



VITALS

A Weekly Safety Newsletter For Medical Transport Professionals

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Happy New Year or Maybe Not: Who Can Tell?

I am confused. The headlines from the last few weeks don't fill me with the optimism I normally anticipate and experience at the beginning of each year. Instead I have a sensibility associated with the macabre. There are some really incredible things happening.

An "EMS ambulance driver" pleaded guilty to manslaughter in the second degree, second degree assault, wanton endangerment, criminal mischief and driving under the influence. She agreed to a ten year prison sentence rather than face trial for murder. She was observed driving erratically for at least half a mile before crashing through poles, ditches and embankments. The patient who was being transported for a nosebleed died from blunt force trauma. The driver had measurable levels of methadone in her system at the time of the crash. Her original story was that she swerved to avoid a pedestrian. The dead patient's family was angry that the ambulance driver neither showed remorse nor apologized.

Another sad story describes the death of a 36-year old paramedic and his 78-year old patient. Police investigators have the opinion that the paramedic's medical condition may have played a role in the crash. The medic suffered from narcolepsy and epilepsy, and was taking medications for both disorders. He was receiving and accepting cell phone text messages around the time of the crash. The ambulance he was driving left the road at 50 mph and hit a parked truck. No brakes were applied. The patient was being transported back to a nursing home after receiving dialysis. Her family acknowledged she was in ill health and recuperating from a stroke, but they were saddened that "she had to die that way."



These stories illustrate that we and the public will never be truly safe without stringent fitness for duty requirements that begin at the employee selection process and continue every day. There was some discussion in the second case that medic's medical conditions were unknown to his employers (The crash occurred at his part-time job). Informal reports from co-workers indicated the medic experienced a seizure and was placed on light duty at some point in his work history.

It is not my intention to judge, or ask you to judge, the soon to be incarcerated or the dead. But I very strongly ask you to judge the processes you have in place that could prevent occurrences such as these. An official involved in the second case declared "If a physician clears an employee to drive, saying an employee can drive, he can drive." Think we have an obligation to make certain a physician gets all of the information needed to make an informed decision? Can anybody declare somebody fit for duty if they don't know what the duty is?