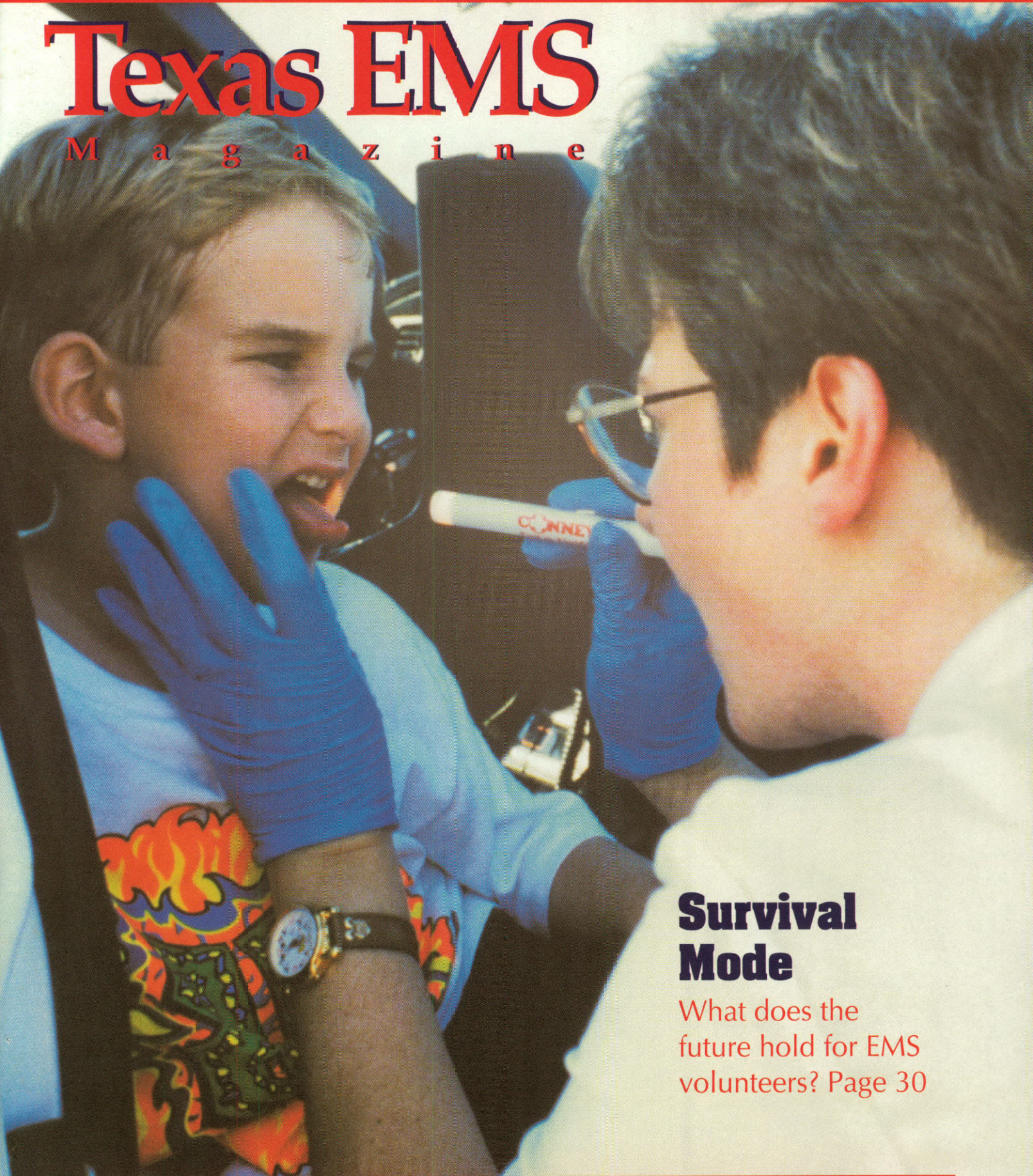


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# Texas EMS

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Serving Texas Emergency Care Professionals

Texas Department of Health

May/June 1998

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# Texas EMS

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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.

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



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May 17-23, 1998

# Texas EMS

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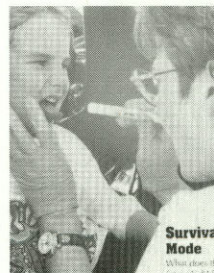
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You've heard it before but here it is again: get up and get moving. You'll feel better. Promise.



COVER PHOTO: Friendswood Volunteer EMS responded to this two-car collision. The young man in the photo was wearing a seatbelt and sustained no injuries. Photo by Greg Mapp.





## TEXAS DEPARTMENT OF HEALTH MISSION

*To protect and promote the health of  
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*To facilitate statewide, regional, and  
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# Texas EMS

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May/June 1998

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# An open letter to EMS in Texas

I have just come home from work and completed my daily ritual of reviewing the EMS communications on the Internet. This is my way of seeing on a regular basis what you are talking about and what is important to you. Very few times have I responded, but I feel compelled to speak at this time regarding what your Emergency Health Care Advisory Committee and many of your fellow EMS providers are trying to do.

During World War II, in the wee hours of the morning, an aide to Sir Winston Churchill's was watching "Winnie" pace the floor in his robe while puffing on one of those infamous cigars, his brow heavy and furrowed. The evening had been tense as Churchill searched for answers. To break the tension, the aide spoke softly, "Sir, might I ask you a question?" Churchill paused, peered over his half glasses and replied, "Surely, what is it?"


The aide said, "Sir Winston, you have had such an incredible life, and so many fantastic opportunities and experiences have come your way. To what would you attribute all this?" Churchill paused, puffed his cigar, and gazed out the window into the dark night for several seconds. He then turned to his aide and delivered his answer. "My boy, all these things have happened because I placed myself in their path."

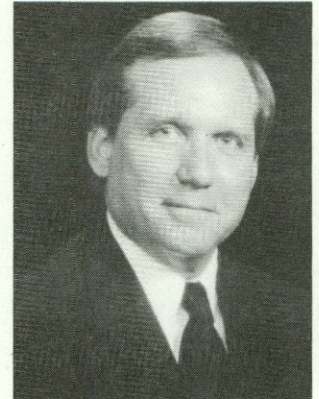
The point appears to be that we can achieve many things in life but it requires placing ourselves in the right path. We must prepare and act to position ourselves in order for "fantastic opportunities and experiences" to come our way. We have the option to be motivated by fear or by our dreams, visions and goals. If fear is allowed to beat its incessant drum, we can seldom hear the sound of dreams and opportunities when they reveal themselves.

In 1989, EMS in Texas was given an unfunded mandate by the Legislature to develop and implement the Texas Trauma System. Many said that it was too

large a project, that it could never be done. It was, and is, being done. Many attempts were made to fund this project. They said it couldn't be done. By placing ourselves in the right path, funding is now a reality. Disputes over the funding formula have been resolved, despite many who said we could never bring the parties together. All of this has been accomplished because we have acted, instead of reacting out of fear and selfish interests. We have placed ourselves in the path of success.

Project Alpha has been proposed as a way to review and revise the EMS rules in Texas. We have another opportunity to place ourselves in the path of success and create a plan for EMS to move into the next century. We are trying to resolve the issues inherent in any project that changes the way we have done things for 25 years. Your EHCAC members are committed to lead as we move down the path and we need your continued help. EHCAC is not EMS—you are EMS. You must be involved in the process of modifying Project Alpha so we can successfully complete what we have begun. The end result will not be exactly what the medical directors want. It will not be exactly what EHCAC wants. It will not be exactly what the EMTs want, nor the firefighters, nor the first responders, nor the TDH staff who developed and proposed it. It will not be the first choice of any single group, but it will be the work of many. It will be a comprehensive, though not perfect, plan to revise the EMS rules and improve patient care.

If we can put aside our selfish interests, greed, petty personality differences and preconceived ideas, we can once again place ourselves in the path of success and help EMS in Texas save lives and reduce injuries. That is our mission and our goal. Politics will not stand in our way. We have been and we will be successful. We are on the right path. 



By RONALD C. REDUS,  
DDS, MSD  
CHAIR, EMERGENCY HEALTH  
CARE ADVISORY COMMITTEE



The Bureau of Emergency  
Management  
mourns the passing of this  
EMS friend

**James Franklynn (Jim) Wynn**, 60, of Uvalde, passed away February 17, 1998, at the Audie L. Murphy Memorial Veterans Hospital in San Antonio. For many years, Wynn was an active member in Uvalde EMS and continued to play an active role until his health failed. He is survived by his wife, Sue Chadwick Wynn, and all his friends in EMS.

## Keene ambulance involved in a head-on collision

A patient and a passenger in the truck were killed, and three Keene firefighters were injured, when a Keene EMS ambulance was involved in a collision with a pickup truck during a patient transport in March. The truck, traveling southbound, swerved into the northbound lanes. The ambulance, heading north into Fort Worth, moved into the southbound lanes to avoid the oncoming truck but was hit on the front passenger side. The ambulance rolled three times and then burst into flames. —*Dallas Morning News*

### Answers to March/April '98 CE test

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

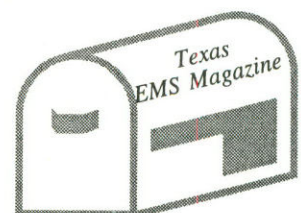
# L e t t e r s

**To Texas EMS Magazine:** On Saturday, February 21, 1998, we laid to rest a true friend of Uvalde EMS and of mine. Someone once wrote that acquaintances are many but true friends can be counted on the fingers of one hand. Such was my relation with Jim Wynn. It wasn't that way in the beginning. More years ago than I care to remember, I first met Jim. He was one of the first paid personnel to work for Uvalde EMS. My initial reaction was, "Where did they find this grumpy old man?" It didn't take long to see through the charade and discover the real person under the mask of negativity. If there was ever someone who really cared about EMS in Uvalde, Texas, Jim was that person. Not too long after we met, I began to promote some holiday programs in the local nursing homes. It bothered me to see that many of the patients in those facilities never had visitors or family members come to see them, not even during the holidays. I contacted Uvalde EMS and other EMS systems in the area and asked if they would like to help with the programs. Jim was almost always the first to show up—gripping of course—and the last one to leave. Jim assisted not only with these presentations but was always available when there was a need for an extra CPR instructor or any activity relating to EMS. Whenever there was a need, you could count on Jim. Not too many

years later, his health began to fail and he retired from active duty. However, that didn't stop him from participating in local EMS activities or dropping by the office here to see what was going on. He was active on the local EMS board and stories are told about how he would carry applications with him to pass out to prospective members. During this time, his health continued to fail, but that never dampened his love for EMS. Once in a while I would see him out and about, and on occasion we would have a cup of coffee together and talk about the past, present and future of EMS.

We scattered his ashes in a small private cemetery near Reagan Wells in the midst of a cloudburst of rain and hail. As we made a hasty retreat to our vehicles, I smiled when I thought about Jim looking down at us with that cynical smile, making some wisecrack about our appearances. Yes, to those who knew him well, Jim was more than a crusty old ex-sailor/EMT. He was one of those who cared. Goodbye, my old friend. You will be missed and not forgotten.

*Lee Sweeten, EMT-P  
Uvalde*





By Rod Dennison, EMT-P

# This ain't no hobby

Too many complaints we receive in the EMS regional office indicate there is a widespread belief that the standards for patient care provided by first responders or volunteer EMS services are not the same as the standards that apply to paid EMS services. Regardless of whether responders to emergency scenes are first responders or transport services, paid or volunteer, the consistency and quality of patient care should be the same. Standard of care and level of care should not be confused.


Level of care can be anything from ECA to paramedic. Standard of care has to do with the commitment of personnel and the quality of care they provide, regardless of certification level. Patients have a right to expect consistent and excellently performed emergency care along the entire chain of persons helping them, from first responder to physician. We have received numerous complaints about first responder organizations that provide care inconsistent with the transporting service, have inadequate training or equipment, and fail to complete (or even have) patient care report forms. We have received numerous complaints about EMS providers that frequently have long response times because they cannot consistently get a crew together. Too often ambulances roll with only a single person, hoping to rendezvous with additional personnel on scene. Usually that happens. Sometimes it does not. Way too often certain

services do not respond at all because of failure to put a crew together. The general plan when this happens is to initiate mutual aid.

This indicates three things about the non-responding service: 1) the service is not meeting the obligation it has made to the citizens in its service area; 2) the service is exploiting and undermining a neighboring service; and 3) the service is not complying with its legal obligations as an EMS provider licensed by the State of Texas. All three of these demonstrate a lack of professionalism. In addition, #3 has significant concrete implications. Failure to comply with requirements of an EMS license places the service at risk of administrative financial penalties and loss of license. Failure to comply with requirements of first responder registration places the organization at risk of losing fee exemption status for its personnel, losing grant eligibility and having its registration revoked.

Taking care of injured and ill human beings is not a hobby. If any of the above observations apply to you or your service, make the necessary changes for an around-the-clock commitment to excellent service, or find another hobby.

Rod Dennison is EMS Regional Administrator in Region 7's Temple office.

 **EMS Fact:** More than 20 percent of 9-1-1 calls, about 60,000, are now placed with wireless phones.

—National Highway Traffic Safety Administration

TEXAS EMS CERTIFICATIONS AS OF MARCH 30, 1998

ECA	6,856
EMT	23,520
EMT-I	3,845
EMT-P	11,397
TOTAL	45,618
COORDINATOR	418
INSTRUCTOR	1,995
EXAMINER	2,313



# EMS news

*A compilation of news from around the state and nation*

## Delta Airlines equips fleet with AEDs

Delta Airlines has unveiled plans to equip its entire fleet with AEDs and expanded emergency medical kits by July 1998. Delta flight attendants will be trained to operate the AEDs in case of in-flight emergencies and a visual display of the patient's heart rhythm will help evaluate the patient's condition. In 1997, Delta carried more than 103 million passengers.

## NOVA award presented to GDIPC and Dallas hospitals

In February, the Greater Dallas Injury Prevention Center, along with Parkland Health & Hospital System, Children's Medical Center of Dallas, Presbyterian Healthcare System, Baylor Health Care System and Methodist Hospitals of Dallas, were presented with one of the five American Hospital Association's NOVA Awards for their collaborative approach in preventing injuries in Dallas. The NOVA award recognizes the formation of community partnerships to respond to specific community needs. AHA plans to use the GDIPC as a model for communities to use in injury prevention.

## CPSC recalls vent pipes on home heating systems


The manufacturers of high-temperature plastic vent pipes, along with most of the furnace and boiler industry and the Consumer Product Safety Commission, announced a recall of approximately 250,000 HTVP pipe

systems attached to gas or propane furnaces and boilers in consumers' homes. The pipes could crack or separate at joints and leak carbon monoxide. CO, a colorless, odorless gas produced by the incomplete burning of natural gas and propane, can cause dizziness, fatigue, headache, nausea, irregular breathing and death. Consumers with recalled pipe systems will receive new, professional-installed venting systems free of charge or may receive reimbursement for some or all replacement costs if they have already replaced the systems. Contact (800) 758-3688 for more information regarding this recall.

## Milwaukee hospitals post bed availability on Internet

Emergency rooms in the Milwaukee area are linking to an Internet site that provides continuously updated information on the number of surgeons and beds available. This site is used to coordinate patient care during disasters and at other times by allowing emergency personnel to decide which hospitals would be best at that particular time for treating various injuries, and is immediately updated from the hospitals' existing computers.

## American Red Cross releases new water rescue courses

 The American Red Cross has released two new courses to prepare individuals to respond effectively in water and small craft emergencies. *American Red Cross Basic Water Rescue* teaches the fundamentals



## TDH regional offices increase on-line information

Want to know the next testing date in your area? TDH Public Health Region 1 (Canyon and Lubbock), Region 2 (Abilene and Wichita Falls), Region 3 (Arlington) and Region 6 (Houston) have added regional calendars, exam schedules, contact and general information to their web sites. Click on <http://www.tdh.state.tx.us/hcqs/ems/emshome.htm> and choose the EMS Regional Offices button for more information.



of self-rescue and assisting others using nonswimming rescues, while maintaining personal safety. *American Red Cross Small Craft Safety*, developed in conjunction with the American Camping Association and Girl Scouts of the USA, prepares individuals to respond effectively to a variety of small craft emergencies. While neither course is a lifeguard course, the courses can be customized to fit the needs of a specific site and personnel. For more information regarding these courses, contact a local Red Cross office.

### **Judge acquits California doctor of murder of infant patient**

The trial of a California doctor charged with the murder of an infant patient ended when the judge ruled that authorities had not shown that the doctor had acted criminally. The 11-month-old child had been seen by the doctor at a rural hospital emergency department in 1996 during two of three visits within 48 hours for vomiting and diarrhea. After keeping the child for eight hours during his third visit, the doctor told the parents to drive the baby to another hospital 55 miles away. The child was brain-dead upon arrival at the other hospital. During the trial, the defense testified that during the months prior to the child's death, out-of-county transports had been delayed an average of 75 minutes, but a paramedic testified that an ambulance had been available that evening. A California coroner testified that the cause of death was a massive infection, but exact cause could not be determined due to the amount of fluids and antibiotics given during resuscitation. A nationally-known pediatric infectious disease expert testified that the doctor had acted appropriately in caring for the child. National and state medical associations applauded

the judge's decision, adding the doctor should have never been tried in criminal court for medical decisions.

### **National EMS Memorial sponsors a Moment of Silence for fallen EMS personnel**

The National EMS Memorial, a permanent memorial for EMS personnel who have died in the line of duty, is sponsoring a national Moment of Silence at 7:00 p.m.(CST), Saturday, May 23, as part of the National EMS Memorial Service. During the service, families of the honorees are presented with a medallion, a U.S. flag that has flown over the U.S. Capitol and a white rose. Each honoree's name is engraved on an oak-leaf-shaped bronze piece which is added to the "Tree of Life," part of the National EMS Memorial. While the service is being held in Roanoke, Virginia, the national Moment of Silence seeks voluntary participation by other EMS providers, agencies and emergency communications centers in observing a moment of radio silence. Click on <http://naemt.org/nmos/> for more information about the memorial and the ceremony.

### **Safe Riders Program has information about low-cost bicycle helmets**

TDH Safe Riders Program coordinates two statewide projects regarding bicycle helmets. One program provides low-cost helmet purchases for groups, with a minimum order of 12. Safe Riders also coordinates a bicycle helmet distribution program for low-income children. Community groups throughout Texas are invited to apply with Safe Riders to receive helmets. For more information concerning either of these bicycle helmet programs, contact TDH Safe Riders at (800) 252-8255.



**EMS Fact:** The highest percentage of alcohol-involved crashes was on St. Patrick's Day (68.1 percent), followed by Superbowl Sunday (56.1 percent).  
—General Motors Safe Driving Program

### **Web pages**

Drug problems can be found in all communities across the country. Some sources of prevention education can be found at: National Inhalant Prevention Coalition at <http://www.inhalants.org>; Partnership for a Drug-Free America at <http://www.drugfreeamerica.org>; National Clearinghouse on Alcohol and Drug Abuse at [www.health.org](http://www.health.org); Texas Commission on Alcohol and Drug Abuse Clearinghouse at <http://www.tcada.state.tx.us>; and the Texas Prevention Resource Centers at <http://www.prc7.org>.

Looking for information about recalls on the Evenflo child passenger safety seats? Hair dryers? Halogen floor lamps? Check out the Consumer Product Safety Commission's web page at <http://www.cpsc.gov> or call (800) 638-2772 for the latest recall information.

The Center to Prevent Handgun Violence's web site contains information about protecting your family and friends from handgun violence and changes and trends in gun laws in the U.S. at <http://handguncontrol.org>.



# Texas EMS Conference '98—Registration Form

*Note: Make a copy of this form for each additional registration—only one registration per form. Fill in the name exactly like you want your nametag to be printed. (Please type or print the information)*

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

Level of Certification  ECA  EMT  EMT-I  EMT-P Other/Title \_\_\_\_\_

Do you make purchasing decisions for your firm?  yes  no

Do you subscribe to *Texas EMS Magazine*?  yes  no For information call (512) 834-6700.  
Fax to (512) 834-6736.

## PRECONFERENCE CLASSES

*If you are taking a preconference class, check the Preconference Class Title*

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> \$100 High Angle Rescue               | <input type="checkbox"/> \$40 Clown College                        | <input type="checkbox"/> \$50 Cadaver Lab (number time preferences 1,2,3) _____ |
| <input type="checkbox"/> \$100 Cave Rescue                     | <input type="checkbox"/> \$100 Pediatric Basic Trauma Life Support | __8:30 __11:00 __2:30   |
| <input type="checkbox"/> \$195 Advanced Cardiac Life Support   | <input type="checkbox"/> \$35 Moulage                              |   |
| <input type="checkbox"/> \$35 EMS Managing Hazardous Materials | <input type="checkbox"/> \$20 Educational Site Review              |   |
| <input type="checkbox"/> \$75 Infection Control in the 90s     |  |   |

Total Preconference  
Class Fee \$ \_\_\_\_\_

**Mailed registrations will not be accepted after 11/1/98.**

<input type="checkbox"/> MC <input type="checkbox"/> Visa Credit Card No. _____
Card Holder _____ Card Exp. _____
Signature of Card Holder _____

**Sunday, November 22, 1998**

1:00 pm - 7:00 pm Registration-Convention Center  
3:00 pm - 7:00 pm Exhibit Hall Opens-Welcome Reception

**Monday, November 23, 1998**

7:00 am - 6:00 pm Registration-Convention Center

**Tuesday, November 24, 1998**

7:00 am - 5:00 pm Registration-Convention Center

**No refund after 11/1/98**

Conference	Amount
Registration Fee	\$ 80
PreConference class fee included	+
Total Amount enclosed	\$

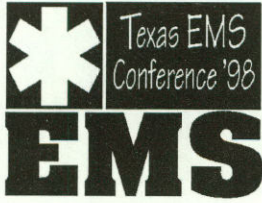
**Check or money order must accompany registration. Registration by fax will be accepted only if you are using a credit card. No refund after 11/1/98—There is a 9% administration fee if a refund is necessary.**

<b>Official Use Only</b>	<b>Date Rec'd.</b>	<b>Check No.</b>	<b>Method of Pmt.</b>	<b>Amt. Rec'd.</b>

Make check to: **Texas Health Foundation**  
Mail: Texas EMS Conference  
PO Box 142694  
Austin, Texas 78714-2694



# Texas EMS Conference '98



The 13th Annual  
Texas EMS Conference

November 22-25, 1998  
Austin Convention Center  
Austin, Texas

## EXHIBITOR REGISTRATION FORM

### T E X A S E M S C O N F E R E N C E ' 9 8 — EXHIBITOR REGISTRATION FORM

Firm Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_ FAX \_\_\_\_\_

Type of business/products *Please be specific—this determines what kind of company you are placed next to.*

Make check to: **Texas Health Foundation**  
Mail to: **Exhibitor**  
Texas EMS Conference  
PO Box 142694  
Austin, Texas 78714-2694

- (1) 10X10 regular booth ..... \$500 each
- (2) 10X10 booths ..... \$475 each
- (3 or more) ..... \$450 each
- (1) 20X20 vehicle booth ..... \$550 each
- (2) 20X20 booths ..... \$500 each
- (3 or more) ..... \$475 each

Number booths & extra reps.	Amount enclosed
Regular Booths	\$
Vehicle Booths	\$
Extra reps. (\$50 each)	\$
<b>Add \$100 to the total after 10/1/98</b>	
Totals	\$

**Official Use Only**

Date Rec'd.	Check No.	Method of Pmt.	Amt. Rec'd.

No refund after 11/1/98  
(payment must be received by 11/1/98)

Names of representatives working in the booth(s):

Last Name	First Name	Title/Certification
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____
5. _____	_____	_____
6. _____	_____	_____
7. _____	_____	_____
8. _____	_____	_____

(Note: Two representatives per exhibit space are included in the registration fee. Additional representatives are welcome and need to pay an additional fee of \$50 each. Please include this amount in your check total.)





# 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 rescue class, plus many of the favorites from past years.
- Learn about the latest in EMS technology 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!
- 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>.

## Agenda

### Sunday, November 22, 1998

- 1:00 pm - 7:00 pm Registration in Convention Center  
Inside Exhibit Hall
- 3:00 pm - 7:00 pm **Exhibit Hall Opens with Welcome Reception**

### Monday, November 23, 1998

- 7:00 am - 6:00 pm Registration in the Convention Center  
Inside Exhibit Hall
- 8:15 am - 9:30 am Opening Session  
Ballroom A-C
- 9:45 am - 10:45 am Workshop Breakouts  
Ballroom A, Rooms 4 - 10 (Third floor)
- 10:00 am - 6:00 pm **Exhibit Hall Open**
- 11:00 am - 12 noon Workshop Breakouts  
Ballrooms A-C, Rooms 4 - 10 (Third floor)
- 12 noon - 1:00 pm Lunch in Exhibit Hall
- 2:00 pm - 3:00 pm Workshop Breakouts  
Ballrooms A-C, Rooms 4 - 10 (Third floor)
- 3:15 pm - 4:15 pm Workshop Breakouts  
Ballrooms A-C, Rooms 4 - 10 (Third floor)
- 4:30 pm - 5:30 pm Workshop Breakouts  
Ballrooms A-C, Rooms 4 - 10 (Third floor)

### Tuesday, November 24, 1998

- 7:00 a.m - 5:00 pm Registration in the Convention Center  
Inside Exhibit Hall
- 7:30 am - 8:30 am Early Bird Workshop Breakouts  
Ballrooms A-C, Rooms 4 - 10 (Third floor)



8:45 am - 9:45 am Workshop Breakouts  
Ballrooms A-B, Rooms 4 - 10 (Third floor)

10:00 am -11:45 am **Exhibit Hall Open**  
*(closed during Awards Luncheon)*

10:00 am -11:00 am Workshop Breakouts  
Ballrooms A-B, Rooms 4 - 10 (Third floor)

11:45 am -1:15 pm Awards Luncheon  
Exhibit Hall *(Overflow seating in Ballroom C)*  
*(Exhibit Hall open immediately after Awards Luncheon)*

1:15 pm - 5:00 pm **Exhibit Hall Open**

2:00 pm - 3:00 pm Workshop Breakouts  
Ballrooms A and B, Rooms 4 - 10 (Third floor)

3:15 pm - 4:15 pm Workshop Breakouts  
Ballrooms A-C, Rooms 4 - 10 (Third floor)

4:30 pm - 5:30 pm Workshop Breakouts  
Ballrooms A-C, Rooms 4 - 10 (Third floor)

5:00 pm **Exhibit Hall Closes**

**Wednesday, November 25, 1998**

8:30 am - 9:30 am Workshop Breakouts  
Ballroom A-C, Room 6

9:45 am - 10:45 am Workshop Breakouts  
Ballroom A-C, Room 6

11:00 am - 12 noon Workshop Breakouts  
Ballroom A-C, Room 6

**Conference Adjourns**

**Conference Hotels**

Hyatt \$70/\$95  
(Host Hotel)  
(512) 477-1234

Radisson \$70/\$95  
(512) 478-9611

Four Seasons \$95/\$105  
(512) 478-4500

Embassy Suites \$110/\$120  
(512) 469-9000

Marriott Capitol \$70/\$85  
(512) 478-1111

Omni Hotel \$70/\$95  
(512) 476-3700

Sheraton \$70/\$95  
(512) 480-8181

*Rates listed are single/  
double*

**1998 Texas EMS Photography Contest entry form**

Photographer's Name \_\_\_\_\_

Employed by \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone (home) \_\_\_\_\_ (work) \_\_\_\_\_

**Mail to:** Jan Brizendine, Texas Department of Health  
1100 W. 49th Street, Austin, TX 78756-3199.

**Deadline for entering: November 1, 1998**

Tape this form to the back of the photo.  
For more information call Jan Brizendine at (512) 834-6748.

form on this page, tape it to the back of your photograph, and mail your entry to: Texas EMS Photo Contest, Texas Department of Health, 1100 W. 49th Street, Austin, Texas 78756-3199. Judges will select winning photographs based on artistic composition, originality, visual appeal, and good patient care.

- The Texas Department of Health will keep all photo entries and will have the right to publish entries in TDH publications. The photographer's name will be printed along with the photo. Ownership of the negative will remain with the photographer.
- Winning categories and prizes:  
One grand prize winner from all photos—\$100 and a plaque  
Two first place winners (one color and one black and white)—each wins \$75 and a plaque  
Second place—\$50 and a ribbon  
Third place—\$25 and a ribbon  
Honorable mention—\$15 and a ribbon

**Photo Contest Rules**

- Anyone is eligible; no entry fee is required.
- Entries must be received **no later than November 1, 1998**. Winners will

be announced at the Texas EMS Conference, November 22-25, 1998.

- Unmatted prints **8x10 inches** or **5x7 inches** may be submitted in color or black and white. Fill out the entry



Want to take a pre-conference class? Here are the details.

# PreConference Classes

November 21-22, 1998

1. Participants **MUST** preregister for pre-conference classes. The cut-off date for sending your application **AND** your money is **October 1, 1998**. The registration form is on page 10 of this issue. Be sure to indicate which class you're registering for on the form.
2. Refunds subject to 9 percent administrative fee unless the class is canceled due to under enrollment. No refunds will be given after November 1, 1998 and no refunds will be issued until after the conference.
3. All classes will be in the hotels around the Convention Center, or, in the case of off-site classes, will meet at the Hyatt. Please pay close attention to where your class is meeting.
4. Any class that doesn't meet a minimum number will be canceled on October 5, 1998, and full refunds issued to those who signed up.
5. A current class roster, updated weekly, will be on the web site. If your name is not on there, **YOU ARE NOT REGISTERED FOR THE CLASS**. Confirmation cards will be mailed out October 15, 1998.

## Saturday/Sunday classes

### High Angle Rescue

16 - hour class, \$100\*

8 am - 5 pm

Austin Fire Department Training Tower and

Cliffs on the greenbelt

(Meet at the Hyatt)

**CE Category: Additional**

Learn the basics of high angle rescue in this comprehensive two-day introductory course. Participants will have hands-on training in rappelling, hauls/lowers, basic knots, anchors, patient assessment and patient packaging. This class will fill up fast. This class will award 16 hours of CE and includes all necessary equipment except personal helmets (fire okay) and leather gloves. Strictly limited to 25 students. Lunch and transportation will be included. For more information, please contact Rod Dennison or Mike Foegelle at (254) 778-6744 or email them at [rod.dennison@tdh.state.tx.us](mailto:rod.dennison@tdh.state.tx.us) or [mike.foegelle@tdh.state.tx.us](mailto:mike.foegelle@tdh.state.tx.us), or call John Green at (512) 448-8370 or email [john.green@ci.austin.tx.us](mailto:john.green@ci.austin.tx.us).

### Cave Rescue

16- hour class, \$100\*

8 am - 5 pm

Whirlpool Cave

Goat Cave (Meet at the Hyatt)

**CE Category: Additional**

Learn the basics of cave rescue in this comprehensive two-day course. This introductory cave class provides lots of hands-on training in patient assessment, patient packaging, hauls/lowers - all while underground in some of Austin's popular caves. This class will award 16 hours of CE. All necessary equipment is provided except leather gloves and knee pads. Strictly limited to 25 students. This class will fill fast so sign up early. Lunch and

transportation will be included. For more information, please contact Rod Dennison or Mike Foegelle at (254) 778-6744 or email them at [rod.dennison@tdh.state.tx.us](mailto:rod.dennison@tdh.state.tx.us) or [mike.foegelle@tdh.state.tx.us](mailto:mike.foegelle@tdh.state.tx.us) or contact John Green at (512) 448-8370 or email [john.green@ci.austin.tx.us](mailto:john.green@ci.austin.tx.us).

### Advanced Cardiac Life Support (ACLS)

16-hour class, \$195, Austin Convention Center

8 am - 5 pm

**CE Category: Cardiac**

This popular class will teach you the skills that are fundamental for the advanced care of cardiac patients. The class, which is appropriate for advanced personnel, awards 16 hours of CE and is limited to 40 students. Presented in conjunction with Scott and White Continuing Medical Education. For information on class content, call DeeDee Gee at (254) 724-3197.

### EMS Managing Hazardous Materials

16-hour class, \$35, Radisson

8 am - 5 pm

**CE Category: Medical**

Come and see how EMS can respond to a hazmat incident in this hazardous materials class designed specifically for EMS responders. 16 hours of CE. Class limited to 50 students. Call Betsy DuBard at (512) 834-6700 for more information.

### Infection Control in the 90s

16-hour class, \$75

8 am - 5 pm

**CE Category: Medical**

Learn the basics of infection control in the prehospital setting in this class, which awards 16 hours of CE. The class will cover the state and federal laws and how to create and implement protocols for your service. Class limited to 40 students. For information on class content, call Blas Meza at (915) 771-6391.



### **Klown Kollege**

12-hour class, \$40, Hyatt  
9 am - 5 pm Saturday  
9 am - 3 pm Sunday  
**CE Category: Additional**

Learn to be a safety clown from Who Who the Safety Clown in this class, which awards 12 hours of CE. Strictly limited to 15 students. For information, call Dean Baswell at (940) 322-1506.

### *Sunday classes*

### **Pediatric BTLS (Basic Trauma Life Support)**

8-hour class, \$100, Hyatt  
8 am - 5 pm  
**CE Category: Special Patients**

This popular course teaches the key components of managing a pediatric trauma patient. The class, which is appropriate for both basic and advanced personnel, awards 8 hours of CE and is limited to 30 students. For information on class content, call Leon Charpentier at (254)699-2688 or email him at [hhfd@vvm.com](mailto:hhfd@vvm.com).

### **Moulage**

4-hour class, \$35, Hyatt  
12 pm - 4 pm  
**CE category: Additional**

Learn the basic concepts of disaster make-up using simple, easily purchased materials. Techniques covered include bruising, lacerations, burns and penetrating injuries. Wear old clothes that can get ruined! This class awards four hours of CE. For information on class content, call Lee Sweeten at (830) 278-7173 or email him at [lee.sweeten@tdh.state.tx.us](mailto:lee.sweeten@tdh.state.tx.us).

### **Educational Site Review (No CE)**

8-hour class, \$20, Hyatt  
8 am - 5 pm

This class is designed to prepare you to be a peer reviewer in the educational site visit process. The class is limited to 50 people and DOES NOT award CE. To be a peer reviewer, you must be a medical director or paramedic with certification as an EMS instructor, and you must be associated with a program that has undergone a site review visit. However, anyone may come to the class. To be considered as a peer reviewer, you must supply a CV or resume at the time of class. Use of individuals as peer reviewers will be at the sole discretion of the state training coordinator. For information, call Neil Coker or John Rinard at (806) 743-3218, or email Neil at [alhnbc@ttuhsc.edu](mailto:alhnbc@ttuhsc.edu).

### **Cadaver Lab**

2-hour class, \$50, Austin Convention Center  
8:30 am - 10:30 am  
11:00 am - 1:00 pm  
2:30 pm - 4:30 pm  
**CE Category: Preparatory**

This two-hour course, co-sponsored by Scott & White Hospital and Temple College EMS Technology Program, will teach the basics of human anatomy using a cadaver. This class awards two hours of CE. On the registration form, number time preferences 1,2,3; assignments will be made on a first-come, first-served basis. Each class limited to 25 students. No class assignments will be made without payment received. You will receive a confirmation with your class time listed. For more information on class content contact Diane Simpson at Scott & White at (254) 724-8981 or email her at [disimpson@swmail.sw.org](mailto:disimpson@swmail.sw.org).

Other groups pre-conference activities:

### **Valsalva Competition**

Call TAEMT's Jerry Reichel at (409) 345-6352

**Trauma Nurse Core Course** Call Jackie Brock at (214) 590-8268

**Texas Association of Air Medical Services** Call Tom Flanagan at (713) 704-3502.

**Texas Ambulance Association** Call Ron Beaupre at (972) 417-2878.

**EMS Educators Association of Texas** Call Jeff Jarvis at (254) 724-8981 for information on pre-conference educators class.

Activities at no charge:

**Ride out with Austin EMS** Want a chance to ride out with an urban service that responds to about 60,000 calls a year? Austin EMS is offering ride-outs at no charge during the conference. Different times are available. Sign up at the conference registration booth beginning Sunday on a first-come, first-serve basis. Bring dark pants and shoes and a white, collared shirt. Call James Shamard at (512) 448-8380 or email him at [james.shamard@ciaustin.tx.us](mailto:james.shamard@ciaustin.tx.us).

### **Tour Brackenridge's Level II Trauma Facility**

See what a Level II Trauma Facility has to offer. Different times available; no charge for the tour. Sign up at the conference registration booth beginning Sunday on a first-come, first-serve basis. Call Mike Berg at (512) 473-9591 or email him at [mberg@onr.com](mailto:mberg@onr.com)

\* Lunch and transportation included. For registration information, call (512) 834-6700 or visit our web site at <http://www.tdh.state.tx.us/hcqs/ems/98conf.htm>



## 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.

## Austin Fire Department honors personnel

Austin Fire Department honored several personnel during an awards ceremony in January. The Medal of Honor was presented posthumously to Captain James L. Buford, who died while attempting a swift water rescue on June 17, 1972. Medals of Valor and Medals of Merit were presented to several AFD members for their efforts in rescuing two firefighters who became trapped in a burning house, and for finding a natural gas leak and rescuing an unconscious resident in an apartment building.

## Hall County EMS adds EMS flavor to Christmas season

Hall County EMS, in Memphis, decorated a Christmas tree in December as part of the Memphis Chamber of Commerce's Second

*Hall County EMS decorated an EMS Christmas tree as part of the Memphis Chamber of Commerce's Second Annual Christmas Tree Forest.*



Annual Christmas Tree Forest. The EMS tree was decorated with EMS balloons, bandages sprayed gold to look like garland, ECG strips folded into snowflakes, cardboard ambulances, face masks crafted into Santa Clauses, and Stars of Life made out of tongue depressors. Discarded Solu-Metrol bottles became snowmen and angels were made with ECG strips, scissors and various medication bottles. An IV bag gave the tree a constant source of water.

## Paramedic helps save airline passenger

The first save for an American Airlines AED was recorded in February when a passenger on an international American Airlines flight suffered a heart attack on the plane. Trained flight attendants and passenger Don Grohman, a Texas paramedic, used the machine to defibrillate the patient. American Airlines presently has AEDs and trained personnel on the flights that travel overseas. American plans to have an AED on each plane in its fleet and all flight attendants trained in the use of AEDs by November 1998.

## Weatherford College begins remote site CE program

Weatherford College received a Meadows Foundation grant to establish a remote site continuing education program for EMS in the rural communities surrounding



## LOCAL AND REGIONAL EMS NEWS

Weatherford. The new Remote Sites Continuing Education Program-EMS Project covers 13 rural North Central and near West Texas counties. For more information about the program, contact (817) 594-5471, ext. 229.

### Citizens EMS takes delivery of new ambulance

Citizens EMS, in Clyde, received a newly remounted and refurbished ambulance in December. The cost of the refurbished box and new chassis was partially funded through a TDH Local Project grant. The addition of this unit gave Citizens EMS two MICUs.

### Crockett County EMS donates teddy bears

Crockett County EMS donated 40 teddy bears to Ozona DPS to give to traumatized children they may encounter during calls. Crockett County EMS donated these teddy bears to the officers to show their appreciation for the assistance and for the good working relationship between the two agencies.

### Austin Diagnostic Medical Center hosts medical terrorism training

Austin Diagnostic Medical Center hosted a "Medical Consequences of Terrorism" seminar in January. Sponsored by the Austin/Travis County Interagency Disaster Council, the program



Wharton County Junior College graduated its first group of students from the EMT Paramedic program. The graduates are, first row, from left, Maggie Mejorado, Catherine Morales, Preston Conn and Virginia Clark; second row, from left, Jackie Long, John Creech and Ben Altenhoff; third row, from left, Richard Kovar, Mike Mills, Merriam Owings and Frank Becak.

featured the emergency medicine consultant for Georgia who provided anti-terrorism training for healthcare providers and disaster planners during the 1996 Olympics. Participants learned about nuclear, biological and chemical weapons and management of injured civilians.

### North Texas providers take part in training exercise

Several North Central EMS firms and fire departments participated in an extrication exercise in January. Part of an ECA class, the day-long exercise included patient stabilization and extrica-

Citizens EMS recently took delivery of a new ambulance. Pictured with the new unit are, from left, Tim Atkinson, Bobby Turner, Diane Black, Lonny Broadus, Ronnie Albritton and Linda Davison.





## LOCAL AND REGIONAL EMS NEWS



*Clyde Police Chief Ron Young collapses in a "drunken stupor" after shooting the passengers in his vehicle and shooting towards emergency personnel. This mock incident was part of an ECA class training exercise that taught emergency responders about extrication techniques and personal safety on scene.*

tion from mock vehicle crashes. Students were taught the use of various rescue tools, including the "Jaws of Life." One incident that especially stressed personal

safety was staged by Clyde Police Department. In that incident, the police chief played a drunk, drugged driver who, after shooting all of his passengers, got out

of the car and began firing blanks from a gun before collapsing on the ground. Agencies represented at the class were Citizens EMS, fire departments

*Hall County EMS taught Memphis children about staying safe while riding their bicycles. These children received bicycle helmets provided by the Amarillo Bicycle Helmet Task Force and the Panhandle Regional Advisory Council, Trauma Service Area A.*





from Clyde, Eula, Baird, Oplin, Putnam, Hamby, Potosi, Albany, Stamford and Tye, and Clyde Police Department.

## Wharton County Junior College graduates paramedics

Wharton County Junior College announced the first graduation class from the EMT-Paramedic program. Eleven students completed the class and successfully passed the TDH certification examination: Maggie Mejorado, Catherine Morales, Preston Conn, Virginia Clark, Jackie Long, John Creech, Ben Altenhoff, Richard Kovar, Mike Mills, Merriam Owings and Frank Becak.

*Still need ideas for Texas EMS Week? Here are a few more from Texas EMS Week 1997.*

## Val Verde EMS holds EMS demo

Val Verde Regional Medical Center EMS, in Del Rio, demonstrated extrication and vertical rescue techniques, and displayed an ambulance and medical equipment at a local mall. They also held a bicycle safety rodeo and gave away bicycle helmets to local children.

## Uvalde EMS holds EMS artwork contest

Uvalde EMS sponsored an artwork contest for area second

grade students. The students drew what they considered EMS to be. The artwork was compiled into a coloring book about EMS from a child's perspective.

## Hall County EMS holds bicycle safety event

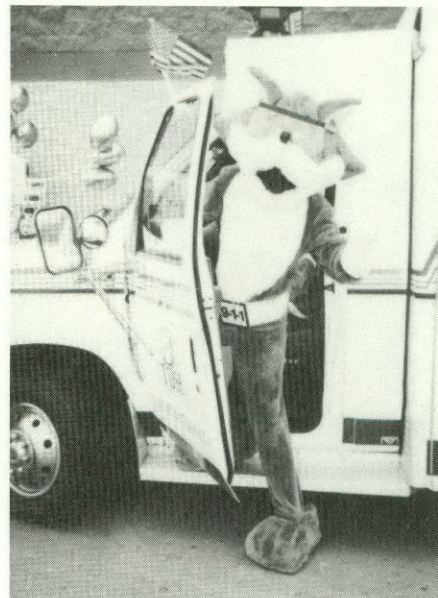
Hall County EMS, in Memphis, hosted a bicycle safety event for children ages 5 to 14 in Memphis. The children watched a music video on bicycle safety, signed a "safe bicycle rider" pledge, and were fitted with bicycle helmets. The helmets were provided by the Amarillo Bicycle Helmet Task Force and the Panhandle Regional Advisory Council, Trauma Service Area A.

## Friendswood VFD-EMS educates public during EMS Week

Friendswood VFD-EMS went to the area schools and day care centers during Texas EMS Week. They handed out Ready Teddy coloring books and educated the children about staying safe. They also began the Child Photo ID program, which makes pictures of the children for parents to use in the event of a disappearance.

## CTTC participates in EMS Week community events

Central Texas Trauma Council in Temple participated in a



*Red E. Fox, the 9-1-1 mascot, was at the emergency services display at the WalMart in Seguin. The display included fire trucks, rescue vehicles, ambulances and information on safety and injury prevention.*

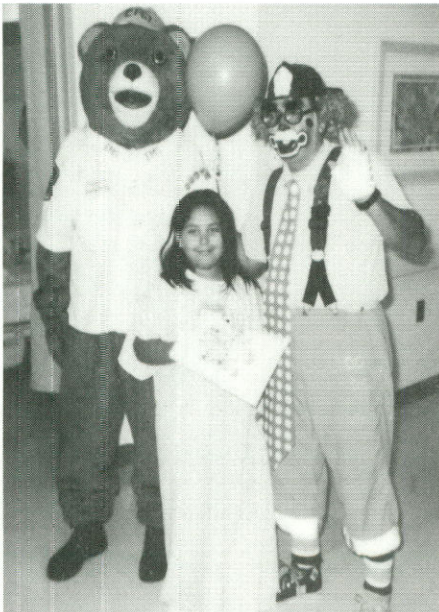
Trauma Awareness Fair at Temple Mall and provided materials and handouts for six other community fairs. CTTC also provided bicycle safety information and bicycle helmets for four area bicycle rodeos.

## Stinnett EMS educates area school children, sponsors CPR class

Stinnett EMS sponsored a CPR class during Texas EMS Week. Ambulance tours were held at the junior high schools and injury prevention information was given out to elementary school students. SEMS also performed blood pressure screenings at area banks, the local courthouse and the senior citizens center.



## LOCAL AND REGIONAL EMS NEWS



*Ready Teddy and Kiko the Fire Chiefie pose with one of the many children who received balloons and gifts from them during Texas EMS Week 1997.*

### Weslaco EMS brings cheer to hospital during EMS Week

Kiko the Fire Chiefie and Ready Teddy visited the children at Knapp Medical Center in Weslaco during Texas EMS Week 1997. Each child was presented with balloons and a small gift. Kiko the Fire Chiefie and Ready Teddy were played, respectively, by firefighter Manuel Varela and volunteer firefighter Mark Escamilla, both of Weslaco EMS.

### Edna EMS participates in community health fair

Edna EMS participated in a community-wide health and safety fair last year. Ambulance tours, blood pressure screenings and fire safety demonstrations were held, and several other

groups, such as the Texas Parks and Wildlife Department and the Red Cross, also participated in the community event. A coloring contest was held for area students and the winners were announced during the health fair.

### Seguin EMS participates in public display

A public display of fire trucks, rescue trucks and ambulances was held at a local Wal-Mart in Seguin during Texas EMS Week. As the public toured the vehicles, the use of the equipment was explained. Safety videos were shown inside the store and injury prevention handouts were available for the public. Red E. Fox, the 9-1-1 mascot, and Ready Teddy, the TDH safety mascot, were on hand to give out safety information and coloring books.

*A child climbs from a fire safety demo with help from emergency personnel. Edna EMS, along with several other agencies, participated in a community health fair last May.*



**EMS Fact:** The number of traffic-related deaths that occur in the U.S. each year is equivalent to a daily 737 jet crash.  
—National Highway Traffic Safety Administration



# LOCAL AND REGIONAL EMS NEWS

## Texas Department of Health EMS Offices

**Bureau of  
Emergency Management**  
1100 West 49th Street  
Austin, Texas 78756-3199  
(512) 834-6700

**Public Health Region 1**  
Terry Bavousett  
P.O. Box 60968, WTAMU Station  
Canyon, Texas 79016  
(806) 655-7151

Denny Martin  
1109 Kemper  
Lubbock, Texas 79403  
(806) 744-3577

**Public Health Regions 2 & 3**  
Jimmy Dunn  
1351 East Bardin Road  
P. O. Box 181869  
Arlington, Texas 76096-1869  
(817) 264-4404

Jerry Bradshaw  
4309 Jacksboro Hwy, Suite 101  
Wichita Falls, Texas 76302  
(940) 767-8593

Andrew Cargile  
1290 S. Willis, Suite 100  
Abilene, Texas 79605  
(915) 690-4410

**Public Health Regions 4 & 5**  
Jim Arnold  
1517 W. Front Street  
Tyler, Texas 75702-7854  
(903) 533-5370

**Public Health Region 6**  
C. Wayne Morris  
5425 Polk Street, Suite J  
Houston, Texas 77023  
(713) 767-3333

**Public Health Region 7**  
Rod Dennison  
2408 S. 37th St.  
Temple, Texas 76504-7168  
(254) 778-6744

**Public Health Region 8**  
Lee Sweeten  
1021 Garner Field Road  
Uvalde, Texas 78801  
(830) 278-7173

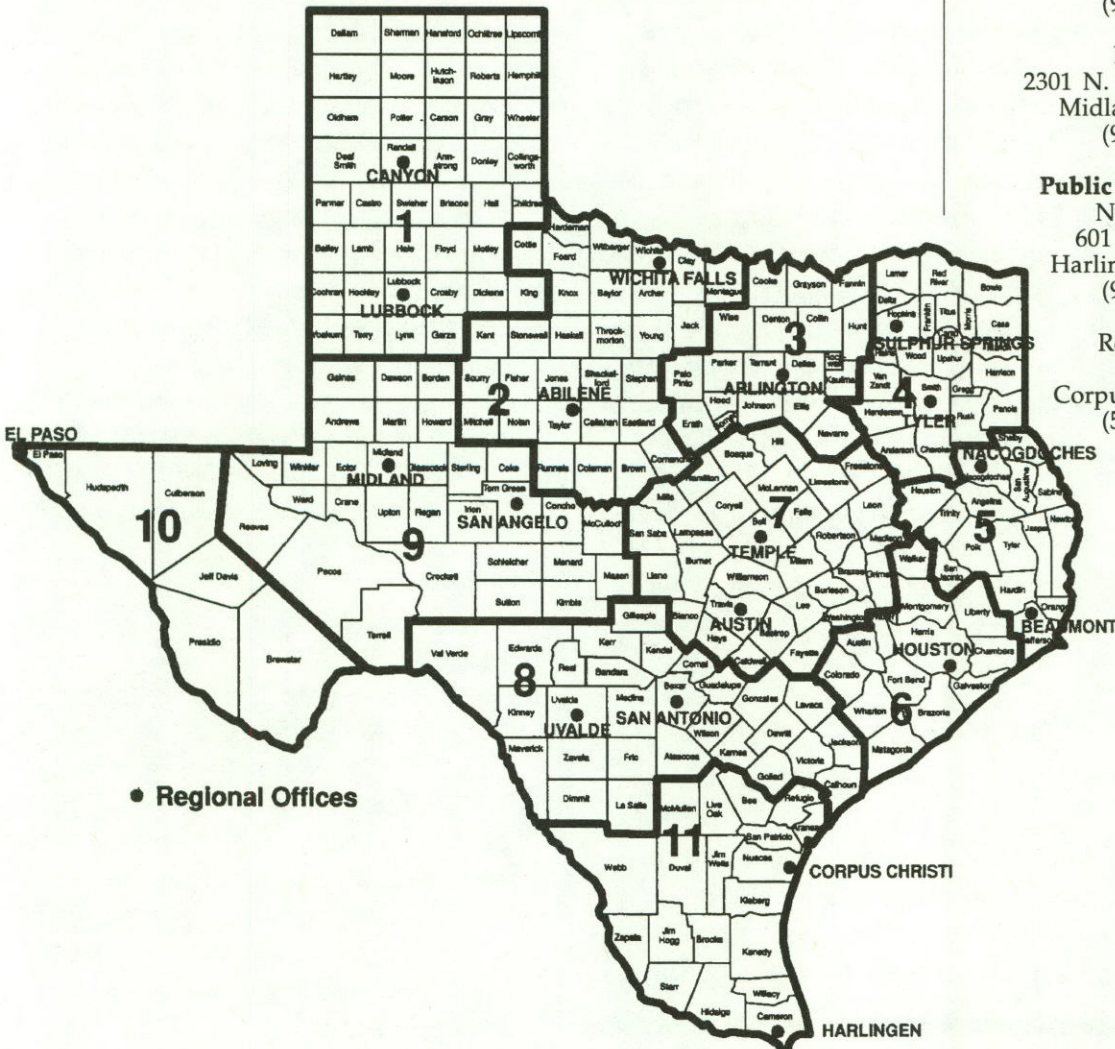
Steve Hanneman  
Fernando Posada  
7430 Louis Pasteur  
San Antonio, Texas 78229  
(210) 949-2050

**Public Health Regions 9 & 10**  
Tom Cantwell  
6070 Gateway East, Suite 401  
El Paso, Texas 79905  
(915) 774-6200

Leland Hart  
2301 N. Big Spring, Ste. 300  
Midland, Texas 79705  
(915) 683-9492

**Public Health Region 11**  
Noemi Sanchez  
601 W. Sesame Dr.  
Harlingen, Texas 78550  
(956) 423-0130

Rothy Moseley  
1233 Agnes  
Corpus Christi, Texas 78401  
(512) 888-7762





By  
Neil Coker, BS,  
EMT-P

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

## Frequently asked questions about EMS Education

**Q.** Our medical director wants us to do clinical rotations on several hospital units. Can these rotations count for CE?

**A.** Definitely. A system of "mini-residencies" or "mini-fellowships" in specialized areas such as geriatrics, pediatrics or obstetrics would be an excellent way to continue the education of your personnel. To use clinical rotations as part of your ongoing CE program, you and your medical director will need to establish objectives and develop mechanisms to ensure that these objectives are met. These methods could include patient contact and procedure records, evaluations by clinical unit staff, or written case studies correlating patient assessments with appropriate prehospital interventions.

**Q.** My students do well on their classroom test. However, during hospital rotations or field internship, they can't seem to apply what they have learned. The preceptors are beginning to complain. Is there a solution to this problem?

**A.** Begin by reviewing your course objectives and the methods

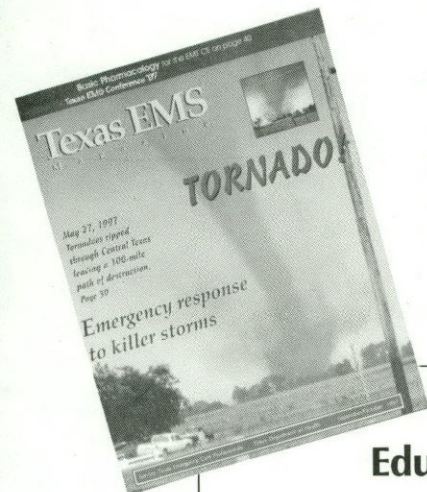
you use to assess student achievement. You probably will discover that the objectives and tests are written at a level that requires only recognition, recall or comprehension of information. However, when your students go to clinical or field internship, they are expected to apply concepts, analyze or synthesize information, and evaluate decisions and results. If you revise your course to include activities that require students to think and perform the way they would on an ambulance run, you should begin to see improvements. These activities could include scenario-based written exams requiring students to describe and justify (rather than simply recognize) correct patient care, and practical exams that involve patient management simulations (rather than isolated skills demonstrations).

**Q.** I'm a Texas-certified EMT who is going to school in Massachusetts. I'd like to keep my certification. Will CE approved by the Massachusetts Department of Health satisfy Texas requirements?

**A.** Yes, it will. Texas recognizes CE activities approved by another state's EMS credentialing agency. Be certain that you receive a completion document indicating approval by the appropriate agency. Since categories used in other states' CE systems may differ from those in Texas, it will be your responsibility to assign hours to the appropriate categories.

### Attention: Educators and writers

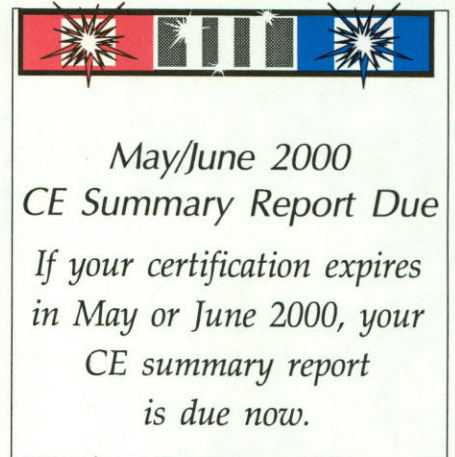
Texas EMS Magazine will pay up to \$200 for good continuing education articles. Write Kelly Harrell at [kelly.harrell@tdh.state.tx.us](mailto:kelly.harrell@tdh.state.tx.us) or call (512) 834-6700 for a list of specifications.





By  
Linda Reyes

## Frequently asked questions about EMS Standards



**Q:** *I am due to recertify at the end of the year. Where do I get a recertification application?*

**A:** We routinely mail notices to let you know your certification expiration date is approaching. The notice and application packet are mailed to the address listed in our database. This is usually the address you included on your most recent application to our office. You should expect to receive your recertification application packet about 5-6 months prior to your expiration date. If you move please notify us of your address change. We usually get about 15 percent of the notices returned by the post office stamped with "Addressee unknown" or "Forwarding address expired." You can update your address by phone, mail or email.

We also mail notices of approaching due date for two-year continuing education summary reports. If you do not receive your notice with appropriate forms, contact your local EMS regional office. The forms are also downloadable from our web site.

**Q:** *My paramedic certification has been emergency suspended due to not completing my continuing education hours for this two-year period. I am also a Texas certified Instructor. Can I continue to be certified as an Instructor?*

**A:** No, you cannot. Instructor certification §157.62 requires that instructors maintain active status for EMS personnel certification. In lieu of EMS personnel certification the candidate may be a physician licensed to practice in the state of Texas or a registered nurse (RN) licensed to practice in the state of

Texas. Failing to maintain active status of EMS personnel certification at the appropriate level or professional licensure is one of the reasons for suspension or decertification by the department. The listing of emergency-suspended personnel in the *Texas EMS Magazine* does not address Coordinator, Instructor or Examiner certification status. Refer to Criteria of Emergency Suspension, Suspension, Probation, and Decertification of Course Coordinator, Program Instructor, and/or Examiner Certification §157.64 for additional information.

**Q:** *I would like to take a paramedic course offered at a local college, but I am not certified in Texas. I do have basic EMT certification from the state I lived in previously. Do I have to start with a basic training course in Texas before taking the paramedic course?*

**A:** Strict adherence to EMS rules requires those who enroll in an EMT-I or EMT-P course to be "certified by the department" before becoming eligible for advanced certification. Historically, we have allowed those currently certified by National Registry or another state to meet the definition of "certified by the department," although technically they were not. The bureau has now officially adopted a policy to legitimize this action. EMS policy number 98-B authorizes current out-of-state certified or Nationally Registered EMTs to enroll in advanced courses, and become eligible for advanced Texas certification, without first receiving Texas EMT certification.

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>

Policies may be  
viewed on the internet  
at: [www.tdh.state.tx.us/hcqs/ems/policies.htm](http://www.tdh.state.tx.us/hcqs/ems/policies.htm)

Email:  
[emscert@tdh.state.tx.us](mailto:emscert@tdh.state.tx.us)



# Let's get physical

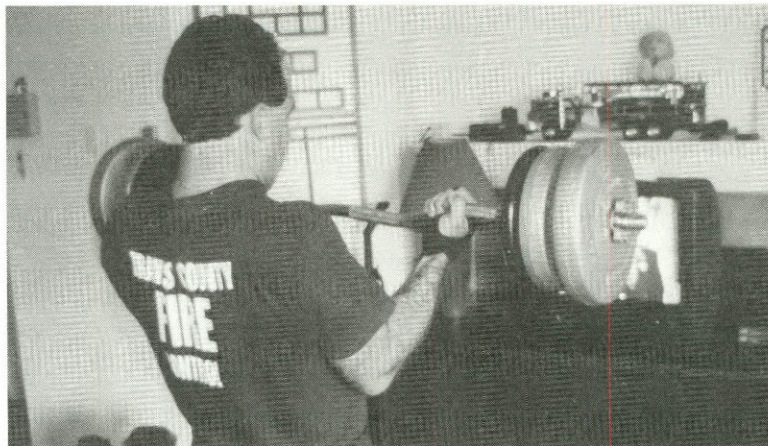
*The million-dollar question—how to make physical activity part of hectic lifestyles when there just isn't time to go to the gym or do aerobics.*

By Barry Sharp, BS,  
EMT, CHES

DOES THE IDEA OF PHYSICAL ACTIVITY SEND A SHIVER THROUGH your spine with memories of junior high PE classes or mental images of a room full of bodies "sweating to the oldies?" Are you one of those people who is "too busy" to exercise? Do you feel intimidated by those youthful guys and gals at the gym or aerobics classes who look like they should have "Body by Mattel" stamped across their stomachs? If so, then read on because you are not alone. There is good news on ways to improve your health.

According to data compiled by the Texas Department of Health's Behavior Risk Factor Surveillance System, more than 56 percent of all Texans live a sedentary lifestyle. This means that more than half of the state's population, which includes those in the emergency services profession, do not participate in any type of physical activity for more than 20 minutes, three times a week. Nationwide, the U.S. Public Health Service reports that 25 percent of adults and 14 percent of adolescents do not participate in any regular physical activity. Granted, this may be different in some services that require physical fitness classes or annual fitness exams, but by and large, emergency service workers mimic the general population.

This inactivity has resulted in numerous health problems, most noticeably in the areas of coronary heart disease, the nation's number one killer. In 1992, the American Heart Association named physical inactivity as a major risk factor, putting it alongside other risk factors including smoking, high blood pressure and high



*Lifting weights helps to burn calories and raise your metabolism, and is a great way to reduce stress and improve mental health.*



blood cholesterol. In recent studies, Stephen Blair, PED, director of research, epidemiology and clinical applications at the Cooper Institute for Aerobics Research in Dallas and senior editor of the *Surgeon General's Report on Physical Activity and Health*, reported that physical inactivity is a greater risk for cardiovascular disease than smoking. In a 1996 presentation he stated that a "fit" smoker is at lower risk for certain health problems than an "unfit" nonsmoker.

However, as bad as the effects of physical inactivity are, the benefits of regular physical activity add up fast. In addition to the already-mentioned reduction of cardiovascular disease risks, physical activity also reduces the risk for some cancers, diabetes, osteoarthritis, osteoporosis, falls, obesity and mental health problems (anxiety, depression, stress), while improving one's overall quality of life. Statistics also show that people who take part in regular physical activity live longer than those who don't.

The million-dollar question is how to make physical activity a part of the already hectic lifestyles where moments of free time between work, school, EMS/fire calls, kids, etc., are at a premium, and there just isn't time to go to the gym or do aerobics.

The Surgeon General's Report on Physical Activity and Health recommends 30 minutes of moderate physical activity on most days of the week. This can be accomplished by a variety of activities including walking with the spouse and children around the neighborhood in the evenings, working in the yard, taking the stairs, throwing a Frisbee or just about anything else that gets you moving.

While it would be nice to be able

to do all 30 minutes at one time, the report acknowledges that this is not always possible and cites recent studies that indicate that 30 minutes accumulated throughout the day can have similar benefits as 30 continuous minutes.

Many of us have heard the old adage, "no pain, no gain." While that may be true for those wanting to reach high levels of physical fitness and athleticism, for a majority of Texans, just adopting the Surgeon General's recommendations to move from the couch and/or computer to the great outdoors will provide enormous health benefits that can last a lifetime.

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Barry Sharp is a health educator with the Texas Department of Health's Bureau of Chronic Disease Prevention and Control, Community and Worksite Wellness Program. He has also been involved in EMS on a volunteer basis since 1980 and is currently a Sr. Firefighter/EMT with Travis County Fire Control/ESD #4 in Austin.



*Walking for 30 minutes at a brisk pace at least three times a week is recommended. The 30 minutes can be in ten minutes segments—ten minutes three times a day. Almost anyone can find ten minutes to spare.*





# Report: Texas Trauma Systems

*Trauma is the fourth leading cause of death in Texas and the leading cause of death for Texans ages 1-44.*

*Approximately 30 Texans are killed every day from traumatic injuries and for each victim who dies, at least six additional people are seriously injured.*

Trauma is a disease that can occur anywhere at any time to anyone. Research has shown that critical trauma victims must reach definitive care within the "golden hour" to help prevent death or disability. So in 1989, the Texas Trauma System (TTS) was created to ensure that trauma victims had access to the highest level of patient care in the shortest amount of time. The TTS divided Texas into 22 regions called trauma service areas (TSAs), each with a regional advisory council (RAC). The TTS also delineated the trauma facility designation process and provided for the development of a state trauma registry.

Now a statewide network of 22 RACs, the TTS received state appropriations in Senate Bill 102 for the first time in 1997. These monies will be disbursed through counties to EMS providers and RACs.

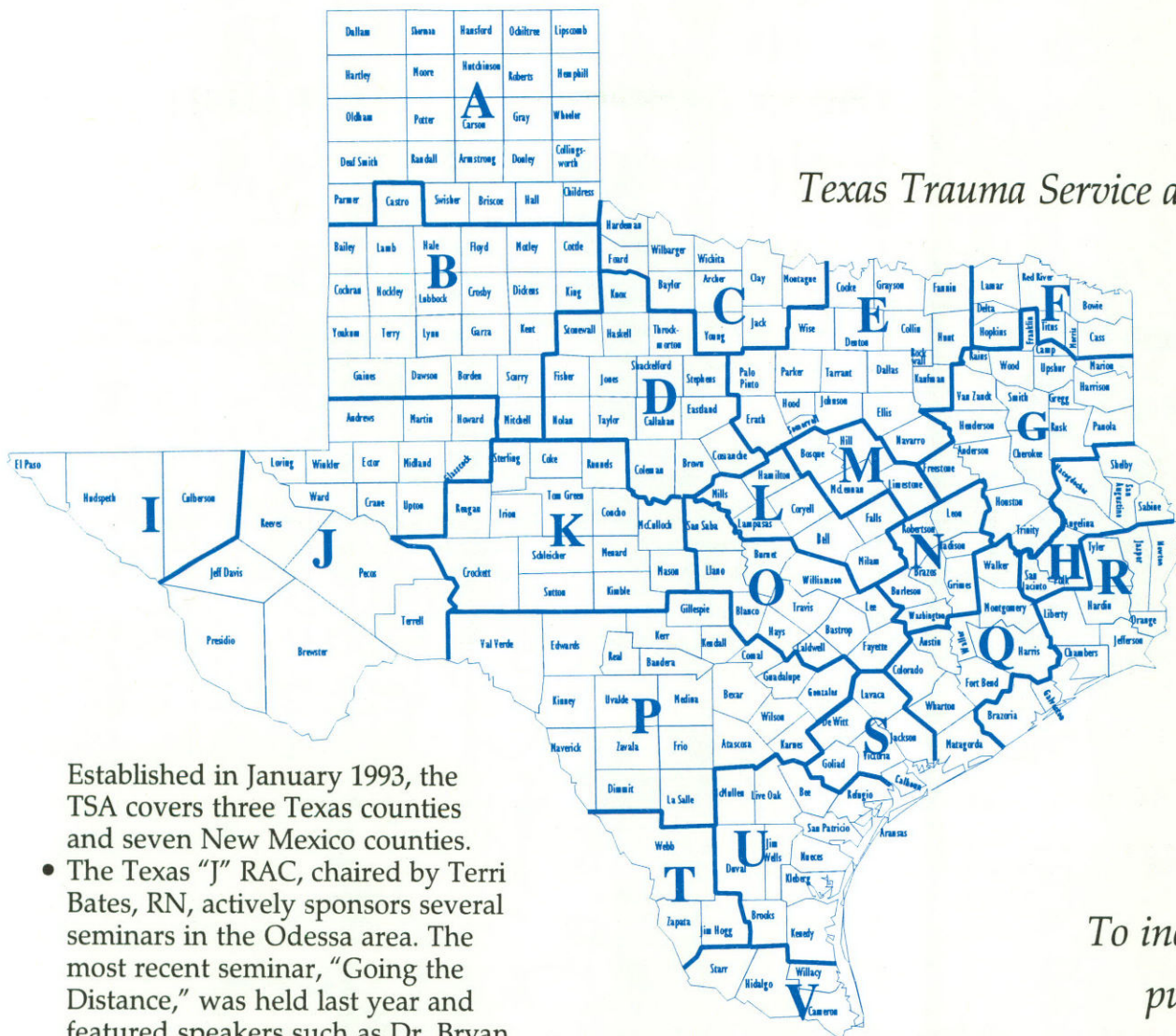
Here's a report on what some RACs are doing.

- The Heart of Texas RAC (TSA-M), chaired by William C. Daney, MD, was organized in May 1994. Serving the Waco area with EMS services ranging from first responder to MICU, in 1997, HOTRAC sponsored training for ECA, EMT bridge, paramedic, BTLS, ACLS, PALS, CPR, AED and CISD. HOTRAC also recently purchased a disaster trailer to be used in the area and is presently working on bypass protocols and revisions to the RAC bylaws.
- South Plains EMS RAC (TSA-B),

chaired by F. E. Shaheen, EMT-P, serves 23 counties in the southern half of the Texas Panhandle. SPEMS RAC was organized in June 1993 and its trauma system plan was approved in May 1995. Within the TSA, all levels of EMS services are provided, including two air ambulance services. SPEMS RAC also sponsors approximately three conferences a year; produces *SPEMS Magazine*, a quarterly 24-page publication that offers free CE; and works with the "Safe Communities" Coalition for TSA-B.

- The Piney Woods RAC (TSA-G) is chaired by Harry E. Wilkins III, MD. The Piney Woods RAC hosted Trauma '98, an annual trauma symposium, in Tyler in February. Established in April 1993, TSA-G services 17 counties in the East Texas area, and is implementing an approved regional plan.
- The Far West Texas & Southern New Mexico RAC (TSA-I), chaired by Skipper Callender, offers EMS service from BLS first responder to MICU, with air medical support, when available, from Fort Bliss. FWT/SNMRAC is unique in that it includes parts of two states. The RAC is actively involved in various fund raising events and with assistance from one of the area hospitals, has established a grant program for system enhancement projects. All EMS services and hospitals in the TSA-I area have been invited to participate in the grants program.





*Texas Trauma Service areas*

Established in January 1993, the TSA covers three Texas counties and seven New Mexico counties.

- The Texas "J" RAC, chaired by Terri Bates, RN, actively sponsors several seminars in the Odessa area. The most recent seminar, "Going the Distance," was held last year and featured speakers such as Dr. Bryan Bledsoe and Scott Bolleter. Established in October 1993, TSA-J covers 17 counties in the Permian Basin area.
- The Central Texas Trauma Council (TSA-L), chaired by Edward F. Lynch, offers all levels of EMS services. CTTC is presently educating county officials about SB 102 and planning its third annual Trauma Fair in May. Organized in January 1993, CTTC has completed area-wide trauma transport and bypass protocols and a portion of the trauma plan has been submitted to TDH for approval. CTTC also assists EMS services in its area by writing grant proposals.
- The East Texas Gulf Coast RAC (TSA-R), chaired by Dale Grantham, MD, is unique in that it covers I-10 as it enters Texas from Louisiana and three of ETGCRAC counties

along I-10 are ranked fourth, fifth and sixth nationally in number of motor vehicle crashes on I-10. Established in May 1993, this RAC has an educational plan for prehospital and nursing personnel as a portion of their developing Trauma System Plan.

- The Golden Crescent RAC (TSA-S) is chaired by David Brown, hospital CEO, and was established in June 1995. Supporting EMS levels from BLS to MICU, GCRAC is presently bringing all facilities on-line by consolidating all trauma information into a RAC-wide trauma registry. Facilities are using the same registry software and compiling and transmitting the data using their own equipment. This RAC is presently investigating other sources of funding for RAC educational programs, such as a TXDOT injury prevention grant. —Penny Workman

*To increase the public's awareness of traumatic injuries, May has been declared Trauma Awareness Month.*

For a list of all RAC chairs, click on <http://www.tdh.state.tx.us/hcqs/ems/trauma.htm>



# The Volunteer Protection Act of 1997

*Recent federal law gives some protection from litigation.*

*If legal considerations are holding back potential volunteers, then this new law passed by the U.S. Congress in 1997 may help. Although there are some exceptions—for instance, the volunteer cannot be under the influence of drugs or alcohol—this law limits the liability of volunteers acting in good faith.*

## An Act

To provide certain protections to volunteers, nonprofit organizations, and governmental entities in lawsuits based on the activities of volunteers. Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled.

## SECTION 1. SHORT TITLE.

This Act may be cited as the 'Volunteer Protection Act of 1997'.

## SEC. 2. FINDINGS AND PURPOSE.

(a) **FINDINGS**-The Congress finds and declares that—

- (1) the willingness of volunteers to offer their services is deterred by the potential for liability actions against them;
- (2) as a result, many nonprofit public and private organizations and governmental entities, including voluntary associations, social service agencies, educational institutions, and other civic programs, have been adversely affected by the withdrawal of volunteers from boards of directors and service in other capacities;
- (3) the contribution of these programs to their communities is thereby diminished, resulting in fewer and higher cost programs than would be obtainable if volunteers were participating;
- (4) because Federal funds are expended on useful and cost-effective social service programs, many of which are national in scope, depend heavily on volunteer participation, and represent some of the most successful public-private partnership, protection of volunteerism through clarification and limitation of the personal liability risks assumed by the volunteer in connection with such participation is an appropriate subject for Federal legislation;
- (5) services and goods provided by volunteers and nonprofit organizations would often otherwise be provided by private entities that operate in interstate commerce;
- (6) due to high liability costs and unwarranted litigation, volunteer and nonprofit organizations face higher costs in purchasing insurance, through interstate insurance markets to cover their activities; and

(7) clarifying and limiting the liability risk assumed by volunteers is an appropriate subject for Federal legislation because—

(A) of the national scope of the problems created by the legitimate fears of volunteers about frivolous, arbitrary, or capricious lawsuits;

(B) the citizens of the United States depend on, and the Federal Government expends funds on, and provides tax exemptions and other considerations to, numerous social programs that depend on the services of volunteers;

(C) it is in the interest of the Federal Government to encourage the continued operation of volunteer service organizations and contributions of volunteers

because the Federal Government lacks the capacity to carry out all of the services provided by such organizations and volunteers; and

(D)(i) liability reform for volunteers will promote the free flow of goods and services, lessen burdens on interstate commerce and uphold constitutionally protected due process rights; and

(ii) therefore, liability reform is an appropriate use of the powers in article 1, section 8, clause 3 of the United States Constitution, and the fourteenth amendment to the United States Constitution.

(b) **PURPOSE**- The purpose of this Act is to promote the interests of social service program beneficiaries and taxpayers and to sustain the availability of programs, nonprofit organizations, and governmental entities.

## SEC. 3. PREEMPTION AND ELECTION OF STATE NONAPPLICABILITY.

(A) **PREEMPTION**. This Act preempts the laws of any State to the extent that such laws are inconsistent with this Act, except that this Act shall not preempt any State law that provides additional protection from liability relating to volunteers or to any category of volunteers in the performance of services for a nonprofit organization or governmental entity.

(b) **ELECTION OF STATE REGARDING NONAPPLICABILITY**- This Act shall not apply to any civil action in a State court against a volunteer in which all parties are citizens of the State if such State enacts a statute in accordance with State requirements for enacting legislation-

- (1) citing the authority of this subsection,
- (2) declaring the election of such State that this Act shall not apply, as of a date certain, to such civil action in the State, and
- (3) containing no other provisions.

**SEC. 4. LIMITATION ON LIABILITY FOR VOLUNTEERS** - Except as provided in subsections (b) and (d), no volunteer of a nonprofit organization or governmental entity shall be liable for harm caused by an act or omission of the volunteer on behalf of the organization or entity if-

(1) the volunteer was acting within the scope of the volunteer's responsibilities in the nonprofit organization or governmental entity at the time of the act or omission,


(2) if appropriate or required, the volunteer was properly licensed, certified, or authorized by the appropriate authorities for the activities or practice in the State in which the harm occurred, where the activities were or practice was undertaken within the scope of the volunteer's responsibilities in the nonprofit organization or governmental entity,

(3) the harm was not caused by willful or criminal misconduct, or a conscious, flagrant indifference to the rights or safety of the individual harmed by the volunteer; and

(4) the harm was not caused by the volunteer operating a motor vehicle, vessel, aircraft, or other vehicle for which the State requires the operator or the owner of the vehicle, craft, or vessel to—

- (A) possess an operator's license, or
- (B) maintain insurance.

(b) **CONCERNING RESPONSIBILITY OF VOLUNTEERS TO ORGANIZATIONS AND**

 **EMS Fact:** At 55 mph, you can cross an entire football field in 3.7 seconds. It takes an average of 5 seconds to dial a cellular phone. —*General Motors Safe Driving Program*



**ENTITIES**-Nothing in this section shall be construed to affect any civil action brought by any volunteer of such organization or entity.

**(C) NO EFFECT ON LIABILITY OF ORGANIZATION OR ENTITY**- Nothing in this section shall be construed to affect the liability of any nonprofit organization or governmental entity with respect to harm caused to any person.

**(d) EXCEPTIONS TO VOLUNTEER LIABILITY PROTECTION**-If the laws of a State limit volunteer liability subject to one or more of the following conditions, such conditions shall not be construed as inconsistent with this section:

(1) A State law that requires a nonprofit organization or governmental entity to adhere to risk management procedures, including mandatory training of volunteers.

(2) A State law that makes the organization or entity liable for the acts or omissions of its volunteers to the same extent as an employer is liable for the acts or omissions of its employees.

(3) A State law that makes a limitation of liability inapplicable if the civil action was brought by an officer of a State or local government pursuant to State or local law.

(4) A State law that makes a limitation of liability applicable only if the nonprofit organization or governmental entity provides a financially secure source of recovery for individuals who suffer harm as a result of actions taken by a volunteer on behalf of the organization or entity. A financially secure source of recovery may be an insurance policy within specified limits, comparable coverage from a risk pooling mechanism, equivalent assets, or alternative arrangements that satisfy the State that the organization or entity will be able to pay for losses up to a specified amount. Separate standards for different types of liability exposure may be specified.

**(e) LIMITATION ON PUNITIVE DAMAGES BASED ON THE ACTIONS OF VOLUNTEERS-**

(1) **GENERAL RULE**- Punitive damages may not be awarded against a volunteer in an action brought for harm based on the action of a volunteer acting within the scope of the volunteer's responsibilities to a nonprofit organization or governmental entity unless the claimant establishes by clear and convincing evidence that the harm was proximately caused by an action of such volunteer which constitutes willful or criminal misconduct, or a conscious, flagrant indifference to the rights or safety of the individual harmed.

(2) **CONSTRUCTION**-Paragraph (1) does not create a cause of action for punitive damages and does not preempt or supersede any Federal or State law to the extent that such law would further limit the award of punitive damages.

**(f) EXCEPTIONS TO LIMITATIONS ON LIABILITY -**

(1) **IN GENERAL** - the limitations on the liability of a volunteer under this Act shall not apply to any misconduct that—

(A) constitutes a crime of violence (as that term is defined in section 2331 of title 18, United States Code) or act of international terrorism (as that term is defined in section 2331 of title 18) for which the defendant has been convicted in any court;

(B) constitutes a hate crime (as that term is used in the Hate Crime Statistics Act (28 U.S.C. 534 note));

(C) involves a sexual offense, as defined by applicable State law, for which the defendant has been convicted in any court;

(D) involves misconduct for which the defendant has been found to have violated a Federal or State civil rights law; or

(E) where the defendant was under the influence (as determined pursuant to applicable State law) of

intoxicating alcohol or any drug at the time of the misconduct.

(2) **RULE OF CONSTRUCTION** - Nothing in this subsection shall be construed to affect subsection (a)(3) or (e).

## **SEC. 5 LIABILITY FOR NONECONOMIC LOSS.**

(A) **GENERAL RULE** - In any civil action against a volunteer, based on an action of a volunteer acting within the scope of the volunteer's responsibilities to a nonprofit organization or governmental entity, the liability of a volunteer for noneconomic loss shall be determined in accordance with subsection (b).

(b) **AMOUNT OF LIABILITY-**

(1) **IN GENERAL** - Each defendant who is a volunteer shall be liable only for the amount of noneconomic loss allocated that defendant in direct proportion to the percentage of responsibility of that defendant (determined in accordance with paragraph (2)) for the harm to the claimant with respect to which that defendant is liable. The court shall render a separate judgement against each defendant in an amount determined pursuant to the preceding sentence.

(2) **PERCENTAGE OF RESPONSIBILITY** - For purposes of determining the amount of noneconomic loss allocated to a defendant who is a volunteer under this section, the trier of fact shall determine the percentage of responsibility of that defendant for the claimant's harm.

## **SEC. 6 DEFINITIONS.** For purposes of this Act:

(1) **ECONOMIC LOSS** - The term 'economic loss' means any pecuniary loss resulting from harm (including the loss of earnings or other benefits related to employment, medical expense loss, replacement services loss, loss due to death, burial costs, and loss of business or employment opportunities) to the extent recovery for such loss is allowed under applicable State law.

(2) **HARM** - The term 'harm' includes physical, non-physical, economic and noneconomic losses.

(3) **NONECONOMIC LOSSES** - The term 'noneconomic losses' means losses for physical and emotional pain, suffering, inconvenience, physical impairment, mental anguish, disfigurement, loss of enjoyment of life, loss of society and companionship, loss of consortium (other than loss of domestic service), hedonic damages, injury to reputation and all other nonpecuniary losses of any kind or nature.

(4) **NONPROFIT ORGANIZATION** - The term 'nonprofit organization' means—

(A) any organization which is described in section 501(c)(3) of the Internal Revenue Tax code of 1986 and exempt from tax under section 501(a) of such Code and which does not practice any action that constitutes a hate crime referred to in section (b)(1) of the Hate Crime Statistics Act (28 U.S.C. 534 note); or

(B) any not-for-profit organization which is organized and conducted for public benefit and operated primarily for charitable, civic, educational, welfare, or health purposes and which does not practice any action which constitutes a hate crime referred to in subsection (b)(1) of the first section of the Hate Crime Statistics Act (28 U.S.C. 534 note).

(5) **STATE** - The term 'State' means each of several states, the District of Columbia, the Commonwealth of Puerto Rico, the Virgin Islands, Guam, American Samoa, the Northern Mariana Islands, any other territory or possession of the United States, or any political subdivision of any such State, territory or possession.

(6) **VOLUNTEER** - The term 'volunteer' means an individual performing services for a nonprofit organization or a governmental entity who does not receive—

(A) compensation (other than reasonable reimbursement or allowance for expenses actually incurred); or

(B) any other thing of value in lieu of compensation, in excess of \$500 per year, and such term includes a volunteer serving as director, officer, trustee, or direct service volunteer.

 **EMS Fact:** Currently, approximately 50 million Americans subscribe to wireless phone service. Wireless services expect to have one hundred million users by the year 2000. —*National Highway Traffic Safety Administration*



# Survival Mode

*San Saba EMS has weathered good and bad times since the service began in 1986. The biggest challenge, they say, is recruiting new volunteers to cover shifts. Why not just give up? "I guess we're just too hardheaded to quit."*

By Kelly Harrell



*From left, original members of San Saba EMS include W.D. Carroll, Jan Vanderburg, Linda Sloan, Joe Ragsdale, Barbara Gilger and Naomi Ragsdale.*



*The  
number of  
volunteer  
firms has  
dropped  
35 percent  
in the last  
10 years.  
What does  
the future  
hold?*

Linda Sloan can't remember the exact moment she first had the idea to help organize San Saba's volunteer EMS. After all, her home's location in a remote part of the rural county had already compelled her to sign up for an EMT class long before she thought about organizing anything. And before the class started, tending to her critically injured son in the back of the funeral home's ambulance—while the only trained person drove to the hospital—didn't really make her think that she would ever ride as an EMT. The idea probably came to several people when that same ambulance later broke down on a hill outside town.

"The ambulance broke down on Five Mile hill with a really critical patient," Sloan says. "We were sitting back saying, 'somebody ought to do something.'"

That 'somebody' turned out to include Sloan. The incident motivated a group of women to go to the commissioner's court and offer to organize volunteers to run EMS. To their surprise—and relief—a private service competed with them for the contract. Sloan was on the tennis court when she got the word that the volunteer service had beat out the private.

"We were flabbergasted," says Sloan. "I quit tennis and haven't played since."

Jan Vandenburg, another original member of the group, chimes in: "It ruined our tennis league."

Twelve years later, the volunteer service that began with 48 volunteers now has 73 on the roster with three ALS-capable units. But that growth has not been without a struggle. Last year, Sloan had to tell the commissioner's court that the service was in danger of shutting down if more volunteers weren't recruited.

A flurry of newspaper articles about the shortage netted enough new EMTs to keep shifts covered in this rural county of 6,000 people.

"We put out the word that we were going to be gone if we didn't get people," Sloan says. "It scared 'em."

Are volunteer services in danger of becoming extinct? Thirty years ago in Texas, funeral homes dominated EMS for one simple reason: often times, they were the only people in town with a vehicle big enough for a patient to recline. Drivers were required to carry only a first aid kit and a traction splint, and to have a few hours of Red Cross training. As the Texas Department of Health pushed for better training and regulations increased, funeral

## Volunteer Profiles

Name: **Waller County Volunteer EMS (also known as Waller EMS, Hempstead EMS and Waller-Hempstead EMS)**

Years in EMS: 15

Area (square miles): 550

Level of EMS service: BLS/MICU

Number of runs per year: 2,000

Number of volunteers: 45, also has a paid staff

Biggest challenge in retention: Requiring a level of participation that insures quality patient care and coverage of the service level with the competing demands on the individuals in their personal lives in a modern society.

Name: **Edgecliff Village VFD**

Years in EMS: 19

Area (square miles): 30

Level of EMS service: ALS/MICU

Number of runs per year: 200

Number of volunteers: 24

Biggest challenge in retention: While several of our guys are career medics, the monetary rewards of being in EMS are not as high as many other medical personnel have.



homes began to drop out of the prehospital business. Out of necessity, volunteers took up the slack.

"Back in the early to mid-seventies, the majority of the EMS in Texas was provided by volunteers," says Gene Weatherall, chief of TDH's Bureau of Emergency Management, which oversees EMS. "Volunteers were a crucial link in the growth and development of our modern-day EMS system."

Currently, 276 of the state's 728 licensed providers claim volunteer status. Roughly one-fifth of EMS personnel—about 8,600—are exempt from fees, although that number does not give an accurate

count of the number of people volunteering because some paid personnel also volunteer. Since 1986, the number of volunteer firms and fire departments licensed to provide EMS has dropped by about 35 percent while the total number of firms has dropped 25 percent.

The dwindling numbers say what volunteer services already know: It's hard to compete with urban and private services, and harder still to recruit and keep volunteers in the changing economic and social structure of our society.

When Harker Heights Fire Department ran a newspaper ad last January to recruit

volunteers for its part-paid service, one applicant responded. "Ten years ago, we did not have to recruit volunteers. They came to us," says Leon Charpentier, chief of Harker Heights. "(Now) we pay for classified ads in the newspaper to recruit."

The economic downturn in the mid-1980s that brought much of Texas to its knees, and the subsequent prosperity that followed ten years later, had a profound effect on the way Texans do business—and the way we look at emergency medical services. Weatherall believes that the downturn was the real beginning of the decline

of volunteers in EMS.

"Back in the 1980s, we suddenly went to a position where two people in the household had to work, and we saw volunteers leave to go to work," Weatherall says. "I think in most households it takes two adults working to make a living. People just don't have as much time to volunteer."

As people spent more time at work, leisure hours shrank, and EMS began competing with other organizations and activities such as Little League and church. Ironically, as volunteers' time disappeared, the time commitment to EMS often grew. In rural communities, a hospital closing meant that a routine transport took hours instead of minutes. New rules tightened continuing education reporting requirements.

"We've had a big turnover lately



*A young patient is readied for transport to the hospital by Morgans Point Volunteer Fire Department. — Photo by Ron Stewart, Jr.*

## Volunteer Profiles

Name: **Marathon EMS**

Years in EMS: 20

Area (sq. miles): 2,500 primary;  
6,100 backup

Level of EMS service: BLS

Number of runs per year: 70

Number of volunteers: 6

Biggest challenge in retention: Keeping up the morale. Some stress because of responding to locals whom the volunteers all know well or are related to, and massive trauma or fatalities involving tourists.

Name: **City of Hildago Volunteer Fire/EMS**

Years in EMS: 21

Area (square miles): 8

Level of EMS service: BLS

Number of runs per year: 650

Number of volunteers: 25

Biggest challenge in retention: Lack of monetary resources and self improvement by education and experience.

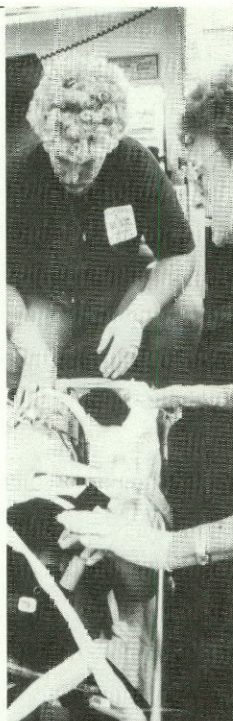


and it's directly related to this two-year CE stuff," Sloan says. "Everybody's willing to come in and do their shift to help people in the community, but it's ... coming to class to get enough CE (hours) to send in and do your recertification. People are trying to work and make a living, take care of families, and do this on the side."

Other repercussions persist, despite the state's rosy economic forecast. Rural, agricultural counties such as San Saba aren't sharing in the upturn. That makes money tight, and means people are less willing to spend money on volunteer needs such as uniforms and training. "They give their time," Sloan says. "If it's going to cost them to stay in, that's a problem."

Rural economies also produce fewer jobs, which means a smaller pool of potential volunteers. In the rural West Texas county of Coke, Blackwell Volunteer Fire Department struggles to attract new members. "In small towns there are only so many people to draw from," says Barry Meffert, assistant fire chief in Blackwell. "Most of the younger people move to larger cities for jobs and schooling. (There aren't) many job opportunities in a town of 345 (people)."

In some ways, volunteer services are victims of their own success. With high-profile television shows and prominent mention in the media, the public expects that EMS will respond—without a real



*A young patient is transported to the hospital by Friendswood Volunteer Fire Department. — Photo by Greg Mapp*

understanding of how the service is funded or staffed. In San Saba, the service lost so many volunteers that by last summer, some people were pulling as many as 15 12-hour shifts a month.

"I think the community had gotten a little complacent because we were here and we'd already done it," Sloan says. "We wouldn't be here if we hadn't had that (EMT) class (last summer)."

Ironically, the latest economic boom in Texas has done as much to hasten the demise of volunteer services as it has helped Texans.

With the boom has come the

big money to EMS.

"In the early to mid-1990s, we saw a lot of corporations come in and start buying ambulance firms all over the state," Weatherall says. "We saw them go in and take over a lot of service territory that volunteers had covered in the past."

**B**ut don't write volunteers off yet. Cypress Creek EMS, outside Houston, continues to grow and add new volunteers to its 200-member roster. Chief Charpentier in Harker Heights says that volunteers will always have a place in his service.

"When we have a large incident and no volunteers available, we end up using just anyone and/or police officers

## Volunteer Profiles

Name: **Blackwell VFD**

Years in EMS: 20

Area (square miles): 600

Level of EMS service: BLS/MICU

Number of runs per year: 100

Number of volunteers: 11 in EMS

Biggest challenge in retention: Attracting new members is our biggest problem.

Once new members join, they normally stay involved. Going through EMT training and working full time is hard for most departments and most of our members have paid for training out of their own pockets.

Name: **Hamshire VFD**

Years in EMS: 10

Area (square miles): 470

Level of EMS service: BLS/ALS

Number of runs per year: 250

Number of volunteers: 19, also utilizes 5 from a neighboring VFD/EMS

Biggest challenge in retention: Members moving away due to losing job or company relocation; losing members due to stress following a call involving the death of a child; and lost one member due to severe latex allergy.



whom we have not trained to work with us," says Charpentier. "I do not want to operate without volunteers ... They make our life easier."

In other counties, such as Travis, volunteers work closely with Travis County government, which strengthens the organizations. Whether as a reinforcement to a paid service or as a sole responder, the work volunteers do is crucial and cannot be replaced without major funding.

"Even though we've seen a decline in the last several years in the number of EMS volunteers, I think that will level off within the next five years," Weatherall says. "At that point, the private companies and governmental

organizations will have expanded and gone into just about every area of the state that is profitable for them. The other areas, especially the remote ones, will continue to be operated by volunteer services."

If nothing else, that need for service in remote areas will continue to keep volunteerism alive because Texans expect to have emergency medical services when they dial 9-1-1. Most rural communities don't have many options for EMS unless the counties or municipalities pick up the costs. And that means invoking

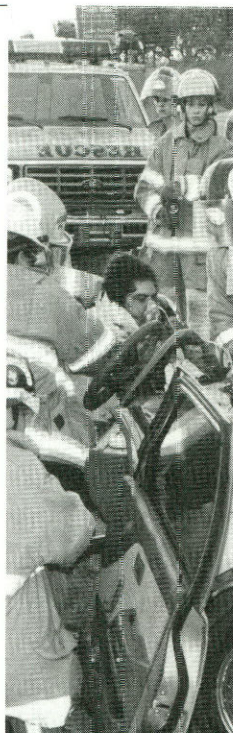
the dreaded T-word: taxes. For now, most governmental organizations who can will rely on volunteers.

Weatherall: "Look at the areas where you find the strong, dedicated volunteers, and it's the areas where if they weren't there, there wouldn't be any service at all."

San Saba volunteers tell the story of being called to the scene of a one-car wreck. On the run that day was a volunteer who also happened to be the town's funeral director. As the victim slumped over the wheel, he kept mumbling something in

Spanish that the volunteers couldn't understand. He continued mumbling those same words all the way into the hospital emergency room. As a Spanish-speaking nurse listened to him, she burst out laughing. "He must have seen you," she said, pointing to the funeral director. "He's saying, 'I'm not dead.'"

Neither is volunteer EMS in Texas.



*Oak Hill volunteer firefighters work on trying to free a man from a car crash. —Photo by W. David Luther*

## Volunteer Profiles

Name: **Borden County Volunteer EMS**

Years in EMS: 21

Area (square miles): 912

Level of EMS service: ALS/MICU

Number of runs per year: 60

Number of volunteers: 12

Biggest challenge in retention: Maintaining skill levels at a proficient standard that is required by the local standard of care and the medical director.

Name: **Timpson Volunteer Ambulance Service, Inc.**

Years in EMS: 20

Area (square miles): 20

Level of EMS service: ALS/MICU

Number of runs per year: 200

Number of volunteers: 14

Biggest challenge in retention: Meeting the state mandated continuing education requirements.



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



# What helps a volunteer service to grow and thrive?


What helps a volunteer service to grow and thrive? We asked three people, all with plenty of volunteer experience, to come up with some ideas to help other services. Thanks to Chris Charron of Cypress Creek EMS, Barbara Gilger and Linda Sloan of San Saba EMS, and Rod Dennison and Mike Foegelle of Public Health Region 7.

- Create a schedule and stick to it if you can. If everyone responds to every call because they don't know if there will be enough responders, burnout could increase. It's better to know who's jumping on the truck.
- Take every opportunity to give public praise and recognition to volunteers at banquets, in newspaper articles and at meetings. (Quick tip: send stories and pictures of what volunteers are doing to *Texas EMS Magazine* for Local and Regional News).
- Have a clearly communicated mission statement and goals, and ask volunteers how they can help the organization reach those goals.
- Do whatever it takes to involve a volunteer's family, including incentive programs or prizes.  
Chris Charron of Cypress Creek

EMS says that when the service gives away prizes such as movie tickets, there are enough for the whole family.

- Set up a good orientation program.
- Keep an open line of communication with all volunteers from the top down. A few ways to increase communication: send out a newsletter, post memos or create distribution lists on email.
- Recruit volunteers who don't want to ride the ambulance to develop a telephone calling committee to inform the membership about meetings and notices, or to cook dinner for people in an evening EMT class.
- Volunteers stay when they're allowed to grow. Good medical direction allows volunteers to upgrade their skills by practicing procedures.
- Strong leadership is the backbone of any organization. Leaders need to be accessible to volunteers and be able to communicate a vision of where the organization is going.
- Solicit input from volunteers on how to solve problems.

—Kelly Harrell

 **EMS Fact:** Approximately 1.4 million drivers were arrested in 1995 for driving under the influence of alcohol or narcotics. This is an arrest rate of 1 for every 123 licensed drivers in the U.S.

—National Highway Traffic Safety Administration



In EMS, one doesn't have to look far to see quality at work. It has always existed in some form in the service delivered by the better volunteer providers found across Texas. Many volunteers are well aware that they can and will be called upon to render service to their own family and friends on occasion. In such circumstances, they naturally want to be able to provide all that the system can deliver. Quality also exists in many private ambulance services. Superior private services have found that providing good quality care is just plain good business. Around Texas it is possible to find services operated by local governmental agencies in which high quality is the standard. Like volunteers, these local government agencies exist to serve their families, friends and neighbors. So quality service is prudent for them as well as a point of pride.

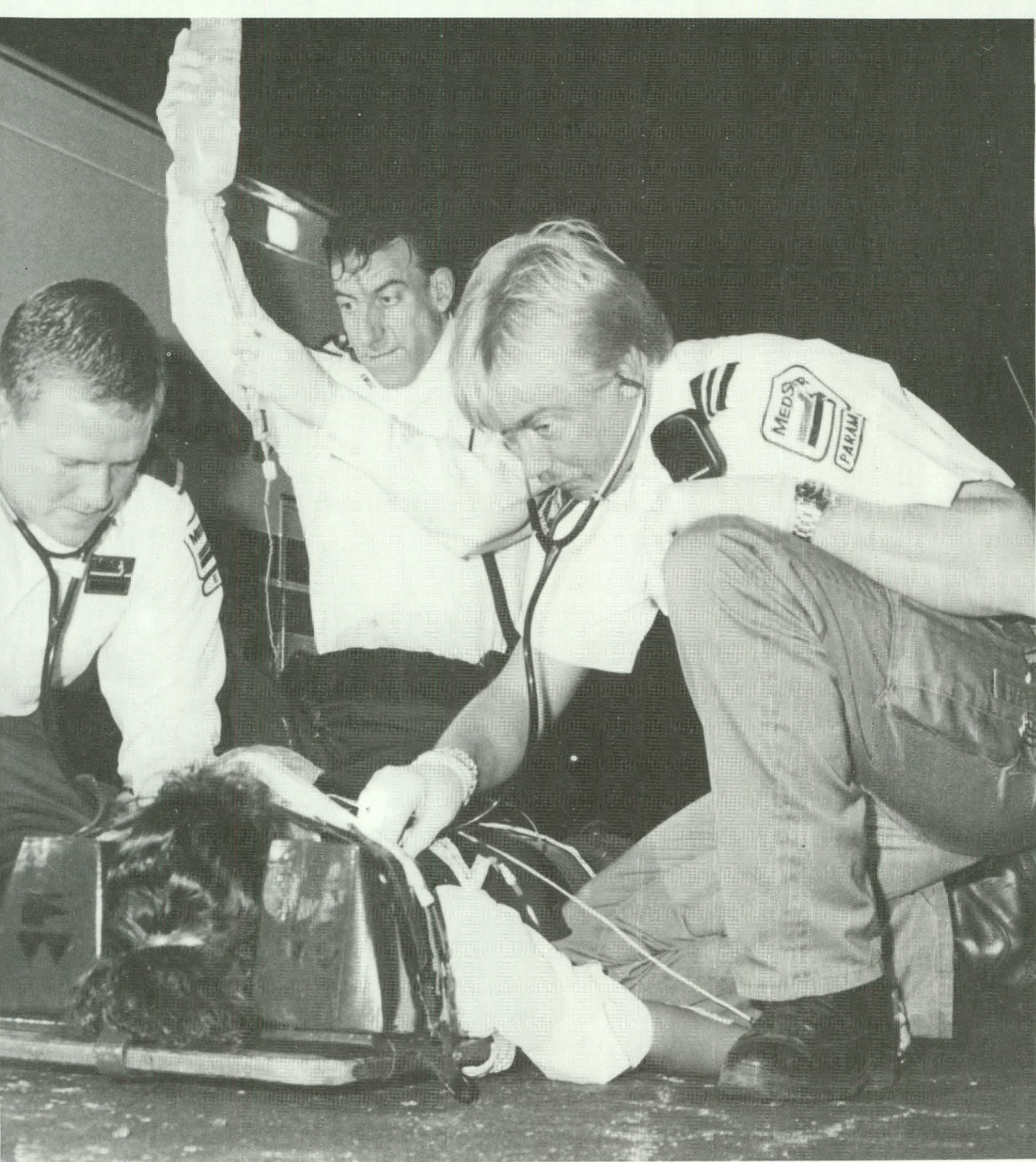
By C. Wayne Morris

ILLUSTRATION PHOTO  
BY AL BRISENIO



# EMS Quality Improvement:






## *A learner's overview*



Unfortunately, though quality can easily be found in specific EMS systems around Texas, it is too rare. Someone once said, "Anything worth doing is worth doing poorly until you learn to do it well." If that statement is true about anything, it is true about EMS. For years we have all worked on the assumption that some EMS is better than no EMS at all. The problem is, some certificants and license holders want to cling to that standard indefinitely. Justifying such a stance is becoming increasingly difficult, yet we continue to hear some reply to exhortations to strive for quality with, "We're *just* volunteers. We can't be held to the same standard as the big city guys." We see a few private for-profit ambulance services that continually offer minimum, slipshod care until their company name becomes a liability. Then they slip out of town and open up somewhere else under a new name to start all over again with the same seedy service; or if the city is big enough, they just change their name and address and start anew. Between the high-minded services who know

that quality must be achieved, and the fly-by-nights, who don't care about quality and never will, are those services and personnel who are willing to work toward quality but just need encouragement and direction.



*"Quality is never an accident; it is always the result of high intention, sincere effort, intelligent direction and skillful execution; it represents the wise choice of many alternatives."*

—WILLIAM A. FOSTER

So, what is quality improvement? It has become such a buzz phrase in the last few years that one hears it constantly, and it has come to mean different things to different people. Some see it simply as the desire to help the community. They think that because their motives are good, their outcomes must also be good. But quality is more than that. Some have even come to see it as a mechanism by which they can cover up their mistakes and avoid accountability under the EMS Act. But quality improvement has never been about covering up anything. Quality can be defined as anything that enhances EMS care from the point of view of the patient and promotes positive patient outcomes.

Much of what the average person knows about quality improvement comes from contemporary writers and from those who promote and conduct training classes for companies interested in securing the benefits of quality improvement techniques. Stephen Covey has been very successful in assessing the habits of effective people and businesses and sharing that assessment in train-

### Objectives

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

- Define mission, vision, values and goals statements
- Outline the elements of a strategic plan
- Describe confidentiality as it relates to quality assurance team meetings

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EMS Regional Administrator in Region 6.



ing classes conducted for the nation's largest companies. The good news is that help in building and conducting a quality improvement system is as close as the local library, a computer with web access and/or the regional EMS office.

Most of what we know about quality improvement today was refined by W. Edwards Deming, who began applying the principles in postwar Japan in 1950. Deming felt that quality is improved when everyone in a company understands and is committed to the goal of total customer satisfaction through continuous quality improvement. He promoted what he called the *PDCA Cycle*. To know that it works, one only has to observe that Japan rose from the ashes of atomic destruction to become an economic superpower in less than two decades. As the illustration at right demonstrates, one must *plan* to implement a policy, *do* it by putting the plan into action and *check* or assess to see if the plan worked. To complete the cycle one must *act* to stabilize any improvement that occurred or determine what went wrong if the improvement envisioned did not occur. Improvements that do occur are only the base from which one must set targets for new improvements in the next PDCA Cycle.<sup>1</sup>

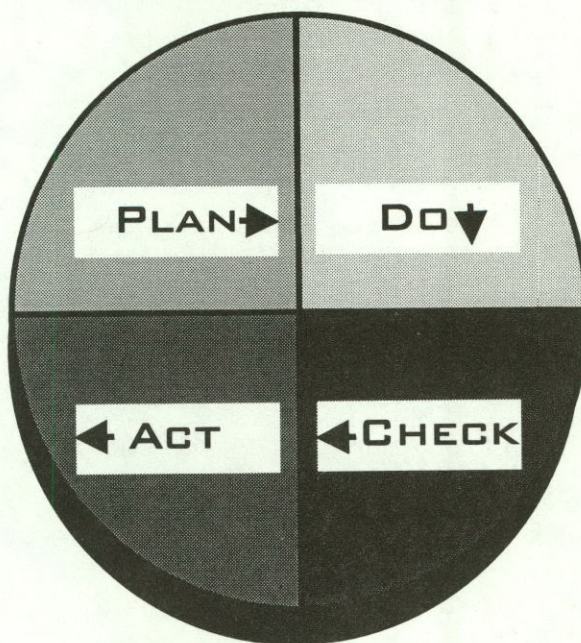
Joseph Juran, another quality proponent, developed "The Juran Trilogy." For Juran, the quality trilogy consisted of *planning*—designing operations to meet customer needs; *control*—monitoring for performance with corrective action as needed; and *improvement*—planning, testing and implementing new cycles of en-

hanced performance.<sup>2</sup>

In his writings, Philip Crosby stressed the belief that most quality flaws are managerial and/or design shortcomings rather than personnel shortcomings. To those who are followers of Crosby, it only makes sense that great effort be put into designing systems correctly the first time because fixing mistakes is costly and time-consuming as well as annoying to customers.<sup>3</sup>

To Crosby, mistakes were an expensive problem to be fixed. Sometimes, EMS mistakes cannot be fixed at any cost, for they have already cost the patient his life. Covey, Deming, Juran, Crosby: all have much to contribute to quality improvement in EMS. Texas EMS, in the closing months of the 20th century, must become increasingly oriented to quality.

So now we know a little about what quality improvement is, and hopefully, we know why we need it. How do we get it? It all begins with effective leadership. EMS medical directors and EMS system directors



<sup>1</sup> A Leadership Guide to Quality Improvements for EMS Systems; page 7.

<sup>2</sup> A Leadership Guide to Quality Improvements for EMS Systems; pages 10-11.



## The Strategic Plan

- Identifies clear goals and defines expected outcomes;
- Is fact-based and provides a way to measure progress toward goals;
- Includes cycles of planning, doing, checking, and acting;
- Concentrates on key processes in which better results are desired; and
- Focuses on the needs and desires of patients and other customers.

must work with the people under their direction to establish a *mission statement*, put a *vision statement* in writing, adopt a *values statement* and set *goals* for quality improvement. And they must expect those goals to be accomplished with guidance from the vision and values statements and in keeping with the purpose set forth in the mission statement. The mission statement defines the purpose of the organization. *Why does the organization exist?* The vision statement sets forth a desire for future attainment. *What position should the company hold in the EMS community in the future?*

—*“Never tell people how to do things. Tell them what you want them to achieve and they will surprise you with their ingenuity.”*

—GENERAL GEORGE S. PATTON

<sup>3</sup> A Leadership Guide to Quality Improvements for EMS Systems; page 11.

The values statement defines the beliefs and principles that *each* person in the company will be expected to honor. *What ethical standards are expected of all?*

Such things as fairness, honesty and dependability should be included in the values statement. If an EMS service does not have a policy on values, how can it expect employees and managers to have ethical service values?

Finally, goals are objectives that give day-to-day direction to problem solving as well as giving direction to keep EMS directors and their employees or volunteers focused on solving problems that are barriers to the vision of the service's future status. In other words, goals are established to overcome problems and setbacks, and to rally employees around both short-term and long-term problem-solving objectives. Mission, vision, values and goals statements must be put down on paper and they must be put into the hands of each EMS employee or volunteer. They are a part of the service's *strategic plan* for success (see box). Note that while the plan should focus on the needs of the primary customer, the patient, there are many other customers that must also be considered. Among these are employees, board members, governmental sponsors, financial backers or contributors, and regulatory agencies. To Deming, equity or fairness in dealing with customers made good sense. He cautioned against policies that might reap short-term benefits for the company but prove to be counterproductive in the long run for society and the company. He felt governmental-based services in particular should be judged as much, if not more, on equity as on efficiency.



Since many EMS services are governmental or quasi-governmental services, this admonition should be given great consideration.<sup>4</sup>

The strategic plan cannot be carried out by the medical director and the EMS system director. They must have the help and support of each employee. Employees must be empowered. That is, every employee must be given the authority and the ability to identify and solve problems. This works best when employees are allowed to form into teams to work together on solving identified problems. These teams are often called *PIT teams* or process improvement teams. PIT teams are nothing more than a collaborative or group effort to identify and solve problems. There are seven core values with which each PIT team must be imbued. There are: respect for people; honor and integrity; ownership and alignment; consensus; trust-based relationships; full responsibility and accountability; and recognition and growth. In an EMS service in which people are respected, management shifts from the traditional role of authority and control to one of facilitating, coaching and mentoring. In a service in which things get done, commitments are honored. That is a product of integrity. People work willingly for those things in which they have a stake. By increasing each employee's stake in the service's success, managers can do nothing but gain. But it does no good to motivate employees unless there is a common goal towards which all that motivation, *power*, can be directed. That's why alignment is essential. Alignment is just a way of saying that everyone is aware of the service's

vision, mission and course of action. Consensus-based decision-making in which everyone is allowed to work through their disagreements to achieve agreement on a common course of action ensures alignment. A group cannot work through disagreements without trust. Establishing and maintaining trust in an EMS organization is of paramount importance. It can only occur when given time to develop in a supportive work environment in which there is freedom from reprisal and the casting of blame for mistakes. Full responsibility is a personal act on the part of each individual member of a team, an action through which each team member takes on shared responsibility for the success, or failure, of the team. Basketball is a good example of team work. The great Bill Russell's comments on the value of team play can perhaps best illustrate the team concept. Speaking of the eleven-time world champion Celtics, he said, "By design and by talent we were a team of specialists, and like a team of specialists in any field, our performance depended both on individual excellence and on how well we worked together. None of us had to strain to understand that we had to complement each others' specialties."<sup>5</sup>

It is popular today to bash government bureaucracy. Few seem to realize that government has no monopoly on bureaucracy. It exists in all organizations to a greater or lesser degree, and it is altogether too easy sometimes to let "them" take the blame for failures while "I" take the credit for successes. This is not the road to long term success. That ties

<sup>4</sup> Out of Crisis; pp 198-199.

<sup>5</sup> The Fifth Discipline, the Art & Practice of the Learning Organization; p 233.



directly to the seventh and last core value that successful EMS organizations possess, the ability to foster recognition and growth. There is an old saying that, "one mistake equals a thousand attaboys." EMS services in which this is true are not services on the short list for long-term success. It must be okay for employees to take risks, try new things, to learn and to grow. It is not possible to take risks on a regular basis without making mistakes! Management must encourage risks. When the risk pays off, those responsible must be recognized. When it doesn't, those responsible must be encouraged to regroup, identify their mistakes and try again. Recrimination and blame are seldom, if ever, appropriate.

More detailed information on the core values necessary to the successful operation of PIT teams can be found in *Transforming the Way We Work* by Edward M. Marshall.<sup>6</sup> However, from the brief information given here, one should begin to see how all of the core values are important and interrelated. One cannot pick and choose only those values that are convenient or non-threatening. They must be wrapped up and used as a package. The regional EMS program specialists are very familiar with PIT teams and how they function. They can be a valuable resource in helping EMS systems to establish such teams.

In addition to the task-oriented PIT teams that form to solve identified or suspected problems and then dissolve, every EMS system should have a *quality assurance team*. This team should be headed by a quality assurance officer. Its members should include the medical director, the service

director, the personnel officer and shift supervisors. In small rural volunteer services, the team may consist of the service director, the medical director and the training officer.

Problems cannot be solved and processes cannot be improved until sufficient data is collected and analyzed to provide insight into the true nature of the problem. PIT teams and quality assurance teams spend a great deal of their time collecting and analyzing EMS data. Data can be collected from many sources: patient care reports, insurance companies, health care providers, regulatory agencies and customers, to name a few.



*"Quality begins on the inside... and then works its way out."*

—BOB MOAWAD

The quality assurance team should meet on a regular basis, at least once a month, to review pertinent data which will reveal progress or setbacks in achieving quality goals. Such meetings are actually a requirement of EMS Rule 157.11(a)(1)(E)(iv). The quality assurance team should routinely review patient care reports and other collected data to monitor the quality and effectiveness of care. Dangerous or life-threatening actions, or lack of action, should be discussed with the EMT responsible immediately, and appropriate remedial action (training) should be provided. All identified actions which are not in keeping with the standards established by the service should become the subject of continuing education presentations required of all personnel as a condition of employment or volunteer status. For too long, continuing education has been seen by too many as just what they have to do

<sup>6</sup> *Transforming the Way We Work*: pp 28-36.



to pass the recertification evaluation. Under Rule 157.11, continuing education is actually what each EMS certificant should do each month to learn from mistakes, incorporate new and better ideas into their routines and refine techniques in a never-ending cycle of quality improvement. The heart of the quality improvement cycle is the quality assurance team, and the quality assurance team is vital to any service that aspires to quality achievement.

Quality assurance team meetings are closed meetings. The discussion which takes place *within the team meeting* and the documents *produced within the team meeting* are confidential, and that confidentiality is protected by state law. Texas has one of the strongest quality assurance team confidentiality laws in the nation. The law can be reviewed by looking at Chapter 773 of the Health and Safety Code, Section 773.095.

It is worth noting here that while Section 773.095 of the Health and Safety Code offers great protection in maintaining confidentiality concerning the workings of the quality assurance team, that protection has come to be misunderstood by many EMS providers and their employees. The law offers confidentiality for a good and valid reason. A team whose goal is to identify and solve problems must be able to freely consider, discuss and speculate on anything and everything that may be contributing to the problem. Team members would not be likely to speak freely if they knew that anything they said could be made public knowledge, or worse, admitted into evidence against them in a court of law. In such an atmosphere, debate would be limited and so would the ability to solve the problem. Confidentiality is vital to a quality assurance team. It is especially important to an EMS quality assurance

team whose goal is to improve processes and prevent and correct mistakes before they cost a patient's life.

The regional EMS office and the program specialists who work there understand and support the confidential nature of the quality assurance team. While investigating complaints, they have almost total access to EMS records except those formal records *produced by* the quality assurance team. They will never ask to see those records, and they cannot accept them should they be offered. The misunderstanding of some providers surrounds the key words in the above sentence, "produced by." As stated earlier, any process improvement team must pull information from many sources. Just because a quality assurance team pulls in a record from a source *does not necessarily make that record confidential* and unavailable to other persons who have a legal right to see it. In other words, just because the quality assurance team requests a particular patient care report to review does not mean that record then becomes confidential and unavailable to representatives from the Texas Department of Health who have a statutory right to view that document. On the other hand, what is said about that document *within* the closed meeting of the quality assurance team as well as anything that is written down about that document in the minutes or other records of the closed meeting of the quality assurance team *is* confidential. One other point must be understood. Just because the medical director, the service director or any other member of the quality assurance team discusses a matter in a closed meeting of the quality assurance team *does not* mean that he or she cannot discuss, with appropriate persons, information on that matter which he or she knows or holds from other sources independent of the team.

The Health and Safety Code is readily accessible on the Texas Department of Health's web site at <http://www.tdh.state.tx.us/hcqs/ems/emshome.htm>. Upon accessing the web site, follow the links to Resource and Reference Material. If you have trouble navigating the web site, your regional program specialist will be happy to assist you.



In other words, if a medical director's opinion is solicited by a program specialist investigating a complaint on the validity of care rendered in a particular case, based on the entries into a specific patient care report that has been reviewed by the quality assurance team, the medical director may give that information to the investigator. As a physician, the medical director has an opinion that is not based on what may or may not have been discussed in a quality assurance team meeting. However, the medical director may not give the investigator information on what other members of the team may have said about the run report in the quality assurance team meeting. The investigator must talk to each of those persons individually and elicit information on opinions they hold or information they have from sources outside the quality assurance team meeting. Nothing in Section 773.095 of the Health and Safety Code prevents an investigator from building a case outside the quality review process. The investigator just cannot directly access records produced within the formal meetings of the quality assurance team. Quality assurance is not a shield for unethical providers or certificants to hide behind!

In summary, data collection and analysis is vital to the quality improvement process. Every resource a service presently has must be used to collect pertinent data and the service should seek to continually expand its data collection resources. Non-profit EMS providers that do not have computer resources should consider grant applications to the Texas Department of Health for funds to purchase hardware and software to make data collection and management improvements.

For several years EMS Rule 157.11 has required every licensed provider to submit a plan for quality assessment and improvement. To date, regional pro-

gram specialists have been satisfied with almost anything that indicates it could affect quality in a positive manner. However, there have been no attempts to determine if the quality assessment and improvement process identified in the license application is actually functioning in a continuous cycle as it should. The department will be making greater efforts to make sure that quality assurance programs actually exist and function. Any provider that does not have a functioning process should begin working on it now. Help is available from many sources. One excellent source is the National Highway Traffic Safety Administration (NHTSA). NHTSA has prepared *A Leadership Guide to Quality Improvement for EMS Systems*, which is free for the asking to EMS administrators and medical directors. It may be accessed on the web at: <http://www.dot.gov/people/injury/ems/leaderguide/>. The guide goes into great detail about all the topics covered in this article and more. It can be an invaluable resource to those who are new to the quality assurance process. In addition, as stated earlier, regional EMS program specialists are very familiar with the continuous quality improvement process and can be valuable allies in answering questions as services build quality teams. Remember, the only way to get anywhere in the competitive world in which we live is to not only think of quality as the absolute best an EMS service knows how to do today, but also that which the service must improve tomorrow if it desires to maintain quality. 🚚

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<sup>1</sup> A Leadership Guide to Quality Improvements for EMS Systems; page 7.

<sup>2</sup> A Leadership Guide to Quality Improvements for EMS Systems; pages 10 - 11.

<sup>3</sup> A Leadership Guide to Quality Improvements for EMS Systems; page 11.

<sup>4</sup> Out of Crisis; pp 198-199.

<sup>5</sup> The Fifth Discipline, the Art & Practice of the Learning Organization; p 233.

<sup>6</sup> Transforming the Way We Work; pp 28-36.





1. The PDCA cycle of quality improvement stands for:
  - a. Patients Demand Care and Assurance.
  - b. Plan, Develop, Clarify, Act.
  - c. Plan, Do, Check, Act.
  - d. Professor Demming's Criteria for Action.
2. The Juran Trilogy includes all **except**:
  - a. Planning.
  - b. Quality.
  - c. Control.
  - d. Improvement.
3. The Strategic Plan does which of the following:
  - a. Concentrates on key processes in which better results are desired.
  - b. Includes cycles of planning, doing, acting and checking.
  - c. Measures progress.
  - d. All of the above.
4. In Quality Assurance, alignment is:
  - a. Making sure everyone is aware of a mission, vision and course of action.
  - b. Impossible if anyone has any disagreements.
  - c. Checking to see that maintenance is being done properly on ambulances.
  - d. Making sure all the supplies are stocked and in order.
5. Quality Assurance teams should include:
  - a. Medical director.
  - b. EMS system director.
  - c. Shift supervisors.
  - d. All of the above.
6. Quality assurance meetings are closed.
  - a. True
  - b. False
7. Quality Assurance meetings may only discuss individual cases in general terms due to the threat of lawsuits.
  - a. True
  - b. False
8. A Strategic Plan is carried out by the medical director and EMS system director only.
  - a. True
  - b. False
9. A mission statement sets forth a desire for future attainment.
  - a. True
  - b. False
10. Any patient care reports discussed in a quality assurance meeting must now be closed to investigators.
  - a. True
  - b. False





This answer sheet must be postmarked by June 19, 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 \_\_\_\_\_  
*area code*

**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.**

For TDH CE credit, mail your completed answer sheet with a **check or money order for \$5 made out to UT Southwestern to:**

Debra Cason, RN, MS  
EMS Training Coordinator  
The University of Texas  
Southwestern Medical Center  
5323 Harry Hines Boulevard  
Dallas, Texas 75235-8890

You will receive your certificate for 1.5 hours of CE about six weeks after the closing date. A grade of 70 percent is required to receive CE credit.

**Answer Form**

Check the appropriate box for each question.

- 1. a.  b.  c.  d.  e.
- 2. a.  b.  c.  d.  e.
- 3. a.  b.  c.  d.  e.
- 4. a.  b.  c.  d.  e.
- 5. a.  b.  c.  d.  e.
- 6. a.  b.  c.  d.  e.
- 7. a.  b.  c.  d.  e.
- 8. a.  b.  c.  d.  e.
- 9. a.  b.  c.  d.  e.
- 10. a.  b.  c.  d.  e.

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



## 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.





# EMERGENCY MEDICAL SERVICES

*w e e k*



## EMS Week and Trauma Awareness Month Proclamation

**WHEREAS**, emergency medical services is a vital public service in Texas; and

**WHEREAS**, each year in Texas, trauma is a major cause of death and disability, especially for Texas children; and

**WHEREAS**, emergency medical services teams provide lifesaving care in Texas 24 hours a day, seven days a week; and

**WHEREAS**, approximately two-thirds of emergency medical services providers in Texas are volunteers; and

**WHEREAS**, emergency medical service professionals in Texas respond to more than one million calls every year to help the ill or the injured; and

**WHEREAS**, Texas' EMS systems consists of emergency physicians, emergency nurses, emergency medical technicians, paramedics, telecommunicators, first responders, educators, administrators and others; and

**WHEREAS**, access to quality emergency care dramatically improves the survival and recovery rate for those who experience sudden illness or injury; and

**WHEREAS**, Texas EMS personnel also care for the community by teaching injury prevention to citizens to lessen the occurrence and severity of injuries; and

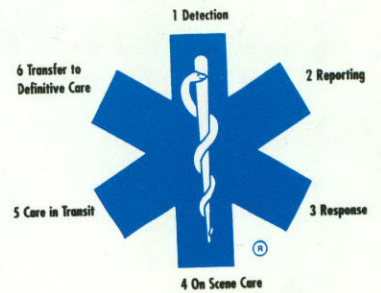
**WHEREAS**, the Texas Trauma Network, one component of Texas' EMS system, is an organized trauma care system consisting of comprehensive trauma facilities, major trauma facilities, general trauma facilities and basic trauma facilities; and

**WHEREAS**, emergency medical services professionals work within the Texas Trauma Network to provide timely access to quality care to injured or ill persons; and

**WHEREAS**, the people of Texas benefit daily from the knowledge and skills of these highly trained individuals and from the availability of the Texas Trauma Network, and the recognition of Texas EMS Week and Trauma Awareness Month will educate the people of Texas about injury prevention and how to respond to a medical emergency; and

**NOW, THEREFORE**, we commend and congratulate Texas EMS personnel for outstanding, dedicated prehospital and medical care to the people of Texas, and hereby join the Texas Department of Health in designating the month of May as Trauma Awareness Month and in designating May 17-23, 1998 as

**Texas Emergency Medical Services Week.**



### What is the Star of Life?

Just as physicians have the caduceus and pharmacists have the mortar and pestle, Emergency Medical Technicians have the Star of Life, a symbol whose use is encouraged by both the American Medical Association and the Advisory Council within the U.S. Department of Health and Human Services. On road maps and highway signs, the Star of Life indicates the location or access to qualified emergency care services.

The symbol's six-barred cross represents the six-system function of EMS (see illustration above). The staff at the center of the symbol represents medicine and healing. According to Greek mythology, the staff belonged to Asclepius, the son of Apollo (god of light, truth and prophesy). Asclepius supposedly learned the art of healing from the Centaur Cheiron. But he elicited the wrath of the god Zeus when he started resurrecting people from the dead. Fearful that Asclepius' knowledge might render mankind immortal, Zeus slew Asclepius with a thunderbolt. Eventually, Zeus restored Asclepius to life, making him a god. Asclepius is usually shown in a standing position, dressed in a long cloak and holding a staff with a curative serpent coiled around it, an image Zeus later set among the stars. Worshippers used to sleep in Asclepius' temples in belief that Asclepius cured the sick during their dreams. — *American College of Emergency Physicians*



It takes an average of 5 seconds to dial a cellular phone. In 3.7 seconds you can cross an entire football field at 55 mph.

Baylor found out that their wireless heart monitors quit transmitting data to the nurses' stations at Baylor University Medical Center because the monitors use the same digital channels as a local TV station.

**A**t 55 mph, you can cross an entire football field in 3.7 seconds. It takes an average of 5 seconds to dial a cellular phone. Currently, approximately 50 million Americans subscribe to wireless phone service. Wireless services expect to have one hundred million users by the year 2000. —*General Motors Safe Driving Program and National Highway Traffic Safety Administration*

**O**veruse injuries in children used to be rare, but medical personnel are now seeing an epidemic of overuse injuries in 8- to 16-year-olds. Many blame organized sports for these injuries. Parents and coaches generally consider children to be fit, but with sedentary hobbies such as video games and television, they are actually more sedentary than adults. The physical activities they do undertake are organized sports, where they often push their bodies to perfect certain techniques by repeating the motions. Many experts believe that repetitive motions, combined with the fact that children are still growing and bones, tendons and ligaments do not grow at the same rate, are responsible for the increase in overuse injuries in teenagers. From *Houston Chronicle*, "Overuse injuries rise in children," by Jan Brogan, March 9, 1998.

**D**octors halted a study comparing two blood pressure medications in diabetic adults after the surprising discovery that people taking one of the drugs were seven times more likely to have a heart attack than individuals taking the other drug.

The 5-year-old study compared nisoldipine, a calcium channel blocker, and enalapril, an ACE inhibitor. Both drugs were proving to be equally effective in managing the dangerously higher blood pressure that commonly accompanies adult diabetes, but individuals taking the calcium channel blocker were found to be more likely to have a heart attack, and die from that attack. Some researchers believe that the difference was due to the ACE inhibitor's better protection against heart attacks, more so than an increase in attacks caused by the calcium channel blocker. Calcium channel blockers decrease blood pressure by relaxing the blood vessel walls, but that causes the heart to work harder. Doctors recommended that people taking calcium channel blockers not quit taking the medicine, but consult with their physicians. From *San Antonio Express*, "Channel blockers seen as danger for diabetics," by Rick Weiss, March 4, 1998.

**T**wo Minnesota nurses recently studied the communication styles of men and women to see if their descriptions of heart attack symptoms accounted for the difference in cardiac care that men and women receive when they enter a hospital emergency room. Heart disease is the leading cause of death in women, just as it is in men, and a major cause of disability and impaired quality of life. Their study, which included 51 women and 47 men, found that both sexes were equally likely to complain of arm,



neck, throat, jaw and tooth pain, but that women were twice as likely to complain of back pain. The study found the most discrepancies in the tests and treatments offered to the patient. Men and women were equally likely to undergo stress tests and ECGs. However, while 57 percent of men underwent angiography, only 35 percent of women received that test. Forty percent of women received intravenous nitroglycerin, compared to 65 percent of men, and 40 percent of women received heparin, a blood thinner, compared to 76 percent of men. Only 19 percent of women were offered angioplasty, compared with 33 percent of men. That women suffer heart disease ten years later in life than men and tend to underestimate their own risks in developing heart disease are two reasons already identified by researchers as to why women are often underdiagnosed or under-treated. Researchers are presently studying other causes of treatment discrepancies. From *Houston Chronicle*, "Gender bias in care for heart attacks under scrutiny," by Ruth SoRelle, March 2, 1998.

Digital TV may bring better pictures and better clarity to TV in the future. But for Baylor University Medical Center, the second largest hospital in Dallas, problems began when a local television station began broadcasting two channels in digital: some of the hospital's 60 wireless heart monitors quit transmitting data to the nurses' stations. After two days of investigation, clinical engineers in the hospitals realized that the unlicensed, low-power transmitters in Baylor's heart monitors use portions of the radio spectrum equivalent to the two digital channels of the station. The TV station agreed to quit broadcasting the digital chan-

nels until Baylor could purchase and install new heart monitors. From *The Wall Street Journal*, "For Texas Station, HDTV Means Hospital-Disturbing Television," by Evan Ramstad, March 4, 1998.

Hoffman-La Roche, a pharmaceutical company, urged physicians to be aware that some young patients who use Acutane, a drug recommended only for the most severe cases of acne, may suffer from depression as a side effect of the drug and may go so far as to attempt suicide. The company pointed out that the same hormones that cause acne contribute to depression and the same age group most likely to suffer from depression are more likely to be on the drug so there is no definite causal relationship between the drug and emotional problems. The company is planning to add stronger warnings to the product's label. From *Austin American-Statesman*, "Acne drug possibly linked to depression," by Marlene Cimons, February 26, 1998.

Deaths from prescription medication errors rose at a higher rate over a ten-year period than any other cause, except AIDS. Researchers have found that the rise in drug-error deaths parallels the rapid shift from inpatient hospital care to outpatient care. In 1983, one of every 539 outpatient deaths was caused by medication errors, compared to one of every 131 outpatient deaths in 1993. The largest number of deaths has been attributed to error in dosage or in taking the wrong type of painkiller. Researchers are now looking for ways of increasing the quality control for medications in the outpatient setting. From *USA TODAY*, "Drug errors kill outpatients at a rising rate," by Tim Friend, February 27, 1998.

Some young patients who use Acutane, a drug recommended only for the most severe cases of acne, may suffer from depression as a side effect of the drug and may go so far as to attempt suicide.

In 1983, one of every 539 outpatient deaths was caused by medication errors, compared to one of every 131 outpatient deaths in 1993. Researchers have found that the rise in drug-error deaths parallels the rapid shift from inpatient hospital care to outpatient care.



# Two-year continuing education Emergency Suspensions

The following is a list of EMS personnel with certification expiration dates of 10/99 and 11/99, 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/certqry.htm](http://www.tdh.state.tx.us/hcqs/ems/certqry.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

100133	BRETT	AARON	AUSTIN	EMT	82692	SANDRA	BRICE	GROESBECK	EMT	18835	JERRY	DONAHOE	PASADENA	EMT-I
66769	BRENDA	ADAMS	BRNWOOD	EMT	98704	KEITH	BRIESCH	NEDERLAND	ECA	89472	DEWIGHT	DOPSLAUF	SHERIDAN	EMT
69625	CHRIS	ADAMS	CARTHAGE	EMT	938	HENRY	BROTS	KERRVILLE	EMT	41320	HARRY	DOUGHERTY	CONROE	EMT-P
85168	JASON	ADAMS	COLLEGE STA	EMT	93410	NELMA	BROOKS	BAY CITY	ECA	90754	TERI	DUHON	GROVES	EMT
31572	KENNY	ADAMS	GILMER	EMT-P	77911	ANGELA	BROWN	TROUP	ECA	16271	JESSE	DUNCAN	HOUSTON	ECA
70428	LEWIS	ADAMSON	MIDLOTHIAN	ECA	36325	ANNE	BROWN	SHEPHERD	EMT-I	28377	RONNIE	DUNKLIN	MIDLOTHIAN	EMT
87500	WILLIAM	ADKINS	PASADENA	ECA	64985	HERBERT	BROWN	COLLEYVILLE	EMT	60794	MILES	DYESS	HUFFMAN	EMT-I
77022	RICHARD	AGUILAR	DALLAS	EMT	91695	MARCUS	BROWN	FT WORTH	EMT	74355	MICHAEL	EARLEY	SANTA FE	EMT
66732	CLARENCE	AINSWORTH	HENDERSON	EMT	76029	TERRI	BROWN	DALLAS	EMT	49208	TIMOTHY	EARLEY	HUTCHINS	EMT-P
75640	MICHAEL	AINSWORTH	BAYTOWN	ECA	45807	MARIA	BROWNING	ORANGE GRV	EMT	80434	TERRY	EASTWOOD	HOUSTON	ECA
80403	O	AKINS	HOWE	ECA	62396	PATRICK	BRYANT	FT WORTH	ECA	41117	RICHARD	EDMONDS	PAIGE	EMT-P
56993	PAMELA	ALBERTS	GILBERT	EMT	88172	BETTY	BULLARD	OZONA	EMT	2080	OWEN	EDMONDSON	SAN SABA	EMT
100156	DENA	ALBRECHT	CALDWELL	EMT	75080	ROSS	BUMPUS	ROUND ROCK	EMT	58690	PEGGY	EDWARDS	HOUSTON	EMT
42807	ALEX	ALCOCKER	GALVESTON	EMT-P	81669	RICKY	BURFIELD	GUNTER	ECA	100063	RONNIE	EDWARDS	IRVING	EMT
84113	BRAD	ALLISON	QUINLAN	ECA	66309	JERRY	BURGESS	IRVING	EMT	78292	SONYA	EDWARDS	LIPAN	EMT
96208	CHRIS	ALTHOFF	KILLEEN	EMT	94444	CHRIS	BURNETT	YANTIS	ECA	14265	AMY	EISEL	GALVESTON	EMT-I
75548	ROBERT	ALVARADO	DUMAS	EMT	38196	RICKY	BURT	CLEVELAND	EMT	81839	CLEMENT	ELAM	LOMETA	ECA
47430	CANDI	AMARO	THREE RVERS	EMT-I	70729	BETTY	CAIN	HEARNE	EMT	64282	MARIANNE	ELAM	LOMETA	ECA
69340	MICHAEL	AMPÉLAS	SEGUIN	EMT	87070	DON	CALHOUN	BRYAN	EMT	54032	RODNEY	ELKEY	SN ANTONIO	EMT-I
97768	GREGORY	ANDERSON	APOPKA	EMT	70141	ARTURO	CALVO	PLACEDO	ECA	95536	CAYCE	ELLISTON	FT WORTH	EMT
18706	JAMES	ANDERSON	AMARILLO	EMT-I	83874	INEZ	CANTU	LAK JACKSON	ECA	70336	CHARLES	ERICKSON	MT BELVIEU	ECA
24981	MARK	ANDERSON	BAY CITY	ECA	87214	NANCY	CANTWELL	DALLAS	ECA	41138	ROLANDO	ESPINOZA	ALAMO	EMT
84508	SHERYL	ANDERSON	ELECTRA	ECA	68725	KIMBERLY	CARSO	NEEDVILLE	EMT	93679	DANIEL	ESSINGER	DALLAS	ECA
68135	TRACEY	ANDERSON	TEXARKANA	EMT	66663	JAMES	CARTER	SPRING	EMT	43992	BRENT	EUBANKS	PASADENA	ECA
83964	DANIEL	ANDRADE JR	SN ANTONIO	EMT	5107	LINDA	CASEY	DALLAS	EMT-P	80706	TARA	EVANS	HITCHCOCK	ECA
78854	REBEL	ANGERSTEIN	CUERO	ECA	85204	TERRI	CASEY	HUMBLE	EMT	57935	SAMUEL	FAIRCHILD	DAYTONA BCH	EMT-P
69344	DAVID	ANTHONY	ENNIS	ECA	61758	HERBERT	CASTRO	PLANO	ECA	80370	PHILLIP	FARRIS	HOWE	ECA
69342	MICHAEL	ANTHONY	ENNIS	ECA	26048	SAMANTHA	CAYTON	LAPORTE	EMT	65317	GERALD	FERGUSON	AUSTIN	ECA
17783	LUIS	AREVALO	SAN BENITO	EMT-I	91767	TERESA	CHAMBERLAIN	SEAGOVILLE	EMT	36471	WAYNE	FIGG	DESOTO	EMT-P
41990	VINCE	ARMENTOR	SARATOGA	EMT	5567	ROBERT	CHARS	WATAUGA	ECA	58710	DOREEN	FINK	COST	EMT
97409	ALAN	ARMSTRONG	QUINLAN	ECA	100192	HEATHER	CHOATE	BRYAN	EMT	50650	DOUGLAS	FINK	BRYAN	EMT
42493	RICKY	ARMSTRONG	HEWITT	EMT-P	77548	CHRIS	CLARY	BEAUMONT	ECA	99704	COLEEN	FINLEY	DENVER CITY	EMT
69754	VICKY	ARMSTRONG	PINELAND	EMT	77523	RICKEY	COATS	HARLINGEN	EMT	1177	RAYMOND	FLEMING	HOUSTOND	EMT
6301	CLIFTON	ARNOLD	PASADENA	EMT-I	43144	JAMES	COLE	TYLER	EMT-I	45869	JACK	FLESHER JR	SN ANTONIO	EMT
19121	RUDY	AROCHA	FPO	EMT-P	72454	JAMES	COLE	HITCHCOCK	ECA	68027	ALAN	FLETCHER	PONCA CITY	ECA
80497	STEVEN	ARREDONDO	HUMBLE	ECA	48707	KENNY	COLE	KENNARD	EMT-P	69064	JESUS	FLORES SR	EL PASO	EMT
100149	RANDYLE	ASHCRAFT	FT WORTH	EMT	81357	SUSAN	COLLIER	SANTA FE	EMT	89887	PAULA	FOGG	SOMERSET	ECA
93753	JESSE	AVINA	LAPORTE	ECA	56329	WILLIAM	COLLIER	BUDA	EMT-I	81518	VALERIE	FOLLOWELL	DENISON	ECA
94351	CHAD	BABCOCK	RICHARDSON	EMT	64755	THERESA	COOMES	DALLAS	ECA	28005	LAMAR	FONTENOT	HARDIN	EMT-P
59782	ROBIN	BACHEL	N RICH HILLS	EMT	12766	DAVID	CORBETT	HOUSTON	EMT	92003	BILLY	FORET	GROVES	ECA
53792	CAMERON	BAILEY	WACO	EMT-P	74119	BRADLEY	CORLEY	GROVES	ECA	80099	JAMES	FORET JR	GROVES	ECA
13945	JOHN	BAILEY	MISSOURI CTY	EMT	79436	BARBARA	CORNELIUS	HUNTSVILLE	EMT	6668	TANYA	FOUT	QUINLAN	EMT
45565	KELLY	BAKER	SN ANTONIO	EMT-P	79661	GARY	COURTNEY	TEXARKANA	ECA	68415	BRADLEY	FOWLER	PLANO	EMT
80219	KYMBERLY	BAKER	PORTER	EMT	93457	CAROL	COX	GROESBECK	EMT	59303	EDWARD	FOWLER	KILLEEN	EMT-P
76699	CRAIG	BALEY	HURST	EMT	89427	JAMES	COX	WICHITA FALLS	ECA	93770	DEBORAH	FRALEY	DAYTON	EMT
7131	VERONICA	BALLI	DONNA	EMT	74975	PAMELA	COX	WINNIE	EMT	93153	DENNIS	FRANKLIN	SHERMAN	ECA
37280	PATSY	BARBER	PALESTINE	EMT-P	6925	THOMAS	COX	FT WORTH	EMT	69147	KAREN	FRAZIER	FRANKLIN	EMT
85265	MICHELLE	BATES	BRYAN	EMT	84728	TOMMY	CRAIKER	SHEFFIELD	EMT	97189	CARL	FREEMAN	SN ANTONIO	EMT
62162	JENNIFER	BAXTER	GALVESTON	EMT-P	42059	MICHAEL	CRAWFORD	GALVESTON	EMT-P	17200	SARA	FRENCH	LEANDER	ECA
79290	JIMMIE	BAXTER	CAMPWOOD	ECA	87418	TRAVIS	CRUMP	COPELL	EMT	73513	MICHAEL	FRISBEE	WAXAHACHIE	ECA
2738	ALEC	BEARD	HOUSTON	EMT	23299	EDWARD	CRUZ	HOUSTON	EMT	74944	PHYLLIS	FRY	COLLEYVILLE	EMT
3831	GINGER	BEEBE	HKR HEIGHTS	EMT-P	19397	BOBBY	CURE	N RICH HILLS	EMT-P	93194	PAULA	GABRILES	LAMARQUE	ECA
91662	JAMES	BELL	ROSEBUD	ECA	80290	DEBBIE	CURI	CAMPWOOD	ECA	9733	JAMES	GARCIA	HURST	EMT-P
76440	MARCUS	BELLAH	HALTOM CTY	ECA	70823	JUDITH	DALTON	SEAGOVILLE	EMT	92024	JOCQUE	GARCIA	BROWNFIELD	EMT
93878	JOHN	BENTON	LONGVIEW	EMT	81514	WILLIAM	DANIEL	DENISON	ECA	89329	MARIO	GARCIA	LAREDO	EMT
85255	MARVIN	BERNSEN	ROSEBUD	ECA	96702	GENE	DANIELS	LOS FRESNOS	ECA	70903	NOE	GARCIA	CORP CHRISTI	ECA
71895	AUDREY	BERRY	LIVINGSTON	EMT	15047	JILL	DARNELL	SPRING	EMT-I	86737	STEVEN	GARNER	WICHITA FALLS	ECA
49274	KYLE	BETTERTON	PALESTINE	EMT-I	51997	BRET	DAVIS	CARROLLTON	EMT	13728	GARY	GARTIN	MULESHOE	EMT
60196	ROBERT	BICKHAM JR	DENTON	EMT-P	62422	CORNELIUS	DAVIS	AUSTIN	EMT	63217	KATINA	GARTON	MANUEL	EMT
9382	GLENNA	BILLINGSLEY	AUSTIN	EMT	18513	JERRY	DAVIS	DIANA	EMT	89240	ASHLEY	GARZA	MESQUITE	EMT
97381	JAMES	BOBINEY	TEMPLE	EMT	76431	MARSHA	DAVIS	SULPHUR SPGS	ECA	36949	LUIS	GARZA	SAN YGNACIO	ECA
93039	MICHELE	BODIN	HOUSTON	EMT	81360	TAMMY	DAVIS	MARKHAM	EMT	34581	REYMUNDO	GARZA	EDINBURG	EMT
61368	RAYMONA	BOGART	FT WORTH	EMT	92014	TERRI	DAVIS	CAMPWOOD	ECA	89541	GABRIEL	GATICA	CORP CHRISTI	ECA
70560	CRAIG	BOLLES	DUNCANVILLE	EMT	33381	JASON	DAY	AUSTIN	EMT	76838	JOHN	GEER	HOWE	ECA
75955	THERESA	BOLLMAN	DEER PARK	EMT-I	60599	KIMBERLY	DEBERRY	OLTON	EMT	83307	TIMOTHY	GLASS	HOUSTON	EMT
82735	BILLIE	BOND	VICTORIA	EMT	61330	DAVID	DECKER	COMFORT	EMT	77296	TRACY	GLENN	CORP CHRISTI	ECA
81985	SANDRA	BONNETT	WACO	EMT	3609	DANIEL	DEGARMO	SN ANTONIO	EMT-I	54738	ABEL	GOMEZ	COLLEGE STAT	ECA
25821	FRANKLIN	BOOTH	DAYTON	EMT	78670	STEVE	DEGREGORIO	C CHRISTI	ECA	59903	NORBERTO	GONZALEZ	ARLINGTON	EMT
89179	CHRISTINA	BORDEN	PORTER	EMT	92420	BRENT	DELAY	CORP CHRISTI	ECA	91862	ERNE	GOOCH	HICO	EMT
99956	HEATHER	BOTTEGO	LUTZ	EMT	74068	ERIC	DENTON	HOUSTON	EMT	95475	KIMBERLY	GRACY	ROYSE CITY	EMT
73621	JANET	BOWDEN	BELTON	EMT	63402	JEFF	DEPUTY	COPELL	EMT	97074	BETTY	GRAZIANO	HRSESHE BAY	EMT
63676	JOE	BOWENS JR	DALLAS	ECA	99636	HENRY	DEVILLIERS	CANYON LAKE	EMT	83760	AUDRA	GREEN	BREMOND	ECA
62233	MARY	BOWLES	BURLESON	EMT	65535	MATTHEW	DIAMOND	AUSTIN	EMT	74222	RANDALL	GREER	CLEVELAND	ECA
77206	GARY	BOYD	HOUSTON	EMT	93070	GHERARDO	DIAZ	CORP CHRISTI	EMT	81754	VANESSA	GREGG	ROTAN	EMT
96630	JOHN	BRADY	HOUSTON	EMT	64170	DANIELLE	DIECKMAN	GERGETOWN	EMT	78729	GRETCHEN	GREGORY	ABILENE	EMT
45945	PAMELA	BRANNON	MORGAN MILL	ECA	96454	MARK	DIERS	AUSTIN	EMT	87856	JEFFERY	GREGORY	BAYTOWN	EMT
95341	RANDY	BRANUM	GRANBURY	ECA	99028	ROBERT	DOCEKAL	CORP CHRISTI	EMT-I	3819	JO	GRIFFIN	MONTGOMERY	EMT-P
82633	TARA	BRAWLEY	BRYAN	EMT	75285	CHRIS	DODD	GRND PRAIRIE	EMT	75437	JULIA	GRIFFIN	SEYMOUR	EMT



## Emergency Suspensions

64336	STEVEN	GROSKO	LYTLE	EMT	47775	JOHN	KELLER	FREDERICKSBRG	EMT-P	86847	JAMIE	MEDFORD	HOWE	EMT
68564	JASON	GRUBBS	BAYTOWN	EMT	41	DAVID	KENNEY	UNIV CITY	EMT-I	58921	ANNE	MEEK	HOUSTON	EMT-I
36418	SHELLY	GUTIERREZ	TYLER	EMT-I	100182	CYNTHIA	KERLEY	HOUSTON	EMT	20736	ANA	MENDEZ	WYLIE	EMT
97547	JOSE	GUTIERREZ JR	WICHITA FLS	ECA	61500	SAM	KHOURY	GARLAND	EMT	22442	FIDEL	MENDOZA JR	HOUSTON	EMT
18812	JOHN	HADEN III	EL PASO	EMT	58809	KELLI	KIELMAN	MCGREGOR	EMT-I	65827	KENNETH	MENGLING	DENISON	ECA
84845	CHESTER	HALE	CORP CHRISTI	ECA	57332	FELICITY	KILE	ALBANY	EMT-P	22670	RICHARD	MEYERS	AUSTIN	EMT
56830	BEVERLY	HALET	HOUSTON	EMT	84534	MARK	KILMER	ANGLETON	ECA	28784	STEVEN	MICHELSSEN	EULESS	EMT-P
30865	JANET	HANEY	PAINT ROCK	EMT-P	92332	JANY	KIMBLE	HEMPSTEAD	ECA	44918	MELODY	MIDDAUGH	WACO	EMT
40864	TERRY	HANEY	RHOME	ECA	76112	DAVID	KINCAID	TOLAR	ECA	81851	WITOLD	MIGALA	FT WORTH	EMT
72869	FRED	HANHART	NEWBADEN	EMT	6317	KIMBERLY	KIRKLAND	PICAYUNE	EMT	74382	JESSIE	MILAZZO	PORT NECHES	EMT
92933	BURTON	HANKINS	MC GREGOR	EMT	96661	BRIAN	KLINGELE	CORP CHRISTI	ECA	73623	CARL	MILENTZ	COLUMBUS	EMT
4383	DIANA	HANKINS	MCGREGOR	EMT	75845	JAMES	KLOCK	BAY CITY	EMT	54241	DAVID	MILLER	MILLERSVIEW	EMT
57586	LUCY	HARGRV	EDDY	EMT	74987	STANLEY	KNIGHT	WACO	EMT	92273	FELISA	MILLER	EL PASO	ECA
64208	WILLIAM	HARLESS III	DALLAS	EMT-P	5530	DAN	KONZ	DECATUR	EMT-P	88300	JENNIFER	MILLER	GONZALES	EMT
2107	DARWIN	HARRIS	WACO	EMT-P	65743	DEAN	KONZ	DENTON	ECA	71428	JERRY	MILLER	PORTLAND	ECA
82569	CHARLES	HARRISON	AZLE	EMT	96028	KATHRYN	KRISTYNIK	AUSTIN	EMT	91632	RENE	MINJAREZ	FT STOCKTON	ECA
65033	TODD	HARTSOOK	LEWISVILLE	EMT	5695	BARBARA	KRUEGER	ROUND ROCK	EMT	66907	NICKY	MISTRETTA	CHALMETTE	EMT
16696	DOUGLAS	HARVEY	GALVESTON	EMT-I	41632	JAMES	KUYKENDALL	SWEENEY	ECA	9319	MARK	MITCHELL	LONGVIEW	EMT
71380	JEFF	HARVEY	SHERMAN	ECA	52442	BRIAN	LA RIVIERE	HOUSTON	EMT-I	64010	JACK	MOCCABEE	HOUSTON	ECA
99250	MILLARD	HARVEY III	DALLAS	EMT	95095	MARK	LAMB	HIGHLANDS	ECA	72262	ROCCO	MONTORELLO	EL PASO	EMT
91613	ROSELYN	HATCHER	WAXAHACHIE	EMT	69101	MICHELLE	LANGFORD	LOCKHART	EMT	88334	KATHRYN	MOODY	PASADENA	ECA
86099	SHERRY	HAUPTMANN	DENISON	ECA	83727	JEFFERY	LANGLEY	NACOGDOCHES	EMT	89731	JASON	MOON	FORNEY	EMT
64308	BETH	HAWKINS	HOUSTON	EMT	89832	TONY	LANNOM	FT STOCKTON	ECA	51404	CHAD	MOORE	MT PLEASANT	EMT
89279	BRIGGETTE	HAWKINS	SUGARLAND	EMT	87460	RUDY	LARA	FULSHEAR	EMT	16144	JAMES	MOORE	SHERMAN	EMT-P
63215	JOSEPH	HAYES	PASEDNA	ECA	63564	CURTIS	LARUE	SWEETWATER	EMT	45169	KELLEY	MOORE	GRVS	ECA
85684	MARK	HEBNER	CORP CHRISTI	ECA	39829	DARLA	LAWLER	PLANO	EMT-P	73378	WILLIAM	MOORE JR	ORANGE	EMT
97674	ELAINE	HEDDEN	LTLE ROCK AFB	EMT	84277	JAMES	LAWRENCE	PINE	EMT	68531	JOE	MORENO	HOUSTON	ECA
22396	POLLY	HEIN	BEAUMONT	EMT	68416	RANDAL	LAYTON	GARLAND	ECA	62775	DAVID	MORGAN	DUBLIN	EMT
61096	RANDOLPH	HELLUMS	KINGSVILLE	EMT-I	82296	JOE	LEAL	KINGSVILLE	EMT	100014	SARA	MORGAN	MESQUITE	EMT
25231	CLETO	HERNANDEZ	HOUSTON	EMT	13783	RONALD	LEE	KINGSVILLE	EMT	82557	WESLEY	MORGAN	KINGWOOD	EMT
79489	CRISTIE	HESTER	BIG SPRING	EMT	50199	VERNON	LEGENDRE	NEEDVILLE	ECA	21653	DAISY	MORRIS	RISING STAR	EMT
81109	JAMES	HESTER	BIG SPRING	EMT	65019	TRINA	LEISE	BEDFORD	EMT	67521	MARYANN	MOSEBY	ELGIN	ECA
97171	SARAH	HESTER	DENTON	EMT	74941	DUSTIN	LEOPOLD	NADA	ECA	79327	SPENCER	MULLENS	DALLAS	ECA
56270	ALLEN	HILL	LAKEWORTH	EMT-P	57275	ANTHONY	LEWIS	HOUSTON	EMT	73141	T	MURILLO	EL PASO	EMT
65465	FRANK	HILL	RICHARDSON	ECA	69339	JUDY	LEWIS	TEXARKANA	EMT	67976	REBECCA	MURPHY	WACO	EMT
71793	DAE	HIN	AUSTIN	ECA	83165	TRACY	LEWIS	GLEN HEIGHTS	ECA	29536	TRAVISANN	MURRELL	STERLING CTY	EMT
50692	MELISA	HOEFFNER	SN ANTONIO	EMT-P	37620	DONNA	LINEBERGER	LONGVIEW	ECA	64661	MICHAEL	MYGRANT	DENISON	ECA
54174	STACEY	HOLBERT	GRND SALINE	EMT-P	32867	LETICIA	LIRA	BROWNSVILLE	EMT-I	99748	CHRISTYANN	NEAL	AUSTIN	EMT
8257	MICHAEL	HOLDSCLAW	PARKER	EMT-P	35936	JACK	LOFTON	HUMBLE	EMT	35993	JILL	NEEDLES	PFLUGERVILLE	EMT-P
76798	RICHARD	HOMINICK	CORP CHRISTI	ECA	17962	MICHAEL	LOGGINS	WOODLANDS	EMT	77466	DAVID	NEVAREZ	EL PASO	EMT
81454	BRENDA	HOPKINS	WICHITA FALS	EMT	88086	GARY	LONGMIRE SR	SPLENDORA	EMT	65927	CHRIS	NEWSOME	PLEASANTON	ECA
88634	WESLEY	HOPKINS	AUSTIN	EMT	71412	DAVID	LONGORIA	HARLINGEN	EMT	61515	MANYA	NEWTON	HOUSTON	EMT
44212	JAMES	HOUDEK	CORINTH	EMT	67232	MARY	LOVELADY	ROWLETT	ECA	57893	THU	NGUYEN	FT WORTH	EMT-P
51080	MARTIN	HOUSLER	THORNTON	ECA	79149	ALAN	LOWERY	TYLER	ECA	76316	ROBERT	NICKLIN	KERRVILLE	EMT
74878	VIVIANNE	HUDGINS	KEENE	EMT	1902	MARY	LOWERY	AUSTIN	EMT-P	63395	KATHY	NIEVES	WAXAHACHIE	EMT
19248	EARNEST	HUDSON JR	WELLMAN	EMT	98808	KYMBERLY	LYON	LONGVIEW	EMT	85560	PATRICK	NOLEN	DALLAS	EMT
79428	CONNIE	HUGHES	LA PRYOR	ECA	92821	DEBRA	MAEKER	HOUSTON	EMT	54882	MARLENE	NOLETUBBY	GILBERT	EMT
65468	JULIE	HUGHES	FREEPOR	ECA	4775	KEVIN	MAKAL	JARRELL	EMT	79321	CHARLIS	NORTHURP	FT WORTH	EMT
2536	ERIC	HURLEY	SEVEN POINTS	EMT-P	75311	PIORGENE	MALLARE	HOUSTON	EMT	69868	JULIE	NORTON	NEDERLAND	EMT
99673	MISTY	HUTSON	AUSTIN	EMT	74313	TARA	MANNING	HOUSTON	EMT	67270	JOSHUA	NUGENT	JACKSONVILLE	EMT
89681	JEB	INMAN	SNYDER	EMT	77832	LEAANN	MARBLE	NACOGDOCHES	EMT	92439	STEVEN	NUSBAUM	AUSTIN	ECA
77410	BETSY	IVIE	BRYAN	EMT	70289	STEVEN	MARTIN	WOLFE CITY	ECA	88844	LINDA	NUTTER	AUSTIN	EMT
71361	DALE	JACKSON JR	GROVES	ECA	80916	KENNETH	MARTINDALE	BRONTE	EMT	58353	MARGARET	OBRIEN	HOUSTON	EMT-P
47594	ERIK	JAMES	FERRIS	EMT-P	44590	JOSE	MARTINEZ	BROWNSVILLE	EMT-I	43633	CAROLYN	OFFER	BOERNE	EMT-P
73147	STEPHANIE	JAMES	GRANBURY	ECA	70584	JUAN	MARTINEZ	EL PASO	EMT	66505	SAMUEL	OHAEGBULEM	BAYTOWN	EMT
44706	RODNEY	JAMESON	FRITCH	EMT-I	74698	JESUS	MARTINEZ JR	PEARSALL	EMT	69907	ERIC	OLDS	IOWA PARK	ECA
72413	MELISSA	JARRETT	GRANBURY	ECA	69247	LINDA	MASSEY	PASADENA	ECA	97057	THAD	OLIVER	WACO	EMT
13065	ROY	JENNINGS	HUBBARD	EMT	89111	DUDLEY	MATLOCK	NACOGDOCHES	ECA	86136	JOE	OLIVO	EL PASO	EMT
21557	MICHAEL	JENSEN	SN ANTONIO	EMT	62902	CHRIS	MAY	WACO	EMT	37431	FRANK	OLSOVSKY JR	EL CAMPO	EMT
41751	DARRELL	JOE	HOUSTON	EMT	45640	JOHN	MAYES	HOUSTON	EMT	96998	MORGGAN	ONEILL	FT COLLINS	EMT
71534	GAYLA	JOHNSON	PORTLAND	ECA	79887	VENESSA	MCADAMS	HUNTINGTON	ECA	81044	MARY	ORR	CONROE	EMT
66605	RICKY	JOHNSON	FRISCO	ECA	83729	COLIN	MCBRIDE	DALLAS	EMT	77018	VANESSA	ORR	WYLIC	EMT
72298	ROBERT	JOHNSON	SAN SABA	ECA	24159	FRANCES	MCBRIDE	EDDY	EMT	67286	BRIAN	OSBORN	AUSTIN	EMT
67480	TIMOTHY	JOHNSON	SHERMAN	ECA	27529	DEANDRA	MCCABE	SEABROOK	EMT-I	30342	JOEL	OTWELL	IRVING	EMT-P
69395	WILLIAM	JOHNSON	CENTER	EMT	64113	ROBERTA	MCCLAIN	ROUND ROCK	EMT	66754	CANAAN	OWENS	FT WORTH	EMT
50887	RICHARD	JOLLY	GARLAND	EMT-P	92790	NATHAN	MCCLURE	LUBBOCK	EMT	92540	LANNY	PALMER	VICTORIA	EMT
98662	CRAIG	JONES	JUSTIN	ECA	76669	CHARLES	MCDANIEL	AUSTIN	EMT	100043	ASHER	PARKER	JAYTON	EMT
20298	DOLORES	JONES	MOODY	EMT	11130	TERRY	MCDANIEL	PASADENA	ECA	21977	KRISTIN	PARKER	WOODLANDS	EMT-P
77802	JAMES	JONES	AMARILLO	EMT	70572	JASON	MCDANIELS	WOODWAY	EMT	31474	RAY	PARKER	HOUSTON	ECA
71521	JULIA	JONES	JUSTIN	ECA	10527	JESSIE	MCFADIN	UTOPIA	EMT-I	79563	RICHARD	PARKER	MABANK	ECA
68193	MARK	JORDAN	LUMBERTON	ECA	64261	JOHN	MCINTURF	SEADRIFT	ECA	63707	VICKY	PATE	EL PASO	EMT
2958	ENRIQUE	JORGE	HONOLULU	EMT-I	63688	GREGORY	MCINTYRE	HOUSTON	ECA	58389	KUNTAL	PATEL	HOUSTON	EMT-I
64211	JOEL	JOSS	CADDO MILLS	ECA	99253	CHRIS	MCKEAG	COLLEGE STA	ECA	24913	KERRY	PAVELKA	HOUSTON	EMT
316	DAVID	JOYAL	BURLESON	EMT-P	86041	CHAD	MCLEAN	DEER PARK	ECA	83818	BERNICE	PAYNE	OZONA	EMT
96684	JEREMY	KADLETZ	LAPORTE	EMT	74425	ROCKY	MCMILLAN	TYLER	ECA	71632	HEATH	PEACOCK	WELLBORN	ECA
2042	MARC	KAUFMAN	ROWLETT	EMT-P	76196	KELDA	MCMULLEN	BELTON	EMT	97618	DAVID	PELLETIER	DALLAS	EMT
86873	WILLIAM	KEEBLE	LILLIAN	EMT	80767	STEPHEN	MCNABB	CORP CHRISTI	ECA	61186	CHARLES	PENDLETON	GRANBURY	ECA
88813	NELDA	KEITH	FT WORTH	EMT	75683	JAMES	MEADORS	MCGREGOR	EMT	29611	CHARLOTE	PENNINGTON	BRAZORIA	EMT-I



## Emergency Suspensions

88155	DAVID	PENNINGTON	SANGER	EMT	16705	KENT	SIMON	HOUSTON	EMT-I	58919	WATTS	VAUGHAN JR	BAY CITY	EMT
23289	ACIE	PENTON	HOUSTON	EMT-P	27269	DONNY	SIMS	DUNCANVILLE	EMT-P	96892	DIMAS	VERA	LA PRYOR	ECA
73077	VICKY	PEREZ	RIVIERA	EMT	75926	RAYMOND	SKALA	ROSEBUD	ECA	14409	MARCO	VILLALOBOS	EL PASO	EMT-P
80508	PAUL	PERNOUD	HOUSTON	ECA	77938	JASON	SKILES	FT WORTH	EMT	45756	PETER	VILLARREAL	GALVESTON	EMT-I
93299	EARL	PETREE	ROSEBUD	ECA	59640	STEVE	SKILES	CORALVILLE	EMT-P	95024	JESUS	VILLARREAL II	ROSEBUD	ECA
32727	RON	PETRI	BEDFORD	EMT-P	68069	SAMMY	SLATTEN	LIPAN	ECA	93539	ROYAL	WAGUESPACK	FREEPORT	ECA
99886	KIET	PHAM	ANGLETON	EMT	88738	BILL	SLEDGE	HOUSTON	EMT	2736	SANDRA	WALLACE	GRAFORD	EMT
94524	BRIAN	PIEKARSKI	LIVE OAK	EMT	71405	JAMES	SLOVACEK	ROSEBUD	ECA	63574	PAULA	WALLS	LA PORTE	ECA
75938	RACHAEL	PIEPRZYCA	GARWOOD	ECA	50249	DARRELL	SMITH	EL CAMPO	ECA	48219	ELYWNN	WATKINS	FOUKE	EMT-P
74303	J	PITTS	ARLINGTON	EMT	36121	RONALD	SMITH	HOUSTON	ECA	75402	PAT	WEBB	DESOTO	ECA
73783	APRIL	PLEMONS	DUNCANVILLE	EMT	87349	STEVEN	SMITH	PEARLAND	EMT	50088	REX	WEINHEIMER	STONEWALL	EMT
64989	JAMES	PLOTOWSKI	GRANBURY	ECA	66157	CAREY	SMITH JR	BAYTOWN	ECA	73923	ANGELA	WELLS	FT WORTH	EMT
1788	DEBRA	PORTER	DEER PARK	ECA	75284	JEREMY	SMITHERMAN	HENDERSON	EMT	65769	ERIN	WEST	INGLESIDE	EMT
57248	REBECCA	POWERS	SN ANTONIO	EMT-P	50521	RODNEY	SNOWDEN	FRISCO	ECA	92819	JOE	WHEAT	LAMESA	EMT
99614	JAMIE	PRATER	LUBBOCK	EMT	98667	TAMMIE	SODEN	RED OAK	EMT	65684	SUSAN	WHITE	DYESS	EMT
41173	MARGARET	RADIGAN	HOUSTON	EMT-P	36423	MARIE	SOFALY	BRACKETTVILLE	EMT	91615	WENDY	WHITTAKER	BEDFORD	EMT
77224	ANGIE	RAMIREZ	GREGORY	ECA	85039	LARRY	SOTO	SAN SABA	EMT	32501	JERRY	WIGGINS	MAYPEARL	EMT
88306	JENNIFER	RAMIREZ	SNOOK	EMT	7695	STEVEN	SPAINHOWER	HOUSTON	EMT-P	4836	DIANA	WIGGS	CLARENDON	EMT-P
58202	JASON	RAMM	HUTTO	EMT	71775	ISRAEL	SPARKS	DEL VALLE	ECA	36331	CALE	WILCOX	ROWLETT	EMT-P
1865	KENNETH	RAMMRATH	HOUSTON	EMT-P	92759	KARRIE	SPRINKLE	MEYERSVILLE	EMT	3373	JAY	WILLEY	EL PASO	EMT
75222	YOLANDA	RAMOS	POTEET	ECA	14009	JOHN	ST	MCKINNEY	EMT	61496	ANDREW	WILLIAMS	PLANO	EMT
70001	SHERI	RAMSEY	STEPHENVILLE	EMT	85468	DAWN	STAFFON	KILLEEN	EMT	77948	BRENDA	WILLIAMS	BAY CITY	ECA
70022	WESLEY	RANEY	OVILLA	ECA	50496	LONNIE	STANLEY	LONGVIEW	ECA	100008	JASON	WILLIAMS	BRYAN	EMT
69057	SALVADOR	RANGEL	FT STOCKTON	ECA	62196	CRAIG	STEELE	BRYAN	EMT	60097	BRANDAN	WILSON	AMARILLO	EMT
93426	REBECCA	RATLIFF	SHERMAN	ECA	27549	JUDITH	STEHLE	DAMON	EMT-I	94348	CHRIS	WILSON	RICHARDSON	EMT
97112	JARRETT	RAY	AUSTIN	EMT	77205	DONALD	STEPHENS	KELLER	ECA	64993	JANET	WILSON	DALHART	EMT
16165	MICHAEL	REAVES	PENDLETON	EMT	86174	SUSAN	STERN	FT WORTH	EMT	16847	TAYLOR	WILSON	SAN SABA	EMT
5736	LARRY	REDINGER	PEARLAND	ECA	81395	DONALD	STEWART	HALTOM CITY	EMT	63073	VICTORIA	WILSON	KINGWOOD	EMT
72344	EARL	RENNER	GRND PRAIRIE	ECA	97367	ERNEST	STEWART JR	GREAT FALLS	ECA	92006	ANGELA	WINKLE	ALEDO	EMT
67958	DAVID	RHODES	ARDMORE	EMT	16083	MICHAEL	STOCKBERGER	HOUSTON	EMT	65279	JOSEPH	WITCHER	BAYTOWN	EMT
62505	ALAN	RICE	DYESS AFB	EMT	76965	BILL	STOGSDILL	HOWE	ECA	74132	CHRIS	WOLFE	GROVES	ECA
65335	GREGORY	RICE	FRIENDSWOOD	EMT	51918	KEVIN	STOUT	HALTOM CITY	EMT-P	60867	LARRY	WOLFE	BRECKENRIDGE	EMT-I
35166	CHANDRA	RICHARDSON	WEBSTER	EMT-I	99524	AMI	STUMP	OAKHURST	ECA	74263	NORMAN	WOLFORD	CORP CHRISTI	EMT
85342	SHIRLEY	RICHARDSON	DELL CITY	EMT	67804	STEVEN	STURGIS	HUNTSVILLE	EMT	45206	ALAN	WOOD	PASADENA	ECA
10058	JOHN	RIDDLE	CYPRESS	EMT	15002	DONALD	SUDDUTH	TYLER	EMT-I	31129	KYLE	WOOD	FRITCH	EMT-I
27396	J	RILEY	LAPORTE	ECA	100139	JOHN	SULLIVAN	MABANK	ECA	28669	STEVEN	WOOD	ENNIS	EMT-P
5630	SHARON	RILEY	HOUSTON	EMT-I	64742	JOHN	SULLIVAN	HOUSTON	ECA	73008	BILLY	WORTHINGTON	CORP CHRISTIECA	
86702	CHRIS	RIOS	HOUSTON	EMT	83589	KELLY	SUMMERS	PEARLAND	ECA	82145	JEFFERY	WRIGHT	GREENVILLE	ECA
26664	JENNIFER	RIOS	SN ANTONIO	EMT-I	93683	JOHN	SUPULVER	POTEET	ECA	6108	NORMA	WRIGHT	HUFFMAN	EMT
94488	CHRIS	ROBERTS	WOODLANDS	EMT	93681	WENDY	SUPULVER	SOMERSET	ECA	60542	PRISCILLA	WRIGHT	COLDSRING	EMT
77530	KIMBERLY	ROBERTS	LITTLE ROCK	EMT	75347	SCOTT	SUTHERLAND	BANDERA	ECA	81447	MIKE	YARBROUGH	ODEM	ECA
82428	MARK	ROBERTS	WACO	EMT	68813	STEFANIE	SWEET	AUSTIN	EMT	96299	VICTORIA	YARGES	IRVING	EMT
95484	PAUL	ROBERTS	YANTIS	ECA	96476	TERESA	SWEZEY	CAMPBELL	EMT	72412	LANELL	YATES	CIBOLO	EMT
4156	CHARLEN	ROBERTSON	FT WORTH	EMT-P	78009	SYLVA	TALAVERA	FT STOCKTON	EMT	64294	TERESA	YEAGER	QUINLAN	ECA
76558	JOSEPH	ROBINSON	EL PASO	EMT	93214	WELDON	TALLANT	BAYTOWN	EMT	2301	ALWYN	YEAKLE	BAYTOWN	EMT-I
40766	CHRIS	RODRIGUEZ	HOUSTON	ECA	63239	JULIE	TAMISIEA	HOUSTON	EMT	99277	SHAHRIARYEKRANGI		COLLEGE STA	EMT
99375	DAVID	RUYLE JR	WACO	EMT	92516	DEBRA	TARVER	ARANSAS PASS	EMT	25074	JANICE	YORK	HOUSTON	EMT-I
91759	MARIO	SALAZAR	MESQUITE	EMT	15737	AJ	TATUM JR	OVERTON	EMT	83269	MELODY	YORK	IOWA PARK	ECA
13146	NICHOLAS	SALEM	HOUSTON	EMT	11486	DIANA	TAYLOR	DALLAS	EMT-P	55294	THOMAS	YORK	LOS ALAMOS	EMT-P
95957	JOY	SALMON	SEGUIN	EMT	88772	RYAN	TAYLOR	AUSTIN	ECA	24341	DALE	YOUNG	WEATHERFORD	EMT
33832	CARMEN	SAMANIEGO	PEARSALL	EMT	83506	JAMES	TERRY	LAKE JACKSON	ECA	32353	LLOYD	YOUNG	SPRING	EMT-P
52307	VERONICA	SANCHEZ	LOS INDIOS	EMT-I	93340	ALLEN	THIBODEAUX	GROVES	ECA	99103	ROBERT	ZAZULA	FLOWER MND	EMT
13723	JEANNETTE	SANDERS	ORNGE GRV	EMT	76905	NORMA	THIBODEAUX	BEAUMONT	EMT	31447	TERRI	ZEIGER	ALVIN	EMT
99015	STEPHANIE	SANGALANG	DALLAS	EMT	49196	JERRY	THOMAS	TOMBALL	EMT-P	78050	JOSEPH	ZEPEDA	HITCHCOCK	ECA
58175	BRUCE	SANGSTER	SHERMAN	EMT-P	15306	KENNETH	THOMAS	PORTLAND	EMT-I	64925	BRETT	ZIMMERMAN	GALVESTON	EMT
53999	JOHN	SAPPINGTON	CANYON	EMT-I	98134	NOLA	THOMPSON	ARLINGTON	EMT					
72106	GARRICK	SCHIEFFER	ROSENBERG	EMT	82255	JIM	THOMPSON JR	LEAGUE CTY	ECA					
64457	JOSEPH	SCHMALFELDT	MIDLTHIAN	ECA	74309	KELLEY	THRILKILL	SHERIDAN	EMT					
96406	MYRON	SCHMIDT	RICHWOOD	ECA	89500	CRAIG	TIDWELL	CLEBURNE	EMT					
78591	DARRELL	SCHNEIDER	ROSEBUD	ECA	74731	DEBRALEE	TIELKE	HITCHCOCK	EMT					
70147	ALLISON	SCHWIENING	SN ANGELO	EMT	21967	GARY	TILTON	KATY	EMT					
83192	CLAUD	SCIFRES	HAMLIN	EMT-P	90851	ROBERT	TIMMONS	DEER PARK	ECA					
92043	DAVID	SCIVALLY	LAPORTE	EMT	74780	PATRICK	TINSLEY	CANYON	EMT					
90989	WILLIAM	SCOGIN	PORTLAND	ECA	80491	TOBY	TIPPS	MT ENTERPRISE	EMT					
96137	MICHAEL	SEAY	PLANO	ECA	1795	RONALD	TLUCEK	SEAGOVILLE	EMT-I					
94815	LOUIS	SERRANO	ROUND ROCK	ECA	84662	JOSEPH	TOLLESON	CAMPWOOD	ECA					
18287	ELIZABETH	SEYMOUR	FT WORTH	EMT-P	32109	RODNEY	TOLLEY	HOUSTON	EMT					
62000	NEHA	SHAH	AUSTIN	EMT	78660	EMILY	TOMLINSON	BEAUMONT	EMT					
6964	KIMBERLY	SHARP	DALLAS	EMT-P	53103	VANESSA	TORRES	BRUSH PRAIRIE	EMT-P					
58599	LARRY	SHEFFIELD	GRANDBURY	EMT	67075	ELDEN	TRAUB	GARLAND	ECA					
94821	JOHN	SHELTON	AUSTIN	EMT	89285	RICHARD	TRUBEE	ROSEBUD	ECA					
52188	ROBERT	SHELTON	FLORENCE	EMT	86287	CHEYENNE	TUBB	DENTON	EMT					
91807	THOMAS	SHINAPER	POTTSBORO	ECA	70960	JAMES	TUMLIN	ROSEBUD	ECA					
55643	SHANE	SHOBAR	CORP CHRISTI	EMT-P	83034	GREGORY	TURK	SPRING	ECA					
21490	HALLIE	SHOEMAKER	TOMBALL	ECA	83264	JANICE	TURNER	ODESSA	EMT					
42465	DAVID	SHRECKENGOS	VICTORIA	EMT-I	32246	RICKEY	TURNER	FT WORTH	EMT					
2302	CHARLES	SHULL	BELTON	EMT	44353	PHILIP	URBANOVSKY	EL CAMPO	ECA					
63902	FRED	SHUMARD	CONROE	EMT	81712	JEFFREY	VANEK	PASADENA	EMT					

### New complaint hotline

(800) 452-6086

Anyone with a complaint against a provider or certificant can call (800) 452-6086 to report it. The hotline is staffed Monday—Friday, 8 a.m. to 5 pm; during other hours, leave a message and your call will be returned.

This hotline is for **complaints** or **CISM** calls only.



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.

\* **Big Country Medical Transport Service**, Abilene, Texas Revocation of EMS Provider license. EMS Rules 157.19(c)(1)(C) and (K), (P), and (U), providing an unauthorized level of service.

**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.

**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.

\* **Collins, Anita Robin**, Big Lake, Texas. Twenty-four months probation of EMT-Intermediate certification through March 4, 2000. EMS Rules 157.44, 157.51(b)(16) and (c), and 157.53, misdemeanor conviction while certified.

**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.

**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.

**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 certification 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.

**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.

\* **Hanson, Yolanda Saldana**, San Antonio, Texas. Decertification of EMT-Paramedic certification. EMS Rule 157.51(b)(11) and (16), conviction of a felony while certified.

\* **Henry, Douglas A.**, Kirbyville, Texas. Four years probation of EMT-Paramedic certification through February 5, 2002. EMS Rules 157.44, 157.51(b)(16) and (c), and 157.53, misdemeanor conviction 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.

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

\* **Munoz, Mario**, El Paso, Texas. Decertification of EMT-Paramedic certification. EMS Rule 157.51(b)(1), failure to follow the EMS standards of care in the management of a patient.

**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.

**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.

\* **Petty, Travis Wade**, Killeen, Texas. Twenty-four months probation of EMT-Paramedic certification through February 9, 2000. EMS Rules 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.

**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.

**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.

\* 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

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.

July 8-9, 1998. **1998 International ALS and BLS Competitions.** Call Competition Registrar at 800/ 766-6335.

July 9-12, 1998. **ClinCon '98 - 20th Annual Clinical Conference on Out of Hospital Emergency Care.** Tampa Convention Center, Tampa, Florida. Call ClinCon '98 Registrar at 800/ 766-6335.

August 28-30, 1998. **1998 Emergency Response Conference.** Adam's Mark Hotel, Indianapolis, Indiana. Call Indiana EMS at 800/ 666-7784.

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

August 23-26, 1998. **EMD Provider Course.**

## Fax items for this section to 512/834-6736

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

Ernie Rodriguez, Emergency Medical Services Leadership Academy, at [www.emsla.org](http://www.emsla.org).

August 23-28, 1998. **Operational Leadership Course.** Ernie Rodriguez, Emergency Medical Services Leadership Academy, at [www.emsla.org](http://www.emsla.org).

August 23-28, 1998. **Course Coordinator Course.** Ernie Rodriguez, Emergency Medical Services Leadership Academy, at [www.emsla.org](http://www.emsla.org).

August 27-28, 1998. **EMD Instructor Course.** Ernie Rodriguez, Emergency Medical Services Leadership Academy, at [www.emsla.org](http://www.emsla.org).

September 19-20, 1998. **Basic Vertical Rescue.** Call Polli Williams, McLennan Community College-Waco, 254/ 299-8591.

October 4-9, 1998. **Executive Leadership Course.** Ernie Rodriguez, Emergency Medical Services Leadership Academy, at [www.emsla.org](http://www.emsla.org).

October 4-9, 1998. **EMD Management Course.** Ernie Rodriguez, Emergency Medical Services Leadership Academy, at [www.emsla.org](http://www.emsla.org).

October 17-18, 1998. **Basic Vertical Rescue.** Call Polli Williams, McLennan Community College-Waco, 254/ 299-8591.

November 12-14, 1998. **Advanced Vertical Rescue.** Call Polli Williams, McLennan Community College-Waco, 254/ 299-8591.

medic. 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.\*

**EMS Representative:** State of Nevada Department of Human Resources-Health Division is accepting applications for EMS Representative II for the Carson City, NV office. For more information contact Department of Personnel at 702/ 687-3727. +

**EMTs, EMT-Is, paramedics:** Huntsville-Walker Co. EMS, a MICU 9-1-1 based service, excellent pay & benefits package. Score of 80 or above on last TDH exam required. Full time positions available. Contact Paul at 409/ 295-4848. +

**Writers:** Brady Publishing is looking for potential authors in the areas of EMS continuing education. Contact Judy Streger, Senior Editor, Brady Publishing, One Lake St., Upper saddle River, NJ 07458, 201/ 236-7759. +

**Paramedic:** Rural 9-1-1 service. Rotating shifts, benefits. Contact Clu Burnham, Stamford EMS, 915/773-2333. +

## 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.

## 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 para-



# MEETINGS AND NOTICES

**Paramedic:** City of Mathis EMS is accepting applications for paramedic. Send resume to Richard Garcia, City of Mathis EMS, 214 N. Front St., Mathis, TX, 78368, call 512/547-3995, or fax 512/547-7071. +

**Paramedics:** Dallas area 9-1-1, dual paramedic/MICU system. Minimum 2 years 9-1-1 service, ACLS, BTLs/PHILS, PALS/PPPC, prefer National Registry and instructor certifications. \$23K and benefits, must be willing to relocate. Call 972/772-4148 for application. +

**EMTs, EMT-Is, paramedics, dispatchers, non-med drivers:** Full-time and part-time positions. Competitive pay with benefits. Call Life Line Universal Transport, Inc., 281/970-2273 or fax resume to 281/970-1726. +

**Paramedics, EMTs:** Paramedic Plus, 9-1-1 provider in Lampasas, has openings available. Call Human Resources at 800/660-1367. +

**Health supervisors:** 2 summer resident camps seeking health supervisors. Contact Kim Hutchison, Circle T Girl Scout Council, Inc., 4901 Briarhaven Rd, Fort Worth, TX, 76109, 800/582-7272, ext 209. +

**Paramedics, EMTs, EMT-Is:** Pearl EMS, Houston, has full-time positions available. Send resume or call James Metcalf, 6300 Richmond, Ste 201, Houston, TX, 77057, 713/953-0505, or fax 713/953-7636. +

**American Medical Response** offers team members the opportunity to participate in a wide range of challenging career choices with state-of-the-art equipment and technology. AMR also offers competitive wages and excellent benefits that include medical, dental, vision, and 401K. For information call 888-AMR-HIRE. +

## FOR SALE

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

**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. \*

**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 Bu-

reau 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. \*

**For Sale:** Wheeled Coach Ambulance Type II, 1986 Ford E-350 gasoline engine. New tires, 10-channel medical radio. Previously used as third-out unit. Contact Phillip Vargas at 806/874-3139, fax 806/874-2547. +

**For Sale:** 1990 XL ambulance, Wheeled Coach, diesel, automatic, 98K miles, extra clean, \$10,000. Call 281/338-4873. +

**For Sale:** New Type I and II Road Rescue ambulances, Type II Lead ambulances. For information, contact Art Seely, District Sales Manager, Rescue Safety Products Inc., 220 W. Parkway, Denton, TX, 76201, or call 800/481-4490. +

**For Sale:** 1983 Type I Chevrolet 1 ton ambulance, gas, 454 engine, almost new tires, Wheeled Coach box. Radios, cot, suction and light bar included. Call Gustene Bairrington, 806/428-3333. +

**C.E. available:** TDH-approved C.E.s available to meet the needs of your department. Contact FIRE-EMS Education at 903/415-0333. +

**Ambulance Billing:** L&M Billing, a 24/7 billing company with 10 years experience, can do electronic billing for Medicare, Medicaid and private insurance. Contact 830/276-3432. +

**Ambulance Billing:** Electronic billing, paramedic workshops, electronic trauma registry, month-end financial reports reconciliation, with full service billing package. No start-up cost/fees. Payments are mailed directly to provider. Contact Alexander Consulting, Inc, at 888/991-9444 or [www.arconsultants.com](http://www.arconsultants.com) +

+ This listing is new to this issue.

\* Last issue to run (If you want your ad to run again please call 512/834-6748.)

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## Profile: Los Fresnos EMS



EMS Director Tony Betancourt stands by Los Fresnos EMS' new ambulance.

**Name of service:** The City of Los Fresnos EMS

**Areas of service and response type:** Located in the Rio Grande Valley and at the extreme southern tip of Texas is Los Fresnos. The tropical settings, water and friendly people attract thousands of retired senior citizens from

throughout the entire nation. Thousands more of the nation's college students visit this area during Spring Break. In addition, about 70,000 people live within the Los Fresnos EMS zone of about 400 square miles. This zone also contains the second largest school district in the Valley.

**Number of personnel:** The City of Los Fresnos EMS provides high-caliber, professional prehospital patient care around the clock with MICU-capable units. The Los Fresnos Volunteer Fire Department provides additional assistance with TDH-certified Emergency Care Attendants. The ECAs are a major asset in providing the staffing for additional units and are essential during critical periods.

**Years in service:** The Los Fresnos Community Ambulance Service was established in the 1970s as an all-volunteer system. Dedicated volunteers, including bankers, teachers, farmers and housewives, devoted countless hours to providing EMS to the region with an advanced life support ambulance. In February 1991, the City of Los Fresnos began providing EMS to the region as a paid service.

**Units and capacities:** Los Fresnos EMS has three BLS/MICU-capable Type III units, including a recently acquired 1997 Wheeled Coach. A fully stocked paramedic supervisor vehicle equipped with EKG and ALS equipment also fills in as a first responder unit. The Search Trauma and Rescue vehicle, with its capacity and extra equipment, is the first of its kind in this area. The unit is available to other agencies in mutual aid scenarios. Patients are stabilized and transported from rugged and remote areas to an awaiting EMS unit on a safe roadway. The Los Fresnos EMS teams have immediate access to air evacuation, as Harlingen-based Valley Air Care provides round-the-clock service. Immediate ground intervention, combined with Valley Air Care and three Level III hospitals within the county, help in reaching Los Fresnos' ultimate goal, reducing the mortality rate.

Bureau of Emergency Management  
Texas Department of Health  
1100 West 49th Street  
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**Current projects:** In August 1997, the Texas Department of Health EMS Local Grants Program awarded Los Fresnos EMS \$35,000 for an ambulance. Los Fresnos places strong emphasis on promoting a professional EMS and on community awareness programs. With a reduction in mortality as the objective, EMS visits senior citizen RV parks, area schools and adult day care facilities that dot our zone to present education on health-related topics such as bystander awareness, the signs and symptoms of heart attacks, CPR instruction, injury prevention and the dangers of drug and alcohol abuse. With such a large school district, child safety is a popular topic. 🚑