Contents

Cover + Features

04

ATCEMS STRATEGIC PLAN

The recently updated ATCEMS Strategic Plan is a document used to communicate with the organization the organization's goals, the actions needed to achieve those goals, and all of the other critical elements developed during the planning exercise.

10

EMS TACTICAL TEAM ACTIVE SHOOTER DRILL

In today’s society we have seen a significant increase in active shooter events (ASE) as they have become more deadly. As a duty to the citizens we serve and our partners in uniform, together we strive to decrease both morbidity and mortality should an active shooter incident occur within our community.

14

NICHOLAS ROSECRANS AWARD WINNER: FIONA CAMPBELL AND THE CODE GREEN CAMPAIGN

Congratulations Paramedic Fiona Campbell and The Code Green Campaign for winning the Nicholas Rosecrans Award! This award is presented to first responders who demonstrate leadership, commitment and innovation in first responder injury prevention.

16

AMERICAN LEGION PARAMEDIC OF THE YEAR AWARD WINNER: CRAIG FAIRBROTHER

Congratulations to Paramedic Craig Fairbrother! Craig was nominated for his outstanding service to the community, not only for his duties as a Community Health Program Paramedic but for his volunteerism and continued dedication towards the Honor Flight Austin, Angel Flight and the Flying Vikings programs.
18

CAMP MABRY FULL SCALE EXERCISE

On March 3, 2016, Austin – Travis County EMS participated in a full scale exercise at Camp Mabry. There were two main objectives: exercise our new active shooter plan and integration with multiple agencies and the Camp Mabry staff.

In Every Issue

18

YOUR PHOTOS

Catch a glimpse of your coworkers in action!

20

EMPLOYEE RECOGNITION

ATCEMS employees receive kudos, special thanks and congratulations for a job well done.

28

CUSTOMER SERVICE SURVEY

Results from the ATCEMS Customer Callback Program.
AUSTIN-TRAVIS COUNTY EMERGENCY MEDICAL SERVICES (ATCEMS)

STRATEGIC PLAN

JANUARY 2016

This document was produced by the Austin-Travis County Emergency Medical Services Department
Strategic planning is an organizational management activity that is used to set priorities, focus energy and resources, strengthen operations, ensure that employees and other stakeholders are working toward common goals, establish agreement around intended outcomes/results, and assess and adjust the organization's direction in response to a changing environment.

It is a disciplined effort that produces fundamental decisions and actions that shape and guide what an organization is, who it serves, what it does, and why it does it, with a focus on the future. Effective strategic planning articulates not only where an organization is going and the actions needed to make progress, but also how it will know if it is successful.

What is a Strategic Plan?

A strategic plan is a document used to communicate with the organization the organizations goals, the actions needed to achieve those goals and all of the other critical elements developed during the planning exercise. The ATCEMS Strategic Plan was recently updated and available to all employees and can be found in the Library on our Intranet (atceminside). For your convenience, we’ve provided some of the Plan highlights below.

EXECUTIVE SUMMARY

The mission of Austin-Travis County EMS is to provide excellent patient care to anyone, any time, any place. Austin-Travis County EMS (ATCEMS) is people driven. The people in the organization define it. Our expertise, professionalism, and compassion define us.

We are dedicated to community service and we find honor in delivering care in a way that reflects our dedication to constant improvement, our agility, and our responsiveness.

We exist to change the lives of the people who we serve in positive ways and to help improve their situations. We are focused on caring for our patients, building and developing our medical practice, and achieving positive outcomes in our community. Our vision is to be valued as a collaborative healthcare provider to decrease suffering, improve the health of the community and save lives.

ATCEMS CORE COMPETENCIES

ATCEMS has identified core competencies that are central to fulfilling our Mission. These include: Our People, Reliability, Variety of Services, and our Community Engagement. These areas are strategically important capabilities that provide an advantage to our service environment.

The People of ATCEMS are vital to our success. The organization is made up of “Highly Committed People” who we strive to support with excellent training, a safe work environment, and competitive compensation.

ATCEMS provides a reliable “Safety Net” in our community. ATCEMS provides rapid responses and appropriate transport to medical emergencies within the Austin/Travis County service area around the clock every day.

ATCEMS provides a variety of services designed to meet the needs of “Any Patient, Any Time, Any Place”. This capability yields an important service benefit to all of the patients and families we serve. Examples of service include In-House Billing, Community Health Paramedics and Mental Health Services.

The department’s Engagement within our Community is also a key component of our core competencies. This is demonstrated by “Building a Safe and Self Reliant Community”. ATCEMS is engaged in our community through injury prevention programs, community health integration efforts, and giving back to the community through service and educational opportunities.

The Industry Leadership provided by ATCEMS shows how the department “Advances the Quality of Care Industry-Wide”. This is demonstrated through the departments training programs and Community Health Paramedic (CHP) patient navigation program.

ATCEMS has adopted the Institute of Healthcare Improvement (IHI) Triple Aim to optimize our performance. The Triple Aim is a framework that describes an approach used to optimize health system performance. The IHI states that “Organizations and communities that attain the Triple Aim will have healthier populations, in part because of new designs that better identify problems and solutions further upstream and outside of acute health care. Patients can expect less complex and much more coordinated care and the burden of illness will decrease. Importantly, stabilizing or reducing the per capita cost of care for populations will give businesses the opportunity to be more competitive, lessen the pressure on publicly funded health care budgets, and provide communities with more flexibility to invest in activities, such as schools and the environment, that increase the vitality and economic wellbeing of their inhabitants”.


ATCEMS is working hard to insure that patients are at the center of everything we do. We must continue to strive to provide value-based care that ensures the best healthcare outcomes for everyone. ATCEMS has also adopted the six characteristics from the Institute of Medicine (IOM) Quality Chasm which includes providing Safe, Effective, Timely, Efficient, Equitable and Patient-Centered Care. These elements, along with the IHI Triple Aim, contribute to the transformational change happening within the department, propel us from “Saving Lives to Changing Lives” and provide the framework for our core competencies.

STRATEGIC PLANNING PROCESS

ATCEMS utilizes a cyclical Strategic Planning Process (Figure 1.1) that coincides with our annual budget planning process. All stakeholder groups are involved, either directly or through participation in meetings and workgroups or indirectly through various communications methods.

ACTIONS PLANS

The Action Plans for ATCEMS refer to the specific actions taken by individual work units that support the Strategic Advantages and Strategic Challenges set forth by the department. Action plans are used to make the strategic priorities specific and achievable so that effective organization-wide understanding and deployment is possible.

Action planning within ATCEMS refers to specific actions that respond to short and longer term strategic priorities. Action plans detail the tasks involved, resources needed to complete the tasks and the time horizons that are needed for accomplishment. Action plans create aligned measures for all areas within the department’s work units.

DEVELOPMENT

The EMS Department utilizes a web-based product called SmartSheet to track and report on all active action plans. SmartSheet is a cloud-based application to define, organize and sequence the high-
level tasks that need to be accomplished within an Action Plan. The development of an Action Plan helps ensure that tasks and timelines are in sync and brings to light conflicts and resource constraints that may influence the success of a plan. Action Plans document the foundational elements of a project or program and provides oversight and accountability for all participants. Action Plans articulate who is doing what, why, and when.

IMPLEMENTATION
Implementation of the department’s Action Plans is managed at the work unit level. Together the EMS Chief of Staff and each Assistant Director is responsible for assuring Action Plans are properly developed, monitored and implemented. Accountability for the timely completion of the departments Action Plans is assigned through the command structure of the EMS Department. Each employee who has responsibilities associated with an Action Plan will be monitored by their Supervisor or Manager for completion of their associated tasks. Short Term Action Plans are those that can be accomplished within three months from their initiation. Long Term Action Plans are those that take longer than three months and could take multiple years to complete. Progress must be measured to make sure results align with expected outcomes.

REPORTING
Action Plan Reporting is accomplished monthly through a Leadership Performance Reporting meeting. Each member of the EMS Department’s Leadership Team delivers a Leadership Report that includes all active Action Plans for programs or projects relative to their divisions within the department. At various times throughout the year, program leaders have opportunities to share their progress with members of the Executive Team. They can share data, progress landmarks, and request needed support to ensure success from the Executive Team.

The ATCEMS Strategic Plan is located on http://www.atcemsinside.org/home/ (login required) in the Library along with all of the published ATCEMS Annual Reports and the current Meet and Confer Agreement.
OFF-DUTY SAVES IN AUSTIN, DEATH BENEFITS
AND AN IDAHO PARAMEDIC NAMED COMMUNITY CHAMPION

OFF-THE-CLOCK SAVES

It’s a parent’s worst nightmare: Your child is hurt, but you don’t know how to help. It’s in situations like these when EMS crews are truly invaluable, which is why Austin-Travis County EMS (ATCEMS) paramedic Chance Bergstrom was recently honored with a Lifesaving Award for resuscitating a 14-year-old boy.

Bergstrom was driving in the parking lot of a local shopping center when he saw a young boy collapse while walking with his parents. His mother was screaming for help, and Bergstrom knew he had to spring into action, even though he was off duty.

Bergstrom couldn’t find a pulse on the boy, so he began CPR. A police officer equipped with an AED soon arrived, and after two shocks, the boy’s heartbeat returned. It’s not just that Bergstrom was in the right place at the right time; he was at the right place, with the right training, at the right time, and had the right instinct to help.

This save follows on the heels of three other recent saves off-duty ATCEMS personnel were involved in: Just as he was about to go home after a shift, Mark Hawkins helped saved the life of a 50-year-old runner who collapsed in cardiac arrest outside the EMS station; Danielle Henson helped save a 15-year-old boy in cardiac arrest at a local swimming pool; and Craig Smith helped save a young boy who was being repeatedly submerged in a local river after falling off his inner tube.

We give a thumbs up to Bergstrom and his ATCEMS colleagues for acting quickly, even while off the clock. Their heroism shows that helping others is much more than a job description—it’s a way of life.
Congratulations Division Chief Mike Elliott
30 Years of Service to Austin-Travis County EMS
EMS TACTICAL TEAM
ACTIVE SHOOTER DRILLS
In today’s society we have seen a significant increase in active shooter events (ASE) as they have become more deadly. As a duty to the citizens we serve and our partners in uniform, together we strive to decrease both morbidity and mortality should an active shooter incident occur within our community. This is accomplished through rigorous training scenarios involving ASE’s.

We are all too often forced to confront the reality of a violent world around us. An ASE can occur anywhere, anytime, and in the most unexpected places; sometimes by the most unlikely suspect. Today, more than ever, we must be prepared for such an event.

ATCEMS Tactical Medics in coordination with APD SWAT, APD CAST and TCSO SWAT train together to work more efficiently and effectively during an ASE. These real life training scenario's provide participating team with a well-choreographed action plan that ultimately produces a cohesive unified response team where all involved parties are properly prepared to take action.
**Tactical Team Training**

On March 14, ATCEMS Tactical Team conducted several Active Shooter mass casualty training scenario with APD SWAT, APD CAST, and TCSO SWAT at Hendrickson High School in Pflugerville. This training involves simulation of a fictitious active shooter inside the school. Sixty Hendrickson H.S. student volunteered as patients.

**Active Shooter Scenario I**

A 17 year old male enters a school carrying a long gun and a hand gun taking hostages and randomly firing upon fellow students. An adult female covered in blood runs out the front entry of the high school frantically screaming “he is shooting everyone in the back”. First on scene units arrive to see subject run to the back of the school with an assault rifle. SWAT teams prepare for entry dressed in tactical gear and armed with assault rifles; they hear shots fire from within the school. Tactical teams make entry in an attempt to neutralize the threat to two tactical medics within their group. Upon entering the hallway, male subject fires his rifle multiple times. A single shot impacts an officer in the neck. EMS Tactical Medics make a difficult decision to split up. One Tactical medic stays with the down officer providing treatment as LEO’s move forward to eliminate the threat, second tactical medic continues with SWAT officers. Emotions are running high as the scenario unfolds and intensifies. As the situation developed, students were found hiding under their desks and in far corners as others lay wounded in the middle of the classroom floor. You can hear the cries, screams and agony of the students from the entry point as they echo down the hall. SWAT members storm into each room weapons drawn clearing the area as they descended down the hallway in search of the young gunman while the single tactical medic rapidly must treat multiple life saving injuries and deal with uninjured hysterical role players.

After the suspect was neutralized the wounded scattered across several areas were moved to the casualty collection point (CCP) where rapid triage and life saving treatment was performed. The CCP was established in a cleared and protected classroom where the first encountered victims lay. At this point additional resources entered into the CCP and all victims were removed in a well organized and strategic manner.

As the scenario came to an end, a young man connected to the assault was dead with a self inflicted GSW to the head. Multiple bodies lay strewn through the hallways of the high school, spent shell casings littered the floors. It is difficult to breathe for the air is filled with a pungent, Sulphur odor from discharged weapons. The results of this vicious attack consist of a police officer with a GSW to the neck, 10 young teens sustained GSW’s to their extremities, four students have GSW to the abdomen, two GSW to the head and two DOS.

This was a well planned, real-life scenario that was executed with great precision and professionalism. All participants did an incredible job, from the LEO’s, Tactical Medics to the high school students. This event was powerful as the impact sharpens your awareness level and strengthens your confidence in the knowledge that these dedicated elite professionals can perform their duties with meticulous vigor to effectively achieve whatever it takes to protect and serve the community.
I would like to congratulate the team on an outstanding drill executed on Monday March 14, 2016 at Hendrickson High School. The work that was put in from the inception through execution resulted in one of the finest Active Shooter drills that has ever been presented in this part of the country. I have heard nothing but great things from participants, the school, the local community and subject matter experts on how smooth and professional this exercise went, not to mention the highest level of instruction and benefit to those that participated as students.

**Captain Capra** and **Captain Mallon** have demonstrated the highest level of professionalism and leadership in their successful execution of this drill. Their hard work and dedication to this project has resulted in a better prepared public safety response, a community with an enhanced understanding of these situations, and have raised the bar in training and delivery of future drills.

**BRAVO ZULU!**

Mikel J. Kane, Division Chief
Code Green Campaign

Congratulations Fiona Campbell and the Code Green Campaign

ATCEMS Medic II Fiona Campbell is the Secretary of the Code Green Campaign. The Code Green Campaign received the 14th annual Nicholas Rosecrans Award for their work in first responder suicide prevention at the EMS Today Conference & Expo in Baltimore, Maryland.

The Nicholas Rosecrans Award is designed to recognize emergency responders who demonstrate leadership, commitment and innovation in preventing injuries.

Paul Maxwell, Paramedic and President/Cofounder of EPIC Medics stated “Fiona and Code Green are well deserving of national recognition and your efforts have not gone unnoticed by your EMS peers. This award is being presented on behalf of all the EMS personnel, who, because of your work, are learning to provide care for themselves and recognize issues in their peers.”

The Nicholas Rosecrans Award is an annual award presented by EPIC Medics in conjunction with JEMS Emergency Medical Services, Laerdal Medical, RedFlash Group and NHTSA to honor innovation and excellence in EMS-based injury prevention programs.
Wald, Kevin  
Schickel, Matt

Incident#15308-02889  Run#15-139956  Date of call 11/04/15

On November 4th, 2015 I was stricken with kidney (and other organ) failure while attending a conference at the Hyatt Regency in Austin. My colleagues called 911, and within minutes a team from the Austin-Travis County EMS was treating me and preparing me for transport to the hospital. I am told that I was near death during the ride to the ER my heart rate had dropped to 26 bpm.

I was hospitalized for more than a month at the Seton/UT hospital, with the first week in the Intensive Care facility. In early December I was transferred to the University of Michigan hospital in Ann Arbor for a week, and then into a rehabilitation hospital for another three weeks for a total of more than two months in the hospital. I am just now returning to work, and still recovering from the after-effects of my illness. The good news, of course, is that I am alive.

I tell you this only to emphasize just how sick I was, and why I believe that the rapid response and treatment from the EMS team saved my life. Had they not been so prompt in responding, and in recognizing the severity of my condition, I would certainly not be here today.

What precipitated this note? In looking through the medical bills today, I ran across a copy of the statement for the EMS Team’s services a grand total of $923.95! It seems a pittance for saving a man’s life without my adding my personal thanks.

So I want to thank the entire EMS team for their prompt and professional action in saving my life. In particular I want to thank the gentleman who appeared to be the team leader. I was not in any condition to recognize exactly what was going on, but I do know that the comfort he provided helped me make it to the ER.

Sincerely yours,  
Dan

“Well done Matt & Kevin!”  
Terésa Gardner,  
Assistant Chief

Matt and Kevin,

I wanted to send this email to personally thank both of you for the care and compassion that you provided to your patient below back in November.

Not often do we get a letter sent to our Billing department emphasizing the fact that our costs were minor compared to the skill, knowledge and significant outcome in a person’s life.

Saying “Excellent job! Or Huzzah!” seems to pale in comparison to the words from your patient.

Respectfully,  
Chief Jakubauskas

Well done Matt & Kevin!”

Terésa Gardner,  
Assistant Chief

RESPECT & PRAISE
ATCEMS Paramedic Craig Fairbrother was recently named winner of the American Legion Travis Post 76 Paramedic of the Year Award! Craig was nominated for his outstanding service to the community, not only for his duties as a Community Health Program Paramedic but for his volunteerism and continued dedication towards the Honor Flight Austin, Angel Flight and the Flying Vikings programs. Craig was honored at the American Legion Travis Post 76 award dinner and ceremony on March 21, 2016.

Craig served in the Navy as a Special Warfare Combat Crewman for 6 years, prior to that he was a Damage Controlman for 6 years. During his Navy years, Craig attended Paramedic School at Tidewater Community College in Virginia Beach, VA. His first paramedic job was while he was in the Navy for Special Boat Unit 20. After completing his service in the Navy, Craig saw the television show “Paramedics” on the Discovery Channel. The show was filmed in Las Vegas and Craig knew that was where he wanted to practice Emergency Medicine.

Craig’s community service began while he was in Las Vegas when he started working with disabled children in his spare time. Craig took ambulances to group homes for disabled children for show-n-tells to help them become more comfortable around emergency personnel and equipment; he didn’t want sick or injured children to be afraid of riding in an ambulance. That’s when Craig found his passion for helping children.

Craig made his move to Austin in 2002 and tested for a position with Austin-Travis County EMS. He began his career with ATCEMS in January of 2003 as a Field Paramedic, working on the ambulance for one year before moving into the Special Operations Rescue division. Being a Navy man and experienced boat operator, he soon became a member of the Swiftwater Rescue Team and Texas Task Force 1 performing water rescues during flood events in Central Texas. Craig worked within the Special Operation Rescue Division for six years before finding another passion in life; his passion for flying planes. Craig took flying lessons when he wasn’t working on the ambulance and received his pilot’s license, eventually working his way up to a commercial, multi-engine license.

Three years ago, while Craig was training to obtain his commercial flight license, he learned about the Angel Flight program. When he heard about Angel Flight’s mission and purpose, he knew he had found his life’s calling and volunteered to fly for his first mission. Angel Flight coordinates with volunteers across south central region to facilitate transport of the critically ill pediatric patients and their families. These patients are transported to a much needed higher level of medical care than can be received at their local hospital.

Angel Flight airlifts patients in donated aircraft with volunteer pilots to their respective destinations. Family and patients alike receive the highest level of care and consideration for their comfort and expedience of travel. Craig is honored to fly a Cessna 4-5 times a month picking up, transporting and returning children in need from Texas, New Mexico, Oklahoma and Louisiana.

Craig’s most memorable flight was a male pediatric patient that was scheduled for transport, but at the last minute the family was unable to get to the airfield due to car problems. He obtained the family’s phone number, then called and asked them to give him the GPS coordinates from their iPhone. Craig input the coordinates and flew to the coordinates, circled around a couple times assessing the hazards and landing areas.
He landed the plane on the street leading to the patient’s home. He carefully taxied up to the front door, loaded up the patient, family and a nurse. He then taxied back out to the road and effortlessly resumed flight with all passengers on-board to MD Anderson Hospital. The patient was able to make his appointment and received lifesaving treatment that afternoon. Craig says “It’s times like these that I can look back and know that I truly made a difference in someone’s life. I am thankful that I have the skills, knowledge and ability to make that difference. To give back to a community in need is incredibly rewarding. The smiles on the faces of the patients and the gratitude of the families are all I need to continue volunteering.”

The **Honor Flight Austin** mission is to transport veterans with a specific priority to Washington, D.C. to visit their memorials dedicated to honor their service and sacrifices and return them home to their families and loved ones. A few years ago, Craig was contacted by the City of Austin’s Veterans Affairs Department to help organize trips (and fly) to Washington DC for Veteran’s. He immediately accepted the challenge and has been flying private planes and transporting our Veterans to their Washington DC Memorial several times a year.

Craig’s newest volunteer effort is the **Flying Vikings**. Flying Vikings allows terminally ill children a chance to be pilots for a day, taking them up into planes with an experienced pilot and then allowing them to control the plane and navigate the sky. The program is designed to immerse children ages 6 to 18 years old with a chronic illness or physical disability into a high-flying adventure.

Craig Fairbrother is currently a Community Health Paramedic visiting patients in their homes and providing medical care and resources to those individuals who may not have immediate access to the services they need. He continues to conduct volunteer flights and charitable missions for Angel Flight, Honor Flight and Flying Vikings.
On March 3, 2016 Austin – Travis County EMS participated in a full scale exercise at Camp Mabry. Planning for the exercise took 5 months and multiple meetings. We hope to make this an annual exercise. ATCEMS had 2 main objectives for the exercise. First, exercise our new active shooter plan with 20-30 patients. Second, integrate with Austin Police, Austin Fire, and Camp Mabry staff during an active shooter incident. Our response included three ambulances, two field Commanders, and a Division Chief. Mike VonWupperfeld, Juan Hinojosa, and Randy Vickery helped with the planning of the exercise.

The responding units did an excellent job during the incident. There were some key items that went well and some lessons learned. One item that everyone has been working on is keeping transport lanes open during an MCI or active shooter incident. APD and AFD did an excellent job at keeping lanes open for ambulances to travel on. This is a key point to remember during a MCI type incident. We cannot transport patients if we cannot get to them.

Positive outcomes

- ICS positions were filled (Unified Command, transport, triage, and treatment)
- Patients were triaged well. They were not over triaged.
- Patients were moved off the scene once EMS was moved forward.
Lessons Learned

- A command post needs to set up early with police, fire, and EMS Command staff. During this exercise there was confusion on the location of the command post. This led to our units being delayed in staging.

- Tracking of patients will be difficult. We are working on some better tools if you are placed in this role.

- Make sure the location of the command post, transport area, etc., is well away from the hot zone.

- Communication will be difficult. Make sure you know what channel you should be on. Limit radio traffic. If additional channels are needed, Command can request them.

We hope to do additional exercises like this in the future. We will be working with the CE department on some additional training. The Emergency Management Division will be taking the lessons learned from this exercise and looking at improving our response to active shooter and MCI Incidents.

A special thanks to all the hard work that was put into the planning of this difficult and complex event. Equally as important and appreciated are those individuals who took part in participating in this large scale exercise.

**Planners**

Keith Noble  
Mike VonWupperfeld  
Juan Hinojosa  
Randy Vickery

**Response Personnel**

Cheryl Bakhtiari  
William Clark  
Simon Powell-Evans  
Wes Mooney  
Health Holt  
Luke Bess  
Jim Martin  
Kurt Brown
ATCEMS Medics Rhys Lucia and Audrey Willis were recently visited by a local Girl Scout Troop! Rhys and Audrey taught the girls some First Aid and the girls learned about bandaging and splinting, how to check for a pulse, what to do if someone has a seizure, and some tips and tricks on how we safely move patients.

They girls got to try on gear and then went over to Medic 16 to check out the ambulance. Willem Gervais also helped out by showing the girls the ambulance and answering questions. These Girl Scouts donated 32 boxes of cookies that will be passed around the stations! Everyone had a great time and the girls were very interested in learning about what paramedics do.
NUTRITION 101

Nutrition Basics for public safety employees

Attention AFD, EMS and APD employees. You are invited to attend this nutrition lecture geared towards public safety workers. Learn basic nutrition information, as well as, meal planning and healthy food options for those with odd shift schedules and time constraints. This lecture will be led by the UHC health coach & registered dietician Tracy Beeman.

TUESDAY, APRIL 12
1:00-2:00PM

AFD WELLNESS CENTER/CLASSROOM A
(517 PLEASANT VALLEY ROAD)

Email Jacqueline.adams@austintexas.gov with questions or to sign up to attend.
Ryan Lee

Darren Rodgers 2014 Clinical Excellence Award

Richard Murry & Kyle Thon

Holly Craghead 15 Year Service pin

Patrick Eaves

Chief Kane 10yrs service pin
March
COLON CANCER
AWARENESS MONTH

preventable • treatable • beatable

Stages of Colon Cancer

- **Stage 0**: Very early cancer on the innermost layer of the intestine
- **Stage I**: Cancer is in the inner layers of the colon
- **Stage II**: Cancer has spread through the muscle wall of the colon
- **Stage III**: Cancer has spread to the lymph nodes
- **Stage IV**: Cancer has spread to other organs

**Stages**

- **Stage I**: 80-95% chance of survival
- **Stage II**: 55-80% chance of survival
- **Stage III**: 40% chance of survival
- **Stage IV**: 10% chance of survival
WHAT IS COLORECTAL CANCER?

Colorectal cancer, or CRC, is the third most commonly diagnosed cancer in both men and women in the United States, and the second leading overall cause of cancer deaths.²

WHO GETS CRC?

More than 90% of CRCs occur in people age 50 and older.²

CRC incidence is:

35%-40% more common in men than women²

20% higher among African Americans than whites²

HOW DOES CRC DEVELOP?

1. Most CRC begins as a non-cancerous growth called a polyp that forms on the innermost layer of the colon or rectum. Some polyps can become cancerous.¹

2. As a CRC tumor develops, it grows through several layers of tissue.¹

3. Eventually the tumor may reach nearby lymph and blood vessels, and may even spread to lymph nodes and distant sites in the body.¹

HOW MANY ARE AFFECTED?

More than 140,000 Americans are diagnosed each year.²

That’s about 16 every hour.²

Each Year 28,700 people are diagnosed with metastatic CRC, or advanced stage disease.³

50,000 Americans will die from the disease each year.¹

CRC incidence has been increasing in adults <50.²

WHAT ARE SOME WARNING SIGNS?

- Changes in bowel habits, such as diarrhea, constipation or narrowing of the stool.⁶
- A constant need to evacuate the bowel.⁵
- Blood in the stool.⁵
- Weakness & fatigue.⁵
- Cramping or abdominal pain.⁵
- Unintended weight loss.⁵

CATCHING CRC EARLY IS IMPORTANT

More than 9 out of 10 individuals diagnosed with early stage CRC that has not spread (metastasized) beyond the colon or rectum survive 5 years.⁴

Approximately 1 out of 10 individuals with advanced stage CRC that has spread (metastasized) to other organs such as the lungs or the liver survive 5 years.⁴

Because the early stages of the disease do not typically cause symptoms, the American Cancer Society recommends screening tests beginning at age 50 for those at average risk for CRC.²
Today I was rounding with one of my RNs and she encountered a situation in which we had to call EMS for a student at St Elmo Elementary around Noon. I was impressed with the level of professionalism and compassion displayed by the two EMS medics caring for this student. They did a great job talking with the mother in Spanish and explaining her choices with respect to transporting the student.

I did want to share these positive Kudos!

Warm regards,

Sally Freeman, MSN, RN, NCSN, NEA-BC
Dell Children’s Medical Center of Central Texas

Great job by both providers!!!

Eric S. Jakubauskas, Division Chief
After **Medic Ryan Lee** completed a late call report at M01, Mr. Lee stopped in the driveway of M01 to assist a gentleman that had run out of gas. He helped push the car out of traffic and then gave the gentleman a ride to get gas. Great job!

**Mark Karonika, SO District Commander**

---

**Farewell**

<table>
<thead>
<tr>
<th>Greg Hall</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nicole Strobel</td>
</tr>
<tr>
<td>Cameron Guthrie</td>
</tr>
</tbody>
</table>

---

**Welcome**

<table>
<thead>
<tr>
<th>Tabitha Barborak</th>
</tr>
</thead>
<tbody>
<tr>
<td>Financial Consultant</td>
</tr>
</tbody>
</table>

---

**Respect**

We had an incident that originally came out to as a Priority 1 respiratory, though the incident ended up as a cardiac arrest involving a 32 year old female. The response from EMS was Medic 24 **Damon Fogley & Babaji Leonard**, and **DC 1 Cathy Gerac**. On our side, we had Quint 1101, Squad 1101 and Battalion 1101.

The purpose of my email is to express our appreciation and respect for the efforts of the crews involved. The code was lead by **Damon Fogley** in a calm and professional manner. While the end result was not successful, the crews attention to detail and teamwork certainly provided the best possible chances for this woman.

Thanks,

**Ken Bailey, Travis County Fire**

---

**KUDOS**

**Callis, TJ**
**Bunting, George**

**Incident #16031-0175 on 01/31/2016**

Patient daughter called stating that EMS crew was very professional (like all of our EMS), was treated with a lot of respect and EMS did a wonderful job.

---

**Leclere, David**
**West, Kerri**

Patient called and wanted a message passed on: He stated he is particularly grateful for their skill, is very, very grateful and says thank you. He stated they were given a situation and they knew what the heck they were doing and did it well. He stated they deserve every bit of income from our charges.

**Margaret A. Hackett,**
**Patient Account Supervisor**

---

Great job, thank you for representing us all with dedication and professionalism to those we serve and serve with each day. **BRAVO ZULU!**

**Mikel J. Kane, Division Chief**
Every so often, doctors encounter a patient with a problem so unusual they decide to publish a case report. Case reports are meant to add to scientific research, or help other doctors who might encounter the same strange symptoms in the future.

But to those who aren’t doctors, case reports illuminate the limits and the mysteries of the human body.

I searched through multiple medical literature sites to find some weird and unusual medical cases on record. Throughout the year I will share some a brief synopsis of the these case reports. Perhaps you will even find them to be educational, interesting or the very least odd.

Risky drinking games usually involve alcohol, but one teen learned not to swig soy sauce, either. A 19-year-old man in Virginia drank a quart of soy sauce on a dare.

He first started twitching, and then had seizures and eventually landed in the hospital in a three-day coma. Doctors diagnosed him with hypernatremia, or dangerous levels of salt in the bloodstream.

One quart of soy sauce can contain as much as a third of a pound (150 grams) of sodium. Excess sodium in the bloodstream pulls water out of nearby tissues by a process called osmosis, which equalizes the concentrations of salt across cells. Hypernatremia can extract so much water from the brain that it starts to shrink and bleed.

It took doctors about five hours and 1.5 gallons (5.7 liters) of sugar water pumped into the teen's body to get his sodium levels back to normal, according to the report, published in the Journal of Emergency Medicine in June.

Surprisingly, he survived with no long-term neurological damage.
Customer Service Response:

471 calls were made during **February**. The questions asked focused on measurable customer service actions.

![Customer Service Results]

Respondents were asked to rate the customer service provided by our medics on a scale from 1 to 5, with 5 being the best. 72.07% of the patients rated the customer service they received at a 5 and 22.52% rated their service at a 4. The average rating overall was 4.62 out of 5 for customer service.

*The response we obtained from our customers is evidence of the great medics we have and the tremendous job you do each and every day.*

Patient Comments:

- “They were seemed very genuine empathetic, caring and they were active listeners. I have PDS. They were very in tune with it and told me not to worry, asked which hospital I wanted to go to and offered the nearest hospital. I am a Veteran dealing with Veteran Affairs and the medic knew just how to code that and it helped delete a lot of questions.”
- “They were took me all the way to my room and even stayed with me for a little while to make sure I would be O.K. They were excellent.”
- “Their demeanor was very calm and put me at ease almost immediately. They answered my questions and explained things. I was very impressed with their service.”
- “Their service was outstanding. They did a wonderful job and I really appreciate it. I may not have been here today if things hadn't happened the way they did and with the right timing.”
- “They were very professional and were very careful with me as I was in a lot of pain. They were very nice. I appreciated their service.”
- “They were so nice and so helpful. I wish everyone was like that. They even treated my little puppy right as it under my bed and barked while they were there. Please tell them I appreciate their service so much.”
Blast from the Past....

Physical Agility testing

CONTACT US WITH YOUR SUGGESTIONS REGARDING...

♦ EMPLOYEE RECOGNITION
♦ PHOTO CONTRIBUTIONS
♦ WRITING A GUEST COLUMN
♦ STORIES FROM THE FIELD/COMMUNICATIONS
♦ ANYTHING YOU FEEL IS RELEVANT, HAVE A PASSION FOR, OR SOMETHING WE MIGHT HAVE MISSED.

EDITOR IN CHIEF: lisa.sepulveda@austintexas.gov
ASSOCIATE EDITOR/WRITER/EMT-P: sheila.schwall@austintexas.gov
COVER ARTWORK/PHOTOGRAPHER/WRITER/EMT-P: clemente.leal@austintexas.gov