Honoring Communication Medics
NATIONAL PUBLIC SAFETY TELECOMMUNICATORS WEEK

The second week in April is set aside each year to recognize and say, "thank you" to our incredible 9-1-1 Public Safety Telecommunicators. They are the behind-the-scenes men and women who answer the calls for help at a moment's notice.

ATCEMS MEDIC SHANNON KOESTERER ATTENDS SERVICES FOR FALLEN FDNY EMT

ATCEMS Medic I Shannon Koesterer worked out of FDNY Battalion 18 on unit 18E from 2013-2014, and one of her neighboring Battalion coworkers was EMT Yadira Arroyo. EMT Arroyo was recently killed in the line of duty after a man hijacked her unit and drove over her, killing her instantly.

GROWING SMALLER: DISTRICT 1

Commander Greg Weller gives us a glimpse of what a positive attitude, dedication and the desire to succeed to achieve a cohesive work environment looks like in District 1.

ACTS OF KINDNESS

Two ATCEMS medics went above and beyond the call of duty for a patient with a chronic health condition. The patient has recurrent epistaxis due to dry air conditions in the home and normal seasonal changes. The patient had a humidifier in her room and it was discovered that the device had been purchased and delivered by two caring ATCEMS medics.
Division News

14

HR BUZZ

When an individual is required to travel on behalf and for the benefit of the City, the employee is expected to exercise good judgment in managing travel costs and make every effort to secure the most economical arrangements available at that time.

16

CONTINUING EDUCATION

Captain Donald Rose gives us an in depth look at the King Vision Video Laryngoscope. In the case of Austin-Travis County EMS, the King Vision Video Laryngoscope was selected because of the quality of the view it provided of the glottic opening, as well as the affordability of the device.

30

CADET GRADUATION

Congratulations to Field Cadet Class 0217 and Comm Intern Class 0916 who graduated the Academy on Thursday, April 13th. We were inspired by Matthew Higgins graduation speech and have included it in this issue, along with the Facebook Livestream graduation video for those who were unable to attend the ceremony.

In Every Issue

32

EMPLOYEE RECOGNITION

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

38

CUSTOMER SERVICE SURVEY

Results from the Customer Callback Program.
ATCEMS to Sponsor Brazilian Jiu-Jitsu Club for EMS Employees

I have been practicing Brazilian Jiu Jitsu (BJJ) for the better part of a decade and can honestly say it has saved my life. BJJ is the most sought after martial art in the world and has been incorporated into the US military’s combatives instruction as well as numerous police departments and other military and nonmilitary organizations around the world.

For those who are unfamiliar with BJJ it is a martial art that focuses on ground fighting, often from one's back, and often against a larger opponent. Unlike other martial arts pure jiu jitsu does not include striking of any kind, rather a jiu jitsu fighter submits their opponent with a choke or joint lock. Because there is no striking, BJJ can be trained at 100% or close to it. BJJ is a difficult martial art to master and obtaining a black belt typically takes 10-15 years.

Over the last few weeks I have been working with the department to get support for, and create, a Brazilian Jiu Jitsu club for EMS. BJJ classes are expensive, memberships typically run in the range of $150 per month. I am very pleased to announce that the department has elected to support this endeavor. Mats have been purchased and I am in the process of putting together a schedule for two 1.5 hour classes per week.

What can BJJ offer you?

Jiu Jitsu offers a sense of community with your fellow fighters that few people experience. It offers you a way to get in shape and stay in shape while at the same time learning a valuable skill. It will give you confidence, it provides an outlet that people in this line of work too often need and go without. This is NOT fight club, this is an opportunity for anyone regardless of physical ability or condition to gain a valuable skill in a safe environment. Perhaps most of all, it comes to you at no cost!

I will be sending out information soon with details etc. in the meantime please don’t hesitate to contact me directly with questions etc.

Will Adams, M2/Rescue
will.adams@austintexas.gov
St. David’s Children’s Hospital

St. David’s Children’s Hospital is located at St. David’s North Austin Medical Center. It is a separate, dedicated 10-bed emergency department, an 8-bed medical surgical inpatient unit and a 6-bed pediatric intensive care unit for children ages 17 and under. It is staffed with pediatric physicians, including pediatric hospitalists, intensivists and other specialties, as well as nurses and a number of ancillary staff specially trained to care for children.

St. David’s Children’s Hospital provides patients with a wide array of pediatric services, including pediatric surgery with a dedicated operating room exclusively for pediatric patients; pediatric radiology for interpretation of studies, as well as interventional services; pediatric anesthesia, as needed for surgical support; and a wide range of pediatric specialties available for consult and treatment, including cardiology, orthopedics, neurology and urology, among others.

EMS Week

St. David’s HealthCare is proud to support EMS during National EMS Week—May 21-27. We will be hosting events each day of EMS Week. Please come out and join us as we celebrate your service to our community. Food and an appreciation gift will be provided.

Monday, May 22 — St. David’s Round Rock Medical Center
Tuesday, May 23 — Heart Hospital of Austin
Wednesday, May 24 — St. David’s Children’s Hospital/St. David’s North Austin Medical Center & St. David’s Georgetown Hospital
Thursday, May 25 — St. David’s South Austin Medical Center
Friday, May 26 — St. David’s Medical Center

Detailed information will soon be posted in the EMS rooms across all St. David’s HealthCare facilities and emailed out through ATCEMS leadership.

CEO Update

Tom Jackson has been appointed the new chief executive officer of St. David’s North Austin Medical Center. He started his new position on March 27, 2017. Allen Harrison, the hospital’s former CEO, recently transitioned to Methodist Hospital in San Antonio.

Tom has more than 30 years of experience in the healthcare field, including 20 years of experience as a hospital chief executive officer. He served most recently as chief executive officer of Tomball Regional Medical Center—a 350-bed, full-service tertiary hospital in Tomball, Texas—where he grew programs, expanded service lines, increased quality, improved employee satisfaction and recruited a number of talented physicians. Prior to joining Tomball Regional Medical Center, Tom served as chief executive officer of College Station Medical Center. Please join us in welcoming Tom to Austin.

St. David’s Children’s Hospital provides emergency, inpatient and intensive care services for children ages 17 and under. In an effort to better reach EMS providers across Austin, St. David’s Children’s Hospital will contribute news and information to PULSE Magazine on a regular basis.

12221 North Mopac Expressway · Austin, TX · StDavids.com/Kids · 512-901-KIDS
The Austin Public Safety Wellness Center offers a variety of services for EMS:

- Yearly Medical and Fitness Exam Assessments
- Pulmonary Function Testing: Screening for Lung Disease
- Vision Screening: Distance Vision Screening
- Hearing Screening
- Fitness Assessment: Row Test
- Evaluation of bloodwork
- Physician visit
- Fitness
- *Workout Programming

*Please email our exercise physiologist or call 972-974-0200 to set up an appointment

**Exercise Physiologist**

- **Coy Schneider**: Coy.Schneider@austintexas.gov
- **Hillary Lee**: Hillary.Lee@austintexas.gov
- **Jeff Johnson**: Jeffrey.Johnson@austintexas.gov

- Health Coaching: Diet Plans and Lifestyle changes
- Injury Rehabilitation counseling
- Group Workout Classes: Monday-Thursday 1000-1100
- Station visits
- Open Gym Hours: Monday-Thursday 0700-1800

**Medical**

- Return to Work: Occupational Physician evaluates personnel to ensure safe return to work after injury
- Tuberculosis Exposures
- If there is an exposure case we will handle blood testing to see if you are positive, follow-up with results, and coordinate treatment if needed

**Vaccinations**

- Vaccinations provided: TDAP, Flu, Hep. A if needed
- All vaccination files are housed here in accordance with HIPAA guidelines
- In the process of updating all personnel’s vaccinations to follow CDC guidelines
- Attending CE to update personnel

**Psych**

- Visits for individual therapy, couples and family counseling with Wellness psychologists. Please call for an appointment if needed

- **Dr. Ebony Butler**
  - Ebony.Butler@austintexas.gov
  - Cell: (601) 559-7886

- **Dr. Marc Kruse**
  - Marc.Kruse@austintexas.gov
  - Office: (512)974-0225 /Cell: (512)294-8092

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Austin Public Safety Wellness Center is Open to ALL EMS Employees
ATCEMS Medic Shannon Koesterer Attends Services for Fallen FDNY EMT

**ATCEMS Medic-I Shannon Koesterer** worked out of FDNY Battalion 18 on unit 18E from 2013-2014, and one of her neighboring Battalion coworkers was EMT Yadira Arroyo. EMT Arroyo was recently killed in the line of duty after a man hijacked her unit and drove over her, killing her instantly. Shannon stated “I had met Yadi in passing and her steady partner is a good friend of mine.” Shannon asked to represent the department at EMT Arroyo’s funeral and Chief Eric Jakubauskas approved her request without hesitation and with our thanks.

Ms. Koesterer spent her own money to fly to New York and attend the funeral services for EMT Arroyo. “The mass and procession were befitting of the hero that she was...I was able to stand side to side with members of Boston EMS, Paramedics from Ontario and old colleagues and partners. Thank you for this opportunity. Furthermore, at the repose I was given a patch from an FDNY Rescue Medic as a sign of respect and at the end of the night I was "pinned" by an FDNY medic from Station 39 in Brooklyn, she stated, "you're one of us now" while pinning her station number on my collar. The appreciation from FDNY members for ATCEMS presence was definitely felt.”

Thousands of mourners packed a Bronx church on the day of EMT Arroyo’s funeral and filled the streets outside to say their final goodbyes. Yadira, a 14-year veteran of the New York Fire Department and a mother of five sons, was responding with another emergency medical technician, Monique Williams, to a routine call on March 16 when they were flagged down by a pedestrian and told Jose Gonzalez, 25, was riding on the back bumper of their rig. They pulled over and when Arroyo got out of the ambulance to check, the man darted around the rig and jumped into the driver's seat. He struck Yadira while attempting to hijack the ambulance.

EMTs from across the country joined thousands of bystanders lining the streets to honor her. She is the first EMT to be killed in the line of duty since 2005.
A large screen television was installed outside of the St. Nicholas of Tolentine R.C. Church to broadcast the ceremony for those who couldn't fit inside.

Yadira’s son Kenneth, 20, is following in his mother’s footsteps and studying to become an EMT. He’s halfway through a three-month training course, with plans to take a state certification test when he graduates. Kenneth plans to wear his mother’s FDNY badge number if he joins the force.

Kudos to Medic I Shannon Koesterer (pictured below) for taking the time to honor her fellow sister in EMS. Austin-Travis County EMS appreciates her dedication and willingness to represent the department in an honorable manner.
#PartnerProject crowdsources photos to show support for fallen FDNY EMT’s partner

Local Austinite, paramedic, podcast host of Medic Mindset and Associate Professor and Assistant Chair of EMS Professions at Austin Community College Ginger Locke started a movement to send well wishes and support to Monique Williams, the partner of fallen FDNY EMT Yadira Arroyo.

The project has medics from all over the world, including many ATCEMS medics, posting pictures with their EMS partner. Ginger is working to make a collage to send to FDNY medic Monique Williams who tragically lost her partner Yadira Arroyo in the LODD.

Through the hashtag, EMS providers are posting pictures with their partners.

"The response to the request for pictures has been overwhelming," Locke wrote on Facebook. "Many have said you want to participate but have never taken a photo with your partner. This is your chance and there's plenty of time. I'm taking this one slowly so we can do it right. Remember, no matter where you are, we are all in this together."

Snap a picture with your partner and share on social media using #PartnerProject to show your support for Yadira and Monique. Make sure to set it to “Public” so that your photos can be seen.

Ginger Locke's podcast, Medic Mindset is on iTunes, SoundCloud and GooglePlay. Tune in to hear her dig into the mind of medics.
The idea of “Growing Smaller” at ATCEMS means establishing roots in an environment that is ripe for growth. We begin to experience a culture shift; a district-wide transformation that fosters smaller groups of people who value each other, nurture relationships and appreciate the camaraderie of their fellow team members.

We are seeing motivated individuals with a renewed spirit who are dedicated in developing new and better ways to engage employees. New stronger relationships are being forged with fellow employees fostering a more productive environment that has produced positive attitudes and empowered employees to take pride and ownership in their assigned stations.

A glimpse of what a positive attitude, dedication and the desire to succeed to achieve a cohesive work environment can be seen in the article provided by Commander Greg Weller. Never give in, never give up and always be willing to take the initiative to make changes within your environment.

The following pictures tell a story of the events that we’ve put together as a team, to build camaraderie away from work. We started this with a BBQ picnic on the Guadalupe River during the summer time. I then organized a dove hunt and ended the year with a Christmas Party. I feel that gatherings such as these have had a positive impact on camaraderie and has really boosted morale in my District. We came up with a t-shirt design that I think the gives the crews a since of pride and unity. I feel getting together away from the job and interacting with employees and their families in a stress free environment is a great team building tool as it builds relationships both professional and personal. I enjoy this tradition as much as the crews do and intend to continue it.

G Weller

Take the initiative to change the environment around you don’t leave it to circumstance
To “grow smaller” is to achieve prosperity. Consistency builds and nurtures relationships providing an optimal collaboration of synergism.

Establishing roots and being able to call a place home makes for a happy and positive environment that is ripe for growth. It speaks volumes that people throughout the department are taking the initiative and leading in a positive manner that becomes infectious. Those who have taken extraordinary steps to increase morale within their district are building a solid foundation of strength and goodwill with a positive spirit.

The Community Relations team would like to do a running series on this type of innovation and leadership that is taking place within the department. We would love to hear from other shift teams who are empowered and taking pride and building camaraderie within your district. Please submit your stories via email to:

Sheila.Schwall@austintexas.gov or Lisa.Sepulveda@austintexas.gov
City of Austin Travel Guidelines

The City of Austin Travel Policy applies to official travel of all City of Austin employees and prospective employees, as well as to travel of all non-City personnel seeking reimbursement from the City, regardless of the funding sources for travel. Official travel is travel that is reasonable and necessary for the conduct of official City business which requires an overnight stay.

When an individual is required to travel on behalf and for the benefit of the City, the employee is expected to exercise good judgment in managing travel costs and make every effort to secure the most economical arrangements available at that time.

The City is not obligated to reimburse any employee or representative of the City for travel expenses which were not previously approved.

**Travel Authorization**

Approval must be obtained prior to making any arrangements, including paying registration fees. It is the traveling employee’s responsibility to ensure all approvals are attained prior to travel.

- Travel Request (memo) must be submitted to the Chief at least (30) days prior to traveling to allow for appropriate approvals and to ensure advance funds, if any, are available prior to departure.
- On May 4, 2011, the City Manager announced “Changes in Required Travel Approvals” to allow more discretion to Department Directors.

**Department Directors:**

Authority to approve travel in the U.S. (except Arizona) for

- Trips costing up to $2,500 person, or
- Trips where no more than 2 people will be attending the same event

**City Manager’s Executive Team:**

Authority to approve travel in the U.S. (except Arizona) for

- Trips costing more than $2,500 per person, or
- Trips where more than 2 people will be attending the same event
City Manager:

All Travel outside of the U.S.

Note: All travel to the State of Arizona continues to be prohibited except:

- Travel related to a police investigation,
- Travel to provide humanitarian aid, or
- Travel to protect the health and safety of Austin residents

Travel requests beyond the chief’s limits have to be approved by the City Manager’s Office.

Written justification is required for early departure and extended stays beyond the conclusion of the travel event. This also includes travel requiring Assistant City Manager’s approval.

In order to guarantee advance funds, approved travel advance request must be submitted to Finance two weeks prior to travel event.

After attaining approval, registration, hotel, and airline reservations can be made.

⇒ Traveler should use UATP card when booking airfare (contact EMS Finance for card information)

**Travel Advance**

Employees may request a travel advance for an approved trip in accordance with the City of Austin’s Travel Policy. If advances are issued, a travel claim is required to be submitted within (20) business days after returning from the trip.

Employees must adhere to the following when submitting a travel advance request:

- A completed City of Austin – Travel Advance Form must be submitted to EMS Finance two weeks prior to the date of travel.

  ⇒ If requests are NOT submitted prior to two weeks of travel date, employees will have to use their own funds and submit a travel claim for reimbursement upon their return.

- Supporting documentation which includes the approved Travel Request Memo must be attached to the Travel Advance Form.

- It is the traveling employee’s responsibility to ensure all travel advance requests are received by EMS Finance fully approved and accurate.

**Travel Claim**

Employees are required to submit a Travel Claim upon their return from travel regardless of whether or not they received a travel advance.

Employees must adhere to the following when submitting a travel claim:

- Travel claims must be submitted to EMS Finance within (20) days after returning from travel.

- Supporting documentation which includes the approved Travel Request memo, conference schedules, registration forms, hotel, meal (only when using city travel credit card), airline, and any other applicable receipts must be attached to the Travel Claim Form.

- It is the traveling employee’s responsibility to ensure all approvals are attained prior to travel and all required receipts are submitted to EMS Finance.
Prehospital medicine is evolving, and becoming increasingly more complex. In that evolution we see ourselves transitioning from technician level medicine to a true extension of the emergency department as free thinking clinicians. As our role develops in this way, we have a responsibility to revisit the cornerstones of our practice. Since Dr. Escott’s arrival to the system, airway management has been and will continue to be one of the main focuses of our continuing medical education curriculum for the next few semesters. His philosophy on airway management is vastly different than our medical directors of the past, especially with regard to advanced airway placement.

Endotracheal Intubation is, without a doubt, one of the most controversial topics in pre-hospital care. The primary concern is, and has been, competency of this high risk, low frequency skill set. The Joint Royal Colleges Ambulance Liaison Committee’s Airway Working Group in the UK released these findings in 2008: “At least 50 intubation attempts are required to achieve a 90% success rate and most Paramedics are unlikely to have sufficient clinical experience to maintain their skills”. This begs to ask the question: How can we more safely and successfully intubate patients in the austere environment that EMS works in?

Enter Video Laryngoscopy (VL). Previously thought of as a luxury, video laryngoscopes have become available in a vast variety of devices making the market competitive and affordable. In the case of Austin-Travis County EMS, the King Vision Video Laryngoscope was selected because of the quality of the view it provided of the glottic opening, as well as the affordability of the device.

How it’s different:
Unlike direct laryngoscopy (DL), which involves the use of a device that displaces tissue and aligns the curvature of the patient’s airway giving your eye a direct line of sight to the glottis, VL utilizes a video camera for visualization of the vocal cords. In the case of the King Vision, hyper-angled geometry allows for almost effortless visualization of the airway structures and glottis with the patient’s head in the neutral position.

It is important to note that using the King Vision VL device is vastly different than DL because of the shape of the device. The provider’s attention is focused on the LCD screen of the device as soon as it enters the patient’s mouth and throughout the procedure. Since the devices is inserted midline, no tongue control or “sweeping” is necessary. Gentle, fine motor movements are used to manipulate the view and almost no lifting of the jaw is required. The ET tube is passed under video visualization as soon as the glottis is in view.

Another nuance of the King Vision VL is endotracheal tube delivery. Since the curve of the blade follows the normal curvature of the airway, the tube has to follow the same curvature. Two options for tube delivery are offered depending on the blade you choose: #3 Channeled OR #3 Un-channeled.
The channeled blade, which Dr. Escott recommends as your initial blade choice, provides an intubating channel along the side of the blade as the name eludes to. Providers can pre-load the tube into the channel and use it guide the tube into the glottic opening once they have a good view.

The un-channeled blade requires the use of a rigid stylette that has a steep curve and a steerable head so that the tube can be manipulated as it nears the glottic opening. This blade may also be used to “scoop” the tip of the epiglottis to improve your view, similar to how a miller blade is used during DL.

So is it really better?

When the CE Team and OMD staff began to design the roll out for the device, rather than re-inventing the wheel, we took a trip to see our neighboring EMS system to the north. Williamson County EMS has been using the King Vision to facilitate intubation with good success for several years. In addition to discussing their role out training with us, they provided some data: First pass success rate improved from 43.8% with DL to 74.2% with King Vision VL. An increase in overall success rate (successful intubations per number of patients intubation was attempted) was noted from 64.9 with DL to 91.5% with King Vision VL. This dramatic spike in success rates reinforced the need for a successful deployment of the device in our system.

The rollout:

The rollout of the device began the week of March 20th. Approximately 65 “Super Users” were trained to utilize the King Vision VL for any situation where intubation is indicated. The majority of the group were Commanders and the rest were select Captains and FTO’s. The reason for a “Super User” group was to identify deficiencies in the rollout training which will become apparent as the device is utilized. The plan, after rectifying any deficiencies in the training, will be to credential all providers who are M-II or higher to utilize the device by the end of 2017.

Skills Maintenance:

As our airway toolbox becomes more diverse, the CE Team and the OMD Staff recognizes significant value in regular re-training and practice to maintain high levels of success with advanced airway procedures. The Training Lab (Classroom C) at EDWD is available to all providers during regular business hours. The CE Team is also working on several projects to bring airway training and skills maintenance to you without your having to visit the training lab at EDWD. One of the ideas is an airway training truck that would potentially make rounds on a regular basis to the hospitals and stations so that you can practice skills on duty with a trainer. Dr. Escott’s goal is that each ALS credentialed provider have a minimum number of intubations (human, mannequin or cadaver) to maintain your credentials. This number is still to be determined.
Our Motor Medic program has a recent achievement that allows us to continue service to our community via this very unique resource. In late January, Paramedic Mark Lynch travelled to Baton Rouge, Louisiana to attend the Northwestern University Motorcycle Officer Instructor program.

This course is 3 weeks of intensive training and instruction in which students from across the country become certified to teach other motor officers. ATCEMS is fortunate to already have 1 instructor (Captain Randy Vickery). Adding a second instructor ensures that we are teaching the most current curriculum and gives Special Events flexibility as we train and also work the various Special Events in the city throughout the year. For perspective, there are motor officers who ride full-time for their departments and are not successful in this training because they are unable to ride the course well enough. Randy and Mark are now the only two motor Paramedics in the United States who are certified through this best-practice program. Please tell Mark congratulations next time you see him!

Following his training, Mark returned to Austin and led the instruction for our most recent quarterly training following SXSW 2017. In this training, Mark implemented 2 competitions in which our motor medics compete against each other as they navigate multiple cone set-ups that simulate real-life situations they encounter. The “Time Trial” was won this quarter by Captain Nick “No Brakes” Baker. The “Slow Ride” course was won by Jeff “Slow Poke” Gaytan. If you ever get the chance to chat with one of our Motor Medics, give them a pat on the back. Their work in Special Events helps us as we work to achieve our objective of minimizing system resources that respond to Special Events. Our Motor Medics are:

- Nick Baker
- Jason Beggs
- Shedrick Cheeks
- James Dionizio
- Jeff Gaytan
- Tom Holman
- Patrick Jacobsen
- Mark Lynch
- Luke Mueller
- Matt Paul
- Randy Vickery
- Geoff Winslow

Wesley Hopkins L.P.
Division Chief
Honoring Child Abuse Victims

April is National Child Abuse Prevention Month. According to the Texas Department of Family and Protective Services, approximately four children die every week in Texas due to abuse and neglect. Over the past 15 years, 3,078 children have lost their lives due to abuse and/or neglect, most at the hands of their own parents or caregivers. Approximately half of these fatalities involved families that had current or prior involvement with CPS.

To honor these victims and spread awareness, the Child Abuse Resource and Education team (CARE), at Dell Children’s Medical Center of Central Texas held a remembrance ceremony with local partners in the hospital’s healing garden.

Austin Travis County Emergency Medical Services was one of many representatives at this annual ceremony focused on child abuse in our community. At the event, Dell Children’s used blue ribbons to symbolize each life lost to child abuse and neglect.
I was out on a run when I experienced sudden cardiac arrest and collapsed. Someone saw me go down and started to give me CPR. At that same moment an ambulance was driving by. They stopped and used the defibrillator paddles to get my heart back in rhythm. From what I have been told they had to use them 3 times. I don’t remember any of this. The last things I remembered were getting ready for my run and waking up at the hospital. That being said, I am extremely lucky to be alive. 90% of cardiac arrest victims don’t survive, and others usually leave with lasting neurological issues. Neither of those things happened and I am just as dumb as ever... :)}
Things I have learned from my experience:

1. Don't take life for granted. Seriously. None of it. Life can end in an instant, and in my case I didn't even see it coming.

2. There is no telling what awaits us in the afterlife. I don't remember anything. Just darkness. Maybe I didn't get close enough to see anything like a light, but if it is simply darkness then I am okay with that. It just makes living this life that much more meaningful.

3. There is nothing without the kindness of others. I don't know who stopped to give me CPR, but they are a huge part of why I am still alive. Furthermore, the outpouring of love and understanding from friends, family, and strangers has been overwhelming at times. I didn't really understand how much people meant to me until this happened. Now I feel it. It is ironic that my heart is more open than it has ever been.

4. And finally -there is not enough time to hold back how we feel or what we think. If there is something that I want to say to someone, to tell them how much they mean to me, or how much I love them then it is going to be said. And now, if I want to go somewhere or do something I am much more likely to take action and do it. There are no guarantees in life, so the best we can do for ourselves is to open up and share who we are with one another.

The surgeons put in an internal cardioverter device (ICD) that should prevent anything like this from happening again. A couple more weeks and I will be rock climbing, biking, and working out again. Though, I will probably take a break from running for a while.

Joe
Each year the second full week of April is National Public Safety Telecommunicators Appreciation week, also known as “Dispatcher Appreciation Week.” This week is set aside each year to recognize and say, "thank you" to our incredible 9-1-1 public safety call takers, dispatchers and communication specialists.

They are the men and women who answer the calls for help at a moments notice. They are the “first” First Responders who provide a critical service to our medics and our community. They are the people you never see; the people who work behind the scenes who provide critical, life-saving information to those in need and critical information to first responders from getting them to the correct address where the crisis is occurring to relaying crucial information during the incident.

This year we wanted to give everyone a chance to get to know a few of the Communication Medics of Austin-Travis County EMS. Special thanks to Commanders Whiteman, Bregenzer and Henson for providing the pictures and information on the following pages. With the utmost respect and gratitude we wish all members of the ATCEMS Communications team a happy Telecommunicators Week and THANK YOU for your service.
The men and women serving as public safety telecommunicators — 9-1-1 operators, dispatchers and other communications specialists — are dedicated to saving lives. These professionals, the “unseen first responders,” provide critical assistance to Texans in times of great need, and their specialized skills and calm presence are invaluable to the Lone Star State.

The Commission on State Emergency Communications works with local and state governments to ensure reliable access to emergency telecommunications services. To highlight the invaluable role of public safety telecommunicators, the commission annually designates a week in April for an awareness campaign.

At this time, I encourage all Texans to extend their appreciation to public safety telecommunicators. Their diligent efforts ensure that help is on the way when we need it most.

Therefore, I, Greg Abbott, Governor of Texas, do hereby proclaim April 9–15, 2017, to be

Public Safety Telecommunicators Week

in Texas, and urge the appropriate recognition whereof.

In official recognition whereof, I hereby affix my signature this the 3rd day of April, 2017.

Greg Abbott
Governor of Texas
Commander Eric Whiteman has been with ATCEMS for 10 years. Eric is currently leading the rabble-rousers of D-Shift, away from work he can found getting some wind-therapy on his motorcycle.
Captain JJ Eeten has been with us for nine years. JJ is the resident MPD expert of her shift. She is the perfect combination of fun and no nonsense.

Captain Steve White has been with the department for 12 years. Though not permanently assigned to Comm, Steve really dove into his reassignment to Comm and is still with us during Telecommunicator Week. D-Shift will sorely miss him when he goes back to the field.

Captain JC Ferguson has been with ATCEMS for six years. JC is the “man with a plan” when it comes to CE and training in Communications. He is also doing his best to get Comm Medics healthy outside of work.
Javi Trujillo - Medic II-FTO Javi Trujillo wanted to be in movies, but his mom said he needed a "real job" and followed his uncles into EMS instead. When not at work, he's hanging with his family or pretending to be James Bond.

Angela Vorhies - Angela is one of our Comm Captains and has been with the department for 17 years! She loves camping, being outdoors, and watching The Walking Dead or anything that is on during Shark Week.

Kat Phillips - Kat is a Medic II in Comm that has 17 years with ATCEMS. She has a daughter in middle school that keeps her busy, and her likes include Netflix, Hulu, and Amazon Prime video. She also doubles as Flo from Progressive!
Michelle Stewart - Michelle is a Yankee with over 20 years in EMS - the last 14 with ATCEMS. Although a confirmed black cloud, she is not, in fact, the Angel of Death as alleged by her coworkers.

Medic I-Cadet Josh Lunday has been with ATCEMS for six months. A graduate of our very first Intern program, Josh is progressing well in his training. When not at work, Josh has a whole football team of kiddos at home that keep him plenty busy.

Medic II-FTO Shaun Pursley has been with the department for six years. Shaun is new to the FTO program, but jumped in full-tilt. When not at work you are likely to find him hiding under a Doctor Who snuggie.

Danielle Henson—Danielle is one of the Commanders in Comm. She is a Pisces, likes long walks on the beach, her tiny blue fiat, and calls from EMSG first thing when she gets to work (no, not really). Gordon Ramsay is her spirit animal.
Captain Nikki Alston works D-shift and has been with us for 8 years. Nikki can always be counted on to keep her shift in line. When not at work, she is doting over her adorable grand-baby.

Haley Fleming Medic II, Haley is known to provide comic relief to the shift, though often at her expense! Outside of work, she spends her time going to Renaissance festivals.

Medic II Esme Harvey has worked for the department for one year. Despite being related to ATCEMS Paramedic Chris Marks (just kidding, Chris!), Esme has developed into a strong call-taker and dispatcher. She’s got a bun in the oven and D-Shift can’t wait to welcome that baby!
Robin Krasher is a 16+ year Medic II on B shift. She loves to travel in her RV, and is preparing for a trip to Moab (again) and Yellowstone. She also loves spending time with her 5 grandkids. As a bonus, she is married to Field Medic II, and cross trained dispatcher Dan Krasher, who also spends time on B shift.

Medic II Edwin Sanchez-Rodriguez has been with the department for one year. Edwin is the king of volunteering....His dirty little secret is that he sang in a mariachi band (and was really good!).

Medic I Tyler Green has been with us for six months. A former EMS Explorer, Tyler is showing great potential in Communications. He excels at what he does, unless what he is doing is sitting on a yoga ball.
So here we are, lucky 13! I say this, for those of you who don’t know. We were the first Field Cadet class in recorded history to have a 100% pass rate! I’d say we definitely lived out our class motto of “strength through unity, success through teamwork.” We knew we were different than any class before us and we wanted to make sure that we left a lasting reminder of just how different we were. We were determined from the start to be the lucky 13 and we did it, congratulations boys.

I want to thank all the families of the cadets that put up with us for the last 10 weeks, I know it was rough on you and none of us could have done it without any of you, so again thank you from the bottom of our hearts. To the amazing training, we’d like to thank Capt. Oskouee for her dedication to our physical health. Commander Hardy for her dedication to education and for the amazing tiffs treats she brought us. Capt. Crouch for being hard on us, when you knew we all could do it, to Keri Cinquina or always being there and giving us an encouraging word, Capt. Gordon for making sure we knew everything about the different types of shock and showing us those amazing cevo videos, and Capt. Ferguson for always having a response that was downright hysterical whenever we asked questions about comms. I know every cadet in this room is a better medic than they were 10 weeks ago.

Now for a little about class 0217, where do I even begin to sum us up? This has been an interesting group of guys. And apparently, we’ve come to work here from all over the country! We have cadets from California, Michigan, Wisconsin, Chicago, Tennessee, not to mention a handful from Texas. I think just about all of us have since bought a pair of cowboy boots, and had at least one delicious BBQ meal, and added at least one country radio station in our cars. Let me tell you a little about each of us, we had:

LeFevre – Mr. Mustache
Kalinowski – Mr. Thumb, Mr. Comedian
Singleton – Mr. High Knees
Holland – The lane splitter. Made our awesome guidon stand.
Stanchfield – Chuck Norris?
Monks – Our only veteran
Belliveau – Mr. Question Mark
Rozmus –Our first class sergeant. Most previous experience.
Cuevas – Our only bilingual, and always up for a good time.

Barquer - Drove the furthest, and had to avoid floods when it rained.

Millholon – The Cowboy, Rodeo Rider, and Patient Zero

Higgins – The man who lost the most weight, and probably worked harder than anyone else in PT.

Wise – The cadence writer/caller

I can’t speak for the cadets who came before 0217. I look forward to learning from them and working with them in the coming years. I’d like to think – we are the class who worked harder, studied longer, and learned more from our instructors than any class before. The class who gave help to one who was struggling, and took responsibility as a team even when one failed.

The class who gets their strength through unity, and their success through teamwork.

We can’t thank the instructors enough for all the hard work they put into our career, not to mention the time and money spent by the city to assure each and every person more than prepared to go out into the city of Austin and serve the people who live here. Now lets get out there and do our best in the next phase of our careers. Thank you!

Graduation Speech by Matthew Higgins

**Field Cadet Class 0217**
- William Millhollon
- Thomas Cooper
- James Monks
- Michael Belliveau
- James Wise
- Charles Singleton
- Saul Cuevas
- Eric LeFevre
- Brian Rozmus
- Matthew Higgins
- Travis Holland
- Phillip Barquer
- Andrew Stanchfield
- Jonathan Kalinowski

**Comm Intern Class 0916**
- Brett O’Connor
- Latrice Chambers
- Paula Rodriguez
- Stephanie Zuniga
- Joshua Lunday

**Comm Medic I Brett O’Connor**

**Medic I Matthew Higgins**
Employee Recognition

I wanted to take this moment to acknowledge the performance of our staff and Commander Pierce at the Disaster Drill at ABIA.

All of the participants who volunteered for the assignment were enthusiastic, knowledgeable, and executed the exercise with precision and an absolute team approach.

Commander Pierce represented the highest level of professionalism and institutional knowledge in her leadership as the EMS Command element representative in the Unified Command.

Today was a perfect example of how all of the Public Safety agencies can work together, to perfection, to serve our Community at the highest level of professionalism and efficiency.

Strong work Commander Noble for putting together a worthwhile and educational exercise.

They all "hit it out of the park" today.

BZ!

Mikel Kane, Division Chief
The patient on this account asked that we let someone know how wonderful the paramedics were. She stated one even went to see her later on during the day at the hospital and thought that was so nice of him.

Margaret A. Hackett  CAC,
Austin Travis County EMS

The billing division would like to thank Lindsey Rutledge and Brandon McGarrh. While being assigned to the billing division for a light duty assignment both of these medics performed well and had exceptional attitudes. The billing team is very thankful for their contributions, their hard work has assisted billing in overcoming an overwhelming backlog. We miss you both. Please come back a visit us anytime.

Thank you,
Meagann Wade, EMS Customer Care Program Manager

Chief Kane,
Just wanted to extend my appreciation to you, DC05, and DC06 for your presence on 4/3. I worked a busy 4 days at DM03 and was about spent by Monday. Seeing you and our Commanders on 7th st triaging, downgrading units when appropriate, and assisting crews was awesome. Also I’d like to share with you that on multiple occasions this weekend M06 used their facility time to assist us. MII Galen Wasem and Medic I Kyle Schutt helped us unload critical patients and listening to radio traffic were ready to assist us at Brack when we brought in two patients. When I thanked Galen he said, "Hey man we're all in this together." That has been that attitude of every encounter I’ve had with this crew.

Thanks again,
Patrick Eaves, LP

I wanted to give kudos to Reyna Ruiz, Gadiel Arellano and Meagann Wade for their presentation in training today. We all know that training for co-workers can be challenging, but they did an outstanding job. They were able to keep us all engaged and made what could have been a long 8 hours into a fun time with co-workers. You can tell the amount of effort and time they put into this and I believe they deserve a huge Kudo!! We all learned from each of them and they made the information personal to each of us.

Great job! I loved being able to see and hear the perspective of the other departments!

Traci Hardy, LP
Austin-Travis County EMS
Commander-Academy

Smith, Jared
Milburn, Jonathan

Audra, a former patient, called EMS HQ to thank medics Sam Latta and Rilie Flanagan for caring for her on the morning of March 26th. She was very impressed, she said Sam and Rilie were wonderful—kind and compassionate and words can’t express her thanks. She wants to bake cookies and deliver them to your station to show her appreciation.

Great work Sam and Rilie!
Acts of Kindness

“No act of kindness, No matter how small, Is ever wasted.”

-Aesop

Medic II Loretta Mooney brought to my attention a call she had whereby an elderly female complained of epistaxis and requested on scene treatment without transport. The crew reviewed the priors for this particular address and found multiple calls for a similar complaint which normally resolved with care on scene and a refusal to be transported. While on scene, Medic II Mooney found that the patient has recurrent epistaxis due to dry air conditions in the home and normal seasonal changes. Medic II Mooney also noticed that the patient had a humidifier in her room and found out that the device had been purchased and delivered by Medic 14 crew Medic II Hagan and Medic I Armstrong following multiple interactions with her.

Not only did Medic II Hagan and Medic I Armstrong consider the needs of the patient by purchasing her a humidifier, but they also considered the needs of the system as a whole with an attempt to reduce the number of calls by a patient with a minor recurring complaint. In addition, this crew purchased and delivered this humidifier on their own time. In their humbleness, they didn’t tell anyone about this act of generosity and compassion which serves as a testament to their strong character and dedication to providing service to others. These two Medics have gone above and beyond their required duties to assist a City of Austin resident. This particular resident is also part of the City of Austin family, having retired from the CoA Health and Human Services Department after decades of service. The patient lives alone and has minimal family support which adds to the storied compassion and empathy this M14 crew continually displays.

This particular incident is not the only time that Medic II Hagan and Medic I Armstrong have demonstrated their caring nature and willingness to serve others, but it does stand out as an incident that supports the Austin-Travis County EMS Mission, Vision, and Pillars of Excellence. Well done gentlemen! This kudos has been reflected in your RMS.

Thank you to MII Loretta Mooney for bringing this to my attention!

Captain Christopher K. Brown, BS, LP
This year’s STARS Picnic was a complete success! We had a lot of delicious food and had a blast during our kickball game.

Thanks to Bryan Herron for being an amazing cook and Mary Hoad for all her hard work with the food prep. A HUGE shout out to the STARS committee members who made this event possible. We hope that everyone had a great time. Stay tuned as we continue to recognize all you do for EMS. We appreciate you all very much and hope you know what an integral part of the department you are!

Special thanks to Reyna Ruiz, Gadiel Arellano, and Mason Stanford for helping make the picnic fun for all.
Customer Service Response:

248 calls were made during **March**. The questions asked focused on measurable customer service actions.

**Customer Service Results**

<table>
<thead>
<tr>
<th>Service Provided</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medic introduced themselves</td>
<td>84.62%</td>
</tr>
<tr>
<td>Medic expressed their yrs of pt care experience</td>
<td>32.65%</td>
</tr>
<tr>
<td>Acknowledge pt by name</td>
<td>90.02%</td>
</tr>
<tr>
<td>Informed pt of tx plan</td>
<td>96.08%</td>
</tr>
<tr>
<td>Explained interventions/pt procedure</td>
<td>69.23%</td>
</tr>
<tr>
<td>Pt had no recommended improvements</td>
<td>96.30%</td>
</tr>
<tr>
<td>Thanked pt for allowing them to help</td>
<td>71%</td>
</tr>
</tbody>
</table>

Respondents were asked to rate the customer service provided by our medics on a scale from 1 to 5, with 5 being the best. 77.03% of the patients rated the customer service they received at a 5 and 20.27% rated their service at a 4. The average rating overall was 4.74 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 they do each and every day.*

**Patient Comments:**

- “It was wonderful, high marks, were here real quick, and took good care of me. I just couldn't ask any better care. They have taken care of me before.”
- “They were very professional, keeping me calm and explained everything to me, helping me through the IV start, as I hate needles. They did a good job of that. They really explained everything to the hospital attendants, taking their time about that as I still couldn't think very well from carbon monoxide poisoning. They really did a good job of taking care of me.”
- “They were amusing, calming to both me and my son, very thorough, looked him in the eye, when they talked to him, and kept his attention. They even pushed the stroller for me and made us comfortable before the nurse came in. They got us there very quickly, and if we had to call again, we would surly want those 3 medics again. They were completely awesome and I appreciate them.”
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.

GREEN BLOOD

Remember Mr. Spock and his green Vulcan blood in Star Trek? Apparently, it can happen. In October 2005, at St Paul’s Hospital in Vancouver, doctors were inserting an arterial line into a 42-year old patient to relieve pressure in his legs after falling asleep in a kneeling position when they were startled to see dark green blood trickle out of the patient instead of the usual bright red. The initial diagnosis of the doctors is methemoglobin, a dangerous condition in which the hemoglobin in blood can’t bind to oxygen. Analysis of the samples taken from the patient revealed another condition called sulfhemoglobinemia, a rare condition where hydrogen sulfide combines with ferric ions in blood to form sulfhemoglobin, which causes the blood to turn dark green. According to the doctors, the disorder can be triggered by excessive doses of medications containing sulfonamides (sumatriptan, a migraine medication, in the case of the patient, although it’s still unclear). The disorder usually goes away with red blood cell turnover, although blood transfusions may be needed in extreme cases.
CONTACT US WITH YOUR SUGGESTIONS REGARDING...

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

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