

EMS Briefs

Trauma Transfer Cases Double at Huron. During the first five months of 2007, 51 trauma patients were transferred to Huron Hospital. For the same time period this year, that amount more than doubled to 104 trauma cases that were transferred from hospitals throughout Northeast Ohio. The hospital's emergency department handles approximately 1,600 total trauma cases each year.

"Most critical care cases are flown in, and we have the ability to transfer these patients in our own Cleveland Clinic helicopters," says Tom Beers, EMT-P, EMS manager. "As a result, we are making Cleveland Clinic doctors, paramedics and nurses available at the patient's side during the transfer process. In addition, more patients are coming to Huron from surrounding counties and communities because emergency department physicians in the region are recognizing the expertise and outstanding trauma care available to patients at Huron's trauma center."

New Staff Joins South Pointe EMS. Two local firefighters and paramedics recently joined South Pointe Hospital's EMS department. **John Higgenbotham** is the new emergency management coordinator, with responsibility for coordinating the hospital's response to any internal or external disasters affecting the hospital. He also serves as captain for the Strongsville Fire Department.

As South Pointe's new EMS instructor, **Scott Wilbenheim** is responsible for continuing education, including American Heart Association certification courses, for fire departments under the hospital's medical control. He is also director of operations for Physician Ambulance Service.

Firefighter of the Year Awarded. The Chagrin Rotary Club has named Quinton Echols, firefighter/paramedic as Firefighter of the Year for the Woodmere Village Fire Department. A resident of the City of Euclid, he also works as a full-time firefighter for the City of Canton. ■

International EMS Expert Calls for Intensified Safety Efforts



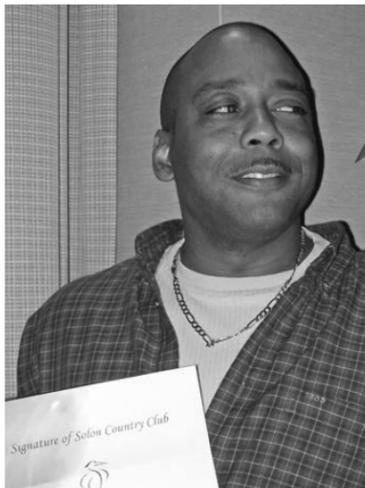
Firefighters and EMS providers gather after listening to Nadine Levick, MD, MPH (center), who presented the first Seminar for Professional Emergency Area Responders (S.P.E.A.R.) offered by Cleveland Clinic. They include (from left) Don Bell, Paul Celinski, Tim Black and Dave Chesnik of Macedonia Fire and Dave Latarski from Solon Fire.

Clutching her Teddy bear, a little girl with a minor injury trusted the paramedics who helped her into the shiny red ambulance. After all, the man and woman were heroes – kind of like Superwoman and Batman. Under their care, the cut on her knee didn't seem to hurt so badly.

The girl did not have a clue that she would soon be seriously brain injured – a victim of another ambulance crash. And neither she nor her mother – who followed the ambulance to the hospital –knew that an ambulance is the most lethal vehicle on the road. To add to the irony, the EMS crew who transported her (along with other EMS crews throughout the nation) was unaware that their moving workplace is a virtual danger zone.

This is just one scenario that was painted by internationally renowned speaker Nadine Levick, MD, MPH, when she presented the first Seminar for Professional Emergency Area Responders (S.P.E.A.R.) to 153 EMS providers and nursing professionals at Signature of Solon Country Club in May.

Offered by Cleveland Clinic Regional Hospitals in celebration of EMS Week, the free event included dinner and two



Beaming after winning a golf prize at the S.P.E.A.R. event is Herbert Waugh, firefighter/paramedic with the Warrensville Heights Fire Department.

hours of continuing education credits for participants. Prior to the dinner and presentation, 10 sponsors exhibited EMS-related equipment and information. Seminar participants were able to view and handle the equipment, pick up literature and speak to representatives – as if attending a mini trade show.

After dinner, Dr. Levick launched into a lecture and PowerPoint presentation – "New Initiatives in EMS Transport Safety: Where is the State of the Art" – that made it apparent why she is a sought-after speaker for major national and international EMS conferences and seminars.

Focusing on ambulance safety issues, Dr. Levick began by giving examples of horror stories like the one about the little girl described above. She drove home the point that some-

thing needs to be done to alleviate the dangers of emergency medical service vehicles in the United States.

Noting that the devastating realities of all-too-frequent ambulance accidents are oftentimes ignored, Dr. Levick said, "An endotracheal tube down the wrong hole may kill your patient and be a terrible burden for the patient's family and the medic involved, but an EMS crash can kill all involved and wipe out an EMS system's response capacity."

While the National Transportation Safety Board (NTSB) has made substantial efforts to enhance EMS aviation safety, Dr. Levick said, "The National Institute for Occupational Safety and Health (NIOSH) has not made the same effort to protect EMS providers and patients in ground-based ambulances."

Statistics show that there are approximately 50,000 emergency medical vehicles in the United States and 5,000 crashes each year, Dr. Levick noted. One fatality (as a result of ambulance crashes) occurs each week, and 10 serious injuries take place every day. This means that each year, one out of every 300 ambulance services experience a fatality.

The doctor asked: "Is it your service's tragic year? With the odds at 300 to one, what are your chances of winning this lottery?"

"UPS and laundry trucks have very similar design as ambulances, and have even more stringent safety requirements," she added. "Yet ambulances carry a very different cargo. People are passengers and not packages or parcels."

Given the less-than-optimal state of affairs regarding ambulance safety standards in the United States, Dr. Levick recommended that community fire departments take their own steps to promote ambulance safety. These include:

- **Buckling up.** A survey of more than 300 EMS providers (as published in the July 2006 issue of *Academic Emergency Medicine*) showed that two thirds do not wear seat belts on the squad bench while treating patients. Other studies have revealed that 82 percent of people killed in the rear of ambulances were unrestrained.
- **Looking to aviation safety standards as a model.** These standards include securing all equipment, including defibrillators and oxygen cylinders. At 40 miles an hour, even a cell phone can kill a person if it hits them in the head.

Safety Efforts

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Dr. Levick: Driving Home EMS Safety

A national and international leader in EMS safety, Dr. Levick is a board-certified emergency medicine physician with a master's degree in public health policy and management from Johns Hopkins University. In 2003, she received the prestigious International Society of Automotive Engineers Women's Leadership Award for her work on EMS vehicle safety, and in 2006, she received the International AMBEX award for research most likely to change practice.

Dr. Levick is the founder and chief executive officer of New York, NY-based Objective Safety LLC and the EMS Safety Foundation "Innovation Consortium," and her recently established website, www.objectivesafety.net, has been recognized internationally. In addition to holding faculty positions at Johns Hopkins University, Columbia University, and Maimonides Medical Center in New York, she has served with the Royal Melbourne Hospital and other healthcare organizations in Australia. ■

- **Securing patients with over-the-shoulder harnesses.** Not only do unrestrained people pose a risk to themselves, during a crash a flying body can seriously injure or kill other people in the ambulance. Depending on the patient's medical condition, have them sit upright as much as possible.
- **Supervising younger drivers.** Research has shown that drivers under the age of 25 are much more prone to have accidents. Fire departments and ambulance services should have policies and procedures in place to account for this fact.
- **Establishing and maintaining vehicle inspection policies.**
- **Requiring full stops at red lights.**
- **Working to avoid on-scene accidents.** When EMS providers are working as pedestrians, extra attention needs to be paid to prevent accidents.
- **Intensifying the driver selection and training process.** Anyone who drives vehicles should complete the Department of Transportation's Emergency Vehicle Operators Course or equivalent.
- **Investing in real-time driver monitoring and feedback devices.**
- **Wearing protective head gear.** Protecting the head while inside and outside of the vehicle is wise. Visors for biohazard protection and integrated sound are recommended.
- **Ensuring the safety of pediatric patients.** Do not allow parents, caregivers or EMS providers to hold children or infants in their arms or laps during transport.

According to Dr. Levick, healthcare providers in medical aircraft notify pilots if they must unbuckle their seatbelts to tend to critical patients. "In EMS, we tell the driver to go faster, and we unbuckle our belts to care for patients," she said. "When the ambulance is speeding, we cannot perform our jobs well, and we put ourselves and our patients at risk."



Eric Ekstrand, firefighter/paramedic with the Solon Fire Department (right) receives an Appreciation Award from Bill Sillasen, RN, EMT-P, regional EMS director, Cleveland Clinic Regional Hospitals, at the S.P.E.A.R. seminar held during EMS Week.

While much of the damage associated with ambulance accidents is obvious, there are many hidden costs, such as the inability to respond well when a vehicle is taken out of the fleet. This is generally more of a problem for smaller communities that have a small number of ambulances.

Another hidden cost may be the expense of providing counseling for staff members who are emotionally traumatized by the injuries or deaths sustained by their colleagues. When you factor in legal expenses, the costs mushroom. "Any cost of addressing these safety issues is dwarfed in contrast to the huge burden of not doing do," said Dr. Levick.

"Not having safety measures in place ends up costing much more, in terms of financial costs – let alone the personal, societal and ethical costs," she added. "Safety is good business."

Next year's S.P.E.A.R. conference will be held in May during EMS Week at Signature of Solon. Watch for information as the event nears. ■