT	38809	VINCENT	YOUNG	TEMPLE	EMT-P
91870	RETHA	SIMMS	COOLIDGE	ECA	97873	RUBY	TUEY	EL PASO	EMT	66954	KAY	ZAGST	MARBLE FALLS	ECA
59222	JAMES	SIMONS	WADSWORTH	ECA	82555	ERIC	TULLEY	PT ARTHUR	EMT	83350	BILLIE	ZERCHER	N BRAUNFELS	EMT
72740	KEITH	SIMPSON	PEARLAND	EMT	25272	EDWARD	TURNER	DENTON	EMT-P	92911	CHRISTOPHER	ZOLAS	HOUSTON	EMT
63295	DENNIS	SIMS	KILLEEN	EMT	24494	JAMES	TURNER	IDALOU	EMT-P	81808	BENITO	ZUNIGA	CORP CHRISTI	EMT
32154	MICHAEL	SIMS	GRAPEVINE	EMT-P	54946	JERRY	TURNER	DALHART	EMT					
49211	STEVE	SIMS	QUINLAN	EMT	16645	LAURA	TURNER	ATHENS	ECA					
97292	TAMI	SIMS	CORP CHRISTI	EMT	71941	ROGER	TURNER	CYPRESS	EMT					
35623	JOHN	SLIGER	CEDAR HILL	EMT	82710	ALYSSA	TYLER	SANTA FE	EMT					
62278	GEORGE	SLOAN JR	COPPERAS COVE	EMT	61597	CARIE	ULLRICH	HOUSTON	EMT					
28510	ROSE	SLUBAR	BRACKETTVILLE	EMT	772	URPAIL	UNIKRISHAN	KILLEEN	EMT					
71052	BILLIE	SMITH	KATY	EMT	94172	KARL	UNRUH	CORP CHRISTI	ECA					
66722	CELIA	SMITH	GARLAND	ECA	9257	LUCAS	VALDEZ	CORP CHRISTI	ECA					
87760	DAVID	SMITH	SCURRY	EMT	4571	TERRY	VALENTINE	KINGSVILLE	EMT					
3553	JACK	SMITH	KATY	EMT	41406	FREDDIE	VANDERGRUFF	AZLE	EMT					
40249	LEWIS	SMITH	SANTA FE	ECA	5073	KAREN	VARTY	AUSTIN	EMT					
146	MARGARET	SMITH	PLANO	EMT	94612	JOSE	VASQUEZ	ALICE	EMT					
81268	SHANNON	SMITH	LUBBOCK	EMT	15169	FRED	VELASQUEZ JR	CORP CHRISTI	ECA					
95783	TANYA	SMITH	GALVESTON	EMT	75552	ROLANDO	VELEZ	BROWNSVILLE	ECA					
73308	TERRY	SMITH	HOUSTON	ECA	93605	BELINDA	VELIZ	MISSION	EMT					
49579	LUTHER	SMITH JR	SWEENEY	EMT	23894	BENJAMIN	VERA	LYFORD	EMT					
80628	JAY	SMITHERMAN	HOUSTON	EMT	40045	JESSE	VILLANUEVA JR	CORP CHRISTI	ECA					
95235	MARC	SMOTHERS	HOUSTON	EMT	78630	CAIN	VILLAREAL	AUSTIN	EMT					
45268	EDWARD	SMYTH	MIAMI LAKES	EMT-P	71289	BEATRICE	VILLARREAL	WOODWAY	EMT					
75684	TANYA	SOBALA	WACO	EMT	99878	FAUSTINO	VILLARREAL	CONROE	EMT					
39192	JUAN	SOLIS	ZAPATA	EMT	23923	JOSEPH	VILLARREAL	SAN ANTONIO	EMT-P					
77531	GILBERT	SOTO	PECOS	ECA	59436	VICTOR	VILLEGAS	EL PASO	EMT					
19869	FLOYD	SOURJOHN JR	ROANOKE	EMT	59272	BRIAN	VONDERHEYDT	ARLINGTON	EMT					
59228	PAITTY	SPALEK	BAY CITY	ECA	84855	HEATHER	VOSS	ARLINGTON	ECA					
12721	SHIRLEY	SPEAROW	BRAZORIA	EMT	59427	JANET	VRZALIK	SAN ANTONIO	ECA					
92483	CHARLES	SPEIGHTS	MAUD	ECA	59410	MICHAEL	VRZALIK	SAN ANTONIO	ECA					

New complaint hotline (800) 452-6086

Anyone with a complaint against a provider or certificant can call (800) 452-6086 to

THE INFORMATION IN THIS SECTION IS INTENDED TO PROVIDE PUBLIC NOTICE OF DISCIPLINARY ACTION BY THE TEXAS DEPARTMENT OF HEALTH AND THE BUREAU OF EMERGENCY MANAGEMENT AND IS NOT INTENDED TO REFLECT THE SPECIFIC FINDINGS OF EITHER ENTITY.

THIS INFORMATION MAY NOT REFLECT ANY NUMBER OF FACTORS INCLUDING, BUT NOT LIMITED TO, THE SEVERITY OF HARM TO A PATIENT, ANY MITIGATING FACTORS, OR A CERTIFICANT'S DISCIPLINARY HISTORY. THIS LISTING IS NOT INTENDED AS A GUIDE TO THE LEVEL OF SANCTIONS APPROPRIATE FOR A PARTICULAR ACT OF MISCONDUCT.

FOR INFORMATION, CONTACT THE BUREAU'S CHIEF INVESTIGATOR, VIC DWYER, AT (512) 834-6700.

Ashmore, Lee Fran, Lufkin, Texas. Two years probation of EMT-Paramedic certification through August 31, 1998. EMS Rule 157.51 (2)(A), failure to follow EMS standards of care in the management of a patient.

Boswell, Bart Paul, Houston, Texas. Four years probation of EMT-Paramedic certification through October 17, 2001. EMS Rules 157.44, 157.51(b)(16) and (c) and 157.53, misdemeanor convictions while certified.

Boyd, David A., Granbury, Texas. Three years probation of EMT certification through August 9, 1999. EMS Rule 157.51(a)(1), imminent danger to the public health or safety.

* **Buske, Kathy**, Abilene, Texas. Decertification of EMT certification. EMS Rules 157.51(b)(15), attempt to obtain certification by forgery, deception or misrepresentation.

* **Cadle, Michael**, Abilene, Texas. Decertification of EMT-Intermediate certification. EMS Rules 157.51(b)(11), appropriates and/or possesses without authorization medications...inappropriately acquired in the course of duty.

Callahan, Ronald G., Palacios, Texas. Twelve months probation through March 14, 1998. EMS Rule 157.51 (2)(A) and (B)(old rules), failure to follow EMS standards of care in the management of a patient.

Chapa, Adalberto Eli, Rio Grande City, Texas. Twelve months probation of EMT certification through October 20, 1998. EMS Rules 157.44, 157.51(b) and (c) and 157.53, felony conviction.

Corbeil, Louis Adrein, Brownsville, Texas. Five years probation of EMT-Intermediate certification through May 3, 2000. EMS Rule 157.44 (b)(1) and (c), and 157.53, felony conviction.

Corson, Kevin Patrick, Santa Fe, Texas. Twelve months probation of EMS Examiner certification through July 23, 1998. EMS Rule 157.53(e)(1), failure to conduct skills proficiency verification in an objective manner according to criteria and standards established by the department for each skill examined.

County Life EMS, Uvalde, Texas. Administrative penalty of \$100. EMS Rule 157.11(d)(2), failure to staff ALS vehicle properly.

Creech, Hugh Lanier Jr., Corpus Christi, Texas. Two years probation of EMT certification through July 23, 1999. EMS Rules 157.44, 157.51(b) and (c), and 157.53, felony/misdemeanor convictions.

Creel, Joel Lamar, Houston, Texas. One year probation of EMT certification through July 30, 1998. EMS Rules 157.44, 157.51(b) and (c), and 157.53, misdemeanor conviction.

Culberson County EMS, Van Horn, Texas. Twelve months probation through April 2, 1998, plus an administrative penalty of \$625. EMS Rule 157.11 (b)(1), operating vehicle without provider license.

Degolier, Paul Anthony, Austin, Texas. Twelve months probation of EMT recertification through July 1, 1998. EMS Rule 157.44, 157.51(b)(16) and (c), and 157.53, misdemeanor conviction while certified.

Dollar, Stace Douglas, Lubbock, Texas. Denial of RN equivalency at the EMT-Paramedic level and decertification of EMT certification effective October 27, 1997. EMS Rules 157.44, 157.51(b)(16) and (26), misdemeanor conviction while certified and falsification of application for EMS personnel certification.

* **Excell Ambulance Service**, Houston, Texas. Administrative penalty of \$1,000. EMS Rule 157.11(d)(1)(A), a BLS provider shall staff BLS vehicle(s), when in service, with at least two emergency care attendants who have active status certifi-

cation 24 hours per day, seven days per week.

Fernandez, Victor M., San Antonio, Texas. Twelve months probation of EMT certification through September 11, 1998. EMS Rules 157.44, 157.51(b) and (c), 157.53, misdemeanor convictions.

Garcia, Julian Javier, Weslaco, Texas. Twenty-four months probation of EMT certification through March 24, 1999. EMS Rules 157.44, 157.51(b) and (c) and 157.53, felony conviction.

Garlington, John Mac, Port Aransas, Texas. Eighteen months probation of EMT-Intermediate certification through July 29, 1998. EMS Rules 157.44, 157.51(b)(16) and (c) and 157.53, misdemeanor conviction.

Gassaway, Douglas Ray, Blum, Texas. Emergency suspension of EMT certification. EMS Rule 157.51(a)(1)(A), imminent danger to public health or safety.

Gault, Shelley Wells, Corpus Christi, Texas. Four years probation of EMT certification through November 3, 2001. EMS Rules 157.44, 157.51(b) and (c) and 157.53, felony conviction and misdemeanor convictions.

Goins, David, Lufkin, Texas. Three years probation of EMT-Intermediate certification until July 31, 1999. EMS Rule 157.51 (2)(A), failure to follow EMS standards of care in the management of patient.

Guerra, Michael Santos, Pharr, Texas. Twelve months probation of EMT certification through October 31, 1998. EMS Rules 157.44, 157.51(b) and (c) and 157.53, felony conviction.

Hartwick, John Paul, Charleston, South Carolina. Decertification of EMT certification effective July 23, 1997. EMS Rules 157.51(d) and Article 6252-13c Sec. 4(e), convicted by military justice while certified.

Hippe, Richard S., Flint, Texas. Twelve months probation of EMT-Paramedic certification through August 1, 1998. EMS Rule 157.51 (b)(11), appropriation and/or possession without authorization of medications, supplies... inappropriately acquired in the course of duty.

Hippe, Terri J., Flint, Texas. Twenty-four months probation of EMT-Paramedic certification through August 31, 1999. EMS Rule 157.51 (b)(2), failure to follow EMS standards of care in the management of a patient.

* **Hitt, Jeffrey L.**, Winona, Texas. Twelve months probation of EMT-Paramedic certification until December 3, 1998. EMS Rule 157.51(b)(1), failure to follow EMS standards of care.

Jordan, Richard Todd, Friona, Texas. Twenty-four months probation of EMT certification through August 27, 1999. EMS Rules 157.44, 157.51(b) and (c), and 157.53, misdemeanor conviction.

Jordan, Ricky Lynn, Ennis, Texas. Decertification of EMT-Intermediate certification effective October 10, 1997. EMS Rules 157.44, 157.51(b)(16) and (26) and 157.51(d), misdemeanor conviction while certified and falsification of an application for EMS personnel certification.

King, Dan S., Burkburnett, Texas. Twelve months probation of EMT certification through July 23, 1998. Health and Safety Code 773.063, knowingly practicing as an EMT without EMS certification.

King, Julie Ann, Sour Lake, Texas. Twenty-four months probation of EMT-Intermediate certification through April 18, 1998. EMS Rule 157.51(2)(A), failure to follow EMS standards in patient management.

* **Life Care Ambulance Service**, Houston, Texas. Administrative penalty of \$250. EMS Rules 157.11(d), failure to staff BLS vehicle, when in ser-

vice, with at least two emergency care attendants who have active certification.

Maldonado, Cesar Guillermo, Devine, Texas. Decertification of EMT certification effective October 10, 1997. EMS Rules 157.44, 157.51(b)(16) and (26) and 157.51(d), misdemeanor convictions while certified and falsification of an application for EMS personnel certification.

Martin, Jason Todd, Austin, Texas. Two years probation of EMT-Intermediate certification through October 20, 1999. EMS Rules 157.44, 157.51(b)(16) and (c) and 157.53, misdemeanor conviction while certified.

* **Martin, Kevin Lee**, Center, Texas. Emergency suspension of EMT certification effective December 30, 1997. EMS Rules 157.51(a)(1)(A), reasonable cause to believe conduct of certificant creates an imminent danger to the public health or safety.

Massegee, Tommy Doyle, Grand Prairie, Texas. Four years probation of EMS certification through March 12, 1999. EMS Rule 157.44 (b)(1) and (c), and 157.53, felony conviction.

Medical Transport Service, McAllen, Texas. Revocation of EMS Provider license. EMS Rule 157.24(e)(1)(A)(B)(C), failure to have liability insurance.

* **Merket, Melissa**, Abilene, Texas. Decertification of EMT-Paramedic certification. EMS Rules 157.51(b)(11), appropriates and/or possesses without authorization medications...inappropriately acquired in the course of duty.

Moreno, Antonio Juan, Rio Grande City, Texas. Twelve months probation of Emergency Care Attendant certification through October 30, 1998. EMS Rules 157.44, 157.51(b) and (c) and 157.53, misdemeanor conviction.

* **Myer, Bobby Wayne**, Haskell, Texas. Twenty-four months probation of Emergency Care Attendant certification until December 3, 1999. EMS Rules 157.44, 157.51(b) and (c) and 157.53, felony conviction.

* **Osterman, Raymond Charles**, Longview, Texas. Emergency suspension of EMT-Paramedic certification. EMS Rules 157.51(a)(1)(a), imminent danger to public health or safety.

Pack, Stephen Todd, Sweetwater, Texas. Two years probation of EMT-Paramedic certification through July 30, 1999. EMS Rules 157.51(b)(26) and (c), falsification of application for EMS Personnel certification.

Padron, Michael L., McKinney, Texas. Twelve months probation of EMT certification through October 31, 1998. EMS Rules 157.44, 157.51(b) and (c) and 157.53, felony conviction and misdemeanor conviction.

Patterson, Carrie Ann, Caldwell, Texas. Sixteen months probation of EMT certification through May 23, 1998. EMS Rules 157.44, 157.51 (b) and (c) and 157.53, misdemeanor convictions.

Pearson, Michael Ray, Huffman, Texas. Twenty-four months probation of EMT-Intermediate recertification through April 15, 1999. EMS Rule 157.44, 157.51 (b)(16) and (c) and 157.53, misdemeanor conviction while certified.

* **Ramsey, Donald Dean III**, Portland, Texas. Four years probation of EMT certification through January 15, 2002. EMS Rules 157.44, 157.51(b) and (c), and 157.53, felony conviction.

Ransonette, Kathleen Doretta, Dumas, Texas. Twenty-four months probation of EMT certification through October 31, 1999. EMS Rules 157.44, 157.51 (b) and (c) and 157.53, misdemeanor convictions.

Riley, John Irvin, Smithville, Texas. Twelve months probation of Emergency Care Attendant certification through November 4, 1998. EMS Rules

157.44, 157.51(b) and (c) and 157.53, misdemeanor conviction.

Scown, Rex Burton, Odessa, Texas. Twelve months probation of EMT certification through October 31, 1998. EMS Rules 157.44, 157.51(b) and (c) and 157.53, misdemeanor conviction.

Sexton, Derek Jason, Maxwell, Texas. Twenty-four months probation of EMT certification through December 2, 1998. EMS Rules 157.44(c), 157.51(b) and (c) and 157.53, felony conviction.

* **Shackleford, Duwane Charles**, Houston, Texas. Decertification of EMT certification effective January 5, 1998. EMS Rules 157.44, 157.51(b)(16) and (26), misdemeanor/felony convictions while certified, filing of forged documents and falsification of an application for EMS personnel recertification.

* **Shepherd, James David**, Granbury, Texas. Emergency suspension of EMT-Paramedic certification effective December 29, 1997. EMS Rules 157.51(a)(1)(A), reasonable cause to believe conduct of certificant creates an imminent danger to the public health or safety.

Shoemaker, Donald Wayne, Lake Jackson, Texas. One year probation of EMT-Intermediate certification through November 9, 1998. EMS Rule 157.51(b)(1), failure to follow EMS standards of care in the management of a patient.

Simmons, R. Brent, Houston, Texas. Decertification of EMT-Intermediate certification. EMS Rule 157.51(b)(25), jeopardize the health and safety of a patient, the public or other EMS personnel.

Skelton, Richard Lee, McGregor, Texas. Three years probation of ECA certification through January 24, 2000. EMS Rules 157.44, 157.51(b) and (c) and 157.53, felony convictions.

Smith, Tracy D., Kingsbury, Texas. Twenty-four months probation of EMT certification through July 23, 1999. EMS Rules 157.44, 157.51(b) and (c), and 157.53, misdemeanor conviction.

Terry, Samuel R., Gainesville, Texas. Twelve months probation of EMT-Intermediate certification until March 14, 1998. EMS Rule 157.51 (b)(1), failure to follow the EMS standards of care in the management of a patient.

Thetford, Jon Wesley, Houston, Texas. Twelve months probation of EMT certification through October 17, 1998. EMS Rules 157.44, 157.51(b) and (c) and 157.53, misdemeanor convictions.

Thomason, Phillip, Lubbock, Texas. Decertification of EMT-Paramedic certification. EMS Rule 157.51(b)(16), conviction of a felony in accordance with the provisions of EMS Rule 157.44.

Upchurch, Kristal Michelle, Schulenburg, Texas. Twelve months probation of EMT certification through October 31, 1998. EMS Rules 157.44, 157.51(b) and (c) and 157.53, misdemeanor conviction.

* **Wamsley, John Martin**, Liberty Hill, Texas. Twenty-four months probation of Emergency Care Attendant certification through January 23, 2000. EMS Rules 157.44, 157.51(b) and (c), and 157.53, misdemeanor conviction.

Weinheimer, Rex Joseph, Stonewall, Texas. Four years probation of Emergency Care Attendant certification through September 30, 1999. EMS Rule 157.44(b)(1) and (c), and 157.53, misdemeanor convictions.

Wells, John Michael, Sweetwater, Texas. Twelve months probation of EMT certification through March 24, 1998. EMS Rules 157.44, 157.51(b) and (c) and 157.53, misdemeanor conviction.

Wind, Jon Todd, Nederland, Texas. Twelve months suspension of EMS Examiner certification through March 5, 1998. EMS Rule 157.63 (e)(1), failure to conduct skills proficiency verification in an objective manner according to the criteria and standards established by the department for each skill examined.

* THESE LISTINGS ARE NEW THIS ISSUE. DENIALS, REVOCATIONS, AND ADMINISTRATIVE PENALTIES WILL BE PRINTED IN THREE CONSECUTIVE ISSUES. SUSPENSIONS AND PROBATED SUSPENSIONS WILL BE PRINTED UNTIL SUSPENSION OR PROBATION EXPIRES.

MEETINGS AND NOTICES

CALENDAR

March 15-20, 1998. **Basic Supervision & Leadership.** Ernie Rodriguez, Emergency Medical Services Leadership Academy, at www.emsla.org.

March 15-20, 1998. **EMD Management Course.** Ernie Rodriguez, Emergency Medical Services Leadership Academy, at www.emsla.org.

March 15-20, 1998. **Instructor Enhancement Course.** Ernie Rodriguez, Emergency Medical Services Leadership Academy, at www.emsla.org.

March 21, 1998. **Sex, Drugs, Rock & Roll.** 1-day conference. Call Vickie Moose, Central Texas Trauma Council at 254/ 939-8762.

March 21-22, 1998. **Basic Vertical Rescue.** Call Polli Williams, McLennan Community College-Waco, 254/299-8591.

March 26, 1998. **Interpretation of Lab Test.** Type I for nurses available. Call Kathy Jordan, Texarkana College at 903/838-4541, ext. 382.

March 28-29, 1998. **Extrication Seminar.** Approved for 16 hours TDH CE. 888/778-2380.

April 3, 1998. **How to Manage Conflict, Anger and Emotion.** A Fred Pryor Seminar. Call Kathy Jordan, Texarkana College at 903/838-4541, ext. 382.

April 4, 1998. **Airlife EMS Conference.** Nationally known speakers. Call VaRie or Cathy/Airlife at 210/297-9600.

April 9-10, 1998. **BTLS Class.** Paul Rosenberger, Baylor Medical Center at 817/329-2815.

Deadlines and information for meetings and advertisements

Deadline: Meetings and notices must be sent in six weeks in advance. After the pages of this magazine have completely gone through editorial, design and layout, the magazine goes to the printshop to get printed (*a 15-working-day process*), then on to our mailing service (*a 4-day process*), and then to the post office to get mailed out. Please send in your calendar items six weeks in advance to make the next issue.

Cost: Calendar items are run at no charge. Calendar items run in the meeting section until just prior to the meeting or class. Classified ads run for two issues unless we are notified to cancel the ad.

Fax or mail: Calendar items can be faxed to 512/834-6736 or mailed to *Texas EMS Magazine*, Texas Department of Health, 1100 West 49th Street, Austin, TX 78756-3199. Call 512/834-6700 if you have a question about the calendar section.

Fax items for this section to 512/834-6736

There is not a charge to run items in the meetings and notices section.

April 16, 23 & 30, 1998. **Pediatric Physical Assessment.** Type I for nurses available. Call Kathy Jordan, Texarkana College at 903/838-4541, ext. 382.

April 18-19, 1998. **Basic Vertical Rescue.** Call Polli Williams, McLennan Community College-Waco, 254/ 299-8591.

May 9-10, 1998. **Basic Vertical Rescue.** Call Polli Williams, McLennan Community College-Waco, 254/ 299-8591.

May 21-23, 1998. **Advanced Vertical Rescue.** Call Polli Williams, McLennan Community College-Waco, 254/ 299-8591.

May 27-28, 1998. **Enhancing Critical Care Skills.** Type I for nurses available. Call Kathy Jordan, Texarkana College at 903/838-4541, ext. 382.

June 13-14, 1998. **Vertical Rescue Problems Course II.** Call Polli Williams, McLennan Community College-Waco, 254/299-8591.

July 18-19, 1998. **Basic Vertical Rescue.** Call Polli Williams, McLennan Community College-Waco, 254/ 299-8591.

August 22-23, 1998. **Basic Vertical Rescue.** Call Polli Williams, McLennan Community College-Waco, 254/ 299-8591.

August 23-26, 1998. **EMD Provider Course.** Ernie Rodriguez, Emergency Medical Services Leadership Academy, at www.emsla.org.

August 23-28, 1998. **Operational Leadership Course.** Ernie Rodriguez, Emergency Medical Services Leadership Academy, at www.emsla.org.

August 23-28, 1998. **Course Coordinator Course.** Ernie Rodriguez, Emergency Medical Services Leadership Academy, at www.emsla.org.

August 27-28, 1998. **EMD Instructor Course.** Ernie Rodriguez, Emergency Medical Services Leadership Academy, at www.emsla.org.

Jobs

Paramedics: MedStar, Fort Worth, has full-time positions. 9-1-1 and nonemergency. Send resume to Annette Hawkins, 3010 S. Grove, Ft Worth, TX, 76104. Call 817/927-4455 or fax 817/927-4493.+

EMS RN Educator: Full-time position in Medical Control for FD-based EMS system. RN with ER/EMS and educational experience. Send resumes to Personnel, Medical Center of Plano, 3901 w. 15th, Plano, TX 75075, 972/519-1581.+

EMTs, EMT-Is: Best Care EMS, Bellaire,

TX. Call 713/ 661-3443, fax resume to 713/773-0930.+

BLS Instructors: To instruct BLS, CPR, first aid classes in Dallas area. Send resume to Metroplex Medical Training, 3637 Trinity Mills #414, Dallas, TX 75287.+

EMS Director: Mason County is accepting applications for EMS director. Must be paramedic. Contact Mason County Judge Tom Reardon, P.O. Box 56, Mason, TX 76856, 915/347-5556.+

Paramedics, EMTs: Texas Motor Speedway is accepting requests to provide MICU-capable ambulances for on-track response during race events. Also accepting applications for fire/rescue personnel. Marcus Smith, 817/215-8532.+

Coordinator/Instructor: Blinn College is seeking coordinator/instructor for Fire Science on technical education campus in Bryan. Send resume to Blinn College Personnel Office, 902 College Ave., Brenham, TX 77833, 409/830-4128.+

Paramedics: Up to 10 positions open with Williamson County EMS. Six months experience required. To apply, a Williamson County application must be received by Human Resources Dept., 710 Main, Second Floor, Georgetown, TX 78626, by 5 pm on March 20, 1998. Resumes not accepted. 512/930-1264.+

EMS Executive Director: Master's or equivalent; 4-10 years experience; paramedic or RN certified. Send resume to James R. Loflin, MD, Texas Tech University Health Science Center, 6090 Surety Dr. #412, El Paso, TX 79905, 915/ 771-6391.+

Assistant EMS Professor: Master's with Health Care emphasis or equivalent. Certified paramedic, instructor & examiner. Apply College of the Mainland, 1200 Amburn Rd, Texas City, TX 77591, 409/938-1211 ext.250.+

Paramedic, EMT-I, EMT: Alpine EMS/WTAS is accepting applications for full-time positions for MICU-level service for city/county 9-1-1, EMS, transfers. Call Mike at 915/ 837-3028; send resume to Alpine EMS/WTAS, P.O. Box 338, Alpine, TX 79831.+

EMTs, Paramedics, Field Training Officer: Rural/Metro Ambulance. Generous benefits package. Qualified individuals should apply at: 201 McKenzie, Ste. 115, Carrollton, TX 75006; for more information call 972/263-7268.*

Paramedic: The City of Harker Heights is accepting applications for dual-certified paramedic-firefighters. Advanced protocols and procedures. Health and retirement plan. Starting salary \$23,426 plus incentives. Send resume to: Harker Heights Fire Department, attn: Captain Philen, 401 Indian Trail, Harker Heights, TX 76548.*

EMS Director: The City of Dublin is seeking a qualified applicant to provide leadership and direction for day-to-day EMS operations. In charge of EMS personnel and management of all related fields of EMS and

MEETINGS AND NOTICES

financial matters. Must be a paramedic with at least 2 years of field experience and possess current ACLS, PALS, and BLS certification. Salary depends on qualifications. Send resume to: City of Dublin EMS, 213 East Black-jack, Dublin, TX 76446.*

Paramedics: Hull-Daisetta EMS, a rural 9-1-1 service is accepting applications for paramedics. Send resumes to: Hull-Daisetta EMS, PO Box 351, Hull, TX 77564 or e-mail emsmichael@imsday.com*

Paramedics, EMTs, dispatchers, billing specialists: Life Line Universal Transport, Inc. Offers exciting work environment and an excellent benefit package. We are seeking self-motivated individuals certified in Texas with a good driving record. Please call 281/970-2273 or fax your resume to 281/970-1726.*

Paramedics and EMTs: Needed for new shifts in Houston area. 48-60 hour weeks. Call bonuses/quarterly bonuses/23-25K. Send resume to Thomas Ambulance, 4527 Spring Cypress Road, Spring, TX 77388 or call 281/353-4949.*

BLS Instructors: 10 positions in the Dallas area. Send resume to: Steve Cutler, Metroplex Medical Training, 3637 Trinity Miles Road, Ste. 414, Dallas, TX 75287.*

EMT, EMT-I, EMT-P needed. Full or part-time positions. Dallas, Houston and San Antonio areas. Send resumes to: AHC, PO Box 948, Lancaster, TX 75146.*

FOR SALE

For Sale: Two-1994 Type II Ford ambulances and a 1993 Type III ambulance. Very good condition. Call Manuel at 512/851-8422.*

For Sale: (2) Maxon 16 ch UHF mobile radios 450-470 Mhz excellent condition \$250 each. Maxon desk mic new in box, \$45. Icom F40LT UHF hand held, 99 channel alpha keypad, includes 1 hour fast charger and programming software, \$425. S. Carson 817/232-5801.*

For Sale: Protocols, BLS and ALS written to your specifications, American Heart Association. ACLS and BTL standards. Sheet or computer disk. For more information contact Kay or Greg McMichael at 409/298-3204 or fax 409/298-2831.*

For Sale: (2) Marquette 1500 AED/defibrillators. Purchased new in 1993, software upgrade in 1996. Pacer, manual override, with simulator/tester. \$5,000 each. Contact Chris Israel at Brazoria Fire Dept. 409/798-4275.*

For Sale: 1994 ambulance, International Series 4700. 406 diesel engine, dual compressor air conditioning. Minimum bid \$50,000. Contact Mike Stillwell, Fleet Service, City of Carrollton, TX, 972/466-3492 or fax 972/466-3486.*

For Sale: CPR manikins, new and used. CPR supplies, airways, manikin face shields,

facepieces, parts. Manikin maintenance cleaning and repairs. Rental manikins available. Contact: Ron Zaring, Manikin Repair Center, Houston, 281/484-8382 or FAX 281/922-4429.*

CPR manikins for rental use: for the Corpus Christi and San Antonio area. Please call Metroplex Medical Training Services at 1-800/583-0097.*

BLS or ALS equipment for rental use: CPR classes available in the San Antonio, Corpus Christi and Austin areas. Please contact Steve Cutler at 800/583-0097 or 972/270-0857.*

Billing: Alexander Consulting, Inc., state-of-the-art billing system is designed to increase your cash flow, and give you more time to focus on growth and service. Call 210/344-9444, 888-991-9444 or fax 210/344-9777.*

Ambulance billing: Electronic billing for medicare and commercial insurances. Call or write 888/282-9203, Elite Billing Services, PO Box 948, Lancaster, TX 75146.*

Business Opportunity: If your background is in EMS? Do you have the desire to own your own ambulance company in your area of service? If the answer is yes, please send a letter describing your transfer service background, your service area and your updated resume to PO Box 2586, Spring, TX 77383. Attn: Roy Peeples.*

Exam Study Guide: Firefighter or paramedic exam study guide. Written for Texas firefighters and paramedics. Mail checks or money order for \$19.99 to: TQE, 2603 N. Arkansas Ave, Suite 6, Laredo, TX 78043.*

Classes: Metrocrest Medical Services Education Department offers CPR classes each week. 40-hour ECA courses, CE packets by mail/\$5 per hour. For information call 972/484-1158.*

Accepting Bids: Shackelford County Hospital District is now accepting bids for management of Small County Wide Ambulance Service. Averages 300-350 calls a year. The district owns two units. Contact SCHD

at 915/762-3313, Diedre Stewart, Steve Hobbs, EMT-P, or Jerami St. Clair, EMT-P, for more information.

For Sale: Lifepak 5 & 10 batteries. Call 800/373-3301.+

ALS training equipment for rental use: IV trainers, adult/infant airway trainers. Call Metroplex Medical Training at 972/662-0816.+

For Sale: 1989 Collins Type I ambulance. Ford F350 chassis, diesel engine, 100,000 miles. Good condition. Includes stretcher. Call Crosby EMS at 281/328-6810.+

BLS manikins for rental use: In San Antonio, Austin, Corpus Christi areas. Call Metroplex Medical Training at 800/583-0097 or 972/662-0816.+

For Sale: (2) Pace-Tech Minipack model 911ST. Automated blood pressure monitor, includes pulse oximetry and temperature probe. 1 unit with printer. Call Crosby EMS at 281/328-6810.+

ACLS and PALS equipment for rental use: Call Metroplex Medical Training at 800/583-0097 or 972/662-0816.+

For Sale: 1982 Chevy Type I Wheeled Coach, large box with stretcher, suction, hangers, siren, lightbars. 15,000 miles on new Goodwrench 454. New tires. \$3500. Call 806/764-3354 or 806/764-3450.+

BLS and ALS manikins for rental use: Call Metroplex Medical Training at 800/583-0097 or 972/662-0816.+

For Sale: 1984 Type I Chevy ambulance, rebuilt 454, 7000 miles/odometer reading 35,000 miles. Good condition. \$4950. Call 800/604-5964.+

Ambulance billing: Municipal Services Bureau provides EMS billing, collection. Electronic billing and reporting to TDH Trauma Registry. For no-obligation fee quote, call Tom Van Wyngarden, 5912 Balcones Dr, Austin, TX 78731, 800/568-7004.+

+ This listing is new to this issue.
* Last issue to run (If you want your ad to run again please call 512/834-6748.)

Placing an ad? Moving? Renewing your subscription?

Placing an ad? To place an ad or list a meeting date in this section, write the ad (keep the words to a minimum, please) and fax to: *Texas EMS Magazine*, 512/834-6736 or send to *Texas EMS Magazine*, 1100 West 49th, Austin, TX 78756-3199. Ads will run in two issues and then be removed.

Moving? Let us know your new address—the post office may not forward this magazine to your new address. Use the subscription form in this magazine to change your address, just mark the change of address box and mail it to us or fax your new address to 512/834-6736. We don't want you to miss an issue!

Renewing your subscription? Use the subscription form in this magazine to renew your subscription and mark the renewal box.

Profile: Corpus Christi Fire Department/EMS



How Many Years in Service: The Corpus Christi Fire Department took over ambulance operations in 1973.

Number of Units and Capabilities: CCFD/EMS operates seven front-line MICU ambulances. We have five reserve ambulances, a rehab bus, and a mass casualty trailer. The ambulances are supported by 19 fire units that are equipped with AEDs, oxygen, trauma bags and medications.

Name of Service: Corpus Christi Fire Department/EMS

Number of Personnel: Corpus Christi Fire Department employs 380 personnel. There are 174 certified paramedics, 42 EMTs, and the rest of the members of the department are CPR-certified.

Number of Calls: In 1997, the EMS units had 19,876 emergency calls and the fire trucks had 11,000 calls, 4500 of which were EMS assists.

Current Projects: We are still gleaming from being named "1997 Public Provider of the Year" at the EMS conference. We are in the process of putting four new medium-duty ambulances in service. We have a working CISM team. We are establishing a crisis response team. The department is actively involved in the "Toys for Tots" program. We are in the process of setting up a mid-year EMS conference here in May. We have an established citizen CPR program and a special events bike patrol. We are active in the local RAC and assist the hospitals in obtaining their trauma designations. We are working hard on our QI program to identify our weaknesses in our system and to try and correct any deficits we find. 🐻

Bureau of Emergency Management
Texas Department of Health
1100 West 49th Street
Austin, Texas 78756-3199

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