

Mobile Training Unit takes free CE to West Texas, Hill Country, South Texas. Page 19

EMS in Primary Health Care

# Texas EMS

M a g a z i n e

Paramedics in PHR 7 immunize tots in Shots Across Texas. In ten clinics from May to November, Central Texas medics gave 578 shots.

Page 15



Serving Texas Emergency Care Professionals

Texas Department of Health

December 1993

EMS in the News: Nueces Canyon hosts BTLs, Comanche EMS raises \$10,000, Travis County Fire Control buys Hummer. Ready Teddy visits Olney. Page 8

**Mail order form to:**

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Order these free materials for your community education programs.

Shipping information: Organization \_\_\_\_\_  
Shipping Address \_\_\_\_\_  
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Amount ordered	Description
_____	<b>"Ready Teddy" coloring book.</b> Twelve pages of injury prevention and EMS awareness tips by the Texas EMS mascot. (4-61)
_____	<b>"When Minutes Count—A Citizen's Guide to Medical Emergencies" brochure.</b> A foldout first aid guide first distributed in 1988. Can be personalized by the EMS service. (EMS-014)
_____	<b>"Don't Guess, Call EMS" brochure.</b> 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, 1989. (EMS-013)
_____	<b>"EMS Lifesavers—Career Information" brochure.</b> Gives types of jobs, paid and volunteer, in various settings and salary ranges. (EMS-007)
_____	<b>"EMS questions and Answers About Citizen participation" brochure.</b> Answers questions about how to call, what to do, how the community can help EMS. (EMS-008)
_____	<b>"EMS—A System to Save a Life" brochure.</b> A 1970's title, 1990's text, and it has public health region office info and "for more information call" box. Explains BLS and ALS 1989. (EMS-012)
_____	<b>"Ready Teddy" poster.</b> The Texas EMS mascot urges kids to prevent injuries. (4-60)
_____	<b>"Dedicated to Patient Care" poster.</b> EMT and elderly woman pictured; featured during 1988's EMS Week. (EMS-009)
_____	<b>"EMS—It's a Lifesaver" poster.</b> Features the scanned ambulance with an orange stripe and EMT. Our first EMS Week poster, 1985. (EMS-018)
_____	<b>"System to Save a Life" poster.</b> Companion poster to brochure, 1990. (EMS-011)
_____	<b>"When It's A Medical Emergency—You Need EMS" poster.</b> Pictures closeup of EMTs resuscitating a child, 1987. (EMS-010)
_____	<b>"I'm an EMS Friend" sticker.</b> Ready Teddy in a 2-½ inch 2-color sticker.
_____	<b>"Children and Guns: A Deadly Combination" flier.</b> Pictures tot with gun, Texas death stats, 1993.

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**ABOUT THE COVER:** James Davis, Public Health Region 7 EMS specialist, became one of the first paramedics in Texas to immunize children under a new TDH program endorsed by Commissioner of Health David Smith, MD, standing. *Photo by Greg Patterson.*

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# Texas EMS

M a g a z i n e

December 1993

Vol. 14 No. 10

Texas Department of Health

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## Congratulations to conference staff and faculty for another successful conference

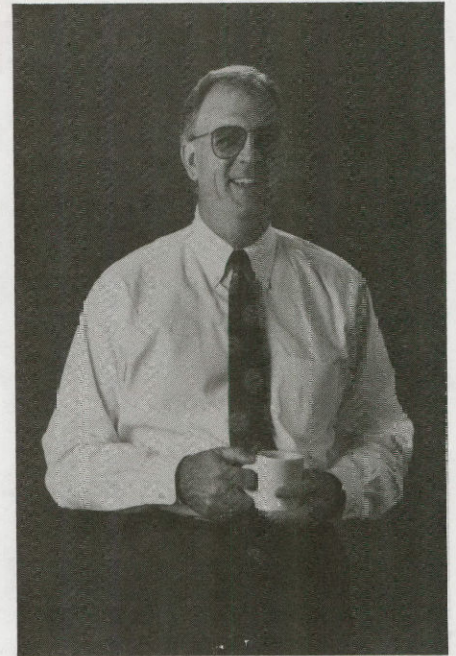
First of all, let me say thanks to my 866 plus close, personal friends who came to Billy Bob's Texas in Fort Worth during our conference. Everyone there seemed to have a good time and we hope everyone who attended enjoyed our conference. Fort Worth was very good to us and we look forward to an even larger crowd next year. We urge you to start making plans now for next year.

A special thanks goes to both our staff and the faculty for the annual conference. These two groups never receive the appreciation that they deserve but without them there would not be a conference. I cannot tell you how proud I am of the staff of the Health Department. They are all truly professionals and all worked very hard to make the conference a success. We think we have the best teaching faculty in the nation for our conference. Thanks to all of you who participated with us in Fort Worth.

Speaking of being proud of this organization, this issue contains our 24-page annual report, which you'll find between pages 18 and 19 of *Texas EMS Magazine*. It will provide you with the accomplishments of this organization during the fiscal year of September 1, 1992, through August 31, 1993. We have an excellent staff in all of our programs in Austin and in

the regional offices, and I hope you will take the time to read of their achievements this past year.

Congratulations to Pam West and her staff on putting the Mobile Training Unit on the highways of Texas. This vehicle, which you can read about on page 19, has been very well received around the state and has provided some rural areas with much needed training. Pam received the Charles E. King EMS Innovation Award for these efforts.



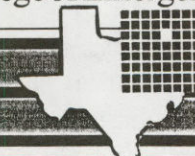
GENE WEATHERALL, CHIEF  
BUREAU OF EMERGENCY  
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### 1994 EMS MEDICAL DIRECTORS SEMINAR

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Texas College of Emergency Physicians



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# Implementation of House Bill 241



RUTH STEWART, MS, RNC  
CHAIR, TEXAS BOARD OF HEALTH

*An open letter from Ruth Stewart, MS, RNC, chair of the Texas Board of Health*

**B**y now, most, if not all, of the dedicated EMS personnel throughout Texas know about, or perhaps have experienced firsthand, some of the confusion and even consternation that has surrounded the passage and implementation of House Bill 241. I am writing this open letter in order to state clearly the position of the Board of Health in relation to

this important piece of legislation.

Most importantly, it must be understood that the Board of Health honors above all else our statutory commitment to protect the health of all Texans. We know those of you who are in the business of responding daily to the call of individuals desperately and critically in need of your assistance can appreciate fully the importance of this commitment. We are acting on this matter, as with all important health related issues that come before us, in a manner deliberately designed to consider the greater good of ALL the citizens of the State.

As you know, the Board has approved publication of proposed rules that would change the current recer-

tification requirements. Change of these standards for recertification was debated by the Texas Emergency Medical Services Advisory Council prior to the past legislative session. In fact, House Bill 241 was filed in response to one constituency of the debate who wanted to abolish recertification requirements. However, House Bill 241 was amended in the Senate to reflect a more moderate position, i.e., the Board of Health would determine the requirements for recertification. When a question arose concerning the Department's interpretation, we submitted the issue to the Attorney General for an opinion. The Attorney General has upheld the Department's interpretation of House Bill 241.

We have, therefore, in good faith followed the prescribed course of preparing and publishing proposed regulations and seeking public comment. We have received many comments from concerned providers reflecting a variety of opinions regarding the competency testing issue. By the time you read this message, many more will have offered comments at the public hearing held at the Texas Department of Health in Austin on November 10.

**A**t issue is the means to best ensure safe and adequate care

for victims of accidents or sudden illness, through emergency care personnel. As far as the Texas Department of Health is concerned, that is the only issue. I can state clearly and with conviction that there is not nor has there been any intent or desire for anything but the expedient and effective implementation of the legislation to serve the best interests of our citizens.

We all know how critically important the knowledge and skills of EMS personnel are for effective intervention in emergencies. This is especially critical because medical supervision is often remote, especially in rural areas. It is obvious that we need to obtain firm, reliable, and factual data to determine the best means for ensuring continual competence in these areas. We are discussing the need for, and exploring the best means to gather and apply, such data in the Department at this time.

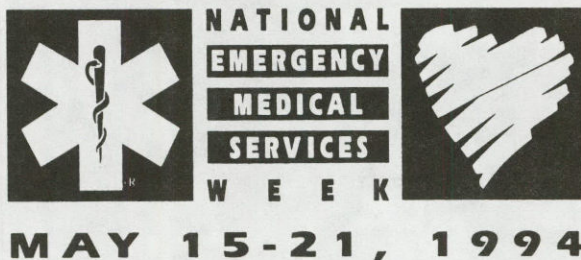
You are possibly aware that emergency physicians are expressing grave concerns that their medical license can be placed in jeopardy and their malpractice insurance adversely affected if they delegate responsibility

to emergency personnel who are not adequately qualified. Their concerns reflect, again, the need for good evaluative data. Many commentators believe testing is the only way to demonstrate competency. Others believe just as strongly that good, thorough continuing education programs are the answer. At the Department we realize that we need more than opinion, we need factual data in order to meet our statutory and ethical responsibility to those we serve.

In closing, I wish to state that the Board of Health recognizes and appreciates the excellence of Texas EMS systems. The extent and depth of the strong feelings expressed on all sides of this issue is itself testament to your commitment and concern for high standards of performance. We have the utmost respect for you and for the important, often perilous and self-sacrificing work you perform. Please be assured that is our intention to work with and support you while we strive to protect and promote the health of all Texans.

*The Board of Health honors above all else our statutory commitment to protect the health of all Texans.*

## EMS: The Stars of Life



TEXAS EMS CERTIFICATIONS AS OF  
DECEMBER 1, 1993

ECA	9,225
EMT	25,324
EMT-I	3,174
EMT-P	8,333
TOTAL	46,056
COORDINATOR	373
INSTRUCTOR	1,150
EXAMINER	1,481



# Local and Regional EMS News

## 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?  
Elected new officers?

Send your news to:  
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Alana S. Mallard, Editor  
Bureau of Emergency Management  
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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.

## Hopkins County EMS participates in week-long community activities

Hopkins County EMS participated in a week's worth of activities in September for the annual Hopkins County Fall Festival. The festivities began with a parade featuring the EMS units and members of the Medical Explorer Post. Later in the week, the service sponsored a domino tournament.

But the most important event, according to EMS Director Cathy Halliburton, came when the Hopkins County EMS Stew Team—Sandy Jeffrey, Bruce Waid, Teresa Strayhorn, and Cathy Halliburton -- entered a contest for best stew recipe and decorations at the cooking site. For their display, members of the EMS built a replica of a federal stockade infirmary built in Hopkins County in 1868, and a display board of the history of medical

services in the county. The team's chicken stew lost out to some of the other 90 contestants, but the display won a Certificate of Merit for Special Historic Presentation.

"It was a long week, but we had a lot of fun participating," said Halliburton.

## Nueces Canyon hosts BTLs course for area providers

South Texas has 25 new BTLs-certified medics, thanks to a course hosted by Nueces Canyon EMS and funded by the Texas Alliance for Education, or TEMSAFE. Paramedic Leslie Madden coordinated the course.

The students represented five area organizations: Nueces Canyon EMS, Edwards County EMS, Frio Canyon EMS, Uvalde EMS, and Maverick County Hospital. Paramedic Susie Jechow, director of

*Members of the Hopkins County EMS took a Certificate of Merit for the display members of the service built for the Hopkins County Fall Festival. The replica of an infirmary and accompanying display about the history of EMS in Hopkins County was judged one of the best out of 90 entries. From left are paramedics Teresa Strayhorn, Cathy Halliburton, Sandy Jeffrey, and Laura Ballard.*





# Local and Regional EMS News

*Nueces Canyon EMS recently sponsored a BTLS class for about 25 students from rural emergency medical services. From left, instructor Dan Esper leads students Janet Wells, Velinda Sifuentes, and Jan Tolleson in a skills exercise.*



Nueces Canyon, says participants wrote in their evaluations that the class would help them reduce on-scene time and increase rescuer safety.

Nueces Canyon EMS is a volunteer service about 100 miles west of San Antonio.

## Delta County struggles to keep ambulance service

Delta County found itself in a difficult position earlier this year as the county's private ambulance service ceased operation due to lack of funds. Jody Carmichael, owner of Delta County Emergency Medical Service, said that small call volume made it difficult to support a service without a subsidy from the county. Carmichael had the contract for almost three years.

When Carmichael pulled out, the county took over the

operation, subsidized in part by St. Joseph's Hospital and Health Center in Paris. However, with the hospital subsidy ending September 30, the county once again had to come up with a \$10,000 monthly subsidy.

"We're having a lot of difficulty keeping (the service) open because we're such a small county," says EMT-I Debbie Watkins, an eight-year employee. "The instability of it is really hard."

The county is exploring ways to fund the service, including creation of an emergency services district and adding a half-cent sales tax. The county has committed to subsidize the service until a tax alternative goes on the ballot, probably in January. Residents of the county are being asked to add between \$1 and \$4 to their water bills to defray the cost. EMS from

Lamar, Hunt, and Hopkins counties will generally not make calls in Delta County unless there is a disaster, according to Watkins.

"Most people want us here, but they don't want to pay for us," says Watkins. "With the sales tax, at least we're spreading the cost to everyone rather than just making property owners pay for it."

Delta County EMS employs seven people full-time and makes about 600 calls a year. One of the smallest counties in Texas, Delta has about 5,000 over 277 square miles.

## Comanche EMS hits the fundraising trail

In just a few short months, Comanche EMS raised more than \$10,000 toward the purchase of a new, \$40,000 ambulance with a series of

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## Local and Regional EMS News

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*Travis County Fire Control added a new weapon to its arsenal: a Hummer. The tough vehicle can take firefighters and medics into areas not accessible to regular firetrucks and ambulances. During this year's dry summer season, firefighters from all over the county fought almost 500 brush and grass fires.*



fundraising events. The first event, a rodeo designed for people under 18, raised about \$1,200. The service also gave free blood pressure checks and sold raffle tickets for a fish cooker in the community-wide Comanche Pow Wow celebration. An EMS-sponsored softball tournament and a \$5,000 donation from the Comanche Community Hospital Guild brought the service even closer to its goal.

"We're up to \$10,600 and we only started two months ago," says Alfred Rodriguez, EMT-P. "We're raising all the money ourselves."

Comanche EMS is a hospital-based service employing three people full-time and seven part-time. The service answers about 70 calls a month over 200 square miles and a population of 8,000.

### Travis County fire fighting ability boosted with Hummer

Travis County Fire Control recently bought the first Hummer-type fire apparatus in Texas. The Hummer, a civilian version of the military Humvee, is an all-terrain vehicle that allows firefighters to reach areas previously not accessible by truck.

The \$65,000 truck carries 250 gallons of water with a 250-gallon-per-minute pump that can supply three hose lines. Other features include four-wheel drive, superior maneuverability on steep inclines, and the ability to inflate or deflate the tires from a control inside the cab. It also carries medical equipment.

"We're very glad to be able to add this type of vehicle to

our fleet," says John Murphy, public information officer for Travis County Fire Control. "The Hummer will be invaluable in helping us get to the base of the fire in the brush and canyonlands of the western part of the county."

### First wilderness course offered at Texas Tech

Texas Tech University Health Sciences Center EMS and Wilderness Medical Associates sponsored a Wilderness EMT course in August.

The 56-hour course is designed for people certified in EMS, especially those working in search and rescue units, or as rural medics, back country rangers, military. Participants can be certified by the National

# Local and Regional EMS News

Association for Search and Rescue. Instructors give special attention to prolonged transports, severe environments, and improvised equipment.

The three intensive field training exercises included a drill scenario involving the rescue of three hikers struck by lightning in a remote area.

## Trans-Star EMS wins business of the year

Trans-Star EMS owners Stephanie and Ron Pitts were named Small Business Persons of the Year by the Silsbee Chamber of Commerce earlier this year. The Pitts started the Hardin County private service in 1986 with a paramedic and EMT while the couple studied for their ECA certification. Since then, Stephanie has gone on to become a paramedic and course coordinator, and Ron is a paramedic and examiner.

Trans-Star now has seven ambulances, 22 full-time employees and 15 part-time. The Pitts expanded in 1991 into Jasper County and now have an office in Beaumont.

## Move puts Llano EMS under hospital's auspices

Llano County Commissioners voted recently to transfer operations of the Llano

County EMS to the Llano Memorial Hospital. In the agreement, the county agrees to pay the hospital \$100,000 a year as well as make the first-year payment on the service's new ambulance.

According to EMS Director Kelly Oestreich, the move is more of a paper transfer since EMS personnel have been employees of the hospital since 1987, and the service is located in a hospital annex.

"The only difference now is that the hospital board has complete control," says Oestreich.

## Transportation department offers free guidebook

The U.S. Department of Transportation is offering the 1993 Emergency Response Guidebook free of charge to emergency first responders through local councils of government. The book gives information on hazardous materials response.

The Texas Department of Public Safety's Division of Emergency Management suggests that books be placed at all communication dispatch points, in emergency vehicles, and in any other vehicles that might come in contact with hazardous materials.

The guidebooks are for use in official vehicles only, and not intended for

distribution in training courses, or for use by private citizens

## Mathis EMS upgrades to advanced life support

Just a few months after the City of Mathis began its own EMS service, it has upgraded to BLS with ALS capabilities. The city took on the responsibility of EMS when it canceled a contract with a private firm. The South Texas service's startup equipment included a seven-year-old ambulance with an engine that didn't work and a feed warehouse that needed to be remodeled into an EMS building.

Currently, three of the seven medics are certified EMT-Is; however, two employees will soon complete paramedic training. With those people trained, according to director Chris Barrera, the service could offer MICU services by April of 1994.

Peter Morgan, MD, of Beeville, provides medical direction for the 10-month-old service at the cost of \$1 per year. Morgan served as a paramedic for several years before attending medical school.

## Life Line EMS gives award to first responders

Life Line EMS, Inc., of Wichita

## Local and Regional EMS News

Falls presented its First Responder of the Year award in a ceremony earlier this year to Burkburnett Fire Department. The award is intended to recognize first responders for providing care and treatment to citizens in the first critical minutes on medical emergencies.

### Something about this call really bugged the medics

Ask Baytown EMS Director Jack Pitcock about his most unusual call, and he has a ready answer. No doubt, it's the cockroach call.

Here's the story: while a man slept, a cockroach apparently crawled in his ear. The man woke up feeling the strange sensation of having a bug trying to burrow deeper into his ear canal. The patient tried to get himself to the hospital but had to pull over and call for help. Medics could not extract the stubborn bug and transported the patient to the hospital.

"You never expect to get a call like that," says Jack Pitcock, EMS director.

The roach did not survive the hospital visit.



*Ready Teddy does a little networking with another large, furry animal in Olney in October. Children have sighted Ready Teddy all over Texas in the last few months. TDH's Austin office and public health region offices have bear suits available to lend.*

*Do you have a humorous or unusual call to share with Texas EMS Magazine readers? Write down the details along with your name and daytime phone number and send to: Unusual Story, Texas EMS Magazine, 1100 West 49th, Austin, Texas 78756-3199.*

**Correction** In a story about Possum Kingdom Westlake Volunteer EMS in the Sept/October 1993 issue, we failed to name the

Meadows Foundation as a contributor to the ambulance fund. The Dallas-based foundation gave the service \$35,000 toward the purchase of the 1993 Ford.

Algur H. and Virginia Meadows created the Meadows Foundation in 1948 to benefit Texans in health, education, arts and culture, social services, and civic endeavors. As of January of 1993, the foundation had given more than \$250,000,000 to groups around the state, including several emergency medical services.

# Local and Regional EMS News

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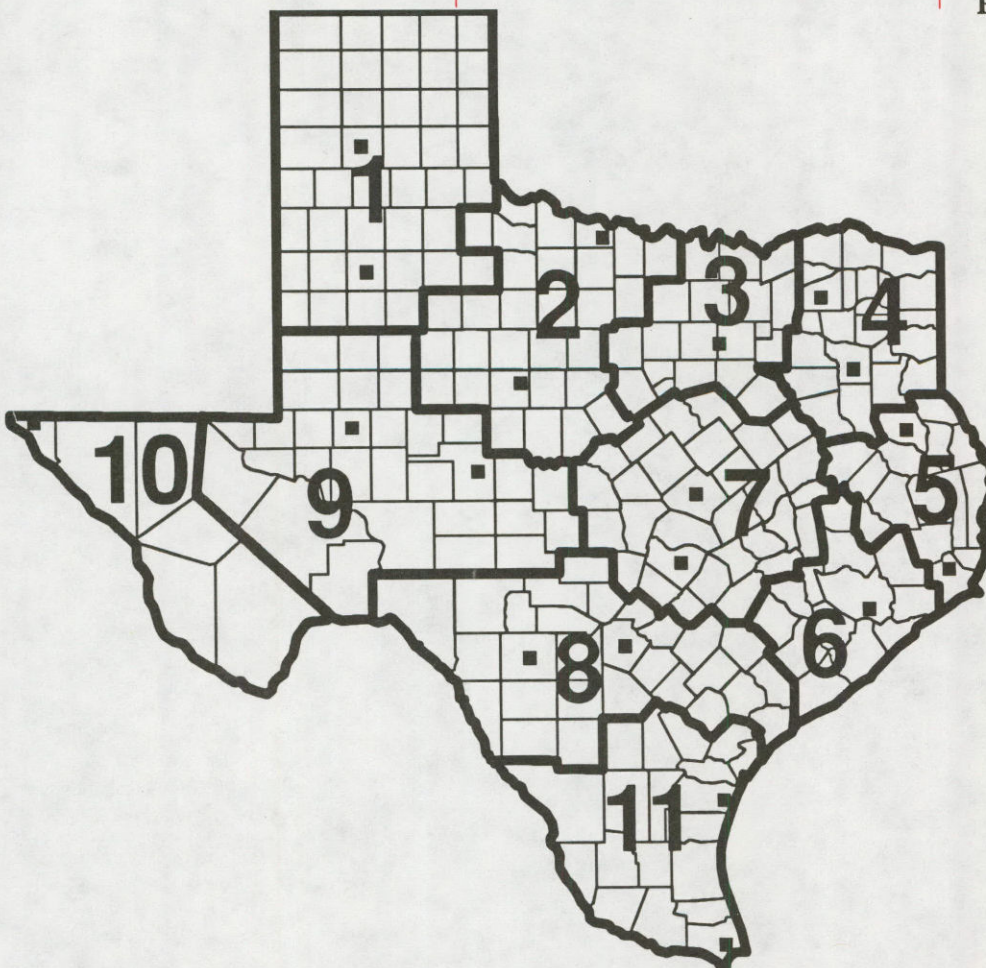
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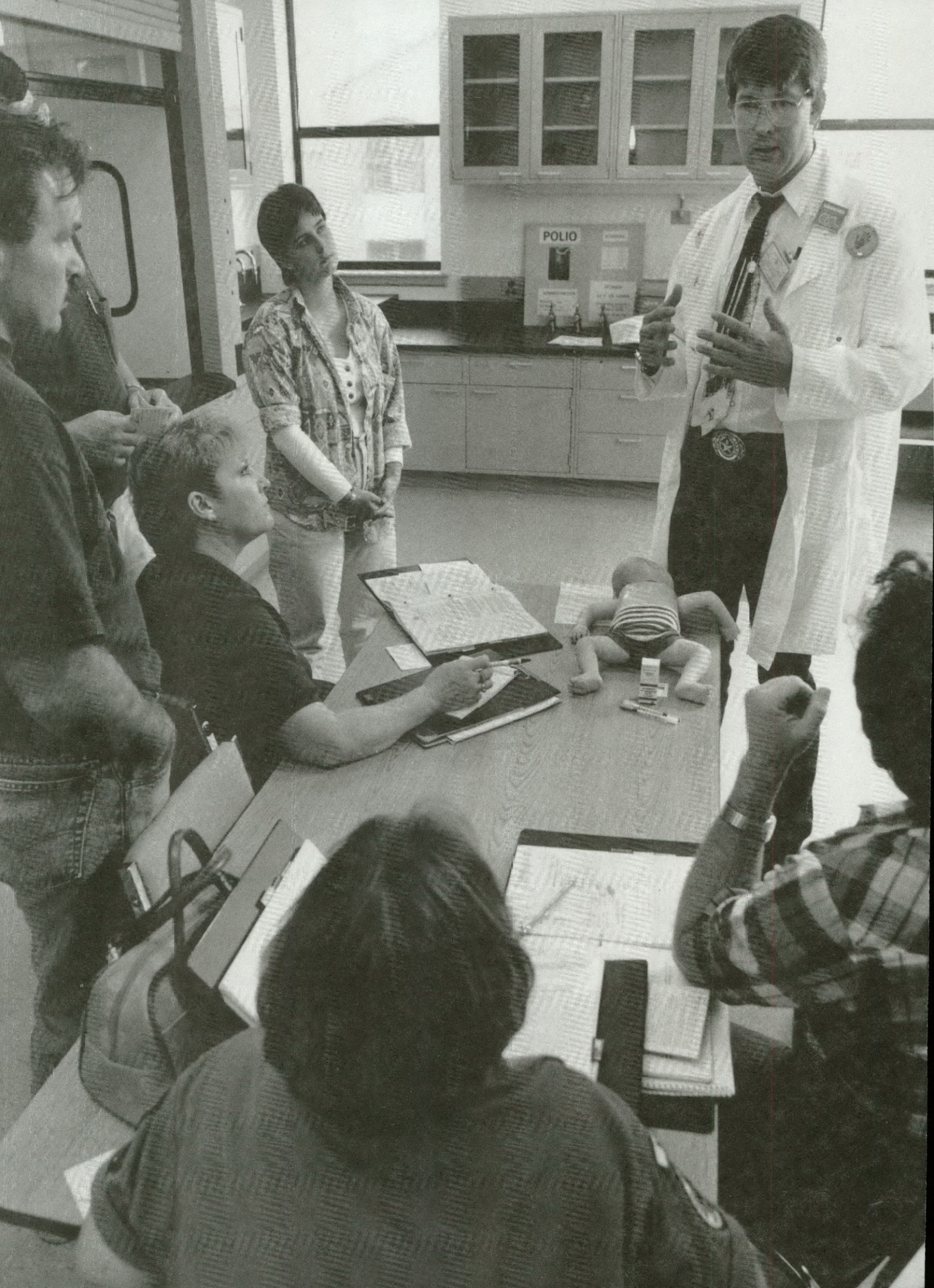
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# Paramedics Trained to Immunize Littlest Texans

*In Texas, we lead all other states in the number of vaccine-preventable cases of childhood diseases each year. Approximately 70 percent of all Texas two-year-olds still need some of their childhood shots.*

By  
Larry D. Robinson

PHOTOGRAPHS BY  
SCOTT & WHITE MEMORIAL HOSPITAL  
AND GREG PATTERSON

IN THE LAND OF MOM, APPLE PIE, AND FREEDOM live diseases that threaten America's children. Half of America's children younger than age two do not receive necessary vaccinations. In Texas, we lead all other states in the number of vaccine-preventable cases of childhood diseases each year. Approximately 70 percent of all Texas two-year-olds still need some of their childhood shots.

During the past five years, more than 4,400 children under five years of age living in Texas have contracted measles. Twelve died. In 1992, more than half of the 2,200 measles cases reported nationally occurred in Texas.

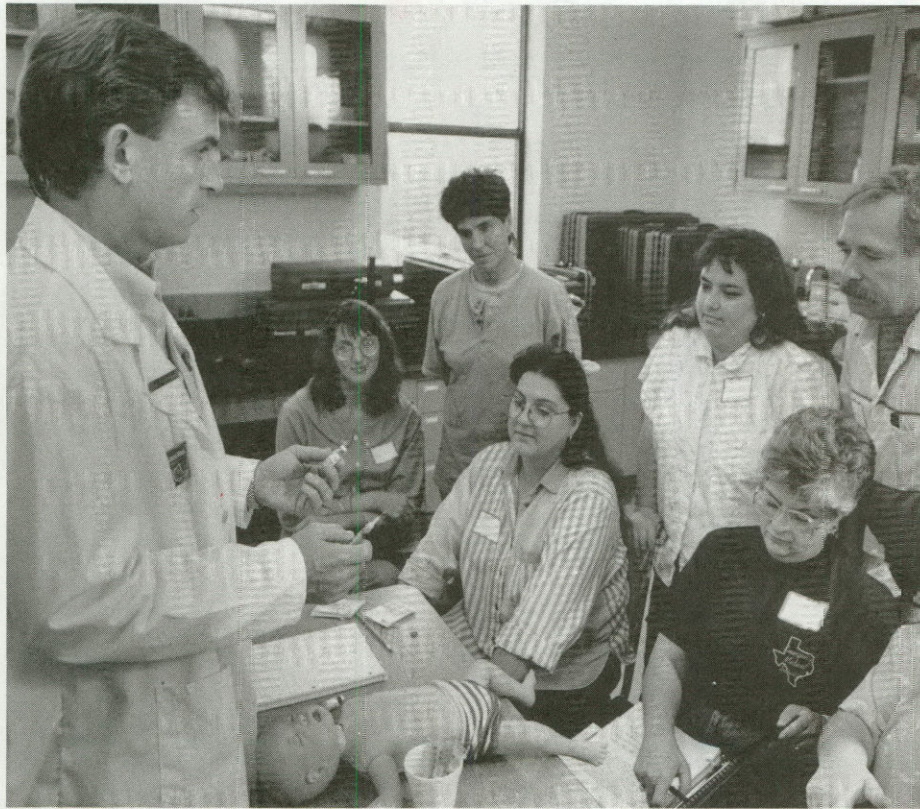
"For years we have been aware of the problem," said Texas Commissioner of Health David R. Smith, MD, a pediatrician. "But, as a society, we have ignored the blinking yellow warning lights: the reports and statistics. Now the lights are no longer yellow. The warning signals have been replaced with the piercing red of a moral stop light. It's time to slam on the brakes."

Smith refers to an outbreak of measles that occurred during 1990 in Dallas and hospitalized 228 adults and children at a cost of \$3.4 million: "In addition to causing unnecessary, senseless suffering and death, preventable diseases are economic burdens on our already over-burdened health care delivery system." Vaccine for those 228 patients costs about \$3,700.

According to former U.S. Surgeon General C. Everett Koop, today's new parents got the shots they needed as children and did not experience the crippling epidemics we

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*Specialists from Scott & White Memorial Hospital and Texas Department of Health in Temple developed the 8-hour immunization workshop for paramedics. Public Health Region 7's James Davis (standing, right), helped instruct the workshop and has participated in immunization clinics since May.*



*As paramedics expand their roles in the area of preventable medicine, they could move from giving shots into conducting health screenings, well-child seminars, and risk reduction workshops to help their neighbors live healthy lives by preventing diseases. Rod Dennison (left), EMS manager for Public Health Region 7, worked with other health department divisions so paramedics could participate in Shots Across Texas.*

now face. He says that otherwise conscientious, caring, and intelligent mothers and fathers who never had childhood diseases inadvertently believe that measles, polio, whooping cough, rubella, and tetanus pose no threat to their children.

In the 30-county area of Public Health Region 7 in Central Texas, the health department's communicable disease and emergency medical services personnel joined forces to educate parents about immunizing their infants and toddlers and to increase the number of medical professionals trained to conduct immunization clinics.

"EMS personnel are already in place and can provide a needed ser-

vice—immunizations," says paramedic James F. Moshinskie, PhD, director of EMS education of the Texas A & M College of Medicine at Scott & White Memorial Hospital in Temple. "We may be giving shots, not treating victims of car wrecks, but lack of proper immunizations is a growing national emergency, and children desperately need our help."

In a cost-effective and practical dual role, EMS personnel from Central Texas communities such as Temple, Mart, Lampasas, Austin, and Groesbeck can provide immunizations and respond to anyone who experiences negative reactions to immunizations, thanks to the one-of-a-kind workshop developed to train paramedics as immunizers.

Nearly 46,000 certified EMS personnel serve the citizens of Texas, and 8,200 are paramedics. PHR 7 has 816 paramedics. These specially trained men and women work and volunteer each day in communities that rely heavily on the services they offer.

"There is no real advantage to sending medical personnel to an area, especially a rural area, for the specific purpose of immunizing people, if medical personnel are already there, in place and serving the community," says James Davis, a senior EMS specialist in the PHR 7 EMS office. Davis conceived the notion of using paramedics in PHR 7 to conduct immunization clinics.

"Paramedics are very talented and very capable," says Mary Urubek, RN. Urubek has trained LVNs and RNs in proper immunization techniques during her 13-year tenure with the Texas Department of Health. "I have seen paramedics giving immunizations while working



to make people's health better—I've seen this first-hand. Paramedics have a strong degree of ability, training, and self-confidence. And their self-confidence shows as they embark on new extensions of their duties."

Maribeth Bartz, assistant program manager in PHR 7's Communicable Diseases office, worked with Davis and Rod Dennison, PHR 7's EMS program administrator, to involve paramedics in the immunization program sponsored by Texas Department of Health. Shots Across Texas, the statewide immunization program kicked off in October, aims to immunize Texas children against a variety of diseases. And paramedics have become actively involved in the Shots Across Texas community immunization clinics in Central Texas.

"So far, we have had trained EMS personnel and nurses give immunizations at a fire station. But on October 15, 1993, we held the first immunization workshop uniquely designed for the purpose of training paramedics to provide immunization services," Dennison said. Thirty-one paramedics from a dozen EMS organizations completed that first 8-hour immunization workshop held at Scott & White Clinic on October 15.

In conjunction with Moshinski and other EMS personnel from Texas A & M College of Medicine and Scott & White Memorial Hospital, Dennison, Bartz, and Davis helped develop the training program.

"We designed the (training) program with the hope that it would complement Governor Ann Richard's Spirit of Cooperation, a theme growing among medical personnel in Texas," said Pauline M. VanMeurs, paramedic and director of Paramedic

Technology at Scott & White Memorial Hospital's EMS Education Program.

"We began at ground-zero," said Dennison, "paramedics have the mechanical skills and an orientation to particular biological mediums is all that they were lacking.

"Yet, our program is only the tip of the iceberg. I am confident that many will follow."

The workshop consists of a pre-test, a didactic training seminar, and a post-test. The paramedics learn the procedures necessary to administer immunizations under the written orders of a physician, within strict guidelines, and according to well-defined protocol. The classroom training includes objectives,

*Paramedics from these services completed the  
Paramedic Immunization Workshop in October:*

*Temple Fire Department EMS*

*South Limestone County EMS*

*King's Daughters Hospital Medical Transport*

*Mart EMS*

*Falls County EMS*

*San Saba EMS*

*Granite Shoals EMS*

*Lampasas EMS*

*Austin EMS*

*Belton Fire Department EMS*

*Williamson County EMS*

*Sold Cross Ambulance*

*Coryell Memorial Hospital EMS*

For information on using the 8-hour immunization workshop for paramedics in your area or on Shots Across Texas, contact Rod Dennison or Maribeth Bartz at (817) 778-6744.

responsibilities, clinical and clerical requirements, assessment procedures, immunization schedules, and proper administration of all biologicals.

Paramedics learn another important skill during the workshop: developing a one-on-one approach in communicating with parents and patients. As immunizers, paramedics must convey important medical concerns, such as future immunizations required for each child, to parents. Paramedics also learn to detect common medical needs of their immunization patients.

In the last phase of the formal training session, the intensive internship, each paramedic spends clinical time with a preceptor experienced in administering immunizations.

"This will greatly aid in the professional development of personnel and it gives us another mechanism for positive exposure within

communities. And working with community organizations has always been one of our strongest points," Dennison says.

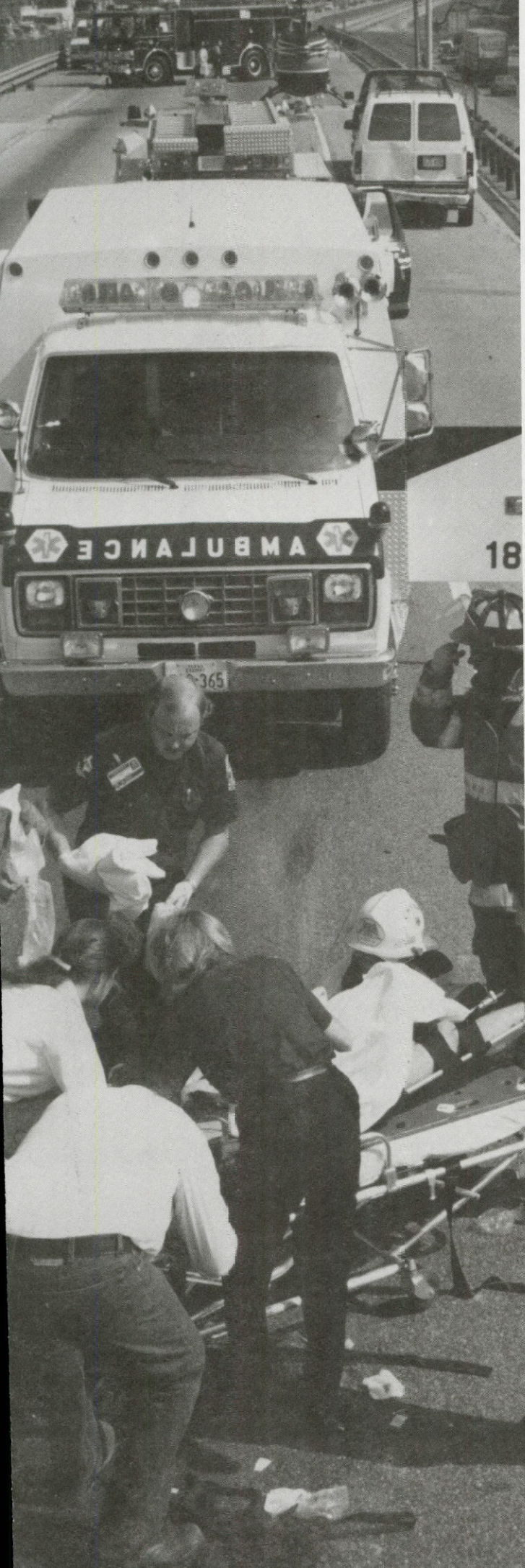
From May, when Dennison and Davis first began working immunization clinics, through November 1, 16 paramedics have participated in ten clinics in PHR 7, giving 578 shots to 373 clients.

"In the end, the number of immunized children in Texas will increase using a practical approach," Dennison says. "By offering a training seminar that takes one day to conduct and following up with continuing education and testing, we will be able to provide the total package."

Larry Robinson, a senior-year professional writing major at Baylor University, wrote this article in conjunction with an internship conducted through Texas Department of Health, Public Health Region 7.



*As professional immunizers, paramedics play an important role in educating parents about future immunizations. Six-month-old Zachary Mallard-Schobey will need four shots at 15 months.*



TEXAS  
DEPARTMENT  
OF HEALTH



BUREAU OF  
EMERGENCY  
MANAGEMENT

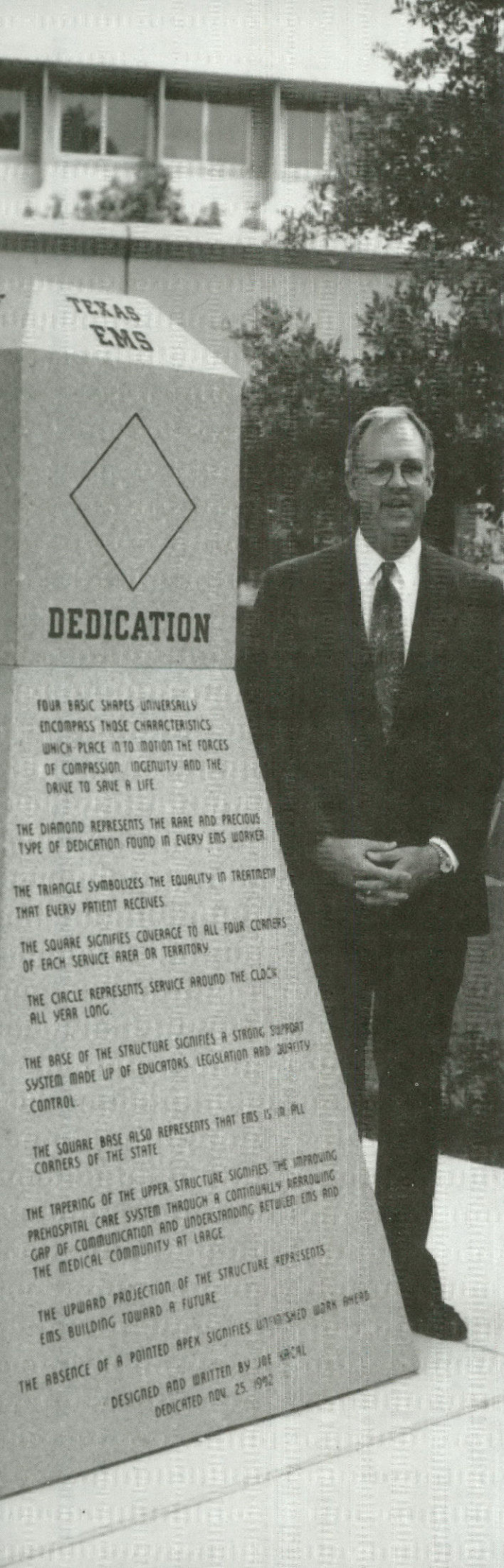
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REPORT  

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1993



## *The Bureau Vision*

*All the people of Texas, because of the effectiveness of our emergency services systems, will not experience serious injury or illness but if ill or injured will receive the best emergency care in the nation.*

## *The Bureau Mission*

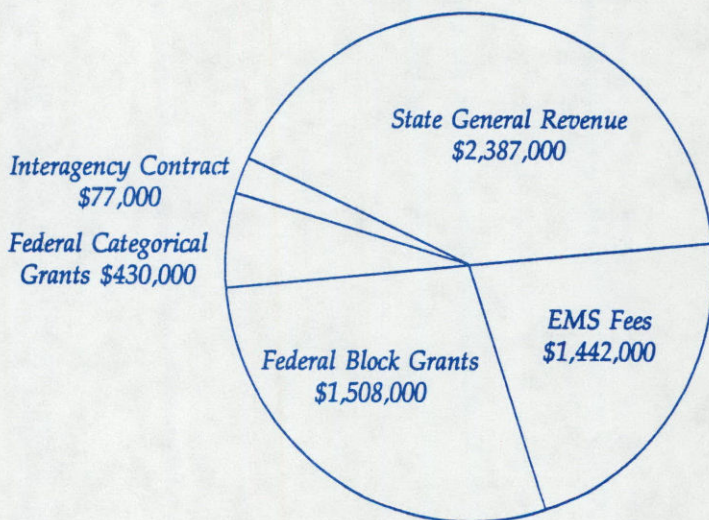
*To develop a statewide system that provides emergency care to all people through prevention, awareness, and intervention.*

PHOTOGRAPH BY  
ALANA S. MALLARD

# THE BUREAU OF EMERGENCY MANAGEMENT

Originally established in 1966 as the Division of Disaster Health and Medical Services as Congress appropriated the first ambulance training funding to the states, today's Bureau of Emergency Management operates diverse programs: emergency medical services, driver safety, sexual assault services, trauma systems development, and public information and education.

**THE FY93 BUDGET OF \$5.8 MILLION CAME FROM THESE SOURCES:**



## EMS LEGISLATION HALLMARKS

- 1993 - EMS for Children Program legislation passes
- 1989 - State legislation establishes statewide trauma system
- 1983 - EMS Act requires two certified EMS personnel aboard an ambulance
- 1973 - EMS Systems legislation establishes first advisory council, state EMS plan, state communications system, fifteen components of EMS system

1943 - Ambulance legislation requires eight hours of first-aid training and a first-aid kit

## FY93 BUREAU HIGHLIGHTS

- Medical Advisory Board trains record 4,211 law enforcement officers and others to recognize medical conditions that make driving dangerous.
- 73rd Texas Legislature passes EMS for Children legislation, second in the nation.
- Local Projects Grant Program distributes \$530,000 to 77 local EMS organizations for training, equipment, public education.
- EMS for Children Program trains 1,350 EMS personnel, nurses, and physicians; establishes ongoing training programs in community colleges and hospitals.
- Certification Program develops training and testing guidelines based on Americans with Disabilities Act; federal government rules in our favor in one of the first tests in the nation.
- Bureau certifies 12,505 EMS personnel.
- Texas EMS Conference '92 in Austin attracts 1,200 registrants, 110 exhibitors, 85 faculty.
- Texas EMS Monument dedicated on Texas Department of Health grounds.
- Sexual Assault Program provides educational services to 500,000 citizens and \$790,000 to 51 local sexual assault programs.
- Ten regional advisory councils organize to develop trauma care systems and injury prevention strategies.

## MEDICAL STANDARDS ON MOTOR VEHICLE OPERATIONS DIVISION

This division works to reduce the number of motor vehicle accidents caused by medical problems by revoking or reasonably restricting the licenses of drivers who exhibit medical problems likely to interfere with safe driving. One-third of the 1,200 cases reviewed each month relates to alcohol. Medical conditions such as diabetes and epilepsy are also reviewed.

In FY93, the division broke its previous training record with 4,211 people completing the short course on recognizing medical limitations to driving. Largely, the graduates are law enforcement officers with 3,687 attending courses taught at police academies. EMS personnel also take the courses as do school bus drivers. Division staff members taught 165 courses across the state this fiscal year.

Division staff processed a total of 13,514 cases in FY93 with nearly 2,000 drivers losing their licenses. Some 1,600 drivers had their licenses restricted this year. The division's Medical Advisory Board, made up of physicians, reviews cases each week and makes recommendations to Texas Department of Safety about each driver. Texas Department of Public Safety makes the licensing decisions based on the board's recommendations.

The division director participated on the Texas task force on older drivers, which released its report in December, 1992. As one of 88 members representing organiza-

tions interested in research, traffic safety, age-related services, and public safety, the division director helped formulate recommendations to meet the needs of older drivers. Areas of concern include: revision of standards for traffic control devices; maintenance of the devices; improved skills assessment and training; increased accommodation of special needs; and use of a multimedia campaign.

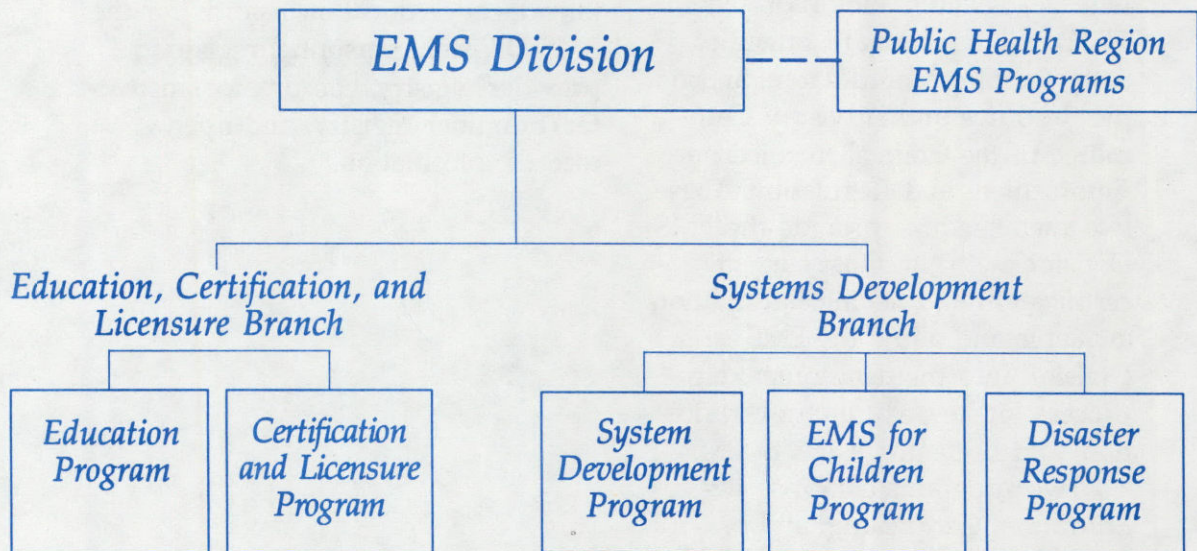
# THE EMS DIVISION

The EMS Division's functions include regulation and development of emergency medical service systems throughout Texas. Division personnel work directly with EMS provider agencies, EMS personnel, and health care consumers to improve prehospital emergency care.

The State EMS Plan, a five-year plan followed and updated each year by the EMS Division, addresses these eight key areas:

- Management and technical assistance
- Staffing and training
- Communications/Access to care
- Transportation
- Facilities/Critical care units
- Record keeping/Data collection and evaluation
- Public information and education
- Disaster linkage

Two branches—Education, Certification, and Licensure Branch and Systems Development Branch—comprise the EMS Division. Each Public Health Region office staffs an EMS office for local implementation of the programs of the EMS Division and the Bureau of Emergency Management.



# EDUCATION, CERTIFICATION, AND LICENSURE BRANCH

The Education, Certification, and Licensure Branch of the EMS Division functions as the regulatory arm of the EMS Division, maintaining certification and licensing records on more than 45,000 medics and 1,000 organizations in FY 93. The branch this year began registering first responder organizations. This process encourages teamwork between first responder groups and licensed transporting agencies, which results in better patient care.

This branch helps draft rules and rule revisions on certification, licensing, and education issues, and writes policies and procedures to ensure unified implementation of new and amended rules by division and regional staff. The assistant EMS division director who heads the branch represents TDH on the National Council of State Training Coordinators and on the Resource and Advisory Committee of the Council for Licensure Enforcement and Regulation. These two memberships provide the EMS Division with the most current certification and testing information available and allow the EMS Division into the decisionmaking process for key education, certification, and licensure issues in EMS.

Two programs comprise the Education, Certification, and Licensure Branch—the Certification and Licensure Program and the Education Program.

## CERTIFICATION AND LICENSURE PROGRAM

The Certification and Licensure Program maintains credentials on the EMS professionals ready to serve the 17 million people living in Texas: 46,000 certified EMS personnel, 280 registered first responder organizations, 750 licensed providers.

In FY93 the Certification and Licensure Program processed 12,505 EMS personnel applications for field medics; 1,485 coordinator, instructor, and examiner applications for EMS educators; and licensed 480 firms.

The program reviewed 666 applications from other states for reciprocity certification; registered 311 first responder organizations; and processed 1,106 felony investigations. The Certification and Licensure Program maintains legal certification records for the EMS Division: personnel registry, provider registry, coordinator/instructor/examiner registry, and open records information.



## THE EMS EDUCATION PROGRAM

The EMS Education Program manages the educational activities of the EMS Division in several ways: certification exam development and grading; continuing education standards approval; initial education standards; testing standards and policies; and national education issues.

The Education Program invites three exam review committees comprised of EMS instructors, coordinators, and medical directors to Austin approximately ten times each year to review the certifying exams and the database of 4,500 test items. The exam review committee members take meticulous care as they discuss each question by comparing data gathered from test sites and sifting through reference material to ensure that questions are fair, logical, reliable, and relevant. In FY93 more than 1,500 questions in the advanced databases were reviewed. The educators added 70 new questions and did pilot studies of more than 140 new questions.

The Education Program and the Public Health Region EMS Programs will work together to implement the new EMS course approval process defined by the *EMS Education and Training Manual* produced this year. The two branches of the EMS Division produced the *EMS Education and Training Manual*, with the specific processes such as certification, course approval, and continuing education contributed by the regulatory branch. The development branch contributed philosophy and design.

The EMS continuing education resource library maintained by the Education Program at the health department's film library provided 28,477 continuing education credits to certified

EMS personnel statewide.

The Education Program produced and began distributing with every certification application a brochure called *Candidate Testing Guidelines* that gives EMS students tips on studying, test-taking, and the certification process. The brochure also includes information on requesting special considerations allowed under the Americans with Disabilities Act.

To comply with the Americans with Disabilities Act in EMS education, the program worked with the health department's ADA expert to develop policies and procedures. The national EMS community watched Texas this year as the U.S. Department of Health and Human Services decided an EMS education ADA case in the health department's favor.

The Education Program participates at the national level to ensure the Texas EMS point of view. Program members reviewed the new EMT curriculum drafted by the U.S. Department of Transportation, which will become the national standard for all EMT courses in the future. Program members also reviewed for the development of the national EMS Training Blueprint. This document plots the course of EMS education throughout the country by setting standards for the teaching and practice of prehospital medicine and the promotion of national reciprocity.

In FY94 the branch will implement a new continuing education process, develop a free CE tracking computer software, and implement new EMS course approval requirements. The EMS course coordinator training curriculum and exam will be revised to include the principles of continuous quality improvement and the new EMT curriculum will take effect.

# PUBLIC HEALTH REGION EMS PROGRAMS

## PUBLIC HEALTH REGION 1, TEMPLE

The most dramatic event of the year in PHR 1 was the standoff outside Waco between the Bureau of Alcohol, Tobacco, and Firearms and the Branch Davidians. Three staff members spent many hours in Waco and at the area just outside the compound. During the initial stages of the standoff, staff members provided additional medical and logistical support wherever such support was needed. PHR 1 EMS program members assisted in obtaining backup EMS vehicles and crews from local services, and aided in the procurement and supply of tactical equipment to crews at the scene. PHR 1 EMS program members made the first contacts for critical incident stress debriefing for EMS personnel.

Training was a high priority in FY93, both for program staff and for EMS providers in the region. Program staff completed training or certification/recertification requirements for National Registry Paramedic, ACLS Instructor, BTLS Instructor, PPC Instructor, PALS, NALS, TNCC, and ATLS. The EMS program assisted approximately 25 EMS groups as instructors. Program members provided instruction in specialty fields such as hazmat and rescue, and for such groups as Texas Parks and Wildlife Department's game warden academy and Fort Hood's 507th Medical Company/MAST's EMT school.

Working with the EMS Education Department at Scott & White Hospital and the PHR 1 Immunization Program, EMS program staff members initiated a new project in FY93 to train paramedics to conduct immunization clinics. PHR 1 staff were the first paramedics to work clinics under this program and are now developing a quality improvement plan for all paramedics staffing health department clinics.

## PUBLIC HEALTH REGION 2, CANYON

Two educational programs in the region continue to be supported by Public Health Region 2 staff members. The Tri-State Trauma Symposium and South Plains EMS Update succeeded again this year both in the quality of programs and attendance numbers. Regional staff helped in the formation of Regional Advisory Councils for trauma in both South Plains and the Panhandle. Both Panhandle EMS and South Plains EMS updated patient treatment protocols and both groups improved air evacuation possibilities—Panhandle by launching a new helicopter program and South Plains by putting two new helicopters in service.

Public Health Region 2 EMS training programs graduated a record number of paramedics and emergency medical technicians in FY93, many of whom work as volunteers in the area.

Besides their regulatory duties, regional EMS staff also worked on special projects. Two staff members served this fiscal year on the American Heart Associ-

*Public Health Region numbers changed on September 1, 1993. This report uses the old numbering system.*

ation Affiliate Faculty. One staff member taught Advanced Cardiac Life Support Instructor and Provider courses. One staff member provided administrative support for a regional critical incident stress debriefing team in South Plains. One staff member provided educational and technical support for the Texas EMS software package. Staff members assisted with the development and exercise of local, system, and regional disaster plans.

### PUBLIC HEALTH REGION 3, EL PASO

Public Health Region 3 EMS program personnel carried out the first site evaluation of an EMS training facility—Midland College—during FY93.

EMS program members joined Texas One, a Disaster Medical Assistance Team, in El Paso, buying gear, participating in training, and receiving clearance for activation as federal employees in certain disaster situations.

The office completed an EMS course coordinator seminar in the Permian Basin area, and again participated in mass CPR training in El Paso. Staff members have received critical incident stress debriefing training, and assist with local critical incident stress management.

### PUBLIC HEALTH REGION 4, HOUSTON

PHR EMS program staff members continued to develop the C.A.R.E. and EMS Sharing programs for regional, rural continuing education during FY93. Staff members worked with staff in other public health regions and the Central Office to extend C.A.R.E. concepts and programs to the rest of the state, including Texas EMS Conference '93.

Staff members helped develop a DWI awareness program in the region, which

is modeled after the successful Austin EMS program. Staff members act as presenters throughout the region for the DWI awareness program, working to educate the public about violence and injury prevention.

Staff members continued their work in FY93 with EMS coalitions, specifically Greater Houston EMS Council and Southeast Council. Greater Houston EMS Council is a forum for all EMS affairs, and the Southeast Council is made up of the junior college college EMS coordinators and several independent EMS coordinators who work on common concerns and to allocate clinical and OJT facilities for EMS courses.

### PUBLIC HEALTH REGION 5, ARLINGTON

FY93 saw more students tested for certification and recertification by Public Health Region 5 EMS program personnel than in any other year—4,270. More than 100 EMS providers were relicensed and 15 new EMS services started up. More than 100 first responder groups were recognized in the region during the year.

Program staff investigated 50 complaints with several ambulance service licenses revoked or suspended and some 20 EMS personnel losing their certification. Fines generating \$3,000 in revenue were collected in the region.

### PUBLIC HEALTH REGION 6, UVALDE

EMS training and education continued in the forefront of activities by Public Health Region 6 EMS program personnel. Regional staff conducted coordinator updates in San Antonio and Uvalde, approved 74 formal EMS education courses, and gave 1,089 state written EMS exams.

Program staff provided technical assistance in several areas: provider licensing and its quality management elements, coordinator responsibility as outlined in the new *EMS Education and Training Manual*, and public awareness programs where we distributed more than 15,000 Ready Teddy coloring books.

Other activities during FY 93 included updating the Public Health Region 8 disaster plan annex, supporting the regional critical incident stress debriefing team, and assisting municipalities and agencies with multiple casualty incident exercises.

#### PUBLIC HEALTH REGION 7, TYLER

During FY93, the staff of Public Health Region 7 EMS Program, in addition to routine licensure and certification activities, also:

- Assisted 13 providers in obtaining well over \$73,000 in the health department's local project grant funds; provided technical assistance to 27 first responder groups, 3 educational institutions, and 15 providers in applying for new grants; and obtained funding for training for one rural volunteer provider.

- Provided technical assistance to three Trauma System Areas in establishing Regional Advisory Councils and served on the initial steering committees of two of the councils.

- Provided technical assistance for upgrading two basic life support providers to advanced life support level and two advanced life support firms to mobile intensive care unit level.

- Assisted with the implementation of three First Responder Organizations, one EMS volunteer organization, one

rural professional service, and one specialized care provider.

- Developed and published a regional newsletter.

- Investigated 57 complaints.

- Conducted two EMS implementation feasibility studies, both in rural counties.

- Conducted two area-wide multiple-casualty incident workshops and evaluated four disaster exercises.

- Provided direction for the reorganizing and stabilizing of two rural volunteer EMS organizations.

- Represented the health department on two Texas Department of Public Safety Disaster District Committee exercises.

- Chaired the Public Health Regional Safety Committee.

- Prepared and wrote the Regional Disaster Plans and developed the Regional Catastrophic Hurricane Recovery plan.

#### PUBLIC HEALTH REGION 8, HARLINGEN

Although Public Health Region 8 staff members processed twice as many complaint investigations in FY93 as in FY92, activity continued in EMS system development. Training efforts include three emergency vehicle operation courses, four BTLS courses, three ACLS courses, one mass CPR training course, two mass casualty exercises, one emergency vehicle operation instructor course, one EMS coordinator course, and two START courses.

EMS program staff members' technical assistance included active involvement in forming two trauma regional advisory committees, locating an emergency roadway call box program, developing emergency services districts, upgrading international EMS response, and studying the efficacy of a regional helicopter EMS system.

# CERTIFICATION AND LICENSING STATISTICS BY PUBLIC HEALTH REGIONS

Public Health Region	Firms	Vehicles	Personnel	Educators
1	3 ALS 73 BLS 11 MICU 87 Total	279	814 EMT-P 293 EMT-I 3,517 EMT 1,894 ECA 6,518 Total	68 Coordinators 131 Instructors 263 Examiners
2	3 ALS 79 BLS 8 MICU 90 Total	209	479 EMT-P 179 EMT-I 1,923 EMT 595 ECA 3,176 Total	34 Coordinators 85 Instructors 146 Examiners
3	10 ALS 50 BLS 4 MICU 64 Total	208	475 EMT-P 263 EMT-I 1,759 EMT 650 ECA 3,147 Total	48 Coordinators 87 Instructors 143 Examiners
4	10 ALS 107 BLS 15 MICU 132 Total	574	1,692 EMT-P 941 EMT-I 6,032 EMT 2,622 ECA 11,287 Total	37 Coordinators 271 Instructors 308 Examiners
5	2 ALS 101 BLS 60 MICU 173 Total	600	2,910 EMT-P 467 EMT-I 6,376 EMT 1,697 ECA 11,450 Total	72 Coordinators 220 Instructors 287 Examiners
6	6 ALS 51 BLS 6 MICU 63 Total	267	655 EMT-P 260 EMT-I 2,043 EMT 442 ECA 3,400 Total	41 Coordinators 123 Instructors 109 Examiners
7	3 ALS 39 BLS 11 MICU 53 Total	207	622 EMT-P 491 EMT-I 2,066 EMT 548 ECA 3,727 Total	34 Coordinators 93 Instructors 92 Examiners
8	12 ALS 51 BLS 15 MICU 78 Total	215	551 EMT-P 237 EMT-I 1,311 EMT 669 ECA 2,768 Total	35 Coordinators 124 Instructors 116 Examiners
Out of State			134 EMT-P 30 EMT-I 272 EMT 38 ECA 474 Total	3 Coordinators 3 Instructors 6 Examiners
Statewide Totals	59 ALS 551 BLS 130 MICU 740 Total	2,569	8,333 EMT-P 3,163 EMT-I 25,309 EMT 9,155 ECA 45,960 Total	372 Coordinators 1,137 Instructors 1,470 Examiners

## INVESTIGATIONS PROGRAM

The Investigations Program's chief investigator initiated 251 investigations of complaints in FY93. Ninety-seven complaints were cleared through investigation, and a total of 239 cases were closed in FY93.

EMS personnel requested 46 hearings, and the health department conducted 29 hearings. Twenty-two hearings upheld the health department's recommended disciplinary action.

Of disciplinary actions in FY93, these were taken:

- 41 certificants suspended or decertified
- 4 provider licenses revoked
- 13 applications for certification denied
- 18 emergency suspensions of certification
- 45 probations of certification
- 12 administrative penalties

Approximately 60 investigations remained pending at the end of FY93.

Typical complaints investigated by this program in FY93 included:

- failure to follow EMS standards
- staffing violations
- forgery of skills sheets
- failure to list convictions on certification application
- failure to provide care
- lack of proper equipment
- practice beyond the scope of

EMS certification

- jeopardizing patient safety and health
- abandonment
- failure to have medical direction
- providing care beyond the EMS certification level

# THE EMS SYSTEMS DEVELOPMENT BRANCH

The EMS Systems Development Branch tries to look beyond traditional boundaries and searches for innovative solutions. The "Yes..we can" ideal prevails in the branch.

An Assistant EMS Division Director manages the Systems Development Branch and its three programs: Disaster Preparedness and Response program, System Development Program, and EMS For Children program.

The branch provides support to the Texas EMS Advisory Council and coordinates the State EMS Plan, rule drafts and revisions, and the EMS Management Academy.

In the last year, staff helped revise 10 existing rules and draft 3 new rules for the rulemaking process. EMS rules, trauma rules, TEMSAC rules, and Board of Medical Examiner medical director rules were consolidated into one document available at no cost to the public.

The two-year-old EMS Management Academy pools resources from the Division and from the EMS community to design and deliver educational programs related to EMS management. This past year, the academy focused on grant funding and quality improvement. The future will include risk management, billing for services, and a 40-hour supervisory leadership school.

## THE SYSTEM DEVELOPMENT PROGRAM

The EMS System Development program encompasses four areas: Grants Management, the Mobile Training Unit, EMS Communications, and Management Assistance. The goal of these areas together is to help providers offer high quality care and manage their systems in a more effectively and efficiently.

## THE MOBILE TRAINING UNIT

The System Development Program put an EMS classroom on wheels in FY93. The mobile training unit, an innovative, cooperative venture sponsored by the Texas Department of Health and private industry, comes fully-equipped with a paramedic/instructor and more than \$54,000 in donated equipment from EMS suppliers across the nation.

The mission of the MTU is simple: to provide continuing education to areas of the state that would normally have no access to the training. In addition, the instructor will train instructors in each location so that the enthusiasm for education is not lost. The MTU training classes began in FY94, but in FY93, the staff polled every EMS provider in the state about local education needs and capabilities.

## LOCAL PROJECTS

The Local Projects Grants program awarded \$522,000 in FY93 to 77 Texas EMS groups.

The 73rd Legislature allocated \$1.5 million for local EMS grants for FY94

and FY95—an increase that will substantially improve EMS in Texas.

The number of requests for application packets soared to an all time high for FY94 funding—more than 1,000. Of these, the Bureau received 223 applications requesting a total of \$3.64 million by August 31, 1993. Topping the list were requests for ambulances or upgrades of monitoring capabilities.

In addition to the Local Projects funding, the EMS Division received an additional \$150,000 in federal block grant money to provide EMS specialty training across the state. This money was augmented with \$50,000 in unspent funds to provide trauma training.

The EMS Local Projects activity and the EMS Management Academy designed a grantwriting course that taught more than 200 EMS providers, managers, and allied healthcare professionals how to ask for money from alternative sources.

## COMMUNICATIONS

Standardizing emergency medical dispatch in Texas is the goal of the program's communications unit. Part of this work includes designing a communications blueprint for communications centers which includes all aspects of communications. Communication system assessments were completed last year in towns in Regions 4 and 8.

The communication program and the disaster response program worked together to develop communications links for use in the event of disaster. The link includes

a plan to use existing amateur radio networks during disasters.

## MANAGEMENT ASSISTANCE

This area of the System Development developed a way to make reimbursement more effective by working with Medicare. The staff organized two Medicare workshops.

To allow providers to get answers to the questions that effect the, the staff maintains a library of articles for providers to access via computer modem on the Texas State EMS BBS. In addition, staff writes management guides on critical issues in EMS to help supervisors and managers.



## THE DISASTER PREPAREDNESS AND RESPONSE PROGRAM

The Disaster Response Program protects the citizens of Texas by helping them prepare for medical emergencies and disasters. The program has three parts: Emergency Management Assistance, the Radiological Protection Program, and Radiological Instrument Maintenance and Calibration.

During FY93, the Emergency Management Assistance Program developed the capability to operate a health and medical services emergency support center out of Austin's central office, giving the health department an Emergency Operations Support Center. Texas Department of Health also developed Hurricane Evacuation Guidelines and distributed the publication to all EMS providers along the Texas coast.

In FY93, local EMS, hospital, fire, and emergency management personnel received 15,534 contact hours of instruction. And 14 Texas communities received assistance with planning, staging, and evaluating multi-casualty incident exercises, and many others planned their own exercises using the program's informative MCI Guidelines publication. These exercises allow Texas communities to evaluate the effectiveness of their plans, exercise their response skills under realistic conditions, and improve both daily emergency response and disaster operations.

The Radiological Protection Program provides a consulting and assistance service to local communities by visiting 43 counties during the past year, developing plans and standard operating procedures, and assessing

training and instrument needs.

The Texas Radiological Instrument Maintenance and Calibration Program, or RadeF, manages the distribution and repair of a pool of 65,000 radiation detection instruments. Again this year, the Federal Emergency Management Agency identified RadeF as one of the best-run maintenance facilities in the country.

A total of 30,245 instruments were serviced by RadeF during the past year. And RadeF exceeded its only production goal by 40 percent this year, with production costs per instrument lowest in the nation.

EMS and other members of the emergency community responded to about 300 radioactive materials incidents in Texas during 1992, and an estimated similar number in 1993.



PHOTOGRAPH BY  
GARY DON ABERNATHY

## EMS FOR CHILDREN PROGRAM

EMS for Children ended its second fiscal year last September with several successes to celebrate. Legislation passed during this session establishes the EMS for Children program in the Bureau of Emergency Management and creates a seven-member advisory committee of specialists that advises the department on the emergency medical needs of children. The committee also recommends rules changes concerning EMSC to the Board of Health.

The Prehospital Provider's Pediatric Course reached more than 1,250 providers in 40 different classrooms. Another 1,350 prehospital and hospital personnel received training in the recognition and treatment of pediatric emergencies. Those 48 classes included a number of sessions taught in rural areas of the state.

KidCare, an interactive software program developed with Scott & White Memorial Hospital, helps providers learn how to evaluate and treat pediatric emergencies. The program can be used by basic or advanced level providers and PPPC instructors and graduates.

During the year, EMSC staff reviewed prehospital pediatric data from two urban providers. The resulting report, *EMSC Epidemiological Report*, identifies major injuries and illnesses affecting children transported by ambulance. During the study, the staff discovered many challenges in analyzing the prehospital data which they will use for future studies. Staff also produced a report, *Pediatric Mortality*, using 1991 data from the Bureau of Vital Statistics. The graphs and charts depict causes of death by

age, race and sex and will help focus injury prevention efforts by Texas EMS.

Increasingly, EMS is taking a role in injury prevention; EMSC takes a lead role in injury prevention for children. For example, over the last five years in Texas, 399 children under the age of 14 were killed by guns. In response to this, EMSC adapted a brochure outlining the steps parents should take to prevent childhood deaths by firearms. More than 150,000 of these brochures will be distributed by the end of the year.

The program also developed a presentation showing how EMS can help develop local injury prevention programs. Examples include working with city and county officials to plan play areas or to identify dangerous areas and by giving presentations on safety to schools.

## SEXUAL ASSAULT PREVENTION AND CRISIS SERVICES

The Sexual Assault Prevention and Crisis Services Program funded 51 programs in FY93—more programs than ever in the history of the services. More than 20,000 sexual assault survivors in 54 counties were provided crisis intervention, hospital, and/or court accompaniment and advocacy services by these programs. Nearly 500,000 citizens—lay and professional—were participants in public education programs.

The topics for FY93 presented to various groups throughout the state ranged from the most basic "What is Sexual Assault?" to "Sexual Exploitation of Therapists" and "Ritualistic Abuse of Children".

Laws were changed during the year to reflect the changing tide of public opinion: marital rape was eliminated as an exception in the law books and provided spouses with first class citizenship in the penal code. Also legislatively successful was the elimination of the so-called promiscuity law that allowed the past sexual history of a victim to be presented in court if the victim was between the ages of 14 and 16. Gang rape—sexual assault by more than one person—is now an aggravated sexual assault that carries a higher penalty. Apartment security, requiring landlords to install keyless deadbolt locks at the tenant's request, and therapist exploitation, which prohibit therapists from having a sexual relationship with a

client until 2 years after the patient-therapist relationship has been severed, also passed.

A new class that will "train the trainers" for adult sexual assault evidence collection examiners will be held in January 1994 and will be the first of its kind in the nation. The first sexual assault nurse examiner training program began in Texas in Amarillo. Also committed to for the coming year is a series of law enforcement training sessions that will target eight regions.

## PUBLIC INFORMATION AND EDUCATION PROGRAM

The staff of the Public Information and Education Program promotes emergency medical services and injury prevention to the public, to Texas EMS, and to local and regional leaders in five ways:

- *Texas EMS Magazine*
- Texas EMS Conference
- Texas Critical Incident Stress Management Network
- Ready Teddy Child Injury Prevention and EMS Awareness Program
- Texas EMS Week

Color covers and more educational articles contributed to the increase in paid subscriptions to *Texas EMS Magazine* in FY93—975 new subscriptions and 612 renewals. An expanded editorial board that includes local EMS providers, educators, and medical directors and program staff wrote and reviewed 50 feature articles.

Program staff editors launched the 8-page *Trauma Developments* newsletter in FY93 in the March and June issue of *Texas EMS Magazine* with its own design unique from the monthly publication.

During this fiscal year, program staff completed work on Texas EMS Conference '92 held in November, 1992, and completed most of the planning on Texas EMS Conference '93, planned for November, 1993. More than 1,200 people attended 1992's annual educational conference, and after the closing session Texas Department of Health officials dedicated the department's Texas EMS Monument, which was paid for from conference proceeds and donations.

Program staff organized 24 critical incident stress debriefings for local EMS

in FY93, and participated in seven. The Texas CISM Network Advisory Committee approved guidelines for critical incident stress management trainers, and the Texas network received approval from the International Foundation for Critical Incident Stress to use the foundation's forthcoming curriculum in Texas CISM classes. Program staff made 24 CISM presentations at local meetings and regional conferences.

The Texas Department of Transportation-funded Ready Teddy program put mascot costumes in each public health region EMS office in FY93. In addition, approximately 35 local EMS organizations have purchased Ready Teddy costumes. In this third year of the Ready Teddy Child Injury Prevention and EMS Awareness Program, the public information and education program loaned Ready Teddy costumes to 42 communities where the bear medic visited more than 50,000 children. Approximately 314,000 Ready Teddy coloring books were sent to local EMS organizations, hospitals, health organizations, and public health region offices.

In addition, program staff members distributed 1,500 EMS Week packets to local EMS and public health region offices; wrote eight news releases; managed the development of six handouts for trauma awareness, critical incident stress, and EMS awareness; wrote a book chapter on public information and education for EMS; wrote a slide show script for Texas EMS Advisory Council's public information and education committee; and wrote and edited the Bureau's 8-page monthly employee newsletter.



PHOTOGRAPH BY  
LISA CARNLEY

## TEDDY BEARS AND PATIENT CARE AT LAMPASAS EMS

At Lampasas EMS, public education is a warm, fuzzy bear that rides along on every call. While the bear doesn't do much in the way of physical care, it brings something else to the call: emotional support. Medics give a stuffed animal to patients—young and old—anytime they must be transported. The service also uses the animals as patients when they give tours of the ambulance to children.

"To start out with, I was just using the teddy bear as a patient," says Lanell Scarborough, co-director of Lampasas EMS. "But then I saw how kids related to it ... so we (started) carrying bears on the ambulance."

The teddy bear program began in 1988 with an appeal to the community for donations of any kind of clean, stuffed animal. The first year netted 300 animals; this year's drive brought in about 8,000. Animals that EMS doesn't use are sent to the fire department for its annual holiday toy drive.

The teddy bear program makes up just one part of the public education program at Lampasas EMS, a county-owned service that makes about 175 calls a month. Co-directors Scarborough and Kathy Harrell decided several years ago that public education forms a crucial part of total patient care.

The service participates in EMS Week, sponsors CPR classes and ambulance tours, coordinates simulated DWI crashes for the high school, distributes EMS literature, and sponsors safety classes for children.

"We teach them ... how to call for an ambulance and what to tell us,"

says Scarborough. "We teach them to stop, look and listen (at streets), bicycle safety, and (kitchen) safety.

"If one person learns, that's one person I don't have to try to go out and help later."

Another component of education involves educating the public about what EMS does and the Bureau helps that effort by providing free brochures and posters. Telling the community about EMS helps the community and the service.

"If you've never utilized EMS, how would you know (what it's about)?" says Scarborough. "The more the public knows ... the more support we have, and the better we are going to be able to treat them."

## TRAUMA PROGRAM

Since the passage of Texas trauma legislation in 1989, the Bureau of Emergency Management has worked to develop a statewide trauma system.

Early in FY93, Texas Department of Health received a federal trauma grant for \$202,000 for regional trauma system planning and a statewide trauma awareness campaign. The Trauma Program funded five of the state's 22 trauma service areas and worked with The University of Texas-Houston Health Science Center to develop public education materials. *Red Alert: Accidents Don't Just Happen* features Dr. "Red" Duke and urges the public to buckle up, lock up, sober up, and talk up on posters, bumper stickers, and brochures.

Ten Regional Advisory Committees organized in FY93 and received official sanction from Texas Department of Health. Of the remaining 12 TSAs, all have contacted the Trauma Program and nine have held planning meetings. Seven of the ten recognized RACs have working committees to address components of their regional trauma system plans.

The Trauma Program, working with the Trauma Technical Advisory Committee and the Board of Health, put rules and procedures in place to designate General, Major, and Comprehensive Trauma Facilities. The program received two applications for trauma facility designation; eleven hospitals requested applications.

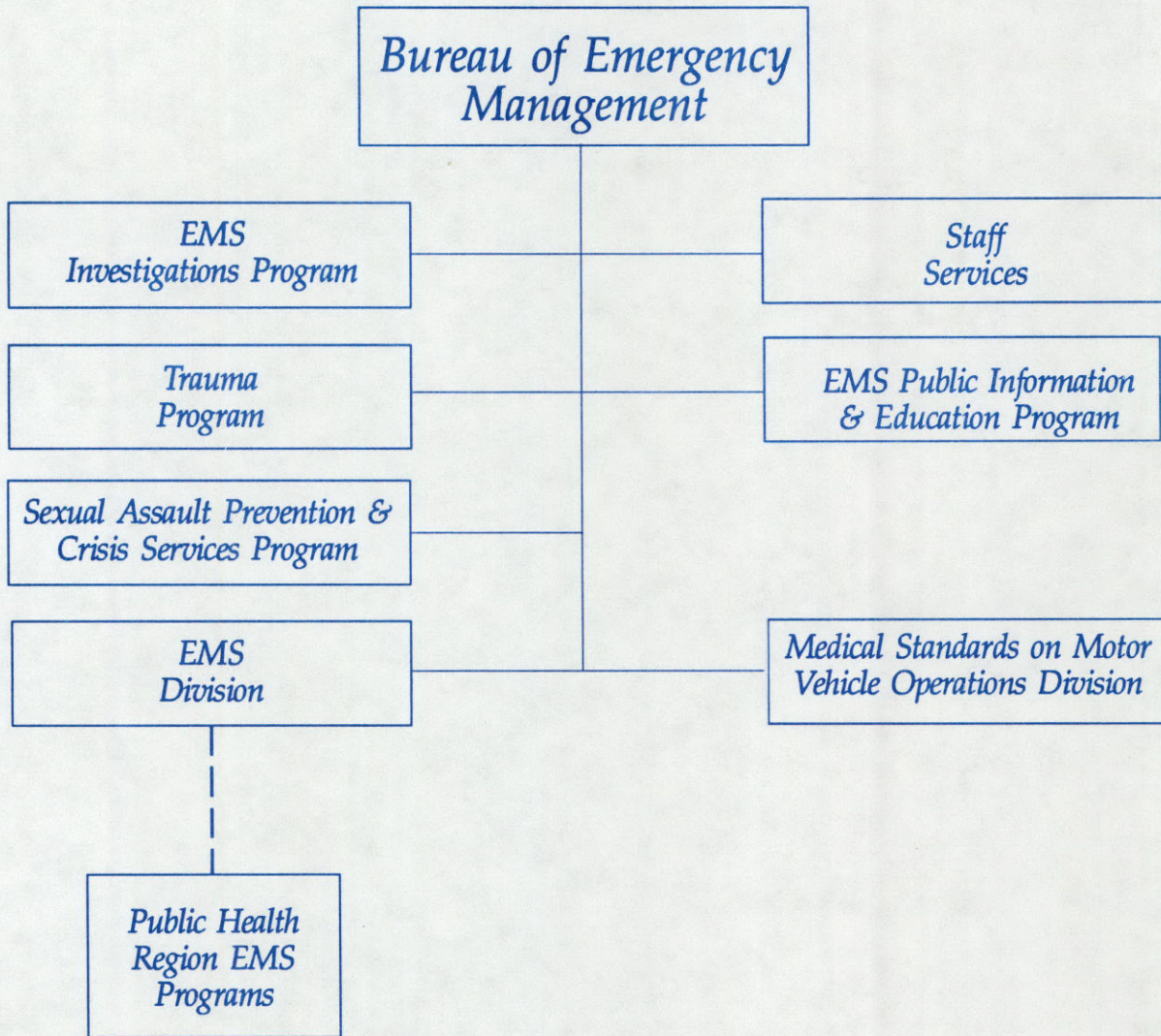
The Trauma Technical Advisory

Committee's adhoc committee on basic trauma facility designation developed criteria, processes, and documents to designate Basic Trauma Facilities, those smaller hospitals in generally rural areas of the state.

The Trauma Registry moved into the Bureau of Epidemiology during FY93, and Registry Program and Trauma Program staff continue to work together. The Trauma Program developed a list of trauma system indicators this year and will work with the Registry Program over the next year to collect the needed data.

A quarterly newsletter, *Trauma Developments*, began this year as an insert in *Texas EMS Magazine*. The 8-page newsletter keeps RACs, TSA contacts, hospitals, and trauma coordinators informed on regional development and Trauma Program activity and assistance.





*The Bureau of Emergency Management employs 69 people, the Public Health Region EMS Programs employ 39.*



TEXAS DEPARTMENT OF HEALTH  
BUREAU OF EMERGENCY MANAGEMENT  
1100 WEST 49TH STREET  
AUSTIN, TEXAS 78756-3199  
(512)834-6740

*Cover Photograph by Mary J. Rapes*

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# Mobile Training Unit Debuts in Menard with 22 Students

*Mobile Training Unit: An innovative approach to EMS education in Texas offering increased training in rural areas, low cost continuing education, specialty training requested by local EMS, and improved patient care.*

By  
Alana S. Mallard

MENARD, TEXAS, BECAME THE FIRST COMMUNITY this fall to use the Bureau of Emergency Management's new Mobile Training Unit. A van filled with training and ambulance equipment. Twenty-two medics and nurses from San Angelo, Junction, Brady, and Menard completed a fundamental and advanced pediatric care training course held at Menard EMS on September 3, 4, and 5.

The Mobile Training Unit provides accessible training in emergency medical care to rural areas of the state by carrying supplies and equipment needed for training sessions. Annie Andrus, a paramedic and certified course coordinator with the EMS System Development Program of the Bureau of Emergency Management, staffs the Mobile Training Unit. Andrus directed the session taught in Menard.

On the first two-week outing from Aus-



*Paramedic course coordinator Annie Andrus carries ambulance equipment, training equipment, and audiovisual equipment to rural locations in the Mobile Training Unit to provide free EMS training from Texas Department of Health.*

Andrus and the Mobile Training Unit traveled from Menard to Fort Stockton for a trauma assessment class and on to Iraan for another pediatric training session. Dell City, Hueco, Terlingua, Presidio, and Marathon hosted Mobile Training Unit classes in October. In December Andrus will teach classes in several locations in Public Health Region 8, the area west and south of San Antonio.

"We work with local EMS organizations and training coordinators to present the types of training the EMS personnel need," Andrus said.

To request training or find out when the Mobile Training Unit travels to your area, call Andrus at (512) 834-6740, ext. 2384, or for more information write Texas Department of Health, Bureau of Emergency Management, System Development Program, 1100 W. 49th Street, Austin, Texas 78756.

Editor Alana Mallard experienced *deja vu* as she wrote about Austin TDH employees training medics across the state: TDH EMS trainers based in Austin conducted 307 emergency care attendant and emergency medical technician classes from August, 1968, through September, 1974.

### *Mobile Training Unit Sponsors*

#### *Advanced Life Support Products*

*Laerdal Medical Corporation*

*Hartwell Medical*

*Seaberg*

*Bird/Life Design*

*Dessine*

*U.S. Clinical Labs*

*Southern Uniforms, Inc.*

*Physio Control*

*Zoll Medical Corporation*

*Medical Plastics Laboratories*

*Mosby Lifeline*

*Brady*

*American Academy of Orthopaedic Surgeons*

*The Bureau of Emergency*

*Management thanks these organizations*

*for their generous contributions of training equipment and materials.*

*Corporations donated equipment worth nearly \$55,000 for the Mobile Training Unit, including two monitors and two defibrillators donated by Physio Control.*



# Mobile Training Unit—Education on the Move

## Sample Course Descriptions

### Infectious Disease Control 6 hours

Teaches EMS responders how to protect themselves and others from communicable diseases. Gives EMS services the information they need to develop and implement plans to comply with OSHA regulations on bloodborne pathogens. Includes ambulance decontamination.

### Pediatric Prehospital Provider 16 hours

### Pediatric Prehospital Provider Instructor 4 hours

Teaches all aspects of prehospital medical care of children, including assessment, medical emergencies, shock, trauma, child abuse, critical incident stress, sudden infant death syndrome, neonatal resuscitation. Hands-on skills stations.

### Recognizing and Identifying Hazardous Materials 8 hours

Teaches students to assist in the mitigation of hazmat incidents. Focuses on basic skills needed by EMS to meet state and federal hazmat training requirements. Overview and drill of Incident Command System.

### START—Simple Triage and Rapid Treatment 8 hours

Trains students in multiple casualty field triage. Recommended for all emergency responders. Includes overview and drill of Incident Command System.

### Trauma Life Support 8 hours

Teaches responders the skills neces-

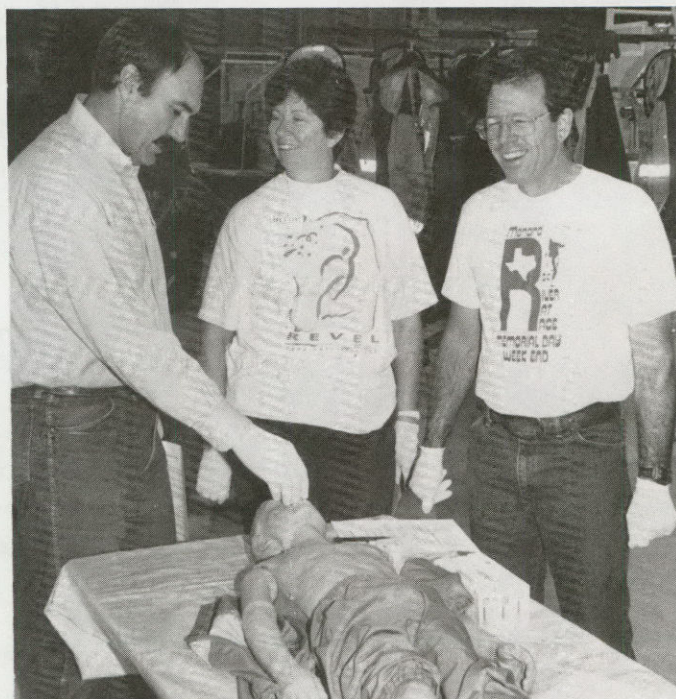
sary for rapid assessment, treatment, and packaging of the trauma victim. Offered in basic, advanced, and mixed levels. Includes hands-on skills practice.

Mobile Training Unit courses are open to all providers of patient care, including firefighters, law enforcement officers, and nurses.

Texas Department of Health approves these courses for EMS CE credit, and some courses have approval for CE credit from Texas Nurses Association, Texas Commission on Law Enforcement Officer Standards and Education, and Texas Commission on Fire Protection.

Contact the Bureau of Emergency Management to design the training needed in your area.

*Mike Watts of San Angelo Fire Department (left) and Janice and Robert Johnson of Kimble County EMS in Junction practiced pediatric emergency care procedures as part of the MTU session in Menard in September.*





# EMS for Children: *Holiday Safety*



*Safety all year long is Dr. Paul Pepe's message with daughter Lauren.*

By

Rhonda Blackmore, Sam Wilson,  
Rebecca Prichard, and Lisa Heino

*The staff of the EMS for Children program encourages local EMS providers to spread holiday safety tips to parents and kids throughout their service areas. Take this information to the newspaper, put it in your service's newsletter, give it to the local schools, and ask local DJs to mention it on the air.*

Many holiday plants can produce disastrous results if eaten by kids.

***Poinsettias*** Causes burning in the mouth and throat, vomiting, diarrhea, and intestinal irritation. All parts of the plant are poisonous.

***Holly*** Causes nausea, vomiting, diarrhea, and stupor. Berries are poisonous.

***Mistletoe*** Causes vomiting, diarrhea, slowed pulse, and circulatory collapse. All parts of the plant are poisonous and can cause death.

Christmas trees are great to look at but can cause injuries to children.

- Glass ornaments can puncture the tiny feet of little ones who accidentally drop the decorations.
- Secure Christmas trees in a properly-sized container. Caution against overloading the tree with decorations as the tree may lean to one side, making it easily pulled down onto the tops of little heads.
- Prevent fire hazards from a dried out Christmas tree by watering the tree daily.
- Remember, do not overload extension cords or electrical outlets. Do not run electrical cords beneath rugs or carpets. Also, do not coil electrical cords.
- Electrical cords can be tripped over or chewed on by the folks who should be

*Clip these pages and save them for next year.*

enjoying the holidays. Place the tree so cords do not cross walkways.

- Gifts are to be enjoyed but safety should be the first priority.
- Give the little owner of a new tricycle and bicycle a helmet and knee pads.
- Likewise, when inline skates, rollerskates, and skateboards are given, the new owners should also receive helmets, knee and elbow pads, and wrist guards.
- Beware of toys with numerous small parts that could be swallowed or cause airway obstruction. Follow the recommended age guides listed on most toys.

Travel during the holiday season:

**Seat Belts** Use seat belts or car safety seats during the visits to grandma's house. Regardless of how short the ride, take the time to buckle up children. Never hold a child in your lap or allow a child to ride unrestrained.

**Drinking and Driving** Do not drink and drive. Be a responsible host or hostess by asking for designated drivers and serving them nonalcoholic beverages. Provide nonalcoholic beverages for all guests.

**Weather Conditions** Be aware of holiday traffic patterns and changing weather conditions that impair driving.

**Leave Early** Avoid the last-minute rush by planning your trip and leave a few minutes early.

Additional home safety tips

1. Visiting family members and friends may not have child-resistant caps on medicine bottles or personal hygiene products. Therefore, store their belongings out of the reach of children.
2. Post the number of your local poison control center, along with all other emergency numbers, by each telephone. Keep available a bottle of syrup of ipecac. Administer only if instructed by the poison control center or your doctor.
3. Do not use cooking appliances to warm the house.
4. Make sure that fireplace screens are in place and all flammable products are a safe distance from the fire. Remove wrapping paper and boxes immediately.
5. Have the chimney cleaned and inspected once a year by a professional chimney cleaner or your local fire department.
6. Insure the proper ventilation of all gas-powered appliances and furnaces.
7. While cooking that holiday dinner, turn the handles of pans to the back of the stove, out of the reach of small hands. Eliminate dangling cords from appliances.
8. Remember to refrigerate food immediately after dinner. Bacteria grows fast in warm foods. Therefore, it is essential to chill the food as soon as possible. Reheat leftovers thoroughly before eating.

*We want the people in your community—and you—to have a safe and happy holiday Season!*

EMS-C staff members Rhonda S. Blackmore, RN, EMT-P, program administrator; Rebecca Prichard, BS, injury prevention specialist; Sam Wilson, EMT-P, education coordinator; and Lisa C. Heino, pediatric epidemiologist, wish a safe and healthy holiday season to all.

# Did you read... By Paul Tabor, EMT-P

Almost one-half of all pedestrian fatalities occurred on Friday, Saturday, or Sunday.

More than 1.8 million drivers were arrested in 1991 for driving under the influence of alcohol or narcotics. This is an arrest rate of 1 for every 92 licensed drivers in the United States.

**T**he National Highway Safety Traffic Administration reports that in 1992 more than one-third of all children between the ages of 5 and 9 years who were killed in traffic crashes were pedestrians. Almost one-fourth of the traffic fatalities under age 16 were pedestrians. Almost half of the 762 pedestrian fatalities under 16 years of age were killed in crashes that occurred between 4:00 pm and 8:00 pm.

Older pedestrians (ages 70+) accounted for 18 percent of all pedestrian fatalities in 1992, and the death rate for this group, both males and females, was higher than for any other group.

Pedestrian fatalities accounted for 87 percent of all nonoccupant fatalities in 1992. Pedalcyclists accounted for 11 percent, and the remaining 2 percent were skateboard riders, roller skaters, etc.

Almost one-half of all pedestrian fatalities occurred on Friday, Saturday, or Sunday: 17 percent, 19 percent, and 13 percent, respectively.

*Traffic Safety Facts 1992 - Pedestrians, US Department of Transportation, National Highway Traffic Safety Administration, National Center for Statistics & Analysis, Research & Development, 400 Seventh Street, SW, Washington, DC 20590.*

**M**ore than 1.8 million drivers were arrested in 1991 for driving under the influence of alcohol or narcotics. This is an arrest rate of 1 for every 92 licensed drivers in the United States. About 2 in every 5 Americans will be involved in an alcohol-related crash at some time in their lives.

More than one-third of all pedestrians 16 years of age or older killed in traffic crashes in 1992 were intoxicated. The driver, pedestrian, or both were intoxicated in 40.6 percent of all fatal pedestrian crashes in 1992. The intoxication rate for pedestrians was more than twice the rate for drivers, 32.5 percent vs. 14.4 percent.

Safety belts were used by only about 13.7 percent of the fatally injured intoxicated drivers, compared to 22.7 percent of fatally injured impaired drivers and 39.1 percent of fatally injured sober drivers.

All states and the District of Columbia now have 21-year-old minimum drinking age laws. NHTSA estimates that these laws have reduced traffic fatalities involving drivers 18-20 years old by 13 percent and have saved an estimated 13,152 lives since 1975.

*Traffic Safety Facts 1992 - Alcohol, US Department of Transportation, National Highway Traffic Safety Administration, National Center for Statistics & Analysis, Research & Development, 400 Seventh Street, SW, Washington, DC 20590.*

**I**n 1992, 2,394 motorcyclists were killed in traffic crashes in the U.S.—15 percent fewer than the fatalities reported in 1991. Motorcycles make up 2 percent of all registered vehicles in the U.S. Motorcyclists were involved in only 1 percent of all police-reported traffic crashes in 1992, but they accounted for 7 percent of all occupant fatalities and 6 percent of total traffic fatalities. Per vehicle mile traveled, motorcyclists are about 20 times as likely to die in

Citations used with permission.



a motor vehicle traffic crash as passenger car occupants. Per registered vehicle, the fatality rate for motorcyclists is 4 times the fatality rate for passenger car occupants.

For 76 percent of the motorcycle operators involved in fatal crashes in 1992, police reported one or more errors or other factors related to the operator's behavior. The factor most often noted was "driving too fast for conditions or exceeding the speed limit." Nearly one out of four motorcycle operators involved in a fatal crash in 1992 was operating the vehicle with an invalid license at the time of the collision. Drivers of passenger vehicles involved in fatal crashes were only half as likely to be operating with an invalid license. Motorcycle operators involved in fatal traffic crashes were twice as likely as passenger vehicle drivers to have a previous license suspension or revocation.

*Traffic Safety Facts 1992 - Motorcycles, US Department of Transportation, National Highway Traffic Safety Administration, National Center for Statistics & Analysis, Research & Development, 400 Seventh Street, SW, Washington, DC 20590.*

**S**udden Infant Death Syndrome support systems are popping up nationwide, especially among EMS providers. In 1990, California's state senate mandated SIDS training for EMTs, paramedics, firefighters, and police officers. The Berkeley Fire Department has instituted three training sessions including SIDS, grief support, and critical incident stress debriefing. Participants learn what SIDS is, how to recognize it in the field, and how to sensitively handle a SIDS death with family members. Specific personnel are chosen as debriefers (along with outside counselors) to form support systems so

responders can deal with critical incident stress by talking about their experiences and learning symptoms to look for in the future.

For more information about SIDS and how to get help in your community, call 800/369-SIDS.

*Emergency, "Understanding SIDS," p. 10, September 1993. Reprinted with permission of EMERGENCY magazine. To become a regular subscriber to EMERGENCY, phone 1-800-854-6449.*

**A**ccidental injury is the number one killer of children in the U.S. today. Yet these injuries are preventable, and sadly, most occur because parents and caregivers are unaware of the proper measures to take. That's why the National Safe Kids Campaign was developed. As an EMS professional, you can help by either volunteering for your local or state coalition or starting your own. To find out how, contact the National Safe Kids Campaign, 111 Michigan Ave. N.W., Washington, DC, 20010-2970; 202/939-4993 or fax 202/939-4838.

*Emergency, "Preventing Childhood Injury," p. 10, September 1993. Reprinted with permission of EMERGENCY magazine. To become a regular subscriber to EMERGENCY, phone 1-800-854-6449.*

**W**hen EMT Fred Hawkins heard about kids saving lives just from watching rescue programs on television, he realized the potential they have to handle an emergency. In 1992, Hawkins started the BAT (Basic Aid Training) program at Alamosa Park Elementary, in Oceanside California, teaching a classroom of fourth-graders CPR and certifying them, too. Hawkins obtained a grant and, with assistance from the Red Cross, was able to

In 1992, 2,394 motorcyclists were killed in traffic crashes in the U.S. Motorcyclists are about 20 times as likely to die in a motor vehicle traffic crash as passenger car occupants

After Fred Hawkins heard about kids saving lives just from watching rescue programs on television he started the Basic Aid Training program to teach fourth-graders CPR.

Fourteen-year-old Angel Weaver took a Safe Sitter class and only a few months later saved the life of a 4-year-old girl she babysat. Safe Sitter is a two-day program

More Americans died in 1991 than ever before, but life expectancy at birth rose to a record 75.5 years, the government's record-keepers have reported. Heart disease, cancer, and stroke remain the three big killers.

teach all third through fifth-graders at the school what do in an emergency.

Third-graders are learning basic first aid, fire safety, rescue breathing, and poison and electrical shock awareness. Fourth-graders are being certified for adult, child, and infant CPR. They receive 12 hours of training and are learning the newest national CPR protocols. It is the same course that is taught to adults, but with more time and direct supervision involved. Fifth-graders are being recertified for CPR, in addition to learning first aid for bleeding, sudden illness, and diabetic emergencies. Their 18-hour program is also based on adult standards.

For more information on the BAT program, contact Fred Hawkins, Alamosa Park Elementary School, 5130 Alamosa Park Drive, Oceanside, CA 92057; 619/940-0700.

*Emergency, "Basic Aid Training for Kids," Julie Fadda, p. 12, September 1993. Reprinted with permission of EMERGENCY magazine. To become a regular subscriber to EMERGENCY, phone 1-800-854-6449.*

**F**ourteen-year-old Angel Weaver took a Safe Sitter class at Cononsburg, Pennsylvania, General Hospital and only a few months later put her knowledge to use and saved the life of a 4-year-old girl she babysat. The girl was chewing gum, choked, and fell to the floor. Angel pulled her to the couch and did the Heimlich Maneuver, saving the girl's life. Angel was named the 1993 Safe Sitter of the Year

Safe Sitter is a two-day program with approximately 400 training sites nationwide. In 1992 it graduated 15,000 11- to 13-year-olds. Parents can feel better knowing their children are in the hands of a sitter who can react properly in an emergency situation.

For more information about the program, contact the Safe Sitter National Headquarters, 1500 N. Ritter Ave., Indianapolis, IN 46219; 800/255-4089.

*Emergency, "Saved by an Angel," p. 12, September 1993. Reprinted with permission of EMERGENCY magazine. To become a regular subscriber to EMERGENCY, phone 1-800-854-6449.*

**M**embers of Tarrant County 911 have created a video for kids with life saving dinosaurs. In "Call 911," these acting dinos teach children how to decide if an emergency exists, how to dial 911, what information to tell the dispatcher, and the importance of staying calm and talking to the dispatcher until help arrives. An educational video for adults, titled "911: It's There for You," is also available. Contact Tarrant County 911, 500 Throckmorton, Ste. 2706, Fort Worth, TX 76102.

*Emergency, "News Around the Nation," compiled by Julie Fadda, p. 14, September 1993. Reprinted with permission of EMERGENCY magazine. To become a regular subscriber to EMERGENCY, phone 1-800-854-6449.*

**H**elp is available for elected officials in small towns and rural areas who are required by federal law to set up a system for managing hazardous materials accidents and training emergency response personnel to contain and clean up contaminated sites. *Accidents Will Happen*, published by the National Association of Towns and Townships, can aid officials and businesses that make, use, or store hazmat materials formulate such emergency management systems. The package includes a guidebook, video, and user's guide that explain federal law, development steps, training techniques, case

studies, and how to use the Local Emergency Planning Committee to gain expertise and reduce costs. The book has been reviewed and approved by the EPA and OSHA as compliant with federal regulations.

Write or call the National Association of Towns and Townships, 1522 K St. NW, Ste. 600, Washington, DC 20005; 202/737-5200.

*Emergency, "News Around the Nation," compiled by Julie Fadda, p. 14, September 1993. Reprinted with permission of EMERGENCY magazine. To become a regular subscriber to EMERGENCY, phone 1-800-854-6449.*

**M**ore Americans died in 1991 than ever before, but life expectancy at birth rose to a record 75.5 years, the government's record-keepers have reported. Heart disease, cancer, and stroke remain the three big killers, claiming 64 percent of the 2,169,518 lives lost in 1991, the National Center for Health Statistics reported. Chronic obstructive pulmonary diseases, including bronchitis, asthma, and emphysema, overtook accidents as the fourth leading cause of death. That was due in part to an 8 percent drop in motor vehicle fatalities. Although the overall number of deaths broke a 1988 record, the center said the death rate actually was down because the population is growing.

The infant mortality rate of 8.9 deaths per 1,000 live births was a record low. Women currently are expected to outlive men by an average of 6.9 years. Life expectancy at birth was 78.9 years for women and 72 years for men.

*Austin American-Statesman, "1991 a record year for deaths in America," Christopher Connell, Associated Press, Thursday, September 2, 1993, p. A30.*

**E**very minute 300 million cells in your body die. They are immediately replaced by the division of living cells, so that the number of cells in your body remains constant throughout adulthood.

Heart attacks increase following holidays. Rates are 28 percent higher the day after Easter, 17 percent higher on July 5, and 16 percent higher on January 2. Also, men are 21 percent more likely to suffer a heart attack on their birthdays. Theory: holidays can provoke emotional stress and overindulgence in drinking and smoking.

A dead snake can still bite. The reflex response of a snake can trigger a bite and the release of poison up to an hour after a snake is killed, even if it has been decapitated.

The average man is wrapped in 20 square feet of skin and the average woman is wrapped in 17 square feet of skin.

*Communicator, EMS Region III, Eastern New Mexico EMS, "Did you know...?," page 18, July/August/September 1993.*

**T**he Management Information Center has released its *Guide for Investigation of a Line-of-Duty Death*, a new guide intended to assist fire departments in planning and preparing to conduct the investigation of a line-of-duty death. The same procedures are applicable to other situations that require a thorough investigation with a focus on occupational safety and health. Cost is \$14.95 for IAFC members, \$21.95 for non-members, pre-paid only. Check, money order, MasterCard or Visa are accepted.

To order, contact Lisa Smith, International Association of Fire Chiefs, 4025 Fair Ridge Dr., Fairfax, VA, 22033-2868, phone (703)273-0911, ext. 332; or FAX (703)273-9363.

*NAEMT News, April/May, 1993.*

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The Management Information Center has released its *Guide for Investigation of a Line-of-Duty Death*, a new guide intended to assist fire departments in planning and preparing to conduct the investigation of a line-of-duty death.

# Say good-night, 1993



ALANA S. MALLARD  
EDITOR  
TEXAS EMS MAGAZINE

The end of the year is an exciting time around the office for us:

- At press time our eighth annual Texas EMS Conference had everybody in the Bureau of Emergency Management jumping and moving to cover every single, teeny-tiny detail of a meeting two weeks away that involves 1,500 registrants, 85 faculty, and 200 exhibitor reps. By the time you read this, we will have had a wonderful five days in Fort Worth, and Dr. "Red" Duke's press conference will have alerted Texans to the fact that "accidents don't just happen" during the holidays.

- The first two weeks in November saw quarterly meetings in Austin of three of our statewide committees—EMS for Children Advisory Committee, Trauma Technical Advisory Committee, and Paramedic Certification Review Committee—and a public hearing on the proposed rules for certification, recertification, and continuing education. A standing-room-only crowd attended the 4-hour hearing.

- In mid-November we notified 85 EMS organizations from across the state of their successful requests for health department grant funding for training, equipment, ambulances, and public education. Bureau staff members reviewed 223 applications that asked for a total of \$3.64 million to improve local patient care.

- Besides writing, editing, and gathering photographs for this issue of *Texas EMS Magazine*, Bureau programs looked backward momentarily early in November to write their parts of our annual report, which you see between pages 18 and 19.

- You may have already read

about the folks in Public Health Region 7 who put together an 8-hour immunization workshop and trained 31 paramedics to conduct shot clinics in their 30 counties in November and December.

- Representatives from the 11 public health region EMS offices converged on Public Health Region 6 on November 17 to meet with The University of Texas-Houston Health Science Center folks and Houston physicians about revolutionary changes in EMS—using interactive TV to beam the monthly C.A.R.E. EMS continuing education programs throughout Texas and expanding C.A.R.E. to include continuing medical education for physicians.

And we know that everyone in EMS stays as busy as we do here in the Bureau of Emergency Management. You'll work harder than ever during the next month responding to trauma and medical calls—it's a fact of EMS life during the holiday season. We all thrive on busy, exciting activity or we'd go to another profession.

But take care of yourselves during the next month: go easy on the holiday food and festivities, don't make yourselves nuts over gift-giving, and keep your expectations for the holidays realistic. (Right, this is one Type A personality talking to a profession full of Type A personalities. We can obsess about New Year's Resolutions in the next issue.)

Have a happy holiday season and we'll see you in these pages next year. Two of our early 1994 projects will promote child passenger safety in February and EMS Week in May. ♦

# Texas EMS M a g a z i n e

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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) 834-6740.

**Ark-La-Tex Ambulance**, League City, Texas. Revocation of EMS provider license. EMS rule 157.11, failure to comply with provider licensure requirements.

**Arris, Randolph Clayton**, Temple, Texas. Denial of EMT certification. EMS rule 157.44 (b)(1), felony conviction.

**Bishop, Jason**, Yoakum, Texas. Twelve months probation of EMT certification through August 10, 1994. EMS rule 157.44, misdemeanor conviction.

**Bolden, Larry D.** Odessa, Texas. Twelve months probation of EMT-Paramedic certification through August 10, 1994. EMS rule 157.44, misdemeanor conviction.

**Canada, Michael E.**, Dumas, Texas. Twelve months probation of EMT certification through September 3, 1994. EMS rule 157.44 (b)(1), felony conviction.

\* **Carter, Lee**, Elgin, Texas. Nine months suspension of EMT certification through August 10, 1994. EMS rule 157.51 (a)(2)(A), failing to follow the EMS standards of care in the management of a patient.

**DelBello, Shawn M.**, Manvel, Texas. Twelve months probation of EMT certification through September 3, 1994. EMS rule 157.44 (b)(1), misdemeanor conviction. (*incorrectly reported as felony conviction in November issue—we regret the error*).

**Dupnik, Shelby J.**, Kenedy, Texas. Twelve months probation of EMT certification through June 14, 1994. EMS rule 157.44, misdemeanor conviction.

**Gobel, Donald Kevin**, Nacogdoches, Texas. Twelve months probation of EMT-Paramedic certification through September 3, 1994. EMS rule 157.44 (b)(1), felony conviction.

**Graham, Jerry L.**, Abilene, Texas. Twelve months probation of EMT certification through September 3, 1994. EMS rule 157.44 (b)(1), felony conviction.

**Harper Volunteer Fire Department**, Harper, Texas. Twelve months probation of provider license through January 1, 1994. Health and Safety Code Chapter 773.050, failure to staff EMS vehicle with at least two certified personnel.

**Heffley, Clete S.**, Clarendon, Texas. Six months probation of EMT certification through March 3, 1994. EMS rule 157.44 (b)(1), felony conviction.

\* **Hester, Anthony**, Houston, Texas. Emergency suspension of EMT-Paramedic certification. EMS rule 157.51 (a)(1), failure to pass skill test and retest.

**Holmes, Martin J.**, Lumberton, Texas. Twelve months probation of EMT certification through August 25, 1994. EMS rule 157.51 (a)(4)(I), obtaining certification by fraud, forgery, deception, misrepresentation, or subterfuge.

**Hopkins, Russell W.**, Van, Texas. Six months suspension of EMT-Paramedic certification through March 29, 1994. EMS rule 157.51 (2)(A), failure to follow EMS standards of care in management of a patient.

**Hubbard, Mitchell Z.**, Houston, Texas. Six months suspension of EMT certification through August 26, 1994. EMS rule 157.51 (a)(4)(K), perform medical acts beyond those permitted by medical director.

**Jones, David Bryan**, May, Texas. Revocation of EMT certification. EMS rule 157.51 (2)(I), misrepresenting EMS certification level.

**Jernigan, William J.**, Ranger, Texas. Six months suspension of EMT certification through February 10, 1994. EMS rule 157.51 (2)(O), attempting

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

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to obtain certification by fraud, forgery, deception, misrepresentation, or subterfuge.

\* **King, Myrth Kody**, Nacogdoches, Texas. Denial of certification. EMS rule 157.44 (b)(1), denial.

**Kolar, Steven L.**, Victoria, Texas. Twelve months probation of EMT-Paramedic certification through March 31, 1994. EMS rule 157.44, misdemeanor conviction while certified.

**LVN EMS Ambulance**, Deer Park, Texas. Administrative penalty of \$3,000. EMS rule 157.19, EMS provider license violation.

**LeBlanc, Dennis**, Beaumont, Texas. Twelve months probation of EMS-Paramedic certification through August 10, 1994. EMS rule 157.44, misdemeanor conviction.

**Leon, Angel G.**, Texas City, Texas. Emergency suspension of Emergency Care Attendant certification. EMS rule 157.51, failure of skills test and retest.

**Luckenbill, Jack E.**, Bryan, Texas. Suspension of EMT-Paramedic certification. EMS rule 157.51 (a)(4)(S), performing medical acts beyond those permitted by medical director.

\* **McCoy, Dennis M.**, Saint Jo, Texas. Eighteen months probation of EMT-Paramedic certification through May 12, 1995. EMS rule 157.51 (a)(2)(A), failing to follow the EMS standards of care in the management of a patient.

**Medi-Van Ambulance Inc.**, Corpus Christi, Texas. Administrative penalty of \$300. EMS rule 157.13 (c), failure to carry required equipment.

**Mission Critical Care**, Mission, Texas. Cancellation of provider license. EMS rule 157(c)(1)(R), failure to pay administrative penalty in full within the 30-day time limit.

**Nixon, Michael E.**, Monahans, Texas. Twelve months probation of EMT certification through August 10, 1994. EMS rule 157.44, misdemeanor conviction.

**Noble, Larry Ray**, Kerrville, Texas. Twelve months suspension of EMT-Paramedic certification through September 28, 1994. EMS rule 157.51 (a)(4)(I), obtaining certification by fraud, forgery, deception, or misrepresentation.

**Owen, David E.**, Brownsville, Texas. Suspension of EMT certification for one year through June 5, 1994. EMS rule 157.51(a)(4)(s), violating a rule or standard that would jeopardize the health or safety of a patient.

**Private Ambulance**, League City, Texas. Revocation of EMS provider license. EMS rule 157.11, failure to comply with provider licensure requirements.

**Rawlins, Ronald J.**, Plano, Texas. Suspension of EMT-Paramedic certification and downgrade to EMT. EMS rule 157.51(2)(A)(B), failure to follow EMS standards of care and failure to follow physician's protocol.

**Robles, Leon Fraiser**, Beaumont, Texas. Denial of EMT certification. EMS rule 157.44 (b)(1), felony conviction.

**Rudisaile, Joseph A.**, Godley, Texas. Twelve months probation of EMT certification through September 28, 1994. EMS rule 157.51, misdemeanor conviction.

**Ryals, Cynthia L.**, Kenedy, Texas. Twelve months probation of EMT certification through June 14, 1994. EMS rule 157.44, misdemeanor conviction.

**Sanders, James Ricky**, Corrigan, Texas. Suspension of EMT certification for one year through June 10, 1994. EMS rule 157.51(a)(2)(A), failing to follow the EMS standards of care in management of patient and/or (D), performing advanced level of treatment without medical direction or supervision.

**Sanders, Kerry M.**, Pampa, Texas. Twelve months probation of EMT certification through June 14, 1994. EMS rule 157.44, misdemeanor conviction.

**Schleiper, Mark Alan**, Alamo, Texas. Suspension of EMT-Paramedic certification for one year through June 5, 1994. EMS rule 157.51(a)(4)(s), violating a rule or standard that would jeopardize the health or safety of a patient.

**Sorrells, Jerry**, Breckenridge, Texas. Twenty-four months probation of provider license through January 12, 1995. Health and Safety Code, Chapter 773.050, failure to staff emergency vehicle with at least two certified personnel.

**Stewart, Andrew A.**, San Antonio, Texas. Eighteen months probation of EMT-Intermediate certification through May 21, 1994. EMS rule 157.51, misdemeanor convictions while certified.

**Tippie, Candance**, Jacksboro, Texas. Twelve months probation of EMS course coordinator certification through April 5, 1994. EMS rule 157.64(a)(1)(D), falsification of course completion document and/or (H), failure to maintain the integrity of the course.

**Tuckness, Andrew**, Throckmorton, Texas. Twelve months probation of EMT certification through July 16, 1994. EMS rule 157.44, misdemeanor conviction.

**Turney, Monty S.**, Abilene, Texas. Twelve months probation of EMT certification through September 3, 1994. EMS rule 157.44 (b)(1), felony conviction.

**Weigel, Toby B.**, Midland, Texas. Eighteen months probation of EMT certification through September 16, 1994. EMS rule 157.44, misdemeanor conviction.

**Woods, Charles**, Texarkana, Texas. Emergency suspension of EMT certification. EMS rule 157.51 (a)(1), failure to pass skill test and retest.

**Wright, Gilbert**, Olney, Texas. Twenty-four months probation of EMT certification through October 1, 1994. EMS rule 157.51(s), violating any rule or standard that would jeopardize the health or safety of a patient or that has a potential negative affect on the health or safety of a patient.

## TEMSAC COMMITTEES AND COUNCIL MEETING

February 17 and 18, 1994

Call Ernesto Rodriguez at (512) 834-6740 for information.



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# Paramedics and Medical Directors

By Vic Dwyer

**R**ecently we received several questions from a new paramedic who wants to know about practicing her skills and the role of her medical director.

*When and where can a paramedic use advanced skills?* The paramedic certificant operates under the license of a medical director who controls the practice of advanced skills. In your area of coverage, wherever that is, the medical director's protocols are in effect. If you have any question about the exact area of coverage, such as on duty or off duty, in county or out of county, ask your medical director. Safer yet, ask your medical director for a letter that covers these situations and others. Your medical director can sponsor you to perform advanced skills citywide, countywide, or statewide.

*What if a paramedic gets into another service's ambulance?* If a paramedic from one service gets into another service's emergency vehicle at the scene of an incident, the paramedic can use the skills covered by his medical director. The visiting paramedic does not have the use of his advanced skills limited by another service's medical director. Servic-

es should work out mutual aid agreements to avoid any confusion and possible liability.

*What about multiple-casualty situations?* A paramedic can perform advanced skills on any unit in disaster situations. But for the normal call, the proper ambulance authorization is best for the protection of the service and the medic. Mutual aid plans in effect with everyone aware of the plans helps in these cases.

A close, working relationship with your medical director is the best and a safest course of action. As captain of the ship, the medical director is responsible for all your medical decisions affecting the patient. As an advisor and mentor, the physician medical director can help you and your service give the best patient care possible.

In the area of complaints, the counsel of your medical director can help correct many of the medical and operational problems you discover. These interested physicians have years of training in many areas and can be a major asset to your organization.

Vic Dwyer, the Bureau's chief investigator, can answer your questions about EMS rules. Write to him at *Texas EMS Magazine*, 1100 W. 49th Street, Austin, Texas 78756-3199.

# Calendar

## Meetings

January 8, 1994. **CPR Instructor Course.** \$50. Contact Steve Cutler, EMT-P. 1603 Camero, Carrollton, TX 75006. 214/242-5883.

January 13-15, 1994. **Prehospital Provider Pediatric Courses.** (Fundamental, Advanced, Instructor). Titus County Hospital. Mt. Pleasant. Gary Williams 903/856-7621.

January 16, 1994. **CPR Instructor Trainer Course.** Dallas, TX. 12-5pm. \$50. Please call Steve Cutler, EMT. 214/242-5883 or mail name and address to 1603 Camero, Carrollton, TX 75006.

January 22, 1994. **CPR Instructor Course.** \$50. Contact Steve Cutler, EMT-P. 1603 Camero, Carrollton, TX 75006. 214/242-5883.

January 23-24, 1994. **Prehospital Provider Pediatric Courses.** (Fundamental, Advanced). Children's Medical Center. Dallas, TX. Amy Kranzow 214/944-8411.

January 29-30 1994. **CPR Instructor Course.** \$50. Contact Steve Cutler, EMT-P. 1603 Camero, Carrollton, TX 75006. 214/242-5883 or mail name and address

to 1603 Camero, Carrollton, TX 75006.

February 10-13, 1993. **CISD Training by Drs. Mitchell and Everly.** The Marriott at Greenspoint, Houston. Contact Elaine Johnson. 713/444-9669.

February 13, 1994. **CPR Instructor Trainer Course.** Dallas, TX. 12-5pm. \$50. Please call Steve Cutler, EMT. 214/242-5883 or mail name and address to 1603 Camero, Carrollton, TX 75006.

February 17-18, 1994. **TEMSAC committees and council meeting.** Austin, Call Ernesto Rodriguez 512/834-6740.

February 19, 1994. **CPR Instructor Course.** \$50. Contact Steve Cutler, EMT-P. 1603 Camero, Carrollton, TX 75006. 214/242-5883.

February 20, 1994. **CPR Instructor Trainer Course.** Dallas, TX. 12-5pm. \$50. Please call Steve Cutler, EMT. 214/242-5883 or mail name and address to 1603 Camero, Carrollton, TX 75006.

February 22-24, 1994. **33rd Annual Texas Emergency Management Conference.** Austin, TX. 512/465-2138. J. Moss, DPS, PO Box 4087, Austin, TX 78773.

February 23, 1994. **Coordinator Course.** Austin, Texas. Texas Depart-

ment of Health, Bureau of Emergency Management. 8-5. \$10 to cover cost of materials. Contact Debbie Bradford, 512/834-6740 to register. Space is limited.

February 24-27, 1994. **12th Annual EMS Today Conference & Exposition.** Seattle, WA. 1-800-266-JEMS.

March 25-27, 1994. **11th Annual Georgia Extrication School.** Athens, Georgia. Contact Sam Cunningham or Kathy Hardigree. 706/542-9500.

March 31-April 1, 1994. **CareFlite Emergency Care Update.** Prehospital, hospital, and aviation tracks. DFW Hilton Executive Conference Center. Grapevine, TX. 214/946-7008 or 214/944-8143.

November 20-23, 1994. **Texas EMS Conference '94.** Fort Worth, Texas. Sponsored by The Texas Department of Health. Call the Bureau of Emergency Management at 512/834-6740 for more information.

## Jobs

**Public Health Technician I, II, and III:** Public Health Technicians must have completed 60 semester hours of college credit. Applicants with a four-year degree and certified at an EMT Basic, Intermediate, or Paramedic are preferred. Salary \$20,652-\$26,832/year. Apply to The Texas Department of Health, Public Health Region 6 (Houston). Call Wayne Morris at 713/414-6495 or write to PHR 6, EMS Program Administrator, 10500 Forum Place Dr., Ste. 410, Houston, TX 77036.

**Education Coordinator:** Must be certified instructor examiner with coordinator certification. For further information contact Daine A. Abbott at Memorial Hospital EMS, 900 S. Sycamore, Palestine, TX 75801. 903/723-4384.

**Paramedic/Firefighter:** Harker Heights FDEMS. 9-1-1 MICU. Advanced protocols. Texas certified EMT-P/Firefighter by May 1994. Salary \$16,937 annually plus incentives. Applications are being accepted at Texas Employment Commission. For further information call 817/699-2688.+

**CPR Instructor:** PRN position, must have current CPR Instructor certification.

### Manage TDH's Local EMS Grants Program— \$750,000 annually for local training, equipment, public education

**EMS System Development Grants Specialist,** TDH posting #93-TDH-1311, monthly salary starts at \$2,549, position closes February 1, 1994. Manage the Local Projects Grants Program, help local areas start Emergency Services Districts, teach for the EMS Management Academy, work with local EMS on fundraising.

Contact John Rinard, program administrator of the EMS Division's System Development Branch at (512) 834-6740, ext. 2359, or submit your application to Texas Department of Health, Bureau of Human Resources, 1100 W. 49th Street, Austin, Texas 78756-3199.

The mission of the EMS Local Projects Grant Program: to distribute funds and provide technical management assistance to organizations responsible for the availability or quality of emergency prehospital health care.

Call today to join a winning team that improves patient care in Texas—(512) 834-6740.

# Calendar

EMT, EMT-P, ACLS preferred. Must live in Dallas area. Please send resume to: Steve Cutler, EMT-P, 1603 Camero, Carrollton, TX 75006.+

**Instructor/Coordinator:** The Department of EMT/UTHSCSA is recruiting for a FT faculty position to coordinate CE programs for EMS providers within Bexar County. Preferred minimum requirements include, Bachelor's Degree, TDH EMT-P certification, TDH Coordinator certification. Salary negotiable based upon education and experience. Send resume to: Department of EMT/UTHSCSA, 4201 Medical Drive, Suite 250, San Antonio, TX 78229-5631. The University of Texas Health Science Center at San Antonio is an equal opportunity/affirmative action employer.+

**EMT-Paramedic/Firefighter:** Full-time employment with city of Edna fire and EMS service. A 24-hour advanced life support service. Contact Buster Chase, EMS Director, City of Edna EMS/Fire Department, 105 N. Allen, Edna, TX 77957 or call for an application at 512/782-3159.+

**EMT-Paramedic:** Two full-time paramedic job positions. Prefer ACLS certified. Contact Marcia Edwards 903/729-6981 ext. 632.+

**EMS Executive Director:** Operational and administrative management of a multi-hospital affiliated ALS ambulance and medical helicopter service. Minimum 5 years progressive administrative experience, masters degree in business administration or related field. Submit a letter describing accomplishments, salary history, and resume of educational and professional experience to: Jamiel Yameen, Fitch & Assoc., Inc. PO Box 170, Platte City, MO 64078-0170.\*

**EMT-Paramedic Teams:** Texas certified. Husband/wife accepted. Needed for upstart rural EMS. Benefits with housing available. Salary commensurate with qualifications/experience. Supervisory/management skills a plus. Resume and references to: PO Box 235, Thicket, TX 77374-0235 or call 409/274-5007.\*

**EMT:** Offshore work in safety, medical and environmental compliance. Must have strong verbal and administrative skills. Computer knowledge mandatory. Send resume to: Personnel director, PO Box 6637, New Orleans, LA 70174-6637.\*

**EMS Dispatcher:** Active North Texas EMS Service accepting applications for EMD certified paramedic dispatchers full and part-time. Send resume to LifeStar Ambulance, PO Box 3444, Arlington, Texas 76010-9930.\*

**EMS Quality Assurance Coordinator:** Texas Tech University at El Paso is seeking an EMS QA/QI Coordinator for El Paso's EMS system. Must also participate in education and prehospital research activities. Required: EMT-P or RN, Bachelors. QA/QI experience. 3 years ALS field experience, 2 years ALS education experience. Send resume to: David Edwards, Dept. of Emergency Medicine, Texas Tech School of Medicine, 4800 Alberta Ave., El Paso, TX 79905.\*

**EMT-B, EMT-P:** 12, 18 and 24-hour shifts available. New and recently certified EMTs for first time job will be accepted. Apply at 10406 Rockley, Houston, TX 77099. No resumes.\*

## For Sale

**For Sale:** Not "X-MAS", but "EMS-Mas!" Christmas carols for EMS personnel. All your favorite tunes—*Twas the Night Before Testing*; *Rudy the Red-Nosed Fireman*; *All I Want for Christmas is My EMT-P*; and many more! Complete caroling booklet only \$7.10. Add \$2.50 for 2-day delivery or 40¢ for regular mail. Send \$10.00 (2-day) or \$7.50 (reg) cash,



## Texas EMS Conference Tote Bag

14 X 11 nylon bag. Send \$5 to Texas Health Foundation/EMS, P.O. Box 142694, Austin, TX, 78714-2694.

check or MO to C. Zavodney at P.O. Box 670703, Houston, TX 77267-0703 for 24-hour processing.

**For Sale:** LifePak 5, batteries and charger. Azle fire department. 817/444-3221.\*

**For Sale:** 1982 Type II ambulance for sale. Good condition. Call 806/794-4169.\*

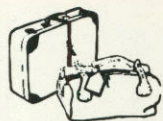
**For Sale:** 1985 Ford Type II Wheel Coach, for transfer service, clean, \$5,200. 1986 Ford Type I walk-thru Collins, vent hood, strobes, extended front bumper, good condition. \$9,500. Monday-Friday 9-5, 512/851-8422.\*

**For Sale:** Physio-Control LifePak 5 monitor/defibrillator with battery charger. Two batteries included. \$3000. PO Box 2951. Palestine, TX. 75801.\*

+ This listing is new to this issue.

\* Last issue to run.

## Moving? Renewing your subscription? Placing an ad?



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**Renewing your subscription?** Paid subscriptions have a 4-digit number on the mailing label. Example: 9304 means the subscription expires with the April, '93 issue. Use the subscription form in the magazine to renew your subscription and mark the renewal box.

**Placing an ad?** To place an ad in the calendar section, write the ad (keep the words to a minimum, please) and fax to *Texas EMS Magazine*, 512/834-6736 or send to the address below. Ads will run in two issues and then be removed.

For circulation and calendar information call or write Jan Brizendine at 512/834-6740 or *Texas EMS Magazine*, 1100 West 49th, Austin, Texas 78756-3199.

# Street to classroom:

## Former firefighter believes in education



As a child, John Rinard dreamed of being a fire fighter: jumping on a bright red engine, and racing toward a fire. When he dropped out of Texas A&M to join the College Station Fire Department in 1980, he figured he was only grabbing the opportunity to do what he had always dreamed of.

But a funny thing happened on the way to a career in fighting fires: EMS. As part of the job with the fire department, John had to train as an EMT. And he discovered something about himself.

"I went into EMS only because it was a requirement of the job," John says. "But I was surprised how much I enjoyed it because I had never been a blood and guts person before."

John enjoyed EMS so much that he left College Station in 1984 to pursue a paramedic education at the Corpus Christi Fire Department. He didn't get off the ambulance until he

came to work for the Bureau in March of 1993.

In Corpus, John taught paramedic and EMT courses for Del Mar College and was regional coordinator for Basic Trauma Life Support classes in South Texas. He still serves on the international BTLIS board of directors. In 1992, John completed his business management degree from Corpus Christi University after attending school part-time for eight years.

"Education is the key and it's not so much that people need to go to school for book knowledge, but they need to know the nuts and bolts of real life experience," John says. "There will always be a lot of surprises, no matter how much you train."

Education spills over into the job John has now as program administrator for EMS System Development. Recently the program launched its first traveling classroom—the Mobile Training Unit. The van comes complete with anything an instructor needs to teach a class.

"We created the Mobile Training Unit because a need for education existed that was not being met by local resources," John says. "In the first two months, we trained 150 people in rural Texas."

John also oversees the local projects grants, which grew from 108 applications submitted last year to 223 this year. This year, the Bureau will fund 85 of the projects for \$650,000.

John says he wants to be responsive to the needs of EMS in Texas and to show people that the Bureau means more than just regulations and rules.

"I know it's a joke to say that we're from the state and we're here to help," John says. "But we really are."

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