

# Texas EMS

Serving Texas Emergency Care Professionals



**Create an injury prevention game plan**

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***What is consent?***

***Earn 1.5 hours of CE***

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# Texas EMS

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Is your service's name in this list? If you didn't apply, you don't have a chance. Take a look at who is getting grant money. Could this be you next year? By Ed LOOMIS, LP

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The 2002 conference is over, and a record number of people earned CE and went through the 132,000 square feet (largest ever!) of exhibit space. Turn here for conference numbers, plus the winning photos from the photo contest. By Kelly HARRELL AND JAN BRIZENDINE

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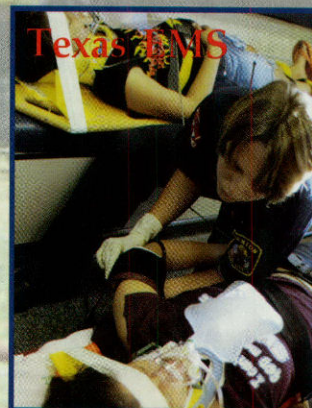
What happened in Austin at the November GETAC meeting? Find out what the votes were, and what's next on the agenda. By KATHY PERKINS, RN, MBA

38 Consent:

What you don't know about issues of consent CAN hurt you! Gene Gandy, a lawyer and paramedic, explains the difference between some legal terms and what you need to do to protect yourself. By GENE GANDY, JD, LP

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**ABOUT THE COVER:** A Denton paramedic treats two patients who were involved in a motor vehicle crash. PHOTO BY KERRI BURNSIDE.



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PENNY WORKMAN

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NICOLE RIVERS

Editor

Associate Editor

Art Director

Editorial Assistant



KATHY PERKINS, CHIEF  
BUREAU OF EMERGENCY  
MANAGEMENT

## Strategic Plan heads to the Capitol as Texas Legislature convenes

It's hard to believe that it is already 2003. Hope your holidays were special and safe. Bureau staff are closing out the 2002 EMS Conference and getting ready for the 2003 conference. It was wonderful to see so many of you there. Initial review of the evaluations seems to indicate that participants thought it was the best ever. We will review those evaluations closely as we plan for next year in San Antonio.

The Governor's EMS and Trauma Advisory Council (GETAC) met in conjunction with the pre-conference, which allowed more stakeholder participation (see the recap of the meeting on page 36). The next GETAC meeting will be March 5 and 6. Watch our website for the schedule.

GETAC's big challenge for the past year and a half was the development of the strategic plan, which was mandated by the 2001 Texas Legislature. By the time you get this, the plan should be on its way to legislators and posted on the Bureau's website. Thanks to everyone who contributed to this huge project. But we cannot sit back now; there are many strategies to begin addressing. GETAC

will start that process at their next meeting and we hope that the various stakeholder groups will do so also. Bureau staff have already begun the process of addressing the strategies assigned to the Bureau.

Initial testing of EMT-Basic through the National Registry is into its fourth month and the transition has been smoother than expected for such a huge change. Issues that have arisen have been handled expeditiously. Advanced testing begins February 1, 2003 (see our website for information). Additionally, we will be moving forward with implementation of the NR First Responder exam for initial Texas ECA certification, probably in late 2003. More details about timelines and process will be forthcoming.

Finally, the Texas Legislature is in session. As of press time, there have been seven bills filed that affect EMS (see box). Getting information about filed legislation is very easy by going to [www.capitol.state.tx.us](http://www.capitol.state.tx.us). The Bureau also plans to post regular updates on its website and/or the e-lists.

### House Bills that relate to Texas EMS

**HB-108** - Relating to a refund of the sales tax on certain equipment purchased by peace officers, members of fire departments, and EMS personnel ([www.capitol.state.tx.us/tlo/78R/billtext/HB00108I.HTM](http://www.capitol.state.tx.us/tlo/78R/billtext/HB00108I.HTM)).

**HB-110** - Relating to reimbursement rates for ambulance services under the medical assistance program ([www.capitol.state.tx.us/tlo/78R/billtext/HB00110I.HTM](http://www.capitol.state.tx.us/tlo/78R/billtext/HB00110I.HTM)).

**HB-111** - Relating to responsibility for payment for transport by ambulance of a recipient of medical assistance in certain circumstances ([www.capitol.state.tx.us/tlo/78R/billtext/HB00111I.HTM](http://www.capitol.state.tx.us/tlo/78R/billtext/HB00111I.HTM)).

**HB-112** - Relating to reimbursement rates for ambulance services under the medical assistance program ([www.capitol.state.tx.us/tlo/78R/billtext/HB00112I.HTM](http://www.capitol.state.tx.us/tlo/78R/billtext/HB00112I.HTM)).

**HB-180** - Relating to a lien on a cause of action or claim of an individual who receives certain medical services ([www.capitol.state.tx.us/tlo/78R/billtext/HB00180I.HTM](http://www.capitol.state.tx.us/tlo/78R/billtext/HB00180I.HTM)).

**HB-201** - Relating to the issuance of emergency medical services personnel license plates ([www.capitol.state.tx.us/tlo/78R/billtext/HB00201I.HTM](http://www.capitol.state.tx.us/tlo/78R/billtext/HB00201I.HTM)).

**HB-267** - Relating to increasing the cigarette tax. Money would go for EMS and trauma care and other programs at TDH including Medicaid ([www.capitol.state.tx.us/tlo/78R/billtext/HB00267I.HTM](http://www.capitol.state.tx.us/tlo/78R/billtext/HB00267I.HTM)).

# Smallpox vaccines coming for healthcare personnel

TDH issued the following statement in early December about pre-event smallpox vaccines. Please monitor our website for updates.

## Key Points

**Situation:** The U.S. Centers for Disease Control and Prevention (CDC) asked all states to submit a plan by December 9, 2002, for vaccinating certain public health system workers and hospital care personnel against smallpox. Implementing the plans will not occur unless there is a directive from the federal government to do so. The purpose is to strengthen the nation's bioterrorism readiness.

## Two categories of personnel would be vaccinated:

1. **Public health system smallpox response teams** at the state, regional and local levels who would investigate/control a possible or actual smallpox case or outbreak.
  2. **Health care smallpox teams** in hospitals where possible or actual cases of smallpox would be diagnosed and treated.
- EMS, firefighters and law enforcement personnel would not be vaccinated in the initial

phase of the pre-event smallpox vaccination plan, but could be later. (One reason: not enough immune globulin to treat severe adverse reactions to the vaccine.)

- Hospital participation is voluntary. Individual participation is optional but could be required for job performance.
- Each entity—TDH, local public health departments and participating hospitals—will determine which of its employees need to be vaccinated.
- All vaccinations would be given by trained public health system nurses from TDH or local public health departments. CDC conducted distance learning training and education sessions in December. Plans call for pre-vaccination education and screening and for vaccination monitoring.
- CDC will supply the DryVax™ smallpox vaccine and vaccination kits at no charge. (DryVax™ is the vaccine stored since

smallpox vaccinations were discontinued in the U.S. in 1972.)

- Nationally, an estimated 500,000 public health and hospital personnel would be vaccinated, including 55,000 in Texas.
- TDH asked local public health departments to submit the number of hospitals participating and numbers of public health and medical care personnel to be vaccinated.
- There are about 550 hospitals in Texas. CDC suggests that a hospital would need to vaccinate 45 workers for round-the-clock readiness. As many as 100 workers per hospital may be needed in major metropolitan areas.
- Texas will need about 80 public health system smallpox response teams. Typically, each team would have from three to six members.
- Once a federal directive is issued, the goal would be to complete vaccinations within 30 days.
- As of December 25, the Homeland Security Act of 2002 became effective, which provides legal immunity to vaccine administrators.



## A look at Texas' plan for smallpox vaccination of state and local health workers and hospital personnel:

375 of 550	Total participating hospitals
36,750	Hospital workers vaccinated
70	Public health system smallpox response teams
3,250	Response team members vaccinated
40,000	Total vaccinations

**NOTE:** For security, safety and confidentiality reasons, TDH will not release specific vaccination logistics, vaccine distribution information, county-specific data, or information specific to individual or hospital participation or non-participation.

# Point of View

By Rebecca Wainright, RN, EMT

## Oh, baby! — Baby arrives on long transport

It was a hot and clear April evening, when Presidio EMS was called out for a patient in active labor west of town on the road to Ruidosa. Two valiant medics were dispatched. Upon meeting the woman en route in spouse's truck, they transfer her to the ambulance – the beloved 561. Considering that delivery was likely before the 100+ miles to local hospital was covered, they call the hungry medic at home who is about to eat supper and ask, "Want to deliver a baby?"

Food or baby? As a medic, which would you choose? Hungry medic dons EMS t-shirt and leaves house, drinking chocolate milk. Parking off the shoulder where FM 170 and the road to Utopia join US 67, hungry medic ties her shoes. Flashing 561 approaches. Hungry medic stands on shoulder of road, thumbing for a ride. Speedy medic smiles, waves from behind the wheel, and points to the back of the rig. New medic has the back of the rig prepped for delivery. Woman in labor is in obvious discomfort. Hungry medic holds her hand, asks questions and assesses situation while 561 rockets north. South of Marfa, baby's head becomes visible and ambulance pulls over for delivery. Then the baby's head retreats. Unit 561 resumes progress toward hospital. Then east of Marfa on US 90, baby's

head comes down to stay. Ambulance pulls off the road again. Hungry medic coaches woman in pushing and breathing, while new medic delivers head, suction, then delivers body. It's a girl! Dry the crying baby off, clamp and cut the cord. Wrap the baby up and offer her to her mother. Mother says she is too tired to hold baby. So new medic readily agrees to hold baby. Hungry medic assesses woman's vital signs, abdomen, etc. Wonder if we have a twin? Nah... just a placenta...looks over at new medic and baby...and sighs. New medic has obviously bonded with the newborn. "You have to give her back, you know?" says hungry (how-come-you-get-the-baby-and-I-get-the-placenta) medic. "What?" says moon-eyed medic who can hardly take her eyes off the wee wonder to respond. "You have to give the baby back to her mother when we get to the hospital. You don't get to keep her." Crestfallen, the bonded-like-superglue medic holds baby closer and her attention is only drawn away by the loud explosion as the outside back tire blows and the tread shreds and flaps against the rig until it falls off, littering the highway – major tire trauma. Speedy medic calmly calls over the intercom, "We lost a tire, but everything will be okay." And it was...we arrive safely at the

hospital where the ER staff and the labor and delivery nurse were waiting. "Did you see how she snatched the baby out of my hands?" says new medic. She revives enough to help hungry medic and speedy medic roll stretcher and woman along the hospital corridors to labor and delivery. Report is given to doctor and hospital staff. Medics write report at nurses' station. Father of baby arrives shortly. New medic notes how baby was calm and peaceful in the ambulance but now crying at the top of her lungs. Finished with report, medics leave for the copy machine then return to leave a copy at the nurses' station. They slowly pass the nursery window. The medics get something to eat and head home only to have another tire go flat. Finally, more than six-plus hours after leaving the station, 561 returns home. The medics restock. The no-longer-hungry medic comforts the why-couldn't-I-keep-the-baby medic: "Well at least you will get a stork pin." Yes, the stork pin, the badge of honor, the croix-de-guerre, a small reward for having to leave the baby at the hospital.

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*Presidio EMS medics Osvaldo Acosta, ECA, and Diane Wilke, NREMT, also took this 200-mile, six-hour trip to Storkville along with Rebecca Wainright, RN, EMT.*

## AROUND THE STATE AND NATION EMS NEWS AND RESOURCES

By Kelly Harrell

### Education manual online



Hey coordinators! Did you know that the EMS Education and Training Manual is now available on the web? The 96-page manual, a tool for coordinators, is designed to aid all types of programs in meeting the needs of EMS education and training. It specifically targets those who do not have access to institutions of higher learning but who possess the knowledge, skills, resources and dedication to provide sound EMS education and training in areas where it would otherwise be unavailable. The Texas EMS Act charges the Texas Department of Health with the responsibility of developing and publishing EMS training and education standards within Texas. This manual lays out those standards. To download this large file (670K), go to [www.tdh.state.tx.us/hcqs/ems/newsfeatures.htm#Training Manual](http://www.tdh.state.tx.us/hcqs/ems/newsfeatures.htm#Training Manual).

### Non-emergency number takes load off 9-1-1

Since its introduction in September 2001, the Austin Police Department's 3-1-1 non-emergency telephone service has reduced the number of calls to 9-1-1 by one-third. That's about 20,000 to 30,000 fewer calls each month, freeing up the emergency number for, well, real emergencies. Residents are asked to call 3-1-1 regarding property crimes (burglary, vandalism, thefts) when the offender is no longer on the scene, animal control issues, illegally parked vehicles or general questions about the police department. Even with the new number, more than half of the 823,923 calls to 9-1-1 in Austin last year did not require police, fire or emergency medical service response.



### Organization working toward EMS database

The National EMS Information Website is now up and running. If you haven't heard, the National EMS Information System Project is a federal contract through the National Association of State EMS Directors to revise the NHTSA Uniform Prehospital Dataset and work toward a National EMS Database or Registry. For more info, go to [www.nemsis.org](http://www.nemsis.org). This project has broad representation across the EMS community and the goal is to reflect the needs of the EMS community. For further information, contact Greg Mears, MD, FACEP, at [gdm@med.unc.edu](mailto:gdm@med.unc.edu).



## British medics refuse violent patients

The problem of violence against medics is so prevalent in Great Britain that one ambulance firm is refusing to treat patients with a history of violence unless they are given a police escort. Figures from the Avon Ambulance Trust show that nearly half of the 245 staff has experienced violence or aggression from patients over the last 12 months. A panel of senior managers will compile a list of people who have been violent in the past. Medics can then refuse treatment for that patient unless accompanied by law enforcement personnel. Anyone added to the list will be informed and be given a chance to appeal.

## Park named for medic killed in WTC

As a part of the "Revitalize Astoria" campaign in Astoria, New York, a piece of land at 21st Avenue and 76th Street currently used as a dumping ground will eventually be transformed into a park that will be named for Carlos Lillo, a paramedic who died in the rescue effort at the World Trade Center.

## ED visits limited at Colorado hospital

Is this the future of the ED? The University of Colorado Hospital in Denver, already under fire for cutting services to the uninsured, began restricting access to its emergency department. The hospital says the limits are necessary because of the number of non-paying patients. The hospital does receive federal money for uninsured patients, and federal law prohibits turning people away without proper screenings. To satisfy that requirement, a nurse practitioner will perform screenings at the door and turn away insured and uninsured patients if the nurse determines that they do not have a real emergency. One other Denver public hospital began the practice in April.

## 18-year-old dies from 'Jackass' stunt

Mimicking reality television and a movie proved fatal for an 18-year-old college freshman in Ohio.

Adam Ports died from head injuries while trying to perform a stunt from the film "Jackass" with some friends. Officials believe that students in the back of a truck set a chair on fire using hairspray. As they were trying to throw the burning chair off the truck, Ports slipped and fell, hitting his head on the pavement. A statement from MTV/Paramount expressed condolences for the family but pointed out that the incident had no connection to any stunts performed on the television



show or the recent movie.



### **Longview marks historic fire station**

You go to work, you relive a little history: the first city building in Longview to receive a state historical marker is a fire station. The station, which was built in 1936, was originally the Longview City Hall. According to officials, the limestone building with the red tile roof is one of the few buildings that combines Neo-classical and Mediterranean architectural styles.

### **Memphis tries sedans to speed response**

Since November 6, you might not see an ambulance if you call EMS in Memphis, Tennessee. Instead, a sedan might carry medics to answer the call. The Rapid Response Triage System pairs an EMT and a paramedic to respond first, and more quickly, and assess the patient to determine if an ambulance is needed. Fire departments from Nashville to Little Rock to Houston have tried similar programs. Memphis officials claim that the new program has shaved three to four minutes from response times.

### **Blast sends squirrels flying**

Put this in the odd call file. A large gas explosion ripped apart a storage container near Tacoma, Washington, in October, injuring a 61-year-old woman and sending nearly 1,000 flying squirrels, well, flying. The squirrels, which the woman sold as pets, are about 12 inches long and look like chipmunks. They can glide up to 300 feet between trees and they will bite, as rescuers found out. Officials estimate that about 130 squirrels died, about 350 were captured, and another 500 escaped. The woman suffered third-degree burns and broken bones.



### **Board adopts paramedic licensure rule**

The Texas Board of Health adopted EMS Rule 157.40 (Licensed Paramedic) in October and the rule became effective on November 7, 2002. The rule brings several changes:

- Changes school accreditation requirement;
- Allows for conversion from inactive EMT-P to inactive licensure;
- CE is an option, with change in content hours and areas (limited substitutions are allowed);
- Expands renewal procedure to 4 options.

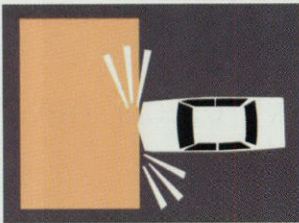
Option 1- Written exam

Option 2- Continuing Education

Option 3- National Registry

Option 4- Formal Recertification Course

GETAC voted at its May meeting to go forward with the rule even though GETAC members acknowledged that the rule still needed some revision. The members of GETAC have vowed to revisit the licensure rule in upcoming meetings.

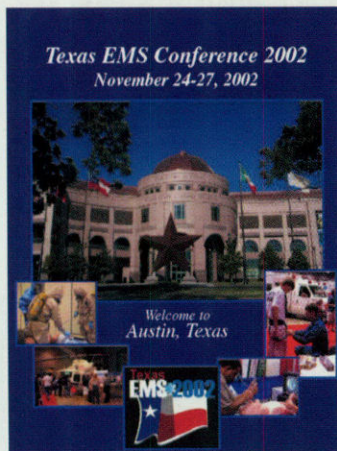


## Driver makes stop in fire station

What is the public taught to do when in trouble? Drive to a fire station. One man in Houston took that advice literally. A driver in southeast Houston veered off the road and into Houston Fire Station 29, plowing through the bay and hitting a HFD Suburban. There were no injuries. The driver, who was suspected of being under the influence of alcohol, was prevented from fleeing the scene by firefighters.

## Oklahoma loses two medics in crash

A sport utility vehicle struck and killed two Ardmore paramedics and a Texas patient they were helping into the ambulance. The October incident happened when a woman from Plano was injured after her car went off I-35. As the medics were loading the patient into the ambulance, a passing driver tried to change lanes and lost control on wet pavement. The vehicle struck and killed all three and then hit the back of the ambulance. Killed were medics Shawn Kelly, 28, and Michael Shane Gilmore, 31, both of Ardmore. Marilyn Melson, 69, of Plano, was also killed. The driver of the car, who is from Spring, Texas, was treated and released.



## Correction to Texas EMS Conference program page 22:

AA Emergency Ambulance Sales, Inc.  
P.O. Box 920952, Suite 402  
4905 Randon  
Houston, TX 77292-0952  
Phone: 713/688-8899  
Fax: 713/683-1799  
[www.aaemergency.com](http://www.aaemergency.com)

## Kilgore chooses Champion EMS

In November, the Kilgore city commissioners chose Champion EMS as the city's ambulance service provider. The decision was made after Roy H. Laird Memorial Hospital's board of directors unanimously recommended the change from a city-run service. The commissioners believe the move will save them money. Two Kilgore residents – a physician and an EMS supervisor – opposed the change at the meeting.

## New law requires belts

In December, President Bush signed a law that aims to protect children who are too big for child seats, but too small to be protected by adult seat belts. Called Anton's Law after a 4-year-old killed in a crash, the law will require auto makers to include shoulder belts in rear center seats and improve federal testing standards for booster seats.

## Sherman firefighters protest requirement



A proposed ordinance that requires all firefighters to maintain EMS certification as long as they are employed by the City of Sherman has brought protests from that group. The current ordinance allows firefighters to drop certification at the age of 45. The proposed ordinance would be retroactive and affect all firefighters. City officials say that since 86 percent of the calls to the fire department are now medical calls, additional medical personnel are needed. The number of calls increased when LifeTech pulled out of the region and the fire department began handling emergency transfers. The president of the firefighters association says that the requirement puts undue stress on the firefighters and does not give them time between calls.



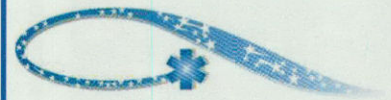
## CDC has stats on injuries

Looking for national statistics on injuries? The National Center for Injury Prevention and Control (sponsored by the Centers for Disease Control and Prevention) has an excellent resource called WISQARS (Web-based Injury Statistics Query and Reporting System). The system is an interactive database system that provides customized reports of injury-related data. WISQARS can generate reports on both fatal and non-fatal injuries. Go to [www.cdc.gov/ncipc/wisqars](http://www.cdc.gov/ncipc/wisqars).

## EMSAT elects new board



The Emergency Medical Services Association of Texas has elected a new board of directors. Dave Taylor with Genesis EMS and Shannon Wilks-Bingham were re-elected to the board. Newly elected to the board was Jane Hill. Paul Smith was elected treasurer and Gene Gandy was elected vice president. Ron Haussecker was re-elected president.



**EMS Week**  
**May 18-24**  
**2003**

## FAQs answer Trauma Registry questions

Confused about who can send in information for you to the Trauma Registry? These FAQs may help you out.

**Q: Can a RAC or billing agency send my data in for me?**

**A:** Yes, you may authorize your respective RAC or billing agency to submit data for your entity. All of the required documents in the deployment packet must be completed, signed and submitted to the Texas EMS/Trauma Registry Program at TDH prior to the establishment of the RAC or billing agent EMS/Trauma Registry account.

**Q: What else can a RAC and billing agency do?**

**A:** With your entity's authorization, the RAC and/or billing agency will have the ability to submit your data files to the EMS/Trauma Registry, enter months with No Reportable Data, and view your submission status.

**Q: Do I need to fill out the RAC and RAC's authorized personnel?**

**A:** You should list a RAC and RAC's authorized personnel if you want the RAC to view your submission status or if you send your data to the RAC's regional registry, who then forwards your data to the state EMS/Trauma Registry. Leaving this section blank means the RAC will not have access to your entity account.

**Q: I would like a member from my RAC to submit my data. How do I get that set up?**

**A:** There are three steps involved. (1) On page three of the deployment packet, clearly write the name of the RAC member whom will be allowed to submit your data. The RAC member should be the person in the RAC who you authorize to view your submission status and send your data, not your own entity's representative to the RAC. (2) Obtain the signature of the RAC member on page five of the packet. (3) Submit this information when you return your completed deployment packet to TDH.

**Q: Do I need to fill out the billing agent**

**and billing agent's authorized personnel?**

**A:** You should list a billing agent and authorized personnel if you are an EMS who sends your data to a billing agent who, in turn, submits your data to the RAC or EMS/Trauma Registry. Do not fill this section out if you do your own billing.

**Q: Our service uses an outside billing company. Do we still have to add them to this deployment packet even though they will not be submitting our data to the EMS/Trauma Registry for us? We do send them a copy of the run report for billing purposes.**

**A:** You only need to add the billing agent if they will be doing the actual data entry and submission of the data to the state for you. Otherwise, you should leave this section blank.

**Q: How do I indicate that a software vendor will be submitting data for my entity?**

**A:** Please indicate the name of the software vendor and vendor authorized personnel under the billing agent section. You will need their signature on page five of the deployment packet as well.

**Q: If I have authorized a RAC member, billing agent and/or software vendor to submit data for my entity, can I include a faxed signature page from them with my deployment packet?**

**A:** Yes. A RAC/billing agent/software vendor may sign one copy of page five of the deployment packet, make photocopies of their signature page and fax it to entities who are authorizing the RAC/billing agent/software vendor to have access to their submission status.

**Q: Do I need to set up an account if a RAC, billing agent, or software vendor is submitting my entity's data?**

**A:** Yes. By setting up an account, you will be able to view the number and status of records that have been submitted, view validation reports and generate data reports.



## TDH honors Emergency Medical Services leaders with 2002 Texas EMS Awards

The EMS organizations and people listed below took top honors at this year's EMS conference. The awards were announced at a luncheon that included a moving tribute by the Lubbock EMS Honor Guard to those fallen in the line of duty.

*EMS Public Information/Injury Prevention of the Year – Williamson County EMS*, for outstanding achievement in public education and injury prevention education in Williamson County. WCEMS serves the citizens of its community through a number of education and service events. WCEMS implemented the We Have A Little Emergency (WHALE) program, in which the parents of babies born in Williamson County are educated about child safety car seats and given stickers to place on the car seat and vehicles that will give emergency responders information about the child if the parents are unable to communicate. Members of WCEMS teach children at local childcare centers and schools about using the 9-1-1 system, give ambulance tours and give presentations on sexual assault and safety at shelters, schools and juvenile probations centers. WCEMS also works within the schools and the communities to teach students about the dangers of drugs, alcohol and driving while impaired, using such recognized programs as the multi-agency "Shattered Dreams" program, and working with Mothers Against Drunk Driving to give presentations to drug and alcohol offenders.

director of the Emergency Health Sciences Bachelors of Sciences degree program at the University of Texas Health Science Center in San Antonio. As a faculty member of UTHSCSA, he was instrumental in developing one of the first bachelor's degree program in Texas. He has taught emergency medical response classes ranging from the initial ECA class to specialized rescue and medical classes such as Prehospital Trauma Life Support and Tactical Medic courses. He has been credited with inspiring members of the medical community in the San Antonio area. He is currently earning a doctorate degree in education while working as a full-time faculty member of UTHSCSA.

*EMS Volunteer Provider of the Year – Angleton Area Emergency Medical Corps*, for providing excellent emergency medical services to its community. Serving a 400-square-mile area, the 42 members of AAEMC respond to about 2,600 calls annually. AAEMC actively educates the community about the dangers of drinking and driving using the Fatal Vision goggles and a wrecked vehicle display sponsored by Allstate Insurance Company and Angleton Fire Department. AAEMC participates in the Sunshine Committee, which helps members of the community who need assistance with food, clothing and toys for the holidays. AAEMC sponsors rescue classes and other continuing education classes for emergency response personnel. AAEMC has used grant funds to supply Angleton PD and Brazoria County Courthouse with AEDs and has held CPR and AED training for emergency personnel and laypersons. Twelve members of AAEMC are trained in critical incident stress debriefing, helping local emergency response personnel handle the day-to-day stresses of their jobs.



Lucille Maes, LP, accepted the award for Angleton Area Emergency Medical Corps, which took top honors for Volunteer Provider of the Year. Maes is the director of the Brazoria County service.

*EMS Educator of the Year – Lance Villers, MA, LP, NREMT-P*, for his leadership and commitment to EMS education in Texas. Having been in EMS for 13 years, Villers has risen through the ranks of EMS to become

AAEMC and the East Texas Gulf Coast RAC-R are currently working together to introduce legislation that would require vehicles to vacate adjacent lanes or slow down when an emergency vehicle is stopped on the roadway. This legislation could reduce the number of injuries and deaths to emergency responders in Texas.

*EMS Medical Director of the Year – Stephen D. Benold, MD, for his work and dedication as medical director for Williamson County EMS and 17 first responder organizations in Williamson County. A full-time family practitioner by trade, Dr. Benold has voluntarily served as medical director of WCEMS for 20 of the last 24 years. He rides out with medics at least one day a week, discussing medical issues and getting to know the medics and the first responders in their field environment. He oversees WCEMS' system of continuing education, personally doing many of the lectures, and requires that the first responders also be involved in obtaining more continuing education. Dr. Benold stays updated on new trends and treatments in emergency medicine. His close work with EMS administrative staff and EMS personnel has allowed WCEMS to create an advanced state of standing orders and protocols that allow the medics to give their patients the best possible treatment. He has directed WCEMS through more than 20 years of growth and change.*

*EMS Administrator of the Year – Belinda Richter EMT-P, Fayette County EMS, for leadership in quality prehospital patient care and community-wide emergency response. Having worked in EMS for more than 20 years, Richter has always strived for the best in care from her service. She began volunteering in EMS after taking an ECA course so that she could take Girl Scout troops on camping trips. Since she became administrator, the service has moved to a full-time paid service, which resolved many staff shortage issues. The service also has implemented a system of roaming EMS captains who can quickly respond with ALS care throughout the county and assist EMS*

crews as needed. She also implemented a first responder program for the nine fire departments in the county. She has proven her skills in grant writing, successfully receiving funding for LifePak 12 upgrades, AEDs and building projects. She still works health fairs and offers CPR classes to the public as needed.

*EMS Person of the Year – Stan Irwin, LP, Leon Valley Fire Department, for leadership and dedication in providing emergency medical service to the citizens of Texas. Irwin is a captain with Leon Valley Fire Department and a leader in Southwest Texas RAC's Emergency Operation Division. Irwin has recently taken a lead role in developing the STRAC Emergency Response Unit command/communications trailer, responding for days on end during the wildfires in southwest Texas, hazardous material spills in Bexar County and numerous demonstration events. As a member of STRAC's Regional Rescue Team, he was with one of the first water rescue squads to respond to the Tropical Storm Allison flooding in Houston in 2001 and to the south Texas flooding in 1998 and 2002. He is considered by many to be the driving force behind the annual Garner Wilderness Rescue Competition, a search and rescue training exercise/competition held in Garner State Park. He is also a member of Texas Task Force 1. His many years of emergency response training, tactical response training, law enforcement training and rescue training allow him to train other emergency personnel and to respond to emergency situations with great effectiveness and efficiency, always giving the patient the best treatment possible.*

*Texas Air Medical Service Award – Air Med 1, San Angelo, for leadership in providing air medical services to local communities. Serving the mostly rural areas surrounding San Angelo, Air Med 1 strives to give the greatest level of care while transporting the critically ill and injured to San Angelo's trauma center and other appropriate hospitals. Air Med temporarily extended its service area to cover the*



*Belinda Richter, EMT-P, couldn't hide her surprise when she was called to the stage after winning EMS Administrator of the Year for her work in Fayette County.*



*Air Medical Service of the Year went to AirMed 1. AirMed 1 serves San Angelo and the surrounding rural areas.*

Abilene area when that area lost its air medical service. Air Med personnel also educate the community about the service by teaching landing zone development

classes, safety classes and global positioning systems usage classes. Air Med participates in local Shattered Dreams programs, trying to impress upon the youth of the communities that drinking while driving is dangerous. Air Med's communications center helps coordinate the many emergency support services that respond to major crises and activates Shannon Medical Center's trauma team as needed.

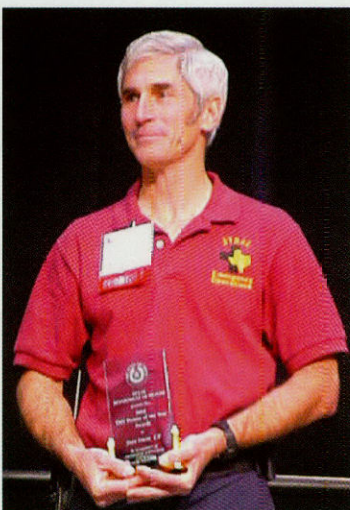
*First Responder of the Year – Bogata Fire and Rescue*, for assuming a leadership role in the areas of patient care, public access, medical control, disaster preparedness, public education and training. Bogata Fire and Rescue has 23 members and covers approximately 160 square miles in Red River County. Averaging 275 calls annually, BFR purchased the first AED for a first responder organization in Red River County. The AED has already been credited with saving one individual's life. BFR

has assisted six other local departments in establishing first responder organizations and has been instrumental in finding instructors and continuing education classes for all the responders in Red River, Titus, Lamar and other Texas counties. During the December 2000 ice storm in north Texas, BFR was incident command for response in Red River County, and was responsible for helping clear the roads, medical care (with assistance from Lifenet), fire calls, welfare concern calls, food and shelter concerns for displaced community members and other activities as needed. BFR is also very active in teaching injury prevention and 9-1-1 awareness to the community.

*EMS Public Provider of the Year – Montgomery County Hospital District EMS*, for

achievements in community education and leadership in emergency medical services to the community. MCHD EMS serves more than 1,100 square miles and more than 300,000 people in Montgomery County. Progressive protocols including c-spine clearance, pericardiocentesis (drawing blood from around a damaged heart) and rapid sequence intubations allow MCHD EMS medics to aggressively treat patients during transport to hospitals in Montgomery and Harris Counties. MCHD EMS has also been instrumental in placing 130 AEDs in fire departments, law enforcement agencies and public buildings, and training more than 400 individuals on use of the AEDs. MCHD EMS also supports injury prevention education within its community, teaching area children safe habits and how to access the 9-1-1 system. The service has recently announced that it is partnering with LifeGift Organ Donation Center in an effort to extend the potential base for tissue donors in and around Montgomery County. MCHD EMS actively supports local, regional and state EMS coalitions such as Southeast Texas Trauma Regional Advisory Council and the Governor's EMS/Trauma Advisory Council.

*Outstanding RAC of the Year – Heart of Texas Regional Advisory Council*, for continuing excellence in regional trauma system development. HOTRAC has strong participation by hospitals and EMS providers within its area. The agency offers services and educational opportunities to its participants, such as grant writing classes, mock hospital designation surveys and technical assistance. Demonstrating strong leadership, HOTRAC actively participates on the state level in policy and legislative issues and has built a strong public information base within its service areas. HOTRAC's system is driven by improvement in patient care. HOTRAC shares its experiences with other trauma regional advisory councils, assisting them with participation and other concerns and has been instrumental in networking the four central Texas trauma regional advisory councils.



*Stan Irwin, LP, of the Leon Valley Fire Department, won EMS Person of the Year. Irwin is active in emergency rescues and is a member of Texas Task Force 1.*



## EMS Award Categories

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

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

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

**Public Information/Injury Prevention Award** honors an EMS group or individual for outstanding achievement in public education or injury prevention.

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

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

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

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

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

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

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

# 2003 Texas EMS Award Nomination Application

This nomination is for:

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

Name of nominee \_\_\_\_\_

Street address of nominee \_\_\_\_\_

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

Telephone number of nominee *Area Code:* \_\_\_\_\_

Your name \_\_\_\_\_

Your street address \_\_\_\_\_

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

Your level of certification \_\_\_\_\_

Your daytime telephone number *Area Code:* \_\_\_\_\_

Your service or other affiliation \_\_\_\_\_

Your signature \_\_\_\_\_ Date \_\_\_\_\_

**Send awards to:** Texas EMS Awards, Texas Department of Health, 1100 West 49<sup>th</sup> Street, Austin, TX 78756-3199.

**Make 15 copies** of the nomination packet. **Nomination packets should be limited to:** the completed form above; three typewritten pages of background information; one page of documentation or examples; and five letters. Only that number of pages will be forwarded to the Awards Committee. Any extra pages will not be reviewed.

**Nominations must be postmarked by September 15, 2003.**

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

We will announce award winners at Texas EMS Conference 2003 during the Awards Luncheon on November 25, 2003.

Firefighters from Saginaw Fire Department work to remove a severely injured male from his vehicle after it was struck while parked on the shoulder. Saginaw FD was awarded an EMS local project grant. Photo by Ryan McDonald.



## Local Projects Grants awarded

This year the Bureau received 191 grant proposals for Local Projects grants. The Bureau funded 96 projects including: 23 ambulances, nine AEDs, 23 monitor-defibrillators, 51 educational projects, 276 pieces of communication equipment, seven Regional Advisory Councils and two EMS provider associations. Emphasis was placed on grants that would upgrade the level of service available, such as putting AEDs on BLS units, a reduction in EMS response time or improvement of patient care capabilities at a county level.

Next year's proposals are expected to be available by spring 2003. We anticipate that the Request for Proposal (RFP) will be published on the State Electronic Bulletin Board in March with the usual mailout just after publication. Questions? Contact Terri Vernon at 512/834-6700 or e-mail [terri.vernon@tdh.state.tx.us](mailto:terri.vernon@tdh.state.tx.us).

Organization name, city, county, dollar amount and project

**Appleby Volunteer Fire Department**

Nacogdoches, Nacogdoches  
\$5,000, extrication equipment

**Aransas County Medical Services, Inc.**

Rockport, Aransas  
\$5,478, monitor defibrillators

**Austin-Travis County Emergency Medical Services**

Austin, Travis  
\$7,500, seminars

**Baxter Volunteer Fire Department**

Athens, Henderson  
\$3,000, automated external  
defibrillators

**Ben Wheeler Fire Department**

Ben Wheeler, Van Zandt  
\$5,000, extrication equipment

**Big County EMS Providers****Organization**

Abilene, Taylor  
\$31,630, radios, oxygen equipment,  
traction splints, a pulse oximeter,  
stair chairs, jump kits, a flow meter,  
a traction splint, a cot and  
backboards

**Boonsville-Balsora Volunteer Fire****Department**

Bridgeport, Wise  
\$4,180, oxygen tanks, regulators,  
jump bags, blood pressure kits and  
pagers

**Bovina EMS**

Bovina, Parmer  
\$35,000, an ambulance

**Brady-McCulloch County EMS**

Brady, McCulloch  
\$3,224, pagers

**Brazos Valley RAC**

Bryan, Brazos  
\$37,980, glucometers, oxygen  
equipment, stethoscopes, pulse  
oximeters, backboards, pediatric  
immobilizers, spider straps, global  
positioning system receivers, triage  
kits, radios, pagers, stretchers, jump  
kit bags, caridac monitors,  
rechargeable batteries and a stair  
chair

**Callender Lake Volunteer Fire****Department**

Murchison, Van Zandt  
\$1,268, mannequins, an oxygen bag,  
a stretcher and a raised anatomical  
chart set

**Campbell Emergency Response Team**

Weatherford, Parker  
\$2,466, a computer and a projector

**Canyon Lake Fire/EMS, Inc.**

Canyon Lake, Comal  
\$35,000, an ambulance

**Center Hill Volunteer Fire****Department**

Linden, Cass  
\$680, pagers

**Central Texas Trauma Council**

Temple, Bell  
\$25,000, EMS certification and  
continuing education training

**Citizens Emergency Medical Services**

Clyde, Callahan  
\$2,515, radios and pagers

**Clarksville City - Warren City VFD**

Gladewater, Gregg  
\$1,392, an oxygen regulator, a  
portable hard case, a flight site  
visibility system, reflective vests  
and first responder tote bags

**Clay County Memorial Hospital**

Henrietta, Clay  
\$27,988, an ambulance

**Coastal Bend RAC, TSA U**

Corpus Christi, Nueces  
\$32,254, a monitor defibrillator,  
mannequin trainers, a prevention  
program, a skid stretcher and  
backboards

**Concho Valley RAC, TSAK**

San Angelo, Tom Green  
\$10,000, bike helmets and safety  
books

**Converse Fire/EMS**

Converse, Bexar  
\$11,075, monitor defibrillators

**Crawford Emergency Medical Service, Inc.**

Crawford, McLennan  
\$15,000, an ambulance

**Crowley Fire Department**

Crowley, Tarrant  
\$10,362, an automated external  
trainer and a monitor defibrillator

**Cuero Community Hospital EMS**

Cuero, Dewitt  
\$35,000, an ambulance

**Dalhart EMS/Coon Memorial Hospital**

Dalhart, Hartley  
\$35,000, an ambulance

**Darrouzett Hospital District**

Darrouzett, Lipscomb  
\$35,000, an ambulance

**City of Denver**

Denver City, Yoakum  
\$35,000, an ambulance

**Dickens County Ambulance Services**

Dickens, Dickens  
\$5,111, emergency medical  
technician training

**Donley County Hospital District****Associated Ambulance Authority**

Clarendon, Donley  
\$6,000, an automated external  
defibrillator and stretchers

**Dublin Ambulance**

Dublin, Erath  
\$1,578, computer equipment

**Eagle Pass Fire Department**

Eagle Pass, Maverick  
\$35,000, an ambulance

**Eastex EMS Ambulance Service**

Kirbyville, Jasper  
\$5,794, radios and communication  
equipment

**El Campo EMS**

El Campo, Wharton  
\$35,000, an ambulance

**El Paso County Emergency Services****District #2**

El Paso, El Paso  
\$4,659, oxygen equipment, board  
splints and medical bags

**Floydada Emergency Medical Services**

Floydada, Floyd  
\$35,000, an ambulance

**Fort Hancock Emergency Medical Services**

Fort Hancock, Hudspeth  
\$35,000, an ambulance

**Fredericksburg EMS**

Fredericksburg, Gillespie  
\$5,180, a pulse oximeter,  
backboards, extrication equipment,  
traction splints, stair chairs and  
pagers

**Frontier Ambulance Corporation**

Morton, Cochran  
\$15,000, an ambulance

**Galveston EMS**

Galveston, Galveston  
\$12,500, stretchers

**GrandPraire**

Grand Praire, Dallas  
\$10,832, monitor defibrillators

**H & S Emergency Medical Services Association Inc.**

Spearman, Hansford  
\$863, a pulse oximeter and a pediatric resuscitation system

**Hamilton EMS**

Hamilton, Hamilton  
\$15,000, an ambulance

**Happy Volunteer Fire and EMS Department**

Happy, Swisher  
\$2,179, an incident command board, triage belts, first responder bags, blood pressure cuffs, stethoscopes, backboards and radios

**Harper Volunteer Fire Department, Inc**

Harper, Gillespie  
\$3,622, an automated external defibrillator trainer, mannequin trainers, a pulse oximeter and a Broselow bag

**Harrison County First Responders**

Marshall, Harrison  
\$5,310, oxygen tanks, regulators and kits, batteries, extrication equipment, stethoscopes and blood pressure equipment

**Heart of Texas Regional Advisory Council**

Waco, McLennan  
\$40,000, an EMS certification course and continuing education training

**Hemphill County EMS**

Canadian, Hemphill  
\$4,801, mannequins, a projector and a laptop

**Iraan Volunteer Fire Department/EMS**

Iraan, Pecos  
\$15,000, an ambulance

**Jacinto City Fire & EMS**

Houston, Harris  
\$31,500, an ambulance

**Jersey Village**

Jersey Village, Harris  
\$1,897, an ambulance cot and floor mount

**Keene Fire/Rescue**

Keene, Johnson  
\$1,230, a projector

**Kerrville Fire /EMS**

Kerrville, Kerr  
\$7,275, pre-hospital advanced life support training, pulse oximeters, stair chairs, pediatric packs and pagers

**Kinney County**

Bracketville, Kinney  
\$2,956, an automated external defibrillator trainer, a pulse oximeter, a thermometer, a stretcher, pediatric safety seats and other medical supplies

**Lake Whitney Medical Center EMS**

Whitney, Hill  
\$2,122, training mannequins and backboards

**Leon Valley Fire Department/EMS**

Leon Valley, Bexar  
\$12,500, a monitor defibrillator

**Liberty Chapel Volunteer Fire Department**

Cleburne, Johnson  
\$4,034, a regulator, blood pressure cuffs, trauma bags and radios

**Lindale Volunteer Fire Department**

Lindale, Smith  
\$3,177, automated external defibrillators and battery packs

**Lufkin Fire Department**

Lufkin, Angelina  
12,080, a monitor defibrillator

**Lynn County Hospital District EMS**

Tahoka, Lynn  
\$800, tires

**Manvel Emergency Medical Services**

Manvel, Brazoria  
\$11,290, a monitor defibrillator and responder kits

**McGregor Volunteer EMS**

McGregor, McLennan  
3,574, monitor defibrillators and a global positioning system

**Montgomery County Hospital District EMS**

Conroe, Montgomery  
\$6,120, radios and communication equipment

**MP Ambulance Services, Inc.**

Houston, Harris  
\$750, computer equipment

**Nevada Volunteer Fire Department**

Nevada, Collin  
\$2,263, an airway bag, a trauma bag, a pediatric bag, blood pressure cuffs, an oxygen regulator, stethoscopes, backboards, straps and extrication equipment

**Nortex Regional EMS Provider's Association**

Wichita Falls, Wichita  
\$8,866, search and rescue equipment, textbooks for advance studies and communication equipment

**Odessa Fire Department**

Odessa, Ector  
\$1,778, mannequins

**Olton Volunteer Ambulance Association**

Olton, Lamb  
\$912, CPR mannequins and training packs

**Pecan Plantation EMS**

Granbury, Hood  
\$2,950, radios

**Pecos County EMS/Pecos County Memorial Hospital**

Fort Stockton, Pecos  
\$35,000, an ambulance

**Pickton Pine Forest Volunteer Fire Department**

Pickton, Hopkins  
\$4,500, extrication equipment

**Port Isabel - EMS Department**

Port Isabel, Cameron  
\$12,500, a monitor defibrillator

**Saginaw Fire Department**

Saginaw, Tarrant  
\$8,750, a monitor defibrillator

**San Jacinto County First Responders**

Point Blank, San Jacinto  
\$8,050, first responder bags, radios and a scanner



*Keene Fire/Rescue responded after a car stopped on Hwy 67 to make a left turn and a pickup rear-ended the car. Three people were extricated with the Jaws of Life and flown to the hospital. Keene was awarded an EMS local project grant. Photo by Wayne Tomlinson.*

**Schleicher County Volunteer EMS**

Eldorado, Schleicher  
\$5,878, communication equipment

**Seguin Fire/EMS**

City of Seguin, Guadalupe  
\$35,000, an ambulance

**Shackelford County EMS**

Albany, Shackelford  
\$35,000, an ambulance

**Shady Oaks Volunteer Fire Department**

Athens, Henderson  
\$1,865, a regulator, a basic life support bag and radios

**South Plains EMS Regional Advisory Council**

Lubbock, Lubbock  
\$6,285, communication equipment

**Southern Oaks Volunteer FD**

Streetman, Freestone  
\$4,052, extrication equipment

**Southside Volunteer Fire Department**

Palestine, Anderson  
\$3,850, pagers

**Sundown EMS**

Sundown, Hockley  
\$17,500, an ambulance

**Sunray**

Sunray, Moore  
\$35,000, an ambulance

**Tennessee Colony Volunteer Fire Department**

Tennessee Colony, Anderson  
\$5,470, oxygen kits and pagers

**Texas State Technical College-West Texas**

Sweetwater, Nolan  
\$725, an ambulance stretcher

**Trauma Service Area - H, Regional Advisory Council**

Lufkin, Angelina  
\$21,731, training mannequins, backboards, board splints, bike helmets and smoke detectors

**Tri-City Emergency Medical Services, Inc.**

Gordon, Palo Pinto  
\$28,000, an ambulance

**Trinity Valley Community College**

Kaufman, Kaufman  
\$3,185, a cot, cricothyrotomy and pneumothorax simulators and a pre-hospital advanced life support resusci-baby

**The University of Texas at**

**Brownsville and Texas Southmost College**

Brownsville, Willacy  
\$5,120, emergency medical technician training, a backboard, a head immobilizer, a splint kit, a flow regulator, airway management equipment, spider straps and c-collars

**Upshur County Ambulance Service Inc.**

Gilmer, Upshur  
\$5,800, monitor defibrillators

**Val Verde Regional Medical Center EMS**

Del Rio, Val Verde  
\$5,000, basic trauma life support and geriatric advanced life support training

**Waskom VFD/EMS Services, Inc.**

Waskom, Harrison  
\$7,733, a monitor defibrillator

**Weslaco Fire Department EMS**

Weslaco, Hidalgo  
\$1,850, a monitor defibrillator and pediatric backboards

**Westside VFD**

Chandler, Henderson  
\$5,702, an automated external defibrillator, extrication equipment, a scoop stretcher, stethoscopes, trauma bags, blood pressure kits, communication equipment and oxygen equipment

**Wichita Falls Fire Department**

Wichita Falls, Wichita  
\$3,780, pulse oximeters, oxygen kits, equipment bags and blood pressure kits

**Willacy County Emergency Service**

Raymondville, Willacy  
\$7,666, pagers and radios

**Yoakum County**

Plaine, Yoakum  
\$35,000, an ambulance

# Local & 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? Have you elected new officers?

Send your news to:  
Texas EMS Magazine  
Kelly Harrell, Editor  
Bureau of Emergency  
Management  
1100 West 49th Street  
Austin, Texas 78756-3199  
(512) 834-6700  
Fax (512) 834-6736

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.

## Liberty FD and Ready Teddy teach area children to buckle up

Liberty FD recently educated area elementary students about using seat belts while in vehicles. Ready Teddy greeted the students and parents at the student drop-off area with a sign that read "Wear your seatbelt." LFD medics showed safety videos about properly buckling up and stressed the importance of everyone in a vehicle being properly buckled in.

## VFD water rescue team receives kudos

The Victoria FD Swift Water Rescue Team was featured in a July *Victoria Advocate* article. In July, VFD SWRT rescued a woman and her granddaughter

from a vehicle that had become partially submerged in fast-moving flood waters. Both were transported to Citizens Medical Center in Victoria.

## A/TCEMS takes honors at annual wilderness rescue competition

Austin/Travis County EMS Rescue Paramedics recently were awarded top honors in the Advanced Category Rescue and the Overall High Point Traveling Trophy in the Annual Wilderness Rescue Competition at Garner State Park. This year's rescue involved a victim who had fallen approximately 40 feet and sustained multiple injuries. The three-day wilderness rescue competition was sponsored by the Texas Association of Emergency Medical Technicians. The

*Liberty Elementary students have their picture taken with Ready Teddy. Ready Teddy and LFD recently taught Liberty elementary students about the importance of wearing seatbelts while in vehicles.*



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competition tested the teams' efficiency and effectiveness, rescue preparedness, incident command management, scene safety, emergency medical skills, trouble-shooting and teamwork, and team communications. A/TCEMS rescue staff work alongside Austin FD Special Operations rescue specialists in real-life rescues.

## Odessa College opens new EST building

In August, Odessa College opened its newly remodeled Emergency Services Technology building. The fire technology and EMS departments held classes in the building throughout the fall 2002 semester. The 11,000 square-foot building now includes two classrooms, a computer lab, a communications room, a breakroom and a bunker room for equipment storage. The building also includes bays for the department's fire engine and ambulance.

## STAR Flight receives award, recognition

Six STAR Flight crew members recently received commendations at the annual Austin Police Department Awards dinner. The crew members were recognized for rescuing two APD officers from the November 15, 2001, Onion Creek flood. STAR Flight also recently was selected to receive the Heroism Award For Helicopter Search



From left, Michael Duplantis, student; Marilyn Paliani, and Dudley Wair, Schertz EMS director, pose with the Lifepak AED model that Defibrillators On Campus hopes to place on all campuses.

and Rescue, a national honor annually awarded by *Rotor and Wing Magazine*.

## Raisin VFD holds fundraiser

The *Victoria Advocate* recently featured an article about Raisin VFD's fundraising barbecue and auction. The monies raised will be used to build a new substation. RVFD has one main station and four substations in its 135-square-mile service area and worked 145 calls in 2001.

## Schertz looking to place AEDs on school campuses

A community group known as Defibrillators On Campus

(DOC) is trying to place an AED on each campus in the Schertz-Cibolo-Universal City Independent School District. DOC is currently collecting donations for the purchase of the AEDs. The funds will be used to buy the same Lifepak model used by Schertz EMS. Schertz EMS will train the school staff and students in CPR and the use of the AEDs.

## Pedernales area dedicates new ambulance and fire truck

The *Lake Travis View* recently featured an article about a new ambulance and new fire truck being dedicated in the Pedernales area of Travis County. The ambulance is

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## TEXAS EMS CERTIFICATIONS AS OF DECEMBER 11, 2002

ECA	5,214
EMT	25,747
EMT-I	4,029
EMT-P	9,484
LP	5,745
TOTAL	50,219
COORDINATOR	355
INSTRUCTOR	1,991



China Springs VFD offered an ECA course during July-August 2002. Pictured are, from left, front row, Tommy Rajkowski, ECA; Todd Rajkowski, ECA; from left, second row, Carolyn Duggan-Gaubert; Steve Little, ECA; David Prestidge, ECA; Melissa Prestidge, ECA; Melinda Mullins, ECA; from left, third row, Kevin Brister; Stan Crain, LP; and Jeri Crain, ECA. Not pictured are James Reeves and Larry Eschenburg, EMT. The course was taught by Susan Simmons, EMT-I, and Michael Simmons, EMT.

Austin/Travis County EMS' most western emergency vehicle and serves a fast-growing community. The fire truck will enable the firefighters in that area to more successfully battle fires similar to the Cat Hollow fire, which drew assistance from as far away as Bulverde. The Pedernales area is southwest of Austin.

### Participants complete ECA course at China Springs VFD

Twelve individuals completed the initial ECA course offered by the China Springs VFD. The class began July 20, 2002,

and ended August 24. The individuals participating in the course included Tommy Rajkowski, ECA; Todd Rajkowski, ECA; Carolyn Duggan-Gaubert; Steve Little, ECA; David Prestidge, ECA; Melissa Prestidge, ECA; Melinda Mullins, ECA; Kevin Brister; Stan Crain, LP; Jeri Crain, ECA; James Reeves; and Larry Eschenburg, EMT. The course was taught by Susan Simmons, EMT-I, and Michael Simmons, EMT.

### Tri-County FD makes big-screen debut

According to a *News Citizen* article, the Tri-County FD recently announced an agreement

with Casablanca Productions of Houston to participate in the making of a full-length comedy/drama. The movie's basic plot focuses on the plight of a small rural fire department that receives a higher inspection rating because the inspector doesn't have his glasses and can't see the condition of the department's equipment. The story follows the department's ensuing fundraising campaign to maintain the higher rating by upgrading its equipment. The unnamed film used Waller County residents as extras and the film crew filmed TCFD in live-action calls as potential footage for the movie. The filming



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began during an actual TCFD fundraising event that featured fire department and law enforcement vehicles, community safety education, live music, kids' activities and a blood drive. TCFD currently serves approximately 120 square miles west of the Houston area.

## **Brownsville donates ambulance to UTB-TSC**

The City of Brownsville recently donated an ambulance to the University of Texas-Brownsville and Texas Southmost College. UTB-TSC plans to use the ambulance as a training tool, allowing students in the Emergency Medical Technology department to practice patient care in the back compartment of the ambulance.

## **SA emergency personnel honored by survivor, family**

Joey Huerta, 9, and his family recently visited many of the emergency response personnel who responded to a car crash last June that sent Joey, his pregnant aunt and four other children to the hospital with severe injuries. All except Joey were released from the hospital within a week of the crash. With injuries including severe skull and facial fractures and a ruptured spleen, Joey spent five weeks in pediatric intensive care at University Hospital and four weeks at Christus Santa Rosa Children's

Hospital for Rehabilitation. Joey gave firefighters, paramedics, surgeons and San Antonio AirLife crew members a plaque that read, "You are the guardian angel God sent to look out for me and help save my life," as thanks for saving his life after the car crash. Joey has had six surgeries and will undergo more surgeries to replace missing portions of his skull.

## **Waller County VEMS holds fundraiser**

Waller County VEMS held a fundraiser in September to raise money to help build a new EMS building in the county. Kids' activities, such as a dunking booth, a moonwalk and child fingerprinting, were offered, along with a silent auction.

## **Midland FD recognized by *Firehouse***

Midland FD was recently ranked 139<sup>th</sup> out of the top fire departments nationwide by the July issue of *Firehouse*. The fire industry trade magazine based its rankings on a 2001 survey, using statistics such as total calls and number of runs. Among the statistics, Midland's rescue ranked 104 out of 146 heaviest rescues; Engine 6 ranked 233<sup>th</sup> busiest engine with 929 runs; EMS 8 ranked 93 out of 119 busiest ambulances with 2,062 runs; and Battalion Chief 1 tied with the Bridgeport, Connecticut, battalion chief as being the

busiest with 500 runs. In 2001, MFD consisted of eight engines companies, five ambulances, five paramedic units, three on-duty chief officers and 176 on-shift firefighters; the department responded to 8,371 incidents.

## **Schertz PD, city buildings add AEDs**

In December, AEDs were placed in Schertz Police Department vehicles, and in Schertz City Hall, the Schertz Library, the Public Works Department and the Schertz Community Center. Schertz EMS personnel are now training law enforcement and city personnel in the use of AEDs.

## **AFD firefighters receive higher certification**

In October, Arlington FD announced that all AFD firefighters can now provide advanced life support to patients. As of October, 212 firefighters had received EMT-I certification and another 55 had received paramedic certification. AFD responds to all medical calls in its service area. By increasing the level of certification of training of the firefighters, the personnel can now perform more lifesaving procedures while patients wait for an ambulance to arrive. AFD initiated the increase in EMS certification training for firefighters after a consultant recommended the move to

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Laredo FD and TxDOT/TDH Safe Riders program recently held a child passenger car seat give-away. During the program, they gave 120 families new car seats for their children.

HEB Groceries, Toys R Us, and Methodist Healthcare Trauma Department.

## LFD, TDH, TxDOT give car seats to families

Laredo FD and the Texas Department of Transportation/TDH Safe Riders Program recently partnered to give 120 families in the Laredo area free child passenger car seats. The families were selected after inspections of their current car seats and needs assessment surveys. All car seat recipients were educated in the proper use of the car seats and given hands-on practice in the proper installation of the car seats.

improve emergency medical services in 1999.

## South Texas RAC sees immediate effects of car seat checkups

In November, South Texas RAC was informed that through the efforts of a recent car seat checkup in the north San Antonio-Schertz area, two children had potentially been saved from injuries in a car wreck. A woman had stopped at the car seat checkup with her two children and had one car seat replaced due to a recall and received a second seat due to the size of her child. The next after-

noon, her husband, with both children properly restrained, was involved in a car wreck. The vehicle was substantially damaged and her husband was slightly injured, but the two children were completely uninjured. The emergency personnel on scene the wreck told the woman that she needed to replace both car seats since they had been part of a wreck, so she went to Schertz EMS office to request two new car seats. She was very thankful to everyone who helped get her children into the proper car seats. The car seat checkup, held on November 14, was sponsored by TxDOT, TDH, Schertz EMS,

## Preston EMS gets new ambulance

Preston EMS, near Pottsboro, recently took delivery of a new ambulance. PEMS purchased the new ambulance with a grant from the Thelma Braun Foundation, a loan from the American Bank and \$28,000 raised at a recent fundraiser. The new ambulance has more storage space, a larger compartment for the patients and the medics and a heat pump that will maintain a steady compartment temperature. The new ambulance will replace the 1993 model PEMS had been using. PEMS is currently raising funds to purchase a new fire truck.

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## Texas Department of Health EMS Offices

**Bureau of  
Emergency Management**  
<http://www.tdh.state.tx.us/hcqs/ems/regions.htm>  
 1100 West 49th Street  
 Austin, Texas 78756-3199  
 (512) 834-6700

**Public Health Region 1**  
<http://www.r01.tdh.state.tx.us/ems/emshome.htm>

Terry Bavousett  
 P.O. Box 60968, WTAMU Station  
 Canyon, Texas 79016  
 (806) 655-7151

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

**Public Health Regions 2 & 3**  
<http://www.tdh.state.tx.us/hcqs/ems/r2&3home.htm>

Kevin Veal  
 1301 South Bowen Road, Suite 200  
 Arlington, TX 76013  
 (817) 264-4500

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

Andrew Cargile  
 4601 S. First, Suite L  
 Abilene, TX 79605  
 (915) 795-5859

**Public Health Regions 4 & 5**  
<http://www.r04.tdh.state.tx.us/hcqs/ems/emstyler.htm>

Brett Hart  
 1517 W. Front Street  
 Tyler, Texas 75702-7854  
 (903) 533-5370

**Public Health Region 6**  
<http://www.r06.tdh.state.tx.us/ems/r6home.htm>

C. Wayne Morris  
 5425 Polk Street, Suite J  
 Houston, Texas 77023  
 (713) 767-3333

**Public Health Region 7**  
<http://www.r07.tdh.state.tx.us/ems/ems.htm>

Rod Dennison  
 2408 S. 37th St.  
 Temple, Texas 76704-7168  
 (254) 778-6744

**Public Health Region 8**  
<http://www.r08.tdh.state.tx.us/r8home.html>

1021 Garner Field Road  
 Uvalde, Texas 78801  
 (830) 278-7173

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

**Public Health Regions 9 & 10**  
<http://www.tdh.state.tx.us/hcqs/ems/r910home.htm>

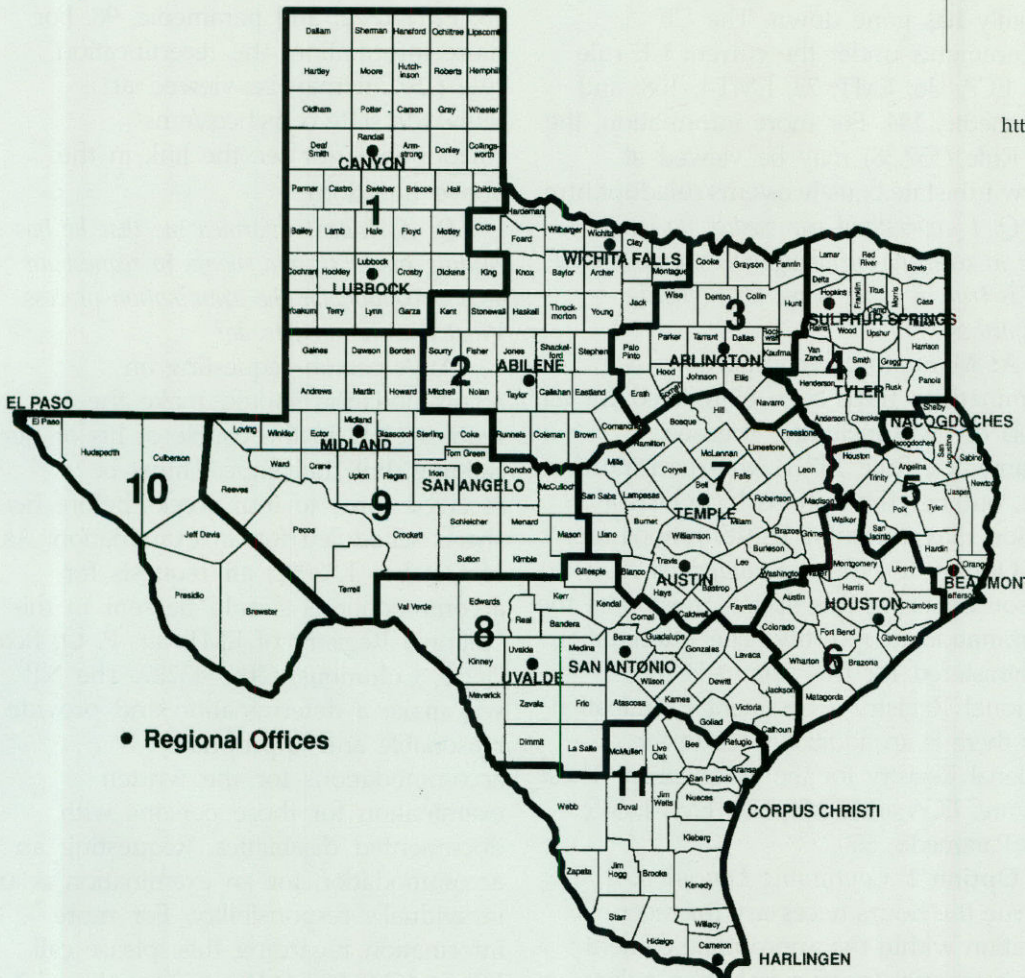
Anthony Viscon  
 401 E. Franklin, Suite 210  
 El Paso, Texas 79901  
 (915) 834-7708

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

**Public Health Region 11**  
<http://www.tdh.state.tx.us/hcqs/ems/r11home.htm>

Noemi Sanchez  
 601 W. Sesame Dr.  
 Harlingen, Texas 78550  
 (956) 423-0130

Rothy Moseley  
 1233 Agnes  
 Corpus Christi, Texas 78401  
 (361) 889-3481



By  
Eddie Walker, EMT-P

# FAQ *Education*

**Q:** *I will be recertifying soon and understand the CE rule has changed. Since I am planning on recertifying by CE, I have two questions about it. Do I still need to submit a CE Summary every two years? Did the total number of CE hours change?*

**A:** The two-year CE Summary reporting requirement is no longer required. All CE accrued is for the four-year certification period. The number of hours for fulfilling the CE requirement actually has gone down. The CE requirements under the current CE rule are: ECA, 36; EMT, 72; EMT-I, 108; and Paramedic, 144. For more information, the CE Rule (157.38) may be viewed at [www.tdh.state.tx.us/hcqs/ems/ruladopt.htm](http://www.tdh.state.tx.us/hcqs/ems/ruladopt.htm).

**Q:** *I understand paramedics no longer have to recertify by taking an examination. If this is true, is it the same for licensed paramedics?*

**A:** Mandatory recertification examinations have been eliminated for all levels of EMS including licensed paramedics. Rule 157.34, the recertification rule, outlines the options by which a person may recertify. Those options are:

**Option 1: Written Examination** A person choosing this option **must** pass the examination to recertify. The examination administered for this option is the National Registry Assessment Examination and there is an additional fee to the National Registry for the examination. Those fees are: ECA and EMT, \$20; EMT-I, \$45; and Paramedic, \$50.

**Option 2: Continuing Education.** Accrue the hours necessary for recertification within the appropriate content area categories (note: a transition policy reduces the total hours required and relaxes the content area category requirement for LPs in the interim until 12/31/03.).

**Option 3: National Registry Certification** A person who has gained or maintained National Registry certification may recertify by showing evidence of current National Registry certification.

**Option 4: Formal Recertification Course** A person may choose to take a recertification course instead of pursuing the other options. The hours for the recertification courses are: ECA, 24; EMT, 48; EMT-I, 72; and paramedic, 96. For more information, the recertification rule (157.34) may be viewed at [www.tdh.state.tx.us/hcqs/ems/ruladopt.htm](http://www.tdh.state.tx.us/hcqs/ems/ruladopt.htm) (or see the link in the above question).

**Q:** *A student informed me that he has a reading disability and wants to request an accommodation for the examination process. What does he need to do?*

**A:** A person requesting an accommodation should make the request early in the course of his or her training, but the request **must** be received three to four weeks before he/she is scheduled for an examination. As of October 1, 2002, **all** requests for accommodations should be sent to the National Registry of EMTs at: P. O. Box 29233, Columbus, Ohio 43229. The NR will make a determination and provide reasonable and appropriate accommodations for the written examination for those persons with documented disabilities. Requesting an accommodation for an examination is an individual's responsibility. For more information regarding this, please call NR at (614) 888-4484, or view the Accommodations Disability Policy at: [www.nremt.org/about/policy\\_accommodations.asp](http://www.nremt.org/about/policy_accommodations.asp).

By  
Linda Reyes

# FAQ *EMS Standards*

**Q:** *I took the NR exam two weeks ago. How much longer before I receive my grades and ID card?*

**A:** You can expect to wait two to three weeks for NR results. If both TDH and NR applications are complete and you have met all eligibility requirements, your state certificate and ID card will follow in approximately 7-10 days. You will be able to view your state-certified status on our web site at: [www.tdh.state.tx.us/hcqs/ems](http://www.tdh.state.tx.us/hcqs/ems).

You will NOT be able to see status changes if your state or NR application is deficient or you fail the NR exam. National Registry will notify you of deficient NR applications. TDH will notify you of state application deficiencies.

**Q:** *I'll be completing my paramedic course in March. Do I contact my local public health region office to schedule my exam appointment?*

**A:** Region office staff will proctor advanced level test sites until January 31, 2002. Beginning February 1, Texas will require all initial advanced candidates to pass the NR exam. The EMS program you complete will most likely provide an NR test site for students completing its courses. If you are unable to test with your class, you may be able to test at another school or check out the Exam Locator on the NR web site at [www.nremt.org](http://www.nremt.org) for other test sites.

**Q:** *I heard TDH will be providing an ID card only and no EMS certificate upon recertification. Is this true?*

**A:** Not yet. It is true that we have begun working on such a process where by those recertifying at the same level would receive only an ID card, in an

attempt to conserve resources. The card is being designed in a postcard-type format similar to the one used by the Secretary of State's Office for voter's registration cards. However, we're still in the developmental stage, and no implementation date has been set.

**Q:** *I have been diligently working on my CE hours to renew my paramedic license. If I choose to renew using the CE option, I'll have to complete a total of 144 CE hours distributed among seven content areas. The old licensure rule allowed me to accrue all CE in one content area. Will you make a special allowance in my case?*

**A:** The Bureau has approved a transition policy that addresses your situation. Until December 31, 2003, paramedic licensure candidates choosing to renew under the CE option will be allowed to substitute 136 CE hours in one or more approved content areas instead of the revised rule requirement of 144 hours in specified content areas.

**Q:** *My paramedic certificate is currently inactive. Can I gain inactive paramedic licensure while on paramedic certification inactive status?*

**A:** Yes. The revised licensure rule allows conversion from inactive paramedic certification to inactive paramedic licensure. Submit the Paramedic Licensure Renewal Application, \$100 fee, Inactive Paramedic Licensure form and an official transcript from an institution that has been accredited by an agency recognized by the U.S. Department of Education as an approved authority. The academic degree requirement is an associate degree in EMS or a higher-level degree in any major.

*NR testing for EMT-Is and paramedics begins February 1, 2003.*

Bureau web home page address: [www.tdh.state.tx.us/hcqs/ems](http://www.tdh.state.tx.us/hcqs/ems)  
EMS Standards home page: [www.tdh.state.tx.us/hcqs/ems/stdhome.htm](http://www.tdh.state.tx.us/hcqs/ems/stdhome.htm)  
Internet certification verification now on web site  
Certification verification phone line: 512-834-6769  
Fax number: 512-834-6714  
email: [emscert@tdh.state.tx.us](mailto:emscert@tdh.state.tx.us)

# The Texas EMS Photo Contest

This year's photo contest was a huge success. Photos started coming in early and continued until the last minute. The final entry count was 151 photos.

The photo contest is always displayed at Texas EMS Conference and this year it was as popular as ever. All attendees are eligible to vote and there was a lot of discussion and interaction between attendees at the photo display. I overheard more than one person say that this coming year they weren't going to put off taking photos and entering them.

The grand prize photo was taken by Anna Boudreau of Stephenville. The photo shows a small airplane that crashed in the shallow part of a lake. There were two people on board.

There was a tie for second place. K. Jessie Slaten of New Braunfels took a photo that shows two firefighters fighting a huge fire. And the other second place photo was taken by Preston Conn of West Columbia who waited for a sunset and took a photo of a helicopter and then superimposed it over a fireman's helmet and a medic.

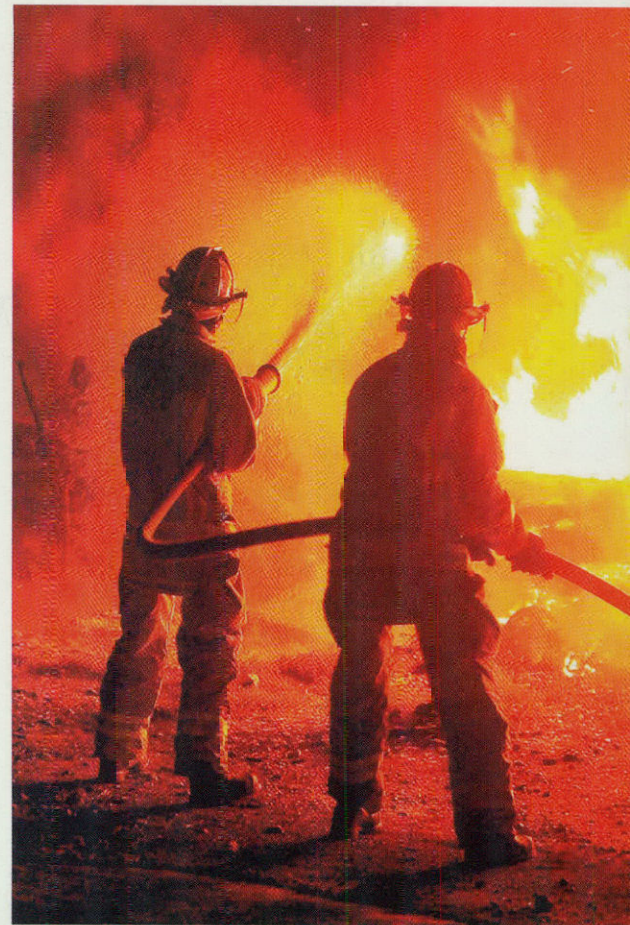
Joel Andrews of Lufkin took the third place photo of rescue workers who had used the jaws of life to free two children trapped in a car crash.

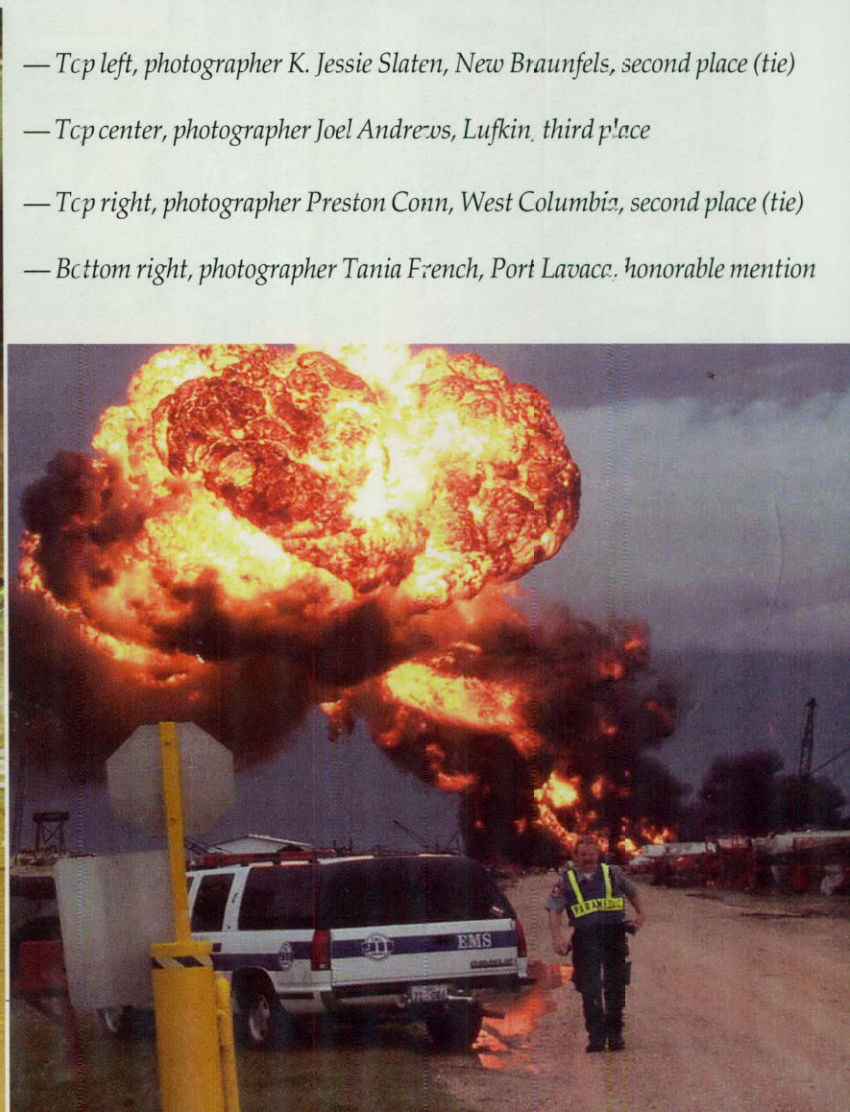
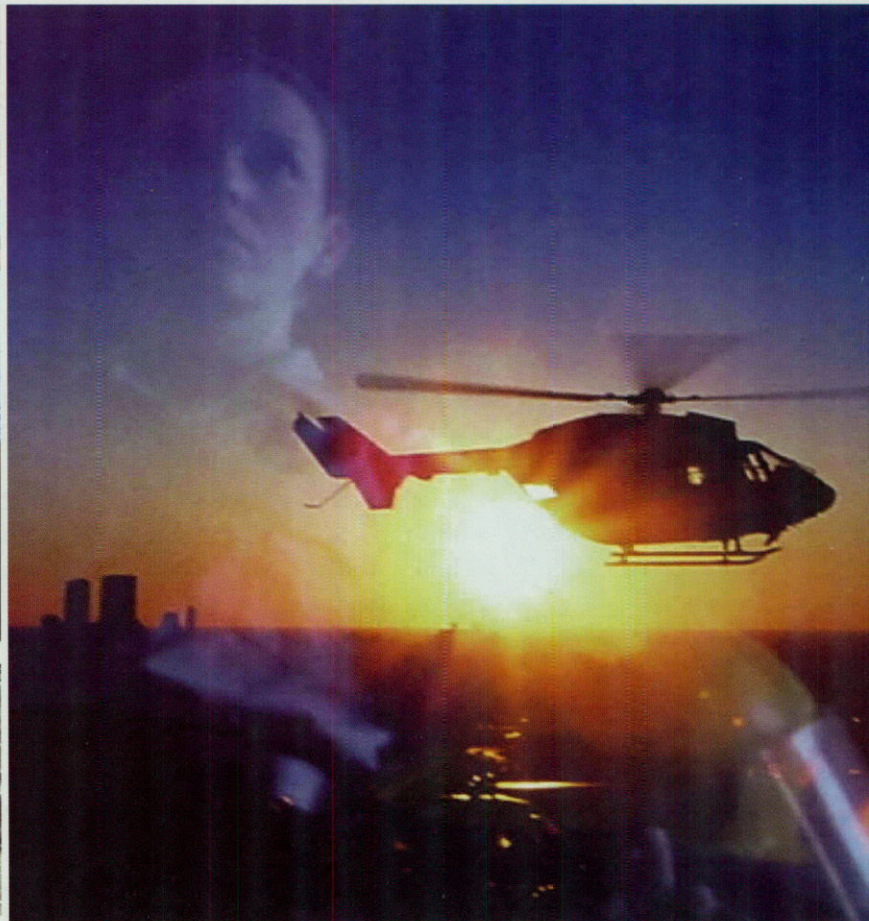
When a gasoline tanker and fuel tank exploded into a huge ball of fire, Tania French of Port Lavaca was on hand to take the honorable mention photo.

Photos entered in the contest are used by the Bureau of Emergency Management in *Texas EMS Magazine*, brochures, the website and displays.

Keep your digital camera ready or your regular camera loaded with film to be ready to snap the winning photo entry in the 2003 Texas EMS Photo contest. Look for an entry form in *Texas EMS Magazine* or on our website at: [www.tdh.state.tx.us/hcqs/ems](http://www.tdh.state.tx.us/hcqs/ems). —Jan Brizendine

—Photographer Anna Boudreau,  
Stephenville, Grand Prize





— Tcp left, photographer K. Jessie Slaten, New Braunfels, second place (tie)

— Tcp center, photographer Joel Andrews, Lufkin, third place

— Tcp right, photographer Preston Conn, West Columbia, second place (tie)

— Bcttom right, photographer Tania French, Port Lavaca, honorable mention



## The 2002 Texas EMS Conference: bigger and better

**M**ore classes, bigger exhibit hall, more attendees—that's the story in a nutshell of Texas EMS Conference 2002. We added another track of classes this year to bring the total to 11 concurrent sessions each hour. And we put another 50,000 square feet—for a total of 132,000—into the exhibit hall and filled it with state-of-the-art products and equipment. All told, we

had almost 2,200 attendees in the conference and preconference classes.

And three cheers for... new continuing education booklets! No more waiting in line at the door as volunteers handed out CE as fast as their fingers would work. The whole process of getting CE seemed to run much smoother this year. Hope to see you all next year on the Riverwalk in San Antonio.

*Below, the Photo Contest had so many photos that both triangle display boards were completely full on all sides.*

*Ferno, below left, brought their huge booth display—and it was always busy. Below, right, the Lubbock EMS Honor Guard led a solemn ceremony to honor those who died in the line of duty. Although no one was inducted this year into the Texas EMS Hall of Honor, Taps was played and attendees honored those who have died in the past with a moment of silence.*



*(Right), The Search and Rescue preconference class took to the park surrounding the Hyatt for a little hands-on experience. Fortunately, the weather cooperated both Saturday and Sunday.*

*(Left), EMS Hall of Fame members Babe Aycock, left, and Alana Mallard, right, attended the Awards Luncheon.*





# Texas EMS Conference

## The Exhibit Hall filled 132,000 square feet!

From babies to boats, and houses to helicopters. Actually, the babies were seen on a big screen displayed in the 9-1-1 Sono booth as pregnant women had a sonogram done right there in the exhibit hall. Attendees gathered around and watched the babies on the big screen—and one woman was going to have twins! The houses were emergency shelters that Zumro Emergency Shelters had in their booth. There were helicopters and a helicopter flight simulator, and Metro Source had a helicopter crash simulator in their booth.

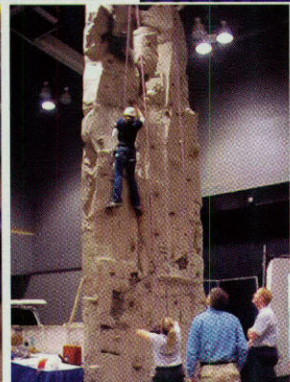
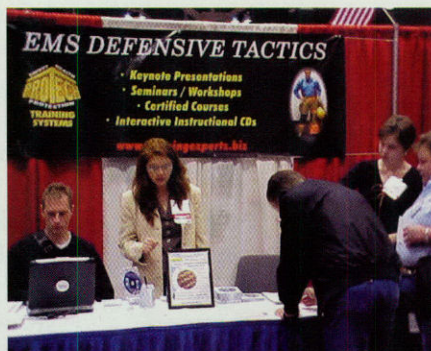
This year 50,000 square feet was added to the exhibit hall, for a total of 132,000 square feet of exhibits—and we still had a waiting list!

There were more than 40 ambulances and just about every piece of state-of-the-art equipment you could want. The Austin/Travis County booth had their famous climbing wall in their booth.

Some of the biggest booths were Laerdal, Ferno, Austin/Travis County EMS, 9-1-1 Outfitters/Ameritech Group, who co-sponsored the conference bags, and Zumro Emergency Shelters, who sponsored the printed conference program. —Jan Brizendine

The exhibit hall photos below are: below left, a group watching a demo; lower left, Austin/Travis County brought the STARFlight helicopter; center, the climbing wall; lower right, the flight simulator and upper right, keynote speaker Ray DuGray and his wife Maria in their booth.

From top to bottom in the right column: the 9-1-1 Outfitters/Ameritech Group booth; the Metro Source helicopter crash simulator; the 9-1-1 Sono booth; Alumitech's rescue boat and Zumro's emergency shelters.



By Jennifer Northway, BS, CHES

# Your Injury Prevention Program *Developing a Game Plan*

## **Step #1: Do a little research.**

Examine your city or country's most common cause of injury and injury-related death. Injury prevention programs that focus on problems affecting the community will be the most effective. Some examples of important sources of data are listed below.

Identify general causes of injury by looking at data on:

- School nurse visits;
- Employee health clinic visits;
- EMS calls;
- Emergency room visits;
- Area health clinic visits.

Identify causes of injury morbidity and mortality by looking at data from:

- Trauma Registry;
- County Child Fatality Review Team;
- Area Department of Protective and Regulatory Services (child and adult abuse statistics);
- Trauma Service Area epidemiology reports.

**Step #2: Pick a topic.** After reviewing the causes of injury in your community, choose an area to focus on. Concentrating on the most common cause of injury can potentially have the greatest impact on your audience.

Another way to organize your injury prevention program activities would be to use the CDC's National Center for Injury Prevention and Control listings of injury-related health observances. This can be found on their website at [www.cdc.gov/ncipc](http://www.cdc.gov/ncipc).

**Step #3: Develop a timeline.** Topic-specific injury prevention activities can be organized to span an entire

year or quarter; the focus of your program could even change from month to month. Develop a timeline that works with your available resources. No time, no money, no staff? No problem. A good injury prevention program does not require that an organization have a staff of ten, thousands of dollars in the budget, nor host multiple large events. However, it does require strategic planning and smart implementation.

## **Step #4: Utilize your resources.**

Use what you have to promote your message. Order free materials from your local health department or department of transportation. Work with area law enforcement, health care personnel, schools, employers, retailers and others to promote your message by providing them with educational materials, such as brochures and posters.

## **Injury prevention activities: Simple, easy, and effective**

Injury prevention activities do NOT have to be large-scale events. In fact, multiple small activities have shown to be more effective. Below are some examples of simple, easy, no-hassle injury prevention activities:

- Disseminate educational information in the form of a brochure, worksheet or fact page at your local grocery or convenience store.
- Place injury prevention posters at local businesses, police stations, day care facilities or in public restrooms.
- Pass out "Buckle Up" reminder stickers and related materials at

*The Ready Teddy Program has several bear suits and gives out thousands of free coloring books per year.*



- parking lot pay stands throughout town.
- Send an injury-related message through your company's e-mail system.
  - Encourage physical education teachers and principals to host safety-related observances, e.g., promote pedestrian safety by hosting a 'Walk a Child to School' event.
  - Sponsor a safety-related contest among employees, high school students or any group of people e.g., 'Why Wear a Seat Belt?' poster contest for middle school children.
  - Pass out rewards to children practicing good safety habits at a health fair.
  - Practice what you preach! People learn by example.
  - Make safety education fun!

- Be creative! Whenever possible, make the message fun and interesting. Learning is enhanced when the audience participates in the message delivery. For example, use word-finds, puzzles, coloring books and cartoons to promote a specific safety message. These can be ordered for free from various governmental entities or designed using common computer programs. Learning is enhanced when the message is repeated. Therefore, you should employ the use of multiple forms of media, e.g., brochures, posters and video, to convey your message. It is also important to partner with area organizations and businesses. This will increase audience exposure to your message.



*Child safety seat programs can have clinics that show parents how to properly buckle up their children.*

## Sample Program Timeline

### Quarterly

#### **Topic: General Prevention**

- 1<sup>st</sup> Quarter—Motor Vehicle Safety
- 2<sup>nd</sup> Quarter—Pedestrian Safety
- 3<sup>rd</sup> Quarter—Water Safety
- 4<sup>th</sup> Quarter—Violence Prevention

#### **Topic: Motor Vehicle Safety**

- 1<sup>st</sup> Quarter—Auto Safety
- 2<sup>nd</sup> Quarter—Child Passenger Safety
- 3<sup>rd</sup> Quarter—School Bus Safety
- 4<sup>th</sup> Quarter—Impaired Driving

#### **Topic: Impaired Driving**

- 1<sup>st</sup> Quarter—Victim Impact Panel
- 2<sup>nd</sup> Quarter—Host 'Shattered Dreams'
- 3<sup>rd</sup> Quarter—Sobriety Checkpoints
- 4<sup>th</sup> Quarter—Community Safe Ride Program

#### **Topic: Violence Prevention**

- 1<sup>st</sup> Quarter—Child Abuse
- 2<sup>nd</sup> Quarter—Domestic Violence
- 3<sup>rd</sup> Quarter—Elder Abuse
- 4<sup>th</sup> Quarter—Suicide

### Monthly

- January—Child Passenger Safety
- February—Animal Bite Prevention
- March—Poison Prevention
- April—Child Abuse Prevention
- May—Suicide Prevention
- June—Fireworks Safety
- July—Water Safety
- August—Pedestrian Safety
- September—Playground Safety
- October—Domestic Violence Prevention
- December—Impaired Driving

GETAC meets March 5 and 6 in Austin. Check the website for details.

# GETAC recap

## GETAC meets in conjunction with the 2002 Texas EMS Conference

The Governor's EMS and Trauma Advisory Council (GETAC) met on November 24th in Austin. GETAC approved minutes from their August 23<sup>rd</sup> meeting and heard reports from the chair, staff, committee chairs and task force leaders (a summary of these reports is included following the action items). Chair Dr. Ed Racht announced the recent appointments by Governor Perry to GETAC: Dr. Fred Hagedorn, Emergency Physician (Term expires in 2008); Dr. Ronnie Stewart, Urban Trauma Facility (2008); Gary Cheek, Fire Department (2008); Arlene Marshall, County EMS Provider (2008); Shirley Scholtz, EMS Air Medical Service (2006); and Kris

Gillespie, General Public (2008). (Unfortunately, Judge Marshall has since submitted her resignation to the Council.) Dr. Racht then announced that it is time for standing committee re-appointments. He has requested that committee chairs "turn over" at least one third of their committees each year to allow broad participation while maintaining stability and focus of the committees. The plan is for the committees to be appointed at the first 2003 GETAC meeting and then the new committees will meet for the first time during the second 2003 meetings. GETAC then heard public comment on the reports and other general issues and took the following actions.

### Action Items:

*A motion was made by Dr. Fred Hagedorn and seconded by Mario Segura to endorse the national American Academy of Pediatrics' and the American College of Emergency Physicians' "Care of Children in the Emergency Department: Guidelines for Preparedness" for Texas. The motion passed unanimously.* After clarifying copyright issues, BEM staff will mail these guidelines to all hospitals (administrator, emergency department [ED] medical director, ED nurse manager, trauma nurse coordinator) and regional advisory councils with a cover letter from Dr. Racht and Dr. Joan Shook.

*A motion was made by Gary Cheek and seconded by Raymond Holloway to hold the GETAC meetings in conjunction with the 2003 Texas EMS Conference in San Antonio. The motion passed unanimously.*

*A motion was made by John Simms and seconded by Dr. Joan Shook to appoint an Air Medical Task Force comprised of 11 air medical and 11 RAC representatives to address the following charge: "Review and make recommendations regarding the specific TDH requirements of the RACs related to aeromedical services." The motion passed unanimously.* The Task Force will be co-led by Dennis Hebner and Donna George. The GETAC liaison will be Shirley Scholtz.

*A motion was made by Maxie Bishop and seconded by Chief Raymond Holloway to endorse the finalization of the draft policy: Clinical Substitution for EMT Basic Courses, with the addition of language requiring approval by the education program's medical director and the Bureau of Emergency Management. The motion passed unanimously.* BEM staff will finalize this policy and disseminate it widely.

*A motion was made by Pete Wolf and seconded by Maxie Bishop to recommend that the Bureau of Emergency Management proceed with adoption of the National Registry of EMTs' First Responder Exam for initial Emergency Care Attendant certification in Texas. The motion passed unanimously.* BEM staff will establish an implementation date/plan and disseminate this information widely.

*A motion was made by Pete Wolf and seconded by John Simms to revise the current GETAC procedural rules regarding combined committee meetings to reflect that the composition must include at a minimum the chair or designee and three others members of each committee. The motion passed unanimously.* BEM staff will revise the rules and provide a copy to GETAC members at their next meeting.

### Staff, Committee, Task Force Reports:

Issues addressed by staff included updates regarding national registry testing implementation; legislative issues including the final interim Senate Intergovernmental Relations and Finance Committee reports related to EMS/Trauma Systems and a list of relevant bills filed to date; adoption of \$157.40 Licensed Paramedic; and implementation. Questions about these staff reports may be directed to BEM (512/834-6700) or the Bureau of Epidemiology (512/458-7266).

Dr. Joan Shook reported that the Pediatric Committee would like GETAC to endorse the American Academy of Pediatrics' and the American College of Emergency Physicians' "Care of Children in the Emergency Department: Guidelines for Preparedness" for Texas. The Committee also developed a list of issues to discuss at a future meeting in combination with the Trauma Systems Committee.

Pete Wolf and Maxie Bishop reported that the Combined EMS/Education Committees discussed the draft BEM policy, Clinical Substitution for EMT Basic Courses, making some recommendations for revisions, and vot-

ed to recommend that the NREMT First Responder test be used by Texas for initial ECA testing.

Mario Segura reported that the Injury Prevention Committee continued work on the Injury Prevention Resource Manual and have been developing an injury prevention strategic plan. The Committee shared a booth with the "Think Child Safety" program at the Texas EMS Conference.

Jorie Klein, who chaired the meeting in the absence of Dr. Ronny Stewart, reported that the Trauma Systems Committee received final recommendations on essential criteria for RACs from the Texas Association of Regional Advisory Councils and discussed draft rule clarifications regarding the transfer of pediatric patients.

Dr. Fred Hagedorn reported that the Medical Directors Committee heard an update on the CCMP project; components of this program continue to be piloted by a number of EMS providers. They discussed the draft BEM policy, Clinical Substitution for EMT Basic Courses, making some recommendations for revisions; and concurred with the EMS/Education Committees' recommendation that the NREMT First Re-

sponder test be used by Texas for initial ECA testing. They also continued discussions of prospective subjects for GETAC "Position Papers."

John Simms reported that the major topic of the second meeting of the Funding Task Force was the establishment of the Texas Trauma and Emergency Health Care Coalition. The vision, mission, scope and goals (see box on this page) were distributed and organizations invited to join. The Funding Task Force will now be discontinued and leave the work to the coalition. For more information on upcoming meetings, contact Dinah Welsh at the Texas Hospital Association: [dwelsh@tha.org](mailto:dwelsh@tha.org).

Pete Wolf reported that the Rural Task Force heard reports from a number of organizations that serve the rural areas of the state (e.g., Office of Rural and Community Affairs, Texas Engineering Extension Service, Texas Department of Transportation) and began discussions of implementation of the GETAC Strategic Plan.

Dr. Racht reported that the main focus of the first meeting of the Air Medical Task Force was to establish the membership and specific charge.

## Texas Trauma and Emergency Health Care Statewide Coalition

**Vision:** To provide a collaborative forum for the purpose of supporting legislative and regulatory initiatives related to trauma and emergency health care.

**Mission:** To ensure that all Texans have access to trauma and emergency health care services; that these services are provided within a reasonable timeframe by qualified providers; that providers receive adequate reimbursement for their services; and that the trauma and emergency health care system is disaster-ready.

**Scope:** Trauma and emergency health care include pre-hospital 9-1-1 communication and EMS/ambulance services, in-patient and out-patient hospital and medical services, stand-by readiness and disaster management, injury prevention activities and surveillance/research.

**Goals:** Through public education, create awareness

that access to essential trauma and emergency health care services is not universal throughout the state, and that these services are in jeopardy where they exist.

Create an adequate, stable funding mechanism to provide fair reimbursement for uncompensated trauma and emergency health care services to ensure provision of these essential services statewide. This funding should *not* be at the expense of existing public programs, such as Medicaid or the Children's Health Insurance Program.

Ensure continuation and expansion of the trauma and emergency health care system by removing barriers to provider participation.

Promote injury prevention and surveillance activities as important components of the trauma and emergency health care system.



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By William E. (Gene) Gandy, JD, LP

ILLUSTRATION PHOTO BY JON FREILICH

# Patient consent and refusal

## *How much do you know?*

### Scenario

You and your partner respond to a popular bar near a college campus at 2330 hours on an assault. On arrival you find a large crowd of people milling around outside in the parking lot. There are many police officers on scene trying to control the crowd.

You are directed to a squad car where a young man about 20 years of age is sitting in the back of the car in handcuffs. The police officer tells you he thinks the man had been knocked out during a fight in the bar. They have handcuffed him because he was staggering around outside, yelling and acting violent when they arrived. The man has dried blood on his face that seems to have come from his scalp, forehead, left eye, nose and lip. He reeks of beer. He is not happy. You introduce yourselves and ask him what happened. "None of your business," he replies.

"Well," you say, "You look hurt and we're here to help you." He responds, "I don't need no help."

"What's your name?" you ask. He doesn't respond.

"Can we look at your injuries?" you ask. He responds by spitting at you. You see it coming and duck just in time. You call for the police officer to help, who says, "Don't bother with that @\$#%. He thinks he's tough. He'll be OK."

"Well, we're going back in service,"

you tell the officer. "Call us if you need us."

You leave the area and document the call by writing, "Patient refused" on your patient care form and nothing else.

On your second day off, you get a call from your supervisor asking you to come in and talk about a problem call. When you arrive, your supervisor tells you that the injured man was found dead in his cell about 0400 the next morning. The autopsy has shown that he had an epidural hematoma from blunt trauma to the left side of his head, which caused the laceration of his middle meningeal artery, which in turn caused his death.

### Introduction

We've all read this at the beginning of EMS textbooks: "Competent adults have the power to consent to treatment or refuse treatment, and minors can neither consent nor refuse." We don't treat people without consent, and they can refuse treatment if they are adults and they know what they're doing. We just get them to sign a release if they don't want treatment. So what's the problem?

*Adult: One who has reached the age of legal consent for medical treatment (the age of 18 in Texas, but ranging up to age 21 in some other states).*

## Learning Objectives

After completing this article, you should be able to:

1. Define:
  - Legal *competence*
  - Present mental *capacity*
  - *adult*
  - *minor*
  - *emancipated*
  - *orientation*
  - *informed consent*
  - *informed refusal*
  - *impaired*
  - *insane*
  - *mental status*
2. Discuss the differences between mental competency and present mental capacity to make a treatment decision.
3. Given a scenario, apply the concepts of consent and refusal to the situation.

*Release: A legal document having the effect of releasing another person or company from liability for something. Releases usually involve the payment of money or some act of legal consideration in return for granting the release.*

*Often coupled with an informed refusal for treatment.*

The problem is that words like *competent, adult, minor, informed, capacity, impaired, emancipated, oriented, mentally ill, insane, alert* and other similar words are used loosely and may have differing meanings to different people. The application of that seemingly simple phrase can

become difficult indeed. And the average *release* is little or no help to you if you get sued for failure to treat a patient who was too impaired to refuse treatment.

We run into problems like the opening scenario all the time, plus many others that are just as perplexing.

Have you ever experienced the situation where a busload of high school students is involved in a minor wreck and all of the students are under 18 years of age? They don't want medical treatment, but momma and papa are nowhere to be found and they're too young either to consent or refuse. What do you do with them?

Have you ever confronted an overdose patient who calmly advised you that he intended to kill himself, answered all your questions correctly, knew who the president was, and absolutely refused to be treated? What do you do with him? If he signs a refusal form, is that all you need?

Or what about the patient who fell off his barstool after an afternoon of celebratory activity and knocked himself cuckoo, but just wants to go home? You suspect he's under the influence of alcohol, and you also know that he lost consciousness for a few minutes. He appears to know who he is and where he is, so can't you just write "No patient" or "Patient refused" on your run sheet?

Most of us who've worked the streets have run into situations like those. We have the patient sign the refusal form and go on our way. So what's the problem?

The problem is that most refusal forms in use today are not worth the paper they're written on in court. They do not document the right things. They contain lots of conclusions and little



factual information. They offer little or no protection in a legal proceeding and, worse, may actually hurt you because of what is NOT documented.

*Informed Refusal: A written refusal of treatment signed by a patient who has the present mental capacity to understand and appreciate the nature of his illness or injuries, understands the consequences of a refusal to be treated and states the same in factual terms that demonstrate his understanding.*

The purpose of this article and those to follow is to acquaint you with the concepts and methods of problem-solving and documentation that you need to practice in the field. This article is for educational purposes only and does not purport to offer legal advice. All providers should consult their own attorneys for legal advice.

When all is said and done, you'll have a better understanding of matters of consent and a better idea of how to handle these and similar situations.

### **Competency vs. Capacity**

Before we go much further let's tackle the words *competency* and *capacity*. We need to understand those words and how they are used before we tackle the questions of who's an adult and who's a minor. Both *competency* and *capacity* are used loosely to refer to the mental status of a person, but they may have quite different meanings de-

pending upon the situation in which they are used.

Merriam-Webster's Collegiate Dictionary defines *competent* both as "legally qualified or adequate" and "having the capacity to function or develop in a particular way." *Capacity* is defined variously as "legal competency or fitness," and "an individual's mental or physical ability." To make matters worse, the same dictionary defines *capable* as "having attributes (as physical or mental power) required for performance or accomplishment." Not much help there.

But that word "legal" keeps cropping up, so let's look at it first. Although one can find many instances of imprecise wording strewn throughout medical and legal literature and case law, one general concept can be stated without much fear of contradiction: Whether or not you say *insanity*, *legal competence*, *legal competency*, or *legal capacity*, you are talking about a *legal* concept, not a *medical* concept.

*Insanity: Unsoundness of mind sufficient in the judgment of a civil court to render a person unfit to maintain a contractual or other legal relationship or to warrant commitment to a mental health facility. In most criminal jurisdictions, a degree of mental malfunctioning sufficient to relieve the accused of legal responsibility for the act committed.*<sup>[1]</sup>

Therefore *insanity*, which is a synonym for *legal incompetency*, will be deter-

mined by the legal system, not the medical system. True, the medical system may play a role in determining *insanity* or *legal competency* by evaluating the patient and presenting testimony about the person's mental status, but the courts will make the determination.

People without mental defects have long been recognized as being legally competent until declared incompetent by a court of law. Legally competent people have also been recognized to have a right to refuse medical treatment against their will. The rights to refuse treatment arise from the English common law, constitutional rights and statutory rights.

People who have not yet reached the age of consent for purposes of medical treatment, which varies from 18 to 21 years of age depending upon what state you're in (it's 18 in Texas for most things but 21 for purchasing alcoholic beverages), are considered to be *minors*. Generally minors can neither consent to nor refuse medical treatment, nor can they execute a will, sign a deed to property, marry or enter into a legally binding contract. Some minors, however, are considered to be *emancipated*, which means either that a court of law somewhere has removed their minor's disability to make legally binding decisions or that, as a practical matter, they are living apart from their parents and functioning on their own as adults.

Courts have struggled with the concept of *insanity* for centuries. An insane person cannot be held legally responsible for his acts, but an insane person may be perfectly aware of his whereabouts and injuries, for example. On the other hand, a *sane* person may lack the present mental capacity to

understand the nature of his condition and make rational treatment decisions. Although an insane person who had been declared insane by a court might at some time possess the present mental capacity to make a valid treatment judgment, he could not legally execute a binding release of liability because he lost his *legal* decision-making rights when he was adjudged to be insane.

Therefore insanity is a legal determination, and although insanity can coexist with lack of competency or capacity, it does not necessarily imply the same thing. For example, a person may be declared legally incompetent because of a birth defect that renders him unable to make rational decisions about his health care. This person is not technically insane but lacks the capacity to make decisions about many things. This person will usually have a court-appointed guardian, conservator or other type of legal representative to make these decisions for him. Insanity generally refers to the person's mental state at the time a crime or offense was committed. Legal competency generally refers to the person's status as being able to execute legal documents and perform other legal functions.

Whether insane or legally incompetent, once so declared by the courts, the status sticks until the courts declare that the person is restored to sanity or legal competency. However, a legal determination of insanity or incompetency does not, in itself, necessarily render the person incapable of making a present decision to either consent to treatment or refuse it.

## Legal incompetency does not equal mental illness

A person who is *legally incompetent* cannot execute a will or deed to property, make a contract, or marry, but his *legal incompetency* does not necessarily render him unable to understand his present condition and decide whether or not to be treated. He may even be allowed to testify in court as a witness. Whether or not he has the *present mental capacity* to make medical decisions must be determined on a case by case basis. A person may be depressed or delusional but still understand that his leg is broken and that he needs to have it cared for. A minor may be perfectly capable of making a rational treatment decision but lacks the *legal* ability to do it.

Perhaps a good way to look at it is to consider *competency* as referring to the ability to perform a legally-recognized act or function and *capacity* as referring to a person's actual, present ability to understand and appreciate the nature of his condition and the consequences of either consenting to treatment or refusing it.

*Legal Competency: The legal ability to perform a legally recognized act or function, such as executing a will or a contract.*

*Mental Capacity: In medicine, the present ability to understand and appreciate the nature and consequences of one's condition and to form a rational treatment decision.*

Thus, the term *incompetent* is more of a legal term and *capacity* is more of a practical term.

## What determines present mental capacity?

A number of factors must come into play in the determination of a person's present mental capacity to make a medical treatment decision. We use the word *orientation* in our medical vocabulary. A patient must be *oriented* to person, place, time and event. That means that the person has a *functional ability* to know and understand who he is, where he is, when it is and what has happened.

*Orientation: Awareness of one's self and one's environment with respect to person, time, place and event.*

Not only must he be mentally oriented but he must also be able to think abstractly about his condition, consider it and make rational judgments about it. Therefore he must appreciate his condition either from his own perception or from what he is told by others. In addition to knowing and appreciating his condition he must be able to correlate that knowledge to the need for treatment and the possible consequences of refusing treatment. This will require his memory to be sufficiently intact that he can remember what his condition is and what he knows or is told about his need for treatment. He must have enough functioning memory and cognitive skills to assimilate and apply information he gets from attending medics to what he knows



Generally, minors can neither consent to nor refuse medical treatment. Illustration photo is of the LifeStar flight crew loading a two-year-old child after a major accident. Photo by Brad Stone.

about his condition and to come up with a treatment decision that makes sense.

It is the measurement and documentation of these abilities that cause us trouble.

So it is not enough that a patient knows who he is, where he is and when it is. He must be able to engage in analysis, critical thinking and problem-solving. He must be able to follow simple directions and remember what is told to him.

We also get into trouble when dealing with patients who are uncooperative and want to refuse treatment when we fail to probe deeply enough into their mental status to make the above determinations. Further, it does us no good in defending our actions if we simply document our conclusions that the pa-

tient was awake, alert, oriented to time, place, person and event, understood that he might need further care and air and was refusing that care. We must obtain and document **objective facts** to support our conclusions. Otherwise we're cannon fodder for lawyers who take us to court.

### Analysis of the scenario

*Now let's explore the scenario given above.*

It should be obvious that there was lack of an adequate assessment of the patient and documentation of his physical condition and mental status.

All patients with obvious injuries must be assessed completely to discover any possible life-threatening injuries and

to determine to the fullest extent allowed by a field examination any other injuries that might have occurred.

The uncooperative patient poses problems for us in doing this. But we as health care professionals must use all the tools at our disposal to overcome the patient's lack of cooperation. We must recognize that we may be dealing with someone who lacks present mental capacity to make the decision to cooperate with us. In this case the patient's alcohol intake together with his obvious injuries would lead a reasonable and prudent medic to assess the patient further than was done in the scenario. It is no excuse that the patient is uncooperative; we are trained to deal with uncooperative patients. It is no excuse that we are busy, tired or frustrated when dealing with an uncooperative patient. He is still a patient until we determine through objective analysis that he is not. His obnoxious and assaultive behavior, although insulting, must be viewed as further evidence of his possible impairment for decision-making.

This patient lacked present mental capacity to refuse treatment due to his alcohol ingestion and alleged loss of consciousness, which should have caused the medics to press for further examination. No attempt was made to diffuse the situation by attempting to gain the patient's trust and cooperation. No attempt was made to educate the patient as to his possible danger from his injuries. No attempt was made to examine him and to gain more information about the history of his injury and his mental state. And the police were not asked to help by ordering his treatment and transport as they could have done. There

were at least three grounds for arresting the patient: public intoxication, assault and being a person chemically dependent who was a danger to himself. His treatment could have been ordered by the police if he couldn't have been convinced to consent himself.

Using verbal communication tools to persuade, educate and convince the patient may help, but if that fails, employment of police assistance would be the next strategy. Verbal strategies are beyond the scope of this article, but there are many sources which you can consult for help.<sup>[2]</sup>

In this case, the police would have probable cause to intervene since the patient may be drunk and since he engaged in inappropriate behavior by spitting at you, which could be the basis for an arrest for assault. If the police are less than cooperative, you should attempt to convince them of the need to cooperate through calm, factual conversation, reminding them of the possible consequences to all of you—patient, police and medics—if he is allowed to go his way without treatment.

Both you and the police might be liable if you let him go and he drives a motor vehicle and has a wreck that injures someone, or if he acts to injure somebody in another way. Therefore you can't let him go. He obviously lacks the *present mental capacity* to understand and appreciate the nature and quality of his injuries and to make a rational treatment decision.

He can be treated either under implied consent or upon the order of the police if he is taken into custody for public intoxication or assault. Texas also has a specific statute that gives law en-

forcement the power to arrest a person without a warrant if the officer has reason to believe that the patient is suffering from chemical dependency (in this case alcohol), is an immediate threat to himself or others, and there is no time to obtain an arrest warrant. Invocation of this law will not normally be necessary, but it's a good tool to know about.<sup>[3]</sup>

Treatment under *implied consent* is based upon the premise that he lacked the present mental capacity to understand and appreciate his situation because of alcohol ingestion and head trauma. This is a common law concept that states that if a patient cannot consent to treatment because of illness or injury, he may be treated upon the assumption that if he were able to consent, he would. This is slightly different from the consent provided in the Texas Health and Safety Code that requires that the patient be unable to communicate due to illness or injury. While the argument can be made that this patient's communications are not appropriate, it is probably a better idea to base treatment on the common law concept since the patient was communicating, albeit not rationally.<sup>[4]</sup>

It could also be said that when in police custody he was in the position of a ward of the state and that the police officer then had the power to make his treatment decisions.

The actions of the medics were negligent and would subject both them and their employer to legal liability. And their lack of documentation compounds the predicament.

Whatever you do, and whatever the outcome, you must document enough

facts to demonstrate that what you did equaled or surpassed the standard of care required. Failure to document will leave you defenseless if you get sued, as can the wrong kind of documentation. Documentation of conclusions without the facts upon which they are based is practically worthless. You must document *facts*, including questions and statements directed to the patient by you and his answers. Yes, that's lots of documentation, but if you expect to survive serious litigation without a judgment being rendered against you, it's not only well worth it, it's mandatory.

## Summary

*Insanity* and *mental competency* are legal terms, and there is a presumption of legal mental competency unless one has been declared insane or mentally incompetent by a court of law.

*Present mental capacity* refers to one's present mental ability to understand and appreciate the nature and consequences of his condition and to make rational treatment decisions.

One who is legally competent may lack present mental capacity to make a valid treatment decision; one who is legally incompetent or insane may have the present mental capacity to make many treatment decisions, particularly the decision to be treated for an immediate illness or injury.

When evaluating a patient for the ability to consent to treatment or refuse treatment, the medic must determine whether or not the patient possesses the present mental capacity to understand and appreciate the nature and consequences of his condition and to make rational treatment decisions. Such an

evaluation must take into consideration not only the patient's orientation to person, place, time and event, but his memory function and his ability to engage in associative and abstract thinking about his condition, to respond rationally to questions and to apply information given to him by the medics who are taking care of him.

Patients with impaired mental capacity may be treated under implied consent.

Finally, the medic's findings must be documented with facts, not conclusions, and such documentation must be sufficient to demonstrate the patient's mental status and understanding of his condition and the consequences of refusing treatment.

In the next article on this subject, we'll discuss ways to measure and document a person's present mental capacity to make a medical decision.

**FOOTNOTES**

[1] The American Heritage Dictionary of the English Language, 4<sup>th</sup> ed., Houghton Mifflin of the English Language, 4<sup>th</sup> ed., Houghton Mifflin

[2] Dernocoeur, Streetsense: Communication, Safety, and Control, 3<sup>rd</sup> ed., Published by the author, ISBN#: 093810621X

[3] Texas Health and Safety Code Chapter 773 Section 462.041.

[4] Texas Health and Safety Code Chapter 773,

**§ 773.008. Consent for Emergency Care.** Consent for emergency care of an individual is not required if:

(1) the individual is:

(A) unable to communicate because of an injury, accident, or illness or is unconscious; and

(B) suffering from what reasonably appears to be a life-threatening injury or illness;

(2) a court of record orders the treatment of an individual who is in an imminent emergency to prevent the individual's serious bodily injury or loss of life; or

(3) the individual is a minor who is suffering from what reasonably appears to be a life-threatening injury or illness and whose parents, managing or possessory conservator, or guardian is not present.

*Plan now for  
Texas EMS Week  
May 18-24, 2003*



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1.5 hours of CE/Preparatory Answer all questions.

1. Mr. Brown is a 76-year-old who has spent most of his adult life in and out of mental institutions following a court commitment for insanity. While on furlough from the institution, he is brushed by a car in the parking lot and sustains cuts, bruises and a possible fracture. Which of the following is correct?
  - A. He cannot consent to treatment under any circumstances.
  - B. He can consent to treatment if he can demonstrate appropriate present mental capacity to consent.
  - C. His legal guardian must be found and asked to consent before any treatment can be done.
  - D. He cannot refuse treatment due to his court imposed mental disability.
2. The term insanity is:
  - A. a precise medical term meaning psychotic.
  - B. never used in legal proceedings.
  - C. determined by a court of competent jurisdiction.
  - D. a term which refers only to schizophrenia.
3. Mary, 17, was determined by a district court in Texas to be able to execute legal documents without parental consent. She is:
  - A. a consenting minor.
  - B. unable either to consent or refuse medical treatment.
  - C. an emancipated minor.
  - D. able to refuse medical treatment under all circumstances.
4. A 19-year-old in the state of Texas:
  - A. cannot vote but may purchase alcoholic beverages.
  - B. cannot consent to medical treatment other than in an emergency.
  - C. may authorize you to treat and transport her for a headache.
  - D. may authorize you to treat her alert and oriented mother who is refusing treatment.
5. An informed refusal should contain:
  - A. factual information demonstrating the patient's orientation.
  - B. a statement that the patient is "A&A&O X 4."
  - C. The signatures of three adult witnesses to the patient's signature.
  - D. None of the above
6. An emancipated minor is:
  - A. one who has reached the age of 18.
  - B. one who has had legal disabilities removed by a court.
  - C. one who is in the Armed Forces of the United States.
  - D. one who has been appointed a guardian.
7. A person who has awareness of who he is, where he is, when it is, and what has happened to him is said to be:
  - A. alert.
  - B. mentally competent.
  - C. oriented.
  - D. in his right mind.
8. The ability to execute a legal document such as a will requires:
  - A. present mental capacity.
  - B. present mental orientation.
  - C. legal competency.
  - D. legal emancipation.
9. Legal competency is determined by:
  - A. a court of competent jurisdiction.
  - B. a mental examination by a psychiatrist.
  - C. mental and physical examinations.
  - D. the attending physician at the hospital.
10. Annie, aged 56, has been adjudged insane in court. She complains of abdominal pain, nausea and vomiting. All the following statements are correct except:
  - A. She may be able to consent to medical treatment.
  - B. She never can consent to medical treatment.
  - C. She may possess present mental capacity to authorize treatment.
  - D. She cannot execute a legal warranty deed to sell property.
11. Ralph was adjudged to be criminally insane by a court. He can be declared restored to sanity by:
  - A. any licensed physician.
  - B. a court of competent jurisdiction.
  - C. his or another psychiatrist.
  - D. a panel of mental health experts.
12. A 49-year-old patient has had a motor vehicle collision. He appears to be under the influence of alcohol. Under which of the following circumstances can he refuse treatment?
  - A. When the police officer advises him to.
  - B. When the police officer advises you he is mentally competent.
  - C. When he advises you that he refuses treatment.
  - D. None of the above
13. A 16-year-old has inherited a tract of land from his grandfather. Which of the following is true?
  - A. He may have his legal disability to deal with property removed by a court.
  - B. He may consent to or refuse medical treatment on his own.
  - C. He may execute a legal deed to property but not a will.
  - D. He may execute both legal deeds to property and wills.
14. When documenting patient refusal, you should, at a minimum:
  - A. document that "patient is awake and alert and oriented times 3."
  - B. document facts that show orientation and ability to make an informed medical treatment decision.
  - C. document your conclusions about orientation after a careful physical and mental examination.
  - D. obtain two witness signatures to the patient's refusal.
15. Texas Health and Safety Code Section 773.008 requires that:
  - A. The patient be able to communicate his desires.
  - B. The patient be of sound mind to refuse treatment.
  - C. The patient be unable to communicate his desires.
  - D. The patient have a guardian appointed by the court.



This answer sheet must be postmarked by February 19, 2003.

CE Answer Sheet *Texas EMS Magazine*

Name \_\_\_\_\_ SSN \_\_\_\_\_

Certification Level \_\_\_\_\_ Expiration Date \_\_\_\_\_

Organization \_\_\_\_\_ Work Phone \_\_\_\_\_  
area code

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

State \_\_\_\_\_ Zip \_\_\_\_\_ Home Phone \_\_\_\_\_  
area code

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

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

Debra Cason, RN, MS  
 EMS Training Coordinator  
 The University of Texas  
 Southwestern Medical Center  
 5323 Harry Hines Boulevard  
 Dallas, Texas 75390-8890

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

**Answer Form**

Check the appropriate box for each question. All questions must be answered.

- |                                |                             |                             |                             |                                 |                             |                             |                             |
|--------------------------------|-----------------------------|-----------------------------|-----------------------------|---------------------------------|-----------------------------|-----------------------------|-----------------------------|
| 1. A. <input type="checkbox"/> | B. <input type="checkbox"/> | C. <input type="checkbox"/> | D. <input type="checkbox"/> | 9. A. <input type="checkbox"/>  | B. <input type="checkbox"/> | C. <input type="checkbox"/> | D. <input type="checkbox"/> |
| 2. A. <input type="checkbox"/> | B. <input type="checkbox"/> | C. <input type="checkbox"/> | D. <input type="checkbox"/> | 10. A. <input type="checkbox"/> | B. <input type="checkbox"/> | C. <input type="checkbox"/> | D. <input type="checkbox"/> |
| 3. A. <input type="checkbox"/> | B. <input type="checkbox"/> | C. <input type="checkbox"/> | D. <input type="checkbox"/> | 11. A. <input type="checkbox"/> | B. <input type="checkbox"/> | C. <input type="checkbox"/> | D. <input type="checkbox"/> |
| 4. A. <input type="checkbox"/> | B. <input type="checkbox"/> | C. <input type="checkbox"/> | D. <input type="checkbox"/> | 12. A. <input type="checkbox"/> | B. <input type="checkbox"/> | C. <input type="checkbox"/> | D. <input type="checkbox"/> |
| 5. A. <input type="checkbox"/> | B. <input type="checkbox"/> | C. <input type="checkbox"/> | D. <input type="checkbox"/> | 13. A. <input type="checkbox"/> | B. <input type="checkbox"/> | C. <input type="checkbox"/> | D. <input type="checkbox"/> |
| 6. A. <input type="checkbox"/> | B. <input type="checkbox"/> | C. <input type="checkbox"/> | D. <input type="checkbox"/> | 14. A. <input type="checkbox"/> | B. <input type="checkbox"/> | C. <input type="checkbox"/> | D. <input type="checkbox"/> |
| 7. A. <input type="checkbox"/> | B. <input type="checkbox"/> | C. <input type="checkbox"/> | D. <input type="checkbox"/> | 15. A. <input type="checkbox"/> | B. <input type="checkbox"/> | C. <input type="checkbox"/> | D. <input type="checkbox"/> |
| 8. A. <input type="checkbox"/> | B. <input type="checkbox"/> | C. <input type="checkbox"/> | D. <input type="checkbox"/> |                                 |                             |                             |                             |

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



# Did you read?

A recent study reported that closely watching the stock market can have negative consequences for mental health. The study, published in the *Journal of Social and Clinical Psychology*, tracked 545 Hong Kong residents' mental health status from June to September 1998, the Asian economic crisis period, and found a direct link between the stock market's daily performance and the subjects' mental health. Those who closely watched the market's ups and downs generally had the poorest mental health, while those who were more ambivalent about the market's status had more "psychological resilience." Psychologists theorize that people's attitudes about money as it relates to their self worth can cause them to have mental health problems, such as anxiety and depression. From *Dallas Morning News*, "Money minded: Having it and not having it can make you sick," by Ira J. Hadnot, December 2, 2002.

Living by the premise that it's better to give than to receive might lead to a longer life span. Scientists studied 423 couples older than 65 for five years and found that those who reported that they had given emotional or practical help to others during the year prior to the beginning of the study were half as likely to have died, even after their physical and emotional health status were taken into account. Receiving did not appear to prolong life. They theorize that the good feelings generated by helping someone might lower the amount of stress hormones. The scientists pointed that these findings did not counter research that shows that too much giving, as in taking care of Alzheimer's patients, can actually impair health. From *USA TODAY*, "Generous spirit may yield generous life span," by Marilyn Elias, November 11, 2002.

Senior citizens with odd walking patterns have been found to be three and one-half times more likely to develop forms of dementia other than Alzheimer's

disease. A recent study found that abnormal gait not caused by physical conditions such as arthritis was a strong predictor of developing vascular dementia. Since vascular dementia has been seen in stroke patients, researchers theorized that people exhibiting abnormal gait could be given blood pressure medications and put on diets to prevent strokes. These findings might lead to combining analysis of gait into a mental sharpness evaluation for better brain image analysis and technology used to predict who will suffer dementia. From *Houston Chronicle*, "Odd gaits could be early sign of dementia," by Linda A. Johnson, December 6, 2002.

**A recent study found that abnormal gait not caused by physical conditions such as arthritis was a strong predictor of developing vascular dementia.**

The United Kingdom is currently experiencing tuberculosis rates in London that are higher than rates in China, Russia, India and Africa. The areas with the highest levels of TB infection are those with high levels of immigration. The rates were also found to be 200 times higher in the homeless population, and doctors stated that while moving the homeless into hostels gets them off the streets, it also makes the perfect breeding ground for diseases such as TB. A recent pharmaceutical industry campaign with the slogan, "Cough? Think of asthma," may have also led many doctors to misdiagnose TB as asthma. A recent survey found that half of 121 cases of TB that arrived at a Newham emergency department were not recognized as TB, even with symptoms such as coughing up blood. Researchers are comparing the TB rates in the UK now to that of the industrial

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revolution, when TB was responsible for one in four deaths. From *The Guardian*, "London TB rates similar to China," by Sarah Boseley, December 5, 2002.

**S**an Antonio researchers recently found that exercise may be more helpful than diet changes in helping overweight children prevent diabetes and improve overall health. The first year of the program followed 1,400 children and found that the diabetic children who went through the program had blood sugar levels drop by about 32 percent and many were able to stop taking insulin. The other children in the program had lower heart rates and lower body fat percentages. The study also found that fiber, fat and caloric intake didn't correlate well with improved health and reduced diabetes risk. The Bienestar program, a pilot program in several San Antonio elementary schools, increases children's activity levels and fiber intake while decreasing fat intake. Those schools served lower-fat meals with more fruits and vegetables, held after-school physical activity clubs and educated both children and their parents about diabetes prevention. From *San Antonio Express-News*, "Exercise outweighs diet in kid study," by Cindy Tumiel, October 22, 2002.

**W**eight-loss researchers are warning that if Americans continue to gain weight at the current rate, almost everyone in the country will be overweight by 2030 and obese by 2100, leading to a skyrocketing number of diabetes cases. Treatment of these diabetic cases and the resulting complications could bankrupt the healthcare industry. About 34 percent of American adults are overweight, defined as ten to 30 pounds over healthy weight, and about 31 percent are considered obese, defined as 30 pounds or more over healthy weight. In 2001, obesity-related costs, including direct health care costs and indirect costs such as decreased productivity, were approximately \$123 billion. And that cost will continue to es-

calate, as children now deal with the short-term and long-term consequences of having a disease that 20 years ago only occurred in adults. Researchers also said that while a small percentage of people will be careful about their weight and diet or are genetically protected against weight gain, that group will continue to be a shrinking minority. From *USA TODAY*, "Scales tipping toward diabetes," by Nanci Hellmich and Anita Manning, October 24, 2002.

**R**eceiving chemotherapy every two weeks for breast cancer, instead of every three weeks, has been found to significantly delay relapse and improve survival rate for breast cancer, according to a National Cancer Institute trial. These findings might result in fundamental changes to the standard medical treatment women receive for breast cancer. However, the cost for their accelerated treatments was approximately double to triple that for the conventional chemotherapy, because they received a new drug that stimulated the production of white blood cells and they had more red blood cell transfusions. White and red blood cell productions are decreased by chemotherapy and doctors generally wait three weeks between treatments to allow the body time to rebuild those cells. While

**Weight-loss researchers are warning that if Americans continue to gain weight at the current rate, almost everyone in the country will be overweight by 2030.**

the accelerated schedule showed some significant outcome difference, some doctors state that since 90 percent of the women who had received the conventional chemotherapy were alive three years after the occurrence, as compared to 92 percent of women who had received

**Did you read?**

# Did you read?

the accelerated therapy, current therapies are working well, making the case for changing the standard treatment schedule weaker. From *The New York Times*, "Breast-Cancer Study Finds Benefit in Chemotherapy," by Andrew Pollack, December 3, 2002.

**T**wo recent studies have found that men who engaged in higher intensity exercises and weight lifting had much lower risks of developing heart disease. One study found that men who exercised at a high intensity (as in running at a six mile per hour pace) had a 17 percent lower risk of heart disease, when compared with men who regularly exercised at a more moderate pace. The other study found that men who trained with weights for at least 30 minutes a week had a 23 percent lower risk of heart disease, when compared to men who didn't train with weights. Researchers theorized that the benefits might be from reduced blood pressure and body fat. From *Houston Chronicle*, "Study finds revved-up exercise cuts risk of heart disease," October 23, 2002.

**S**ince the early 1970s, researchers have found that the simple act of being married can have a striking effect on a person's life expectancy. However, now researchers are finding that a strained and unhappy relationship might actually hurt the body worse than not being married at all. From domestic violence to depression to ulcers and gum disease, people in unhealthy relationships tend to have more health problems and take longer to recover from those health problems. Researchers videotaped arguments between couples in their homes and rated them based on the negativity of their interaction and found that the more negative heart patients were almost two times as likely to die within four years. Changes were also found in the endocrine and immune systems. Researchers inflicted minor wounds on patients admitted into a hospital and charted their interactions with spouses and the wound healing. They then found that those who had

more negative interactions had slower wound healing. The numbers also show that women's bodies appear to react stronger and longer to marital stress. From *The New York Times*, "Good and Bad Marriage, Boon and Bane to Health," by Sharon Lerner, October 22, 2002.

**A** recent geological study found that four times since the last ice age, approximately every 3,000 years, the Northeast has been struck by cycles of powerful storms and the region appears to be entering a fifth era when such superstorms are more likely. The identified stormy periods lasted approximately 100 years and had giant floods sporadically. Researchers examined 12- to 20-foot sediment core samples from two lakes in New York and 11 in Vermont, looking

Since the early 1970s, researchers have found that the simple act of being married can have a striking effect on a person's life expectancy.

back over more than 13,000 years of accumulation. Some of the layers were ten times as thick as the one left by the greatest flood recorded in Vermont, which killed 84 people in November 1927, suggesting torrential rainfalls totaling several inches per hour over several days. The last stormy period was 600 years ago. By using samples from several lakes, the researchers reduced the chance of finding patterns induced by local conditions only. These findings appear to agree with evidence of periods of stormy weather in the North Atlantic found in Greenland glaciers. Researchers are hoping to use their findings to find patterns in the weather that might improve long-term weather forecasting. From *The New York Times*, "Study Finds Storm cycles Etched in Lake Beds," by Andrew C. Revkin, October 25, 2002.

## Disciplinary Actions

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.

TO FILE A COMPLAINT REGARDING AN EMS SERVICE OR PERSONNEL, CALL (800) 452-6086.

The Texas Health and Safety Code can be found at <http://www.capitol.state.tx.us/statutes/hstoc.html>

All of the Texas Administrative Code can be found at <http://lamb.sos.state.tx.us/tac/>

To find EMS-specific information in the Texas Administrative Code, go to [www.texas.gov](http://www.texas.gov), click on Laws and Criminal Justice, click on Laws, Codes and Statutes, click on Texas Administrative Code, click on TAC Viewer, click on Title 25 Health Services, Part I Texas Department of Health, Chapter 157 Emergency Medical Care.

TDH Index of EMS/Trauma Systems Policies can be found at <http://www.tdh.state.tx.us/hcqs/ems/spolicy.htm>

**Adams, Chadwick**, Tyler, TX. 24 months probated suspension of EMT-P certification through October 12, 2003. EMS Rules 157.37(c)(2)(3)(G).

**Advanced Ambulance Services Inc.**, San Antonio, TX 24 months probated suspension of the EMS provider's license through August 2004 and a \$2,500 administrative penalty. EMS Rules 157.16(d)(1); 157.16(d)(19); and 157.11(l) (13).

**Alaniz, Rene**, Mission, TX. 48 months probated suspension of ECA certification through August 29, 2006, a misdemeanor conviction. EMS Rules 157.37 and/or, 157.36(b) and/or, (c).

\* **AMAA/MedStar, Fort Worth, TX.** \$17,000 administrative penalty effective September 26, 2002. EMS Rules 157.16(d)(1); 157.16(d)(19); and 157.11(l) (13).

**AMCARE Medical Services, Inc.**,

San Antonio, TX 24 months probated suspension of the EMS provider's license through August 2004 and a \$1,000 administrative penalty. EMS Rules 157.16(d)(1); 157.16(d)(19); and 157.11(l) (13).

**Americana Ambulance**, San Antonio, TX \$17,000 administrative penalty of which \$15,000 is probated for 6 months through February 2003. EMS Rules 157.16(d)(1); 157.16(d)(19); and 157.11(l) (13).

**AMR - Arlington**, Arlington, Texas 12 months probated suspension of all but \$2,500 of a \$25,000 administrative penalty through 2003. EMS Rules 157.16 (d) (1); 157.16 (d) (19); and 157.11(l)(13).

\* **Arnold, Jeffrey, San Antonio, TX.** 12 months probated suspension of EMT-I certification through November 7, 2003, a misdemeanor conviction. EMS Rules 157.37 and/or, 157.36(b) and/or, (c).

**Baccus, Tommy**, Santa Fe, NM. Suspension of the EMS-I certification through August 2003. EMS Rules 157.44(i)(1)(2)(l).

**Baldwin, John**, Spring, TX. 24 months probated suspension through August 2003. EMS Rules 157.36(b)(1)(2)(26)(27) and (28).

**Barrera, Richard L.**, Round Rock, TX. 24 months probated suspension of ECA certification through March 14, 2003. EMS Rules 157.37(c)(2)(3)(G).

**Blake, Danny**, Dayton, TX. 24 months probated suspension of EMT certification through August 13 2003. EMS Rules 157.37(c)(2)(3)(G).

**Boettcher, Laura G.**, Houston, TX. 24 months probated suspension of EMT certification through August 3, 2003. EMS Rules 157.37(c)(2)(3)(G).

\* **Bolton, Jeff, Kyle, TX.** 18 months probated suspension of the EMT-P certification thru March 2004. EMS Rules 157.36(b)(1); 157.36(b)(2); 157.36(b)(7); 157.36(b)(26); and 157.36(b)(28).

\* **Bowman, Darrell, Winona, TX.** 12 months probated suspension of EMT certification through September 26, 2003, a felony deferred adjudication. EMS Rules 157.37 and/or, 157.36(b) and/or, (c).

\* **Bristow, Greg, Hawley, TX.** 12 months probated suspension of EMT certification through October 23, 2003, a conviction or misdemeanor. EMS Rules 157.37 and/or, 157.36(b) and/or, (c).

**Brooks, Michael**, Temple, TX. Twelve (12) month probated suspension of EMT certification through August 7, 2003, a misdemeanor conviction. EMS Rules 157.37 and/or, 157.36(b) and/or, (c).

**Broom, Arthur**, White Deer, TX. 12 months probated suspension of EMT certification through April 12, 2003, a misde-

meanor convictions and deferred adjudication. EMS Rules 57.37 and/or, 157.36(b) and/or, (c).

**Brown, Jack D.**, Cleburne, TX. 48 months probated suspension of EMT certification through November 3, 2004. EMS Rules 157.37(c)(2)(3)(G).

**Bryan III, Charles**, Baytown, TX. 12 months suspension of the EMT-P certification through February 2003. EMS Rules 157.36(b)(1); 157.36(b)(2); 157.36(b)(26) and 157.36(b)(28).

**Buchanan, Christopher**, Midland, TX. 24 months probated suspension of EMT certification through June 4, 2004, misdemeanor convictions. EMS Rules 157.37 and/or, 157.36(b) and/or, (c).

**Bull, Kenneth**, Fort Worth, TX Suspension of the EMT-P certification through September 2004. EMS Rules 157.36(b)(1); 157.36(b)(2); 157.36(b)(3); 157.36(b)(9); 157.36(b)(26); and 157.36(b)(28).

**Buster, Zack**, Glenn Heights, TX. 12 months probated suspension of EMT certification through March 4, 2003, a misdemeanor conviction. EMS Rules 157.37 and/or, 157.36(b) and/or, (c).

**Byers, Danny**, Earth, TX. 60 months probated suspension of the EMT-P certification through March 2007. EMS Rules 157.36(b)(1); 157.36(b)(2); 157.36(b)(23); 157.36(b)(25); 157.36(b)(26); 157.36(b)(28); 157.36(b)(29); 157.37(a)-(c); and the Occupations Code Chap 53.

**Caldwell, Kenneth**, San Antonio, TX. 48 months probated suspension of EMT certification through August 7, 2006, a felony deferred adjudication. EMS Rules 157.37 and/or, 157.36(b) and/or, (c).

**Campos, Roberto**, Harlingen, TX. 12 months probated suspension of ECA certification through March 12, 2003, a misdemeanor conviction. EMS Rules 157.37 and/or, 157.36(b) and/or, (c).

**Cantu, Jr., Fernando**, San Juan, TX. 12 months probated suspension of EMT certification through March 23, 2003, a misdemeanor conviction. EMS Rules 157.37 and/or, 157.36(b) and/or, (c).

**City of South Houston EMS**, Houston, TX 24 months probated suspension of the EMS provider's license through September 2004. EMS Rules 157.16(d)(1); 157.16(d)(4); 157.16(d)(6); 157.16(d)(14); 157.16(d)(19); 157.11(e)(3); and 157.11(l) (13).

**Coffman, David**, Normangee, TX. 3 months suspension and 45 months probated suspension of EMT certification through June 30, 2005, a felony conviction. EMS Rules 157.37 and/or, 157.36(b) and/or, (c).

## DISCIPLINARY ACTIONS

**Colburn, Robert**, Cuero, TX. 12 months probated suspension of LP certification through March 4, 2003, a misdemeanor conviction. EMS Rules 157.37 and/or, 157.36(b) and/or, (c).

**Cole, Joseph**, Jasper, TX. 12 months probated suspension of EMT certification through August 12, 2003, a misdemeanor conviction. EMS Rules 157.37 and/or, 157.36(b) and/or, (c).

**Contreras, Camile**, North Charleston, South Carolina. 24 months probated suspension of EMT certification through February 5, 2003. EMS Rules 157.37(c)(2)(3)(G).

\* **Covarrubias, Abel, Abilene, TX.** 24 months probated suspension of the EMT-P certification thru November 2004. EMS Rules 157.36(b)(1); 157.36(b)(2); 157.36(b)(7); 157.36(b)(26); and 157.36(b)(28).

\* **Cowen, Christopher, Canyon Lake, TX.** 24 months probated suspension of EMT certification through October 23, 2004, convictions, misdemeanors and deferred adjudications. EMS Rules 157.37 and/or, 157.36(b) and/or, (c).

**Cox, Jeremy**, Kilgore, TX. 12 months probated suspension of EMT-P certification through April 2003. EMS Rules 157.36(b)(1); 157.36(b)(2); 157.36(b)(3); 157.36(b)(7); 157.36(b)(26); and 157.36(b)(28).

**Crane, Truman**, Leander, TX. 12 months probated suspension of EMT certification through February 8, 2003, a misdemeanor conviction. EMS Rules 157.37 and/or, 157.36(b) and/or, (c).

**Cranfill, Jamie**, Goldsmith, TX. 24 months probated suspension of EMT certification through August 8, 2003. EMS Rules 157.37(c)(2)(3)(G).

**Crowe, Gary**, Dale, TX. 48 months probated suspension of EMT certification through November 5, 2005. EMS Rules 157.37(c)(2)(3)(G).

**Cruz, Jesus**, Wharton, TX. 12 months probated suspension of EMT certification through January 2, 2003. EMS Rules 157.37(c)(2)(3)(G).

\* **Dallas Fire Dept EMS, Dallas, TX.** 12 month probation of a \$25,000 administrative penalty through November 2003. EMS Rules 157.11(m)(13); 157.11(d)(3); 157.19(b); and 157.19(c)(1)(A).

\* **Danbury VFD/EMS, Danbury, TX.** 24 months probated suspension of the EMS provider's license through September 2004. EMS Rules 157.16(d)(1); 157.16(d)(4); and 157.16(d)(14).

**Deloza, Javier**, Houston, TX. 12 months probated suspension of LP certification through August 23, 2003, a mis-

demeanor conviction. EMS Rules 157.37 and/or, 157.36(b) and/or, (c).

**Dheil, Mark**, Longview, TX. Decertification of the EMT-P certification effective June 11, 2002. EMS Rules 157.36(b)(1); 157.36(b)(2); 157.36(b)(15); 157.36(b)(21); 157.36(b)(25); 157.36(b)(26); 157.36(b)(27); 157.36(b)(28); and 157.36(b)(29).

\* **Dickey, Shane, Azle, TX.** 48 months probated suspension of EMT-P certification through October 23, 2006, a felony or deferred adjudication. EMS Rules 157.37 and/or, 157.36(b) and/or, (c).

\* **Dove, Rodney, Livingston, TX.** 12 months probated suspension of EMT certification through October 7, 2003, a misdemeanor convictions and felony deferred adjudication. EMS Rules 157.37 and/or, 157.36(b) and/or, (c).

**Eisenmenn, Bradley G.**, Austin, TX. 24 months probated suspension of EMT certification through May 30, 2003. EMS Rules 157.37(c)(2)(3)(G).

**Elliott, Ginger**, Omaha, TX. 12 months probated suspension of EMT certification through February 19, 2003, a felony conviction. EMS Rules 157.37 and/or, 157.36(b) and/or, (c).

**Evans, David**, Arlington, TX. Twelve (12) month probated suspension of EMT certification through July 1, 2003, a misdemeanor conviction. EMS Rules 157.37 and/or, 157.36(b) and/or, (c).

**Fairchild, Brian**, Sulphur Springs, TX. Twenty-four (24) month probated suspension of EMT certification through July 1, 2004, misdemeanor convictions and a felony-deferred adjudication. EMS Rules 157.37 and/or, 157.36(b) and/or, (c).

**Florence, Gertrude**, Leaky, TX. Suspension of EMT certification thru September 2004 due to a CE Audit. EMS Rules 157.36(b)(1), (2), (21) (28).

**Flores, George**, Seguin, TX. 12 months probated suspension of EMT certification through April 29, 2003, a misdemeanor conviction. EMS Rules 157.37 and/or, 157.36(b) and/or, (c).

**Flores, Roswitha**, San Juan, TX. 12 months suspension of the EMT-I certification through February 2003. EMS Rules 157.36(b)(1); 157.36(b)(2); 157.36(b)(22); 157.36(b)(23); 157.36(b)(25); 157.36(b)(26); 157.36(b)(28); 157.36(b)(29); and 157.37(c)(2)(3)(G).

**Foote, Richard**, Plano, TX. 12 months probated suspension of EMT certification through May 10, 2003, a misdemeanor conviction. EMS Rules 157.37 and/or, 157.36(b) and/or, (c).

**Galvan, Martin, Jr.**, Rio Grande, TX. 48 months probated suspension of ECA cer-

tification through October 12, 2004. EMS Rules 157.37(c)(2)(3)(G).

**Garcia, Edward**, San Angelo, TX. 24 months probated suspension of EMT certification through July 1, 2004, misdemeanor convictions and a felony deferred adjudication. EMS Rules 157.37 and/or, 157.36(b) and/or, (c).

\* **Garcia, Victor, Mission, TX.** 12 months probated suspension of EMT certification through September 13, 2003, a misdemeanor conviction and deferred adjudication. EMS Rules 157.37 and/or, 157.36(b) and/or, (c).

**Garza, Bart**, Edinburg, TX. 42 months probated suspension of EMT-I certification through April 12, 2004. EMS Rules 157.37(c)(2)(3)(G).

**Gonzalez, Rolando**, Rio Grande City, TX. 36 months probated suspension of EMT certification through August 22, 2004. EMS Rules 157.37(c)(2)(3)(G).

**Gordan, Carl L.**, Houston, TX. 24 months probated suspension of EMT certification through May 9, 2003. EMS Rules 157.37(c)(2)(3)(G).

**Grabs, Teresa**, Valley Mills, TX. 108 months probated suspension of licensed paramedic through September 26, 2010. EMS Rules 157.37(c)(2)(3)(G).

\* **Gray, Tamara, Houston, TX.** Denial of application for EMT certification effective October 17, 2002. EMS Rules 157.36(b)(2); 157.36(b)(4); 157.36(b)(13); 157.36(b)(15); 157.36(b)(18); 157.36(b)(26); and 157.36(b)(28).

**Grissom, Larry**, Austin, TX. 12 months probated suspension of EMT-P certification through August 29, 2003, a misdemeanor conviction. EMS Rules 157.37 and/or, 157.36(b) and/or, (c).

**Hall, Christine S.**, Alvin, TX. 24 months probated suspension of EMT certification through August 31, 2003. EMS Rules 157.37(c)(2)(3)(G).

**Hansen Jr., Richard Allen**, El Paso, TX. Suspension of EMT-I certification thru August 2004 due to a CE Audit. EMS Rules 157.36(b)(1), (2), (21), (28).

**Harris, Kevin L.**, McAllen, TX. 4 years probated suspension of EMT certification through July 5, 2004. EMS Rules 157.44(c)(2)(B)(vii).

**Harris, Patrick**, Houston, TX. 12 months probated suspension of EMT certification through January 25, 2003, for a misdemeanor deferred adjudication probation. EMS Rules 157.37; 157.36(b), (c).

**Hartley, Sherman**, Bay City, TX. 56 months probated suspension of EMT certification through July 5, 2006. EMS Rules 157.37(c)(2)(3)(G).

## DISCIPLINARY ACTIONS

\* **Harton, Eric, Austin, TX.** Twenty four (24) month probated suspension of EMT certification through September 26, 2004, a felony deferred adjudication. EMS Rules 157.37 and/or, 25 TAC 157.36(b) and/or, (c).

\* **Herrera, Leon, Abilene, TX.** 24 months probated suspension of EMT certification through October 15, 2004, for misdemeanor convictions. EMS Rules 157.37 and/or, 157.36(b) and/or, (c).

**Hines, Carles, Detroit, TX.** 12 months probated suspension of EMT certification through March 28, 2003, a misdemeanor conviction. EMS Rules 157.37 and/or, 157.36(b) and/or, (c).

**Hitchcock, Mike, Blanco, TX.** 24 months probated suspension of EMT certification through October 22, 2003. EMS Rules 157.37(c)(2)(3)(G).

\* **Hopkins, Billy, Athens, TX.** 1 month suspension followed by 11 months probated suspension of the EMT-P license thru November 2003. EMS Rules 157.36(b)(1); 157.36(b)(2); 157.36(b)(3); 157.36(b)(4); 157.36(b)(9); 157.36(b)(26); and 157.36(b)(28).

**Horner, Jason, Houston, TX.** 12 months probated suspension of EMT certification through February 19, 2003, a misdemeanor conviction. EMS Rules 157.37 and/or, 157.36(b) and/or, (c).

**Hughes, Albert, Houston, TX.** 12 months probated suspension of ECA certification through September 4, 2003, a misdemeanor conviction and a felony deferred adjudication violation of EMS Rules 157.37 and/or, 157.36(b) and/or, (c).

**Hungerford, Nancy, San Antonio, TX.** Twelve (12) month probated suspension of EMT certification through June 27, 2003, misdemeanor convictions EMS Rules 157.37 and/or, 157.36(b) and/or, (c).

**Jackson, Michael, Houston, TX.** 48 months probated suspension of EMT certification through March 7, 2006, a felony conviction. EMS Rules 157.37 and/or, 157.36(b) and/or, (c).

**Jarmon, Sr., Joseph Lloyd, San Antonio, TX.** Suspension of EMT certification thru October 2003 due to a CE Audit. EMS Rules 157.36(b)(1), (2), (21) (28).

**Jenkins, Eric Tommy, Spring, TX.,** 12 months probated suspension of EMT-I certification effective August 2002. EMS Rules 157.36(b)(1); 157.36(b)(2); 157.36(b)(4); 157.36(b)(13); 157.36(b)(21); 157.36(b)(26); 157.36(b)(28).

**Jimenez, Amanda, Spring, TX.** Twenty four (24) month probated suspension of EMT certification through July 8, 2004, a felony conviction. EMS Rules 157.37

and/or, 157.36(b) and/or, (c).

**Jones, Duke K., Houston, TX.** 24 months probated suspension of EMT-P certification through September 24, 2003. EMS Rules 157.37(c)(2)(3)(G).

**Kellar, Shanna, Terrel, TX.** 4 years probated suspension of EMT certification through June 30, 2004. EMS Rules 157.44(c)(2)(B)(vii).

\* **Knight, David, Kyle, TX.** 12 month probated suspension of the EMT-P license through October 2003. EMS Rules 157.36(b)(1); 157.36(b)(2); and 157.36(b)(26).

**Kowalski, Michael, Friendswood, TX.** 12 months probated suspension of EMT-P certification through January 2003. EMS Rules 157.36(b)(2), (3), (26).

\* **Lawton, Ronald, Webster, TX.** 24 months probated suspension of EMT certification through October 7, 2004, a misdemeanor and felony convictions. EMS Rules 157.37 and/or, 157.36(b) and/or, (c).

**Leal, Victor John, San Antonio, TX.** 24 months probated suspension of EMT certification through July 2004. EMS Rules 157.36(b)(1); 157.36(b)(2); 157.36(b)(21); 157.36(b)(28).

**Lowery, Jason, Houston, TX.** 12 months probated suspension of EMT certification through May 16, 2003, a misdemeanor conviction. EMS Rules 157.37 and/or, 157.36(b) and/or, (c).

**Mask, Steven, Abilene, TX.** 24 months probated suspension of EMT certification through October 12, 2003. EMS Rules 157.37(c)(2)(3)(G).

**Masters, Casey, Rowlett, TX.** 24 months probated suspension of EMT certification through November 16, 2003. EMS Rules 157.37(c)(2)(3)(G).

**Maurer, Garrison, Canyon Lake, TX.** 48 months probated suspension of EMT certification through January 3, 2006. EMS Rules 157.37(c)(2)(3)(G).

**Mbonu, Bonaventure, Houston, TX.** Twelve (12) month probated suspension of EMT-I certification through August 7, 2003, a misdemeanor conviction and a felony deferred adjudication. EMS Rules 157.37 and/or, 157.36(b) and/or, (c).

**McCormick, Christopher, Corpus Christi, TX.** 12 months probated suspension of EMT certification through April 15, 2003, a misdemeanor conviction and deferred adjudication. EMS Rules 157.37 and/or, 157.36(b) and/or, (c).

**McCrary, Ronnie, L., DeKalb, TX.** 12 months probated suspension of EMT certification through January 3, 2003. EMS Rules 157.37(c)(2)(3)(G).

**McDonald, Debra, Schertz, TX.** 24

months probated suspension of EMT-P certification through April 2003. EMS Rules 157.36(b)(1), (6), (26) and (28).

**McDonald, Krystal, Spearman, TX.** 12 months probated suspension of ECA certification through June 27, 2003, a misdemeanor conviction. EMS Rules 157.37 and/or, 157.36(b) and/or, (c).

\* **McEntire, Jeremy, Richardson, TX.** 24 months probated suspension of the EMT certification thru November 2004. EMS Rules 157.36(g)(5).

**McGee, Thomas R., Kingsville, TX.** 24 months probated suspension of EMT certification through January 11, 2003. EMS Rules 157.37(c)(2)(3)(G).

**McGrew, Robert, Houston, TX.** 24 months probated suspension of EMT certification through June 21, 2003. EMS Rules 157.37(c)(2)(3)(G).

**McLeod, James, Burleson, TX.** 43 months probated suspension of EMT certification through January 10, 2006, a misdemeanor conviction. EMS Rules 157.37 and/or, 157.36(b) and/or, (c).

**Medina, Patricia, Zapata, TX.** 12 months probated suspension of EMT certification through July 31, 2003, a misdemeanor conviction. EMS Rules 157.37 and/or, 157.36(b) and/or, (c).

\* **Mendenhall, Beverlee, Fort Worth, TX.** 12 month suspension of the EMT-P certification through September 2003. EMS Rules EMS Rules 157.36(b)(1); 157.36(b)(2); 157.36(b)(4); 157.36(b)(6); 157.36(b)(9); 157.36(b)(26); and 157.36(b)(28).

**Mettham, Andrew, Amarillo, TX.** 24 months probated suspension of EMT certification through May 28, 2004, a felony deferred adjudication. EMS Rules 157.37 and/or, 157.36(b) and/or, (c).

**Meyn, Jason, Bayview, TX.** 12 months probated suspension of EMT certification through February 19, 2003, a misdemeanor conviction. EMS Rules 157.37 and/or, 157.36(b) and/or, (c).

**Miller, Jason, Corpus Christi, TX.** 24 months probated suspension of ECA certification through October 22, 2003. EMS Rules 157.37(c)(2)(3)(G).

**Mitchell, Marklyn, Stockton, TX.** 24 months suspension of EMT-I certification through April 12, 2003. EMS Rules 157.51(b)(16), (23), (24), (25), (28) and 157.44(c)(1)(C).

**Mitchell, Zane, Alvarado, TX.** 6 months actual suspension followed by 49 months probated suspension of EMT-P certification through September 8, 2006, a misdemeanor/felony or conviction. EMS Rules 157.37 and/or, 157.36(b) and/or, (c).

**Moncada, Gabriel**, San Antonio, TX. 12 months probated suspension of EMT certification through September 4, 2003, a misdemeanor conviction and a felony deferred adjudication violation of EMS Rules 157.37 and/or, 157.36(b) and/or, (c).

**Moreno Jr., Pedro**, Harlingen TX. 12 months probated suspension of EMT-P certification through March 7, 2003, a misdemeanor conviction. EMS Rules 157.37 and/or, 157.36(b) and/or, (c).

**Nelson Jr., Melvin**, McGregor, TX. Suspension of ECA certification thru June 2004 due to a CE Audit. EMS Rules 157.36(b)(1), (2), (21) (28).

**Nickels, Nicky**, Muleshoe, TX. 12 months probated suspension of EMT-P certification through March 4, 2003, a misdemeanor conviction. EMS Rules 157.37 and/or, 157.36(b) and/or, (c).

**North Bosque County EMS, Inc.**, Meridian, TX. 24 months probated suspension through January 31, 2003 and an administrative penalty of \$5000 probated through January 31, 2003. EMS Rules 157.16(b) and (c) and (d)(4), (14), (17) and (19).

**North Texas EMS**, Fort Worth, TX. 24 months probated suspension and administrative penalty of \$6,000 against provider license through January 10, 2004. EMS Rules 157.16(b); 157.16(c); 157.16(d)(1), (10), (11), (12), (14), (19); 157.11(l)(1), (3), (12), (13) and (e)(6).

**Northcutt, Gary**, Smyer, TX. 12 months probated suspension of EMT certification through August 29, 2003, a misdemeanor conviction. EMS Rules 157.37 and/or, 157.36(b) and/or, (c).

**Nowell, Brian**, Red Oak, TX. 24 months probated suspension of EMT certification through August 7, 2004, misdemeanor convictions. EMS Rules 157.37 and/or, 157.36(b) and/or, (c).

**Orta, Fermine**, Roma, TX. 24 months probated suspension of ECA certification through November 2003. EMS Rules 157.36(b)(1), (2), (17), (18), (21) and (28).

**Oujesky, David**, Arlington, TX. 12 months probated suspension of EMT-I certification through July 29, 2003, a misdemeanor conviction. EMS Rules 157.37 and/or, 157.36(b) and/or, (c).

**Owens, Brian**, Smithville, TX. Decertification of the EMT certification effective September 10, 2002. EMS Rules 157.36(b)(1); 157.36(b)(2); 157.36(b)(9); 157.36(b)(26); and 157.36(b)(28).

**Parker, Michael**, Waco, TX. Suspension of EMT certification thru September 2005. EMS Rules 157.36(b)(1), (2), (10),

(21), (28).

**Perez, Ariel**, Crystal City, TX. 12 months probated suspension of EMT certification through June 2003. EMS Rules 157.36(b)(1); 157.36(b)(2); 157.36(b)(7); 157.36(b)(14); 157.36(b)(18); 157.36(b)(21); and 157.36(b)(28).

**Phillips, Earl**, Manchaca, TX. 36 months probated suspension of EMT certification through April 9, 2005, a felony deferred adjudication. EMS Rules 157.37 and/or, 157.36(b) and/or, (c).

**Pina, Sonny**, East Bernard, TX. Twelve (12) month probated suspension of EMT certification through June 27, 2003, misdemeanor convictions. EMS Rules 157.37 and/or, 157.36(b) and/or, (c).

**Pinedo, Marisela**, Los Fresnos, NM. Probated suspension of EMT-I certification through June 1, 2006. EMS Rules 157.44, 157.51(b)(16) and (c).

**Pippin, Brian**, Lipan, TX. 48 months probated suspension of EMT certification through April 9, 2005. EMS Rules 157.37(c)(2)(3)(G).

**Pounds, James**, Pflugerville, TX. 12 months probated suspension of EMT certification through August 12, 2003, a felony deferred adjudication. EMS Rules 157.37 and/or, 157.36(b) and/or, (c).

**Pulido, Gilbert**, Laredo, TX. Suspension of EMT certification thru September 2003. EMS Rules 157.36(b)(1), (2), (10), (21), (28).

**Rankel, Richard**, Spring, TX. 12 months probated suspension of EMT certification through February 11, 2003, a misdemeanor or conviction. EMS Rules 157.37 and/or, 157.36(b) and/or (c).

**Razo, Ramon Jr.**, Pharr, TX. 12 months probated suspension of EMT-I certification through May 10, 2003, a misdemeanor conviction. EMS Rules 157.37 and/or, 157.36(b) and/or, (c).

**Reece, Shawn**, Houston, TX. 12 months probated suspension of EMT certification through March 4, 2003, a misdemeanor conviction. EMS Rules 157.37 and/or, 157.36(b) and/or (c).

**Reel, Amanda**, Longview, TX. 12 months probated suspension of EMT-P certification through September 2003. EMS Rules 157.51(b)(1), (2), (10) and (25).

**Rehonic, Victor**, Grande Prairie, TX. 12 months probated suspension of EMT-P certification through February 13, 2003, a misdemeanor conviction. EMS Rules 157.37 and/or, 157.36(b) and/or (c).

**Reyes, Richard**, El Paso, TX. 12 months probated suspension of EMT certification through August 12, 2003, a misdemeanor conviction. EMS Rules 157.37 and/or,

157.36(b) and/or, (c).

**Rhodes, Linda**, Wimberly, TX. 48 months probated suspension of ECA certification through June 24, 2006, a misdemeanor and felony deferred adjudication. EMS Rules 157.37 and/or, 157.36(b) and/or, (c).

**Riley, Stephen**, Humble, TX. 47 months probated suspension of EMT certification through December 10, 2005. EMS Rules 157.37(c)(2)(3)(G).

**Ripley, Jimmy J.**, Winters, TX. 24 months probated suspension of EMT certification through February 5, 2003. EMS Rules 157.37(c)(2)(3)(G).

**Rocha, Carolina**, Carrizo Springs, TX. 6 months suspension followed by 24 months probated suspension of the EMT-I certification through March 2004. EMS Rules 157.51(b)(1), 157.51(b)(2), 157.51(b)(10) and 157.51(b)(25).

**Rodriguez, Deinea**, Houston, TX. 24 months probated suspension of EMT certification through February 11, 2004, a misdemeanor or conviction. EMS Rules 157.37 and/or, 157.36(b) and/or, (c).

**Roquemore, Joseph**, Atlanta, TX. 48 months probated suspension of EMT certification through August 9, 2005. EMS Rules 157.37(c)(2)(3)(G).

**Ruffin, Rodney**, Fort Worth, TX. 24 months probated suspension of EMT certification through August 2004. EMS Rules 157.36(b)(1); 157.36(b)(2); 157.36(b)(4); 157.36(b)(13); 157.36(b)(26); 157.36(b)(28).

**Ruiz, Ramon**, Van Horn, TX. 12 months probated suspension of the EMT certification through March 2003. EMS Rules 157.36(b)(1); 157.36(b)(2); 157.36(b)(7); 157.36(b)(26) and 157.36(b)(28).

\* **Saenz, Hector, Pharr, TX.** Decertification of the EMT certification effective September 20, 2002. EMS Rules 157.36(b)(1); 157.36(b)(2); 157.36(b)(22); 157.36(b)(23); 157.36(b)(25); 157.36(b)(27) and 157.36(b)(28).

**Saenz, Pablo**, McAllen, TX. 12 months probated suspension of EMT certification through August 20, 2003, a misdemeanor conviction. EMS Rules 157.37 and/or, 157.36(b) and/or, (c).

**Salinas, Rene**, McAllen, TX. 51 months probated suspension of EMT certification through April 25, 2006, for a felony conviction. EMS Rules 157.37; 157.36(b), (c).

**Salazar, Eloy**, Corpus Christi, TX. 12 months probated suspension of EMT-I certification through March 11, 2003, a misdemeanor conviction/deferred adjudication. EMS Rules 157.37 and/ 157.36(b)(c).



## DISCIPLINARY ACTIONS

**Seibert, Eric**, Houston, TX. 24 months probated suspension of the EMT-P certification through September 2004. EMS Rules 157.36(b)(1); 157.36(b)(2); 157.36(b)(6); 157.36(b)(9); 157.36(b)(26); and 157.36(b)(28).

**Shipp, Patrick L.**, Laneville, TX. 4 years probated suspension of EMT-I certification through July 28, 2004. EMS Rules 157.44(c)(2)(B)(vii).

\* **Sierra, Ismael, Mesquite, TX.** 1 month suspension followed by 11 months probated suspension of the EMT-P certification thru November 2003. EMS Rules 157.36(b)(1); 157.36(b)(2); 157.36(b)(3); 157.36(b)(4); 157.36(b)(9); 157.36(b)(26); and 157.36(b)(28).

**Smith, Danny, R.**, San Antonio, TX. 12 months probated suspension of EMT-P through March 4, 2003, a misdemeanor pre-trial diversion probation. EMS Rules 157.37 and, 157.36(b) and (c).

**Smith Jr, Roosevelt, Houston, TX.** 48 months probated suspension of EMT certification through November 5, 2005. EMS Rules 157.37(c)(2)(3)(G).

**Smith-Green, Tonya Sue**, Burleson, TX. 48 months probated suspension of EMT certification through October 15, 2003. EMS Rules 157.44, 157.51(b) and (c), and 157.53, felony/misdemeanor convictions.

\* **Sowers, Marion, Waco, TX.** Decertification of the EMT-P certification effective September 20, 2002. EMS Rules 157.36(b)(1); 157.36(b)(2); 157.36(b)(9); 157.36(b)(26); and 157.36(b)(28).

**Spears, Richard D.**, Iowa Park, TX. 24 months probated suspension of EMT certification through September 11, 2003. EMS Rules 157.37(c)(2)(3)(G).

\* **Stadler, Mark, Friendswood, TX.** Decertification of the EMT-I certification effective September 20, 2002. EMS Rules 157.36(b)(1); 157.36(b)(2); 157.36(b)(6); 157.36(b)(26); and 157.36(b)(28).

**Steger, John S.**, Denton, TX. 24 months probated suspension of EMT certification through May 15, 2003. EMS Rules 157.37(c)(2)(3)(G).

**Stillwell, Landon**, Dallas, TX. 26 months probated suspension of EMT certification through November 6, 2003.

EMS Rules 157.37(c)(2)(3)(G).

**Strimpell, Marc**, San Antonio, TX. 24 months probated suspension of EMT-P certification through April 4, 2003. EMS Rules 157.37(c)(2)(3)(G).

**Sulecki, Christopher**, Hockley, TX. 24 months suspension of the EMT certification through February 2004. EMS Rules 157.36(b)(1); 157.36(b)(2); 157.36(b)(7); 157.36(b)(26); and 157.36(b)(28).

\* **Sutton, Alan, Katy, TX.** 12 months probated suspension of EMT certification through October 23, 2003, a conviction or misdemeanor. EMS Rules 157.37 and/or, 157.36(b) and/or, (c).

**Swoboda, Michael**, College Station, TX. 12 months probated suspension of EMT certification through August 7, 2003, a misdemeanor conviction. EMS Rules 157.37 and/or, 157.36(b) and/or, (c).

**Tadlock, Dorthy**, Mart, TX. 12 months probated suspension of ECA certification through June 27, 2003, a misdemeanor conviction. EMS Rules 157.37 and/or, 157.36(b) and/or, (c).

**Thornton, Odis C.**, College Station, TX. 48 months probated suspension of EMT certification through June 18, 2005. EMS Rules 157.37(c)(2)(3)(G).

**Trans Care Medical Transport**, Fort Worth, TX. 12 months probated suspension of the EMS provider's license and a \$5,000 administrative penalty, which all but \$1,000 is probated for 12 months through February 28, 2003. EMS Rules 157.16(b); 157.16(c); 157.16(d)(1); 157.16(d)(19); 157.11(l)(13); 157.11(i)(1)(E); and 157.11(i)(1)(L).

**Turnbow, Brandon L.**, Lubbock, TX. 24 months probated suspension of EMT certification through March 14, 2003. EMS Rules 157.37(c)(2)(3)(G).

**Turner, John**, Thorndale, TX. 12 months probated suspension of EMT certification through August 7, 2003, a misdemeanor conviction. EMS Rules 157.37 and/or, 157.36(b) and/or, (c).

**Van Meter, Ronald, S.**, Midland, TX. 36 months probated suspension of EMT certification through December 17, 2004. EMS Rules 157.37(c)(2)(3)(G).

**Wann, Carey**, Boscoe, TX. Decertification of EMT certification effective May

20, 2002. EMS Rules 157.36(b)(1); 157.36(b)(2); 157.36(b)(4); 157.36(b)(18); 157.36(b)(26); and 157.36(b)(28).

**Warren, Andrew**, Floresville, TX. 36 months suspension (first 18 months actual suspension, second 18 months probated suspension) of EMT-I certification through December 2004. EMS Rules 157.51(b)(25).

**Waters, Christopher**, Austin, TX. 12 months probated suspension of EMT certification through March 23, 2003, a misdemeanor conviction. EMS Rules 157.37 and/or, 157.36(b) and/or, (c).

\* **White, Darrell, Houston, TX.** Denial of EMT application and all future applications, effective September 20, 2002. EMS Rules 157.37(c)(1); 157.37(c)(2); and 157.37(c)(3).

\* **Whitehead, Christopher, Princeton, TX.** Decertification of the EMT-P certification effective October 9, 2002. EMS Rules 157.36(b)(1); 157.36(b)(2); 157.36(b)(3); 157.36(b)(4); 157.36(b)(7); 157.36(b)(19); 157.36(b)(26); and 157.36(b)(28).

**Williams, David T.**, Dallas, TX. 24 months probated suspension of EMT certification through November 26, 2003. EMS Rules 157.37 (c)(2)(3)(G).

**Wood, Andrew**, Whitesboro, TX. 12 months probated suspension of EMT certification through July 15, 2003, a misdemeanor conviction and a felony deferred adjudication. EMS Rules 157.37 and/or, 157.36(b) and/or, (c).

**Wulf, Dawn**, Flatonia, TX. 24 months suspension of the EMT certification through September 2004. EMS Rules 157.36(b)(1); 157.36(b)(2); 157.36(b)(3); 157.36(b)(4); 157.36(b)(7); 157.36(b)(13); 157.36(b)(26); and 157.36(b)(28).

**Zachary, Jessy L.**, Humble, TX. 48 month probated suspension of EMT-I certification through December 5, 2004. EMS Rules 157.37(c)(2)(3)(G).

**Zais, John**, Mineral Wells, TX. 36 months probated suspension of EMT certification through November 7, 2004. EMS Rules 157.37(c)(2)(3)(G).

**Zamora, Diane**, Temple, TX. 12 month probated suspension of EMT-I certification through June 3, 2003, a misdemeanor deferred adjudication. EMS Rules 157.37 and/or, 157.36(b) and/or, (c).

The Texas Health and Safety Code can be found at <http://www.capitol.state.tx.us/statutes/hstoc.html>. All of the Texas Administrative Code can be found at <http://lamb.sos.state.tx.us/tac/>. To find EMS-specific information in the Texas Administrative Code, go to [www.texas.gov](http://www.texas.gov) click on Laws and Criminal Justice, click on Laws, Codes and Statutes, click on Texas Administrative Code, click on TAC Viewer, click on Title 25 Health Services, Part I Texas Department of Health, Chapter 157 Emergency Medical Care. TDH Index of EMS/Trauma Systems Policies can be found at <http://www.tdh.state.tx.us/hcqs/ems/spolicy.htm>

# Meetings & Notices

## Calendar

January 24, 31-February 7-28, 2002. **EMT-P refresher course.** 3-6 days \$50-\$85 depending on cert. level. Texarkana College. Contact Kathy Jordan 903/832-5565 ext 3384 or e-mail [kjordan@texarkanacollege.edu](mailto:kjordan@texarkanacollege.edu).

February 21-22, 2003. **EMS State of the Science: A Gathering of Eagles V.** Presented by the National Urban EMS Medical Directors Eagles Coalition. Dallas Renaissance Hotel, Dallas. Preconference class, February 19-21 at U.S. Secret Service Training Center in Irving. Contact Francie at 214/648-3784.

March 1-2, 2002. **Pediatric Advanced Life Support (PALS).** Two-day course designed to assist pediatricians, family and emergency physicians, nurses and paramedics in pediatric emergencies. \$210 inc. AHA card, PALS text, lunch for 2 days. Must register course limited to 30. Contact Kathy Jordan 903/832-5565 ext 3384 or e-mail [kjordan@texarkana.college.edu](mailto:kjordan@texarkana.college.edu).

March 6, 2002. **Pulmonary Diseases and Sleep Disorders course** targets

nurses, respiratory technologist, PT/OT's. \$50. inc. refreshments, lunch, handouts, CNE cert. Contact Kathy Jordan 903/832-5565 ext 3384 or e-mail [kjordan@texarkanacollege.edu](mailto:kjordan@texarkanacollege.edu).

March 8-16, 2003. **Trauma in the Tropics 2003.** Educational cruise hosted by LifeLink Ohio Health, aboard the Carnival Spirit, guest and family welcome. Open to all EMS providers, nurses, physicians and other healthcare professionals. Eight-day itinerary departs from Miami and stops in St. Maarten, Barbados and Martinique. CEUs available through the National Registry of EMTs and ONA approved. Contact Rick Dawson 614/871-0304 or [rdawson1@columbus.rr.com](mailto:rdawson1@columbus.rr.com).

April 3-4, 2002. **Mental Health Update,** 2 days, \$30 per day (\$10/day full-time student rate). Designed for social workers, counselors, nurses, mental health tech, LPC's and nursing homes personnel and all mental health professionals. Contact Kathy Jordan 903/832-5565 ext 3384 or e-mail [kjordan@texarkanacollege.edu](mailto:kjordan@texarkanacollege.edu).

April 12, 2002. **PALS Update.** Must register and turn in open-book pretest. \$110 includes AHA card/PALS textbook. Contact Kathy Jordan 903/832-5565 ext 3384 or e-mail [kjordan@texarkana.college.edu](mailto:kjordan@texarkana.college.edu).

April 18-19, 2003. **First Annual Central Texas Antique Fire Truck Muster.** Hosted by Moffat VFD & Temple Fire/Rescue. Antique fire truck showings, booths, demonstrations and parade. Proceeds go to safety programs and equipment funding. For info contact Chief Hal Pagel 254/986-8388 or Chief Lonzo Wallace 254/298-5682.

April 23, 2002. **Neuro Update.** Targets nurses, PT/OT, respiratory and other healthcare professionals. Contact Kathy Jordan 903/832-5565 ext 3384 or e-mail [kjordan@texarkanacollege.edu](mailto:kjordan@texarkanacollege.edu).

Glenwood, Tyler, TX 75702 or 903/535-5803, fax 903/939-5758.+

**Firefighter/Paramedic:** \$2528 /mo plus \$350/mo paramedic cert. Benefit package available. Apply or send resume to City of Kerrville Personnel Dept. 800 Junction Hwy, Kerrville, TX 78028. Or 830/792-8300, fax 830/792-3850.+

**Paramedic/EMTs:** AMR Dallas \$1500 sign on bonus (paramedic only). Competitive wages, benefits etc. Please fax resume/application to 877/932-9267 or e-mail [resume@amr-ems.com](mailto:resume@amr-ems.com) or check website [www.amr-inc.com](http://www.amr-inc.com). +

**EMS/Firefighter:** EDPRO Datamation Group, Inc. is seeking applicants to perform chemical surveys. If you are interested, contact Pat Vigil at (806) 777-1417.+

**Paramedics/EMTs:** Scott & White Pre-Hospital Services based in Temple, Texas is seeking applicants. Must hold current unrestricted EMT certification from Texas Department of Health. To send resume or obtain application contact Scott & White Human Resources, 2401 S. 31<sup>st</sup> Street, Temple, Texas 76508. 254/724-3776 or fax 254/724-1631, [careers@swmail.sw.org](mailto:careers@swmail.sw.org). \*

**Medical Communications Controller:** Scott & White Pre-Hospital Services, Temple, TX seeking qualified applicants. One year of EMS dispatching and or field operations experience. EMD and EMT certification, or obtain within one year of employment. Resume or application to Scott & White Human Resources, 2401 S 31<sup>st</sup> Street, Temple, Texas 76508. 254/724-3776 or fax 254/724-1631, [careers@swmail.sw.org](mailto:careers@swmail.sw.org). \*

**EMS District Manager:** Scott & White Pre-Hospital Services based in Temple, TX is seeking qualified applicants. Provides management and supervision to our ambulance and EMS operations in Milam County. Associate's degree or equivalent, current EMT certification from Texas Department of Health. Six years of full-time EMS experience and two years supervision experience. Send resume or application to Scott & White, Human Resources, 2401 S. 31<sup>st</sup> St., Temple, TX 76508. 254/724-3776 or fax 254/724-1631, [careers@swmail.sw.org](mailto:careers@swmail.sw.org). \*

**Paramedic:** Harris County Emergency District-1 now accepting applications for full time, part time and PRN paramedics positions. Must be 21 years of age and currently certified as Texas paramedic. To obtain application [www.HCESD-1.org](http://www.HCESD-1.org) or information @[HCESD-1.org](mailto:HCESD-1.org) or call 281/

## Deadlines and information for meetings and advertisements

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

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

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

## Jobs

**EMTs/Paramedics:** Part-time positions for special events various hours and competitive pay. Contact MedCare Medical Service 4120 Main St. Dallas, TX 75226. 469/385-4523 or fax 469/385-4524.+

**Paramedics/EMT's/Dispatcher:** ETMC EMS has full-time positions available in the East Texas and Pasadena areas. Competitive wages, excellent benefits, free CE. Contact John Whistell. 352 S.

# Meetings & Notices

449-3131, fax 281/227-3335.\*

**EMT-B/ EMT/Clerk II:** Kinney Co. EMS Brackettville, Texas accepting applications. Full county employee benefit package. Contact Carolyn Rutherford 830/563-9090 or fax resume to 830/563-9949.\*

**EMTs/Paramedics/Dispatchers:** Prime Care ambulance is now hiring part and full time providers in the Houston area. Competitive compensation and health benefits. Contact 713/521-1424 or fax resume 713/521-1496.\*

**EMS Instructor:** Cy-Fair college Houston, TX. Position Ref.# 80081. Teach full range basic, intermediate, and paramedic courses. Associate's degree in EMS technology and current Texas certification. Three years EMS field experience. Go to job.nhmccd.edu or call Maria Anderson 281/260-3887.\*

**Firefighter/EMTs:** RTFC a private industrial fire department. Hiring for positions in refinery fire suppression and emergency operations located in Corpus Christi & Houston area. Competitive compensation and benefit package. Contact RTFC's human resources department by phone 361/885-7226 or e-mail mgarbutt@rtfc.org.\*

**Paramedics:** Washington Co. EMS. Full-time/PRN openings. Salary begins at \$33,000. Excellent benefits including retirement, vacations and merit pay raises. Opportunity for advancement. 24/48. Call Kevin Deramus, LP-Clinical Operations Magr. Call or e-mail 979/277-6268 or kevinmv1@hotmail.com\*

**Paramedic/EMT-I:** The Cy-Fair Vol Fire Dept. is accepting applications for full-time and part-time positions. One year 911 experience required. ACLS, BTLs, PALS or PHTLS and CPR certifications. EMT-I's must have BTLs and CPR. For more information contact Melissa Scrivner at 281/550-6663, e-mail mscrivner@cy-fairvfd.com or in person at 9754 Whithorn, Houston, TX 77095.

## For Sale

**For Sale:** 1990 Ford F350 7.3 Diesel Ambulance, Wheeled Coach Body. Vortec System, charger, engine heater, strobe lights, siren, intercom, 800 watt inverter, Ferno stretcher. Excellent condition 116,700 mi., \$6,500. Contact: John Neukom Hilltop Lakes Vol. FD EMS; PO 1474 or 936/83

6736 e-mail jneukom@aol.com.+

**For Sale:** 1997 Ford E350 Type II Ambulance. McCoy Miller, runs good, 54000 miles. \$25000. Contact Perry Dobbs or Derek Henry at 281/837-8375.+

## Miscellaneous

**Rope Rescue Training:** Training for fire, EMS, law enforcement and industry in Technical Rescue, Rope Rescue, Fire Rescue, Cave Rescue, Vehicle Rescue and Wilderness First Aid. John Green 361/938-7080, www.texasroperescue.com.\*

**Rescue Training Inc:** Swiftwater/flood, rescue boat operations, PWC rescue ops, vertical, urban, wilderness, cave, survival training camps and more. Contact Wesley Meyer 830/620-rescue or www.angelfire.com/tx/rti for most current calendar.+

**Ambulance Remounts:** Priority One Emergency Vehicles, Grand Prairie, TX (866) 660-5595. 3 year/36,000 mile conversion and electrical warranty. www.plemergency.com.+

**Health Claims Plus:** EMS & fire department billing and run report software available. Electronic billing. Contact Health Claims Plus 888/483-9893 or visit www.healthclaimsplus.com.+

**EmCert.com:** Offers online CE TDH and CECBEMS approved for EMS/fire professionals. Subscription pricing for individuals or groups. One hour on-line CE. Call 1-877-367-4376.+

**Pharmacy Technician Program:** For more information call Alvin Community College. 281/756-3807.\*

**Protech Interaction Communications:** Professional training consultants. 2-day certification course on violent patient mgmt and EMS defensive tactics. Contact interact@trainingexperts.biz for dates.\*

**CPR manikins, new and used:** CPR supplies, airways, manikin face shields, face pieces, parts. Manikin cleaning and repairs. Rental manikins available. Contact Ron Zaring, Manikin Repair Center, Houston, 281/484-8382, fax 281/922-4429.\*

**CE Solutions:** EMS CE, accepted in more than 40 states. Internet, software and workbook formats. Click on www.ems-ce.com for 2 free CE hours (first visit), call 888/447-1993.\*

**Execu Med, Inc:** Professional medical management and billing services. Insurance, billing and data entry. Contact 972/780-9770 fax: 972/780-9692 or www.execumedinc.com.\*

**EmCert.com:** Offers online CE—TDH and CECBEMS approved for EMS/Fire professionals. Subscription pricing for individuals or groups. One hour on-line CE. Call 1-877-367-4376.\*

**Provider Billing:** Electronic claims submission and collections for ambulance services. Medicare and Medicaid. Call 800/506-4665 or fax 800/506-8248.\*

**Tarrant County College EMS Program:** Offers CPR, ACLS, BTLs, PEPP, EMT, EMT-P refresher and EMS instructor classes. Call 817/515-6657 or online @tccd.net.\*

**Expert Billing:** Specializing in EMS billing. Medicare, Medicaid and other insurances billed electronic by experienced billing representatives. Contact 713/635-6756 or fax 713/631-1404.\*

**South Texas Billing Specialist:** Complete billing services. Call and find out how we may be able to increase your monthly revenue. We specialize in ambulance billing. Contact 956/342-7518.\*

+ This listing is new to this issue.

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# EMS Profile: *Kerrville Fire/EMS*



*Kerrville Fire/EMS has been serving Kerrville and Kerr County since 1994. GETAC member Raymond Holloway is fire chief.*

**Number of Personnel:** There are 52 shift personnel, four transfer personnel and six administrative staff. Shift personnel work out of three stations located inside the city limits. We serve the City of Kerrville with fire and EMS; we provide Kerr County with EMS and mutual aid fire support. The EMS is not supported by tax dollars. Service charges and occasional grant monies are the sole income used to maintain the EMS service.

**Years in service:** The Kerrville Fire Department took over the EMS for the city and Kerr County on January 1, 1994, and in 1997 was awarded the TDH EMS Provider of the Year. Administration consists of Raymond Holloway, fire chief; Mark Beavers, training officer; Kyle Young, EMS coordinator; Dr. Steven Nail, medical director; and Cyndy Zachry, EMS accounts

administrator. Battalion chiefs are Dane Gourley, A-Shift; Steve Langlains, B-Shift; and Ray Crooks, C-Shift. There are 21 paramedics, nine licensed paramedics, four EMT-Is, and 23 EMTs.

**Number of units and capabilities:** Kerrville Fire/EMS currently has five ALS/MICU ambulances and a sixth one is expected in January 2003. First responder engines in the city and Kerr County volunteer first responders assist ambulances. Each unit is equipped with a 12-lead heart monitor to assist in the proper treatment of the cardiac patient. KFD/EMS are also able to determine quantitative end tidal CO<sub>2</sub> detection. Protocols contain rapid sequence intubation (RSI).

**Number of calls:** In the first nine months of 2002, Kerrville Fire/EMS responded to 3,354 EMS calls; 1,059 first responder calls were made by engine companies. From January 1 to September 30, 2,851 patients were transported.

**Current Projects:** KFD/EMS is in the process of joining the Southwest Regional Advisory Council in their efforts to provide a unified patient reporting system. We have purchased four laptop computers to go on the ambulances for this purpose. We recently upgraded to the LifePak 12s and the Stryker EZ Pro stretchers. Personnel participate in Shattered Dreams and the Hill Country Drug and Alcohol Abuse DWI offender classes. CPR instruction is offered to city employees and citizens. KFD/EMS raised over \$50,000 for the Firefighters Fund after September 11. KFD/EMS recently relocated one of their old stations to the western area of the city. The City of Kerrville has purchased property on the north end of town for a fourth station. We participate in EMS Week activities, Fire Prevention Week, child safety seat distribution and provide standby units for various events each year. KFD/EMS has tactical paramedics with the Kerr-Police Department Special Operations. KFD/EMS has held critical incident management training and is involved in a team together to assist area departments.

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