

The Central Line

A NorthStar Publication

Wilderness EMT: Not Just for Health Nuts

By Wade Browne

I thought I would try to write an article about the Wilderness EMT class that I took for the last two weekends with several other NorthStar Employees taught by Dennis "I'll be dipped" Kerrigan and assisted by Mike "Hey, Hey, Heeeyyy" Senecal of Wilderness Medical Associates and NorthStar.

We have been doing formal Wilderness EMT classes of some sort in this system just about every year since 1996, back when James Bender came along. For years I have been saying that the Wilderness thingy was never my cup of tea, I wouldn't climb a mountain unless it was hunting season and had a gun in hand. It just wasn't gonna happen. So I never put much interest in taking this sort of class.

Most of you know me and know that I'm not the most fit person in the NorthStar world, (but I'm not alone either). I had concerns from the beginning thought of taking such a class, First, I didn't want to take a space in the class that someone else who is into this sort of Wilderness experience that might not be able to go because the class was full. Secondly, I didn't have any of the "backcountry gear" that might be needed and wasn't about to go out and buy some that I would probably never use again. Lastly I didn't want to be put in the situation where my "Milwaukee tumor" might turn me into a patient that our own rescuers would need to take care of unnecessarily.

So throwing those concerns to Dennis and Mike, they reassured me that it would definitely be beneficial to my everyday patient care situations and that not all of it has to do with being on top of a mountain or in a gorge or in the river.

Those situations are all possible, but there are several roles that can be done that are part of "unsung heroes" that aide in every one of the Wilderness Rescues we have. Whether it is the IC person, the equipment person or the scribe, they all play very important parts in making every situation run smoothly.

We learned so many things over the 2 weekends that it would be almost impossible to write them all down. A couple of the highlights are something called ASR- Acute Stress Reaction, another is the 3 critical systems (circular, respiratory and nervous systems) in which we learn that any problems we have with them can be life threatening. Again those are just a couple of things we learned, way to many to touch on in this short rant, but to take a concept and think outside the box in treating pt's to the best of our abilities, is one of the most valuable keys to this whole program.

To learn more you will just have to take the class, trust me you won't be bored (you don't have time). DK's enthusiasm and passion for all things outdoors is truly amazing, he never seems to tire and his energy is unreal.

So just take the class the next time it is offered, they won't intimidate you and it will help you in all of your EMS calls. Scene size up, assessment, documenting and treatment of the pt, it will all be there to help better your EMS career, not to mention the simulations we did, unlike anything else I have ever done.

Hopefully it will always be held at Claybrook Mountain Lodge, what a location, the food was unreal (thank you Patti and

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October Birthdays

- Deborah Clague
- Stephenie Boucher
- Sorry if I missed anyone!



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the girls for serving), the ambiance is spot on and the hospitality is second to none.

In closing, I'll see you at the **bottom** of the mountain (unless I have a gun) trying to help however I can.

Wade Browne **WEMT-B**

Operations Manager's Corner

By Felicia Harris

Well, once again Winter is on its way. If I were a bird I would have headed South a month ago. But, since I do not have that luxury I guess I will just have to endure by digging out my turtlenecks and sweatshirts.

Which brings me to uniforms. If anyone is in need of a sweatshirt send me an email. I have put in an order for sizes small through x-large. I still have some 2XL & 3XL. Vests and jackets are also available. So check your winter attire and let

me know what you need to stay warm. Remember your next \$100.00 uniform allowance is coming up in January so if your boots are wearing and you would like to replace them, that's the time to do it.

Happy cold weather to all....



Don't get any big ideas, Dave!

Director's Notes

A Silent Epidemic

By Dave Robie

As most of you know, I cannot hear (well). Apparently not due to an injury or loud music or my years of motorcycle riding. Just the din of everyday living. It primarily affects high frequency sounds (women and children voices, whispers, birds singing, car squeaks) and is getting progressively worse as the loss continues down the frequency range. The cilia in the inner ear are deteriorating randomly.

How did I first come to know this? Actually my wife started to mumble a lot. I lost the ability to hear whispered speech. Car noises that were obvious to others were silent to me. Discussions that went around the corner were lost. Slight sounds (like heartbeats through a stethoscope) were less clear or gone altogether.

I have found over my 10 years of gradual loss is that Ginni (my wife) and others seem to "mumble" because I actually only hear about

every third syllable of speech and few of the 'sibilant' sounds. And it is not the volume, it is the *clarity* of speech that is a problem: speech differentiation.

I have also found that although insurance never covers aids (eyeglasses yes, hearing aids, no – a pet peeve of mine), my hearing aids suddenly cured a lot of my wife's speech problems! But I need ever more powerful aids and I still, as you know, have problems with people that do not speak distinctly. Ginni and I are learning sign language for the eventuality (and even now, it is nice to be able to "talk" across a crowded room occasionally!)

I have found that this hearing issue is one of the most underreported problems in this country and this area. It is a national but "silent" epidemic. Many reasons: either the symptoms are not recognized

("people mumble too much"), denial ("I'm too young"), stigma ("will people think less of me?"), cosmetic ("I'm too much of a stud to wear an aid"). All bogus. Not being able to hear is very tiring, leads to some very interesting (i.e., odd) conversations and can be "cured". For instance, we are looking to put amplifying stethoscopes in all the front line trucks.

So, I always ask that you speak distinctly and clearly (but not slowly, not loudly) (and not just to me but all the time). And if you think everyone mumbles, get an audiologist to check you out. It will open your ears!

A View From the Cot

By Dean Robinson

As most of you know I was involved in an accident in the beginning of September and needed the services of NorthStar EMS.

I had stopped to help the victim of a rollover, and that was when another vehicle came along and hit the downed power lines and caused the second accident. I can't tell you a lot of what happened until I landed on the bank on the side of the road.

I did learn a few things from my time on the other side of the bench seat. I got a lesson in the bodies response to trauma, from freezing on a hot day to the injuries that just seem to appear after the adrenaline stops flowing.

On the other hand I saw the amount of trust and faith that our patients need to have in us and our care whether they are ill or injured. This is really true as you are immobilized

and are carried up a bank. I also now know the comfort and relief that we are able to provide to the patients that we take care of. On the lighter side I learned that, organic grass doesn't taste any better and an airplane really is important to have if you want to fly.

I have heard many say that I was lucky in this accident, while it may be true I know that luck played no roll. God was watching over everyone involved on the morning of the accident. I know that the outcome could have been a lot different that morning. I have heard a lot of people use the saying "in our job when we go to work we don't know if we will make it home". I have never really given this much thought, but as I did I came to the conclusion no matter what job you do none of use know what is coming tomorrow.

To answer one of the most asked questions, yes, I would stop and

help others in the future. I consider myself lucky to be able to make a living doing something that makes a difference in others' lives. I can not let an accident like this stop me from doing what I feel called to do.

As far as my recovery, the hip feels a lot better than it did, I still can't sit or stand for long periods of time. The shoulder still hurts but only when I use it. They are saying a few more weeks of physical therapy, mostly to strengthen the shoulder. The thoughts and prayer of so many friends and family have been the big part for the quick recovery.

I would like to thank all the people that not only took care of me but also those that came to visit and encourage me while I was in the hospital. There were several members of NorthStar that went well above and beyond the call of duty and it is appreciated. I have to say the best asset that NorthStar has is not the trucks or the equipment that they contain but the employees that truly do care.



*Who takes care of the witch
that hit that telephone pole?
NorthStar!*

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The Back Page

1. It probably rides better.
2. Could certainly transport 4 or 5 transfer patients at once.
3. Animal husbandry is a skill all EMT's should know (isn't veterinary medicine about the same as what we do?).
4. A remount would mean buying new



- plywood, tires and changing Bessie to Bossie..
 5. Hay is less expensive than diesel.
 6. Lose an engine, have a barbeque!
 7. Less transfers to Portland.
 8. Doubles as a float for the 4th of July parade.
 9. NorthStar's entry at the Farmington Fair.
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