

In Your Community: EMTs are on call to save lives

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Health district EMS responder Frank Iovino helps a recently-intubated training dummy breathe during an EMT refresher course in Heppner. -Photo by Andrea Di Salvo

Volunteers or not, they work long hours. Morrow County Health District has 12-hour day and night shifts, 6 a.m. to 6 p.m. and vice versa. He adds that it's not uncommon to have 24- or 48-hour work shifts, with all kinds of combinations of days on and off—two on followed by two off, for example. While the shifts are long, he explains, EMS workers also need enough time to decompress from the stress of the job.

While the shifts may seem crazy to those outside the field, most EMS workers are fine with them.

"I wouldn't want to work nine to five," says Iovino.

"Even though they might be a lot of hours, it doesn't always feel like a lot of hours," agrees Martin. Iovino adds that, with such long shifts, people often misunderstand the role of EMS and think they're not working when they're not responding to a call.

"You're not paying us to sleep at night. You're paying us for our ability to respond," says Iovino.

Martin adds that the average career length for an EMT is less than five years. That can be for reasons that vary from back injury from heavy lifting to the high mental stress caused by some types of calls.

"It requires coping skills," he says. At the same time, he recalls the old saying that if you are doing something you love, you never work a day in your life.

"That is everybody in this field," he says. There are two EMS providers on every shift at the health district. While every shift is unpredictable by nature, Martin says there are certain things that should be done on every single shift, such as checking the ambulance, the equipment, and any controlled substances they have in stock.

A lot of EMS workers carry additional respon-

sibilities. For instance, a lead position at each station—Heppner, Irrigon and Boardman—is in charge of ordering supplies, managing the schedule and filling sick shifts. Martin is the one who makes sure all the paramedics and EMTs have enough training opportunities to meet or exceed recertification requirements.

While the training is extensive, Martin says the biggest factor for a successful EMT or paramedic has nothing to do with education.

"This is far more of a personality type of a job than it is an education or experience thing," he says. "The nice thing about this job is that anybody can do it. Everyone can do the job. Not everyone has the personality for it."

"If you have the personality, we can train you," he adds. "You need to have a strong enough personality that you can walk into a chaotic situation and either take control or remain calm enough to take direction."

He says that the majority of people in emergency medical services have some level of type-A personality. More advanced providers are often asked to take control of an emergency situation. That ability to take control might come naturally or it might be something someone has to develop early in their career.

"That first year as an EMT, you really figure things out," he says. "If you can stay calm in the middle of chaos, you at least have the potential to thrive in this field."

"You kind of have to be that duck," Iovino says. "Calm on the surface but paddling as fast as you can underneath."

"We work long hours in stressful situations, often in dangerous situations. I need to know I can trust my coworkers not only with the patient's life but with mine," Martin adds.

Another important piece of the puzzle is the

equipment, much of it carried in the back of an ambulance. When it comes to what they pack into the ambulance or a trauma kit, space is at a premium.

"Everything has a job," says Martin.

Ambulance equipment includes everything from a cardiac monitor to medication.

"Everything an emergency room can do in the first 45 minutes can be done in the back of an ambulance if there's a paramedic on board," he says.

The cardiac monitor measures the patient's heart rhythm, oxygen and carbon dioxide levels, and blood pressure. There's an AED or manual defibrillator, as well as a pacemaker for if the heart isn't beating fast enough. Twelve leads on a patient's heart provide not only the heartrate, but the path electricity travels to get there.

Aside from a lot of equipment for the heart, Martin says, there's also equipment for breathing and traumatic injuries. The ambulance also carries with it medications to make people comfortable or treat life-threatening illnesses, as well as equipment for IV (intravenous) fluids or IO (intraosseous) infusion.

IO infusion allows EMS staff to inject medications, fluids or blood products directly into the marrow of a bone.

In Oregon, EMS providers can conduct rapid sequence intubation (RSI), allowing them to sedate, paralyze and insert a breathing tube into a patient who's struggling to breathe.

"It's a lot easier to take over control than to play catch-up if someone stops breathing," says Martin, adding that RSI isn't an option everywhere. "In emergency medicine there are different things we do in the Pacific Northwest that are unique to the area, and the RSI is one of them."

"Across the U.S., there a patchwork of protocols,"

adds Iovino.

Martin admits it can be a stressful occupation. A lot of EMS providers struggle with extreme stress, and he says it's important for all of them to remember that they didn't cause whatever catastrophe they're responding to.

"We're called to help. We didn't cause the problem," he says. "There wasn't anything we did to affect it to happen, but there's a lot we can do to help, and that's what we're there for."

He says a lot of EMTs and paramedics find different ways to cope or decompress outside of work, many of which require them to hyper-focus and let the rest of the stress fade away. Martin says he builds motorcycles, while others build cars or renovate houses.

"I know several people who are certified sky divers," he says. "Lots of different ways to cope."

Iovino says he unplugs when he clocks out. He explains that when people first start working in emergency systems, they're excited, and many leave their pagers on all the time, even when off duty.

"When I'm off, I'm off," he says, adding that he enjoys riding dirt bikes or camping with his family. "Nothing too extreme."

"I know some guys who like the high-octane stuff," he adds. "I have a life outside of that."

Iovino also says EMTs can learn from other people's mistakes, watching them burn themselves out or make poor choices in how to decompress.

However, Martin says that not every moment contains extreme stress. Emergency response systems requires a lot of training and a lot of waiting, interspersed with moments of extreme stress.

"But there's a lot of day-to-day, non-exciting things that happen every day," he says.

Even 911 calls, while always carrying the po-

tential for tragedy, aren't always that bad.

"The vast majority of the time when people call 911, it's to hold someone's hand because they're scared, because they don't know what to do," he says.

At the same time, Martin says that one of the absolute worst questions they get asked is, "What is the worst thing you've ever seen?"

"People don't mean it to be a bad thing, but you're asking us to relive the worst thing we've ever seen. We start to relive really terrible events," he says.

However, if you want to ask EMTs about their most interesting experiences, they'll probably have plenty to say. Both Martin and Iovino have worked in places outside of Morrow County; Martin's career took him to Los Angeles for a while, as well as nine months in Las Vegas.

He recalls the time in Los Angeles when a man high on methamphetamine harmed himself, and paramedics had to chase him for half an hour trying to treat him. When they caught up to him, he was on a three-story building with no obvious roof access. They had to call the fire department to get him down.

Martin says the man woke up in the intensive care unit a couple of days later with no memory of

how he got there.

Martin's experiences have ranged from going to crime scenes to pronounce people dead to delivering babies.

"I delivered a set of twins that had known heart problems. Six months later, I was taking one twin and the mom to their last cardiac surgery," he recalls.

They also see the results of what could be called sheer stupidity. For instance, he once treated a paraglider who crashed into a cliff face.

"A month later, he did it again," says Martin.

And, of course, there's always a chance of wildlife when working in rural areas like Morrow County.

"I had a guy get bit by a rattlesnake," says Martin, adding that the man captured the snake so he could show it off. "He wanted to show me, and it got loose in the back of the ambulance."

"I screamed like a little girl, and we were not friends after that."

Chaos or calm, terror or comedy, Martin says the bottom line is that EMTs are there because they want to help.

"Ultimately, when people call, we're the type of people who want to be called. We want to be there," Martin says. "Some people feel bad about calling. We don't feel bad about going."

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Work once a week or once a month.
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