

Question of the Month: (March 2010)

*“I recently responded to a medical call in my district as a law enforcement officer, to offer assistance. The patient was having an apparent heart attack and was quickly loaded into the ambulance by the crew and paramedic. There was a delay which seemed like several minutes before the ambulance began its transport to the hospital. There were several bystanders who were anxious and confused on why the ambulance delayed before racing away with lights and sirens. Although I was able to give them some educated guesses of what was going on behind the closed doors of the ambulance, I felt you may be able to provide a more informed answer to citizens that may see an ambulance remain on scene before getting a patient to the hospital.”*

First of all, I want to thank you for taking the time to bring this question to light and a huge thank you to all the amazing support that law enforcement personnel provide fire and medical responders during calls.

As this question deals with an area I am not qualified to answer, I immediately sought out the professionals who deal with emergency medical calls on a daily basis. Lynn Borders, Chief Officer of Kootenai County Emergency Medical Services System (KCEMSS), EMS Division Chief and paramedic Gary Hoertz of Kootenai County Fire and Rescue (KCFR) and paramedic/firefighters Dave Steed and Kevin Lawler also of KCFR, were asked to share their experiences relating to this issue.

For persons with a loved one who has just been loaded into an ambulance, help can not arrive soon enough. Time seems to stand still. Seconds seem like minutes and minutes must seem like hours. For an ambulance to arrive on scene and then not immediately depart can be incredibly stressful and confusing for those who do not understand the reasons why.

Chief Borders stated that the determination of treatment is ultimately the responsibility of the attending EMT/Paramedic (to see the different levels of medical training, go to February’s article at “kootenaifire.com” and select “Prevention”) and the call for a delay may be for one of many reasons. The intent is always to get a patient the best care in the most effective, quickest, but safest manner possible.

The most common consideration for a delayed response would be if an assessment and/or treatment while stationary is the best choice to improve the patient’s overall outcome. There can be several reasons why it is better for the patient’s safety and positive outcome to delay, if even for just a few minutes, before transporting. Some of these reasons may be to provide basic privacy while others can be the difference between life and death.

Offering the patient privacy may take him/her from the public’s eye and into the ambulance where s/he may need to be undressed for assessment of injuries, and where they can provide their private medical history, personal information and current medications.

In a critical case, it can be difficult to comprehend the number of procedures that need to occur in a timely manner, all done as quickly and as safely as humanly possible with the resources at hand. A person having a myocardial infarction (“MI” or heart attack), may need several personnel who are available on scene but may not be on the transport. They can assist in assessment and stabilization of the patient and treat the symptoms immediately, stopping the progression of the heart attack and ultimate damage to the heart.

One of the most common and critical pieces of information with potential cardiac patients, is to get an accurate picture of the heart’s function using a cardiac monitor to get an EKG (reading of the heart function). Transporting on noisy, rough terrain can make an accurate EKG almost impossible.

There are times when resources are limited or stretched thin due to multiple patients or a response to a remote location. If there is a need for the establishment of an advanced airway (breathing tube) or an EKG, the paramedic can do this while the EMT, who may also be the driver, can be assisting with the stabilization of the patient. This may include removing clothing, starting an IV, seat belting the patient, and/or obtaining a patient’s blood pressure.

Taking the time to acquire this information and insure the patient is stabilized, allows the hospital to get a clear status update, while the ambulance is still in route. This can avoid any delays upon their arrival to the hospital allowing the patient to go directly to surgery or the heart catheterization lab, which can save their life.

There are many calls that are not life threatening and responders can provide some treatments which are more comfortable for the patient before being moved. These also include calls where the reporting person reports a situation that s/he perceives to be critical but after assessment from trained personnel, it is determined to that this is not the case.

By taking that brief period of time on scene, the patient may be given the option to be transported by ambulance or choose to have a friend or family member transport them. When this happens there are some advantages to all those involved. First, the patient does not incur the high cost of an emergency transport. Secondly, resources remain available to respond to more immediate, potentially life saving incidents.

One of these life threatening incidents may be one that requires the establishment of an advanced airway. By literally taking the few extra minutes, especially in a rough surface situation, proper insertion of the breathing tube can be completed which is critical and can truly be the difference in the patient’s survival.

In summary, let me state that each and every call is different. Emergency responders are tasked with getting to an incident safely, then quickly make decisions with the best use of available resources to perform an accurate assessment then prescribe a course of action,

stabilize, treat and potentially transport the patient. All this is done with the goal of achieving the best patient outcome possible.

If you see an ambulance remain on scene after loading a patient, hopefully you can gain some solace in knowing that everything is being done with one common goal – that the care for the patient is being done with his/her best interests as THE priority.

If you have a question about emergency services in your area, please submit your question to “Ask Firefighter Jim” at [askffjim@kootenaifire.com](mailto:askffjim@kootenaifire.com). Visit our web page at [www.kootenaifire.com](http://www.kootenaifire.com) for additional information and to read archives of previously answered questions under the link, “Prevention”.