

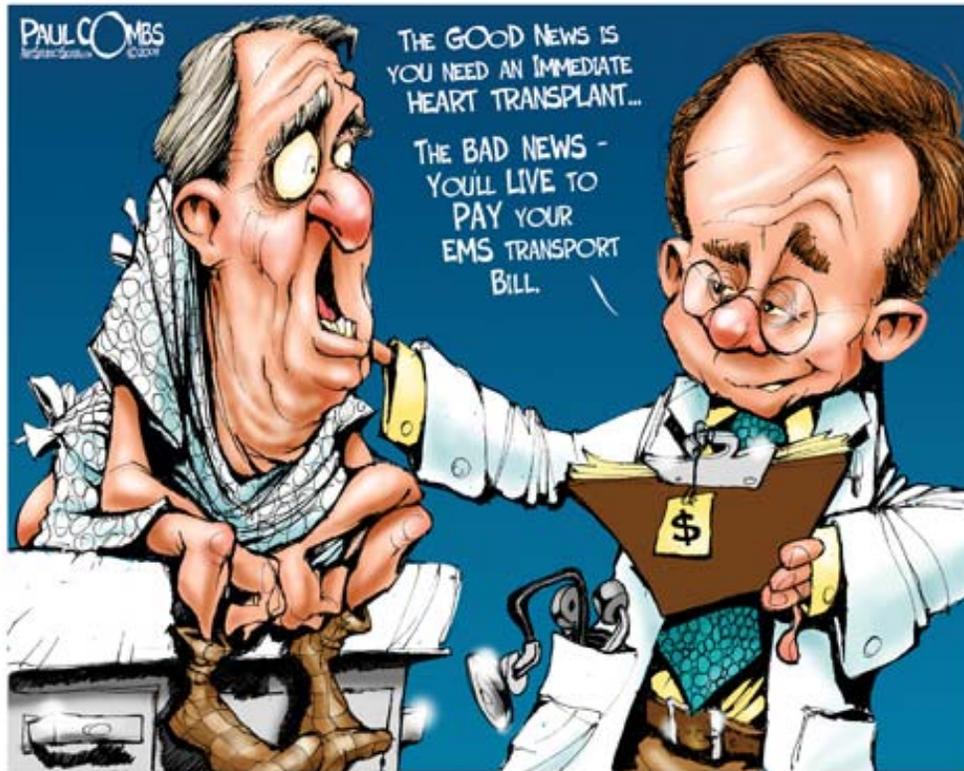
# Thirty-Third Virginia EMS Symposium

The REAL Stories of EMS

2012 Edition!

# C'Mon Man!





## Presented By:

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# Course Objective

A learning environment  
about those mistakes  
that peers made that  
you should not!

# A Few Rules

(after all, this is a compliance class...)

- If you know the case being shared – don't speak up – folks may think it is you!
- If you know the person involved, keep it to yourself!
- Learn!

# A CVS on Every Corner!

- I. A prescription appears at local commercial pharmacy
- II. A astute pharmacists notes the dosage and quantity has been altered
- III. So - what did they do?



# A CVS on Every Corner

- I. Medical Director suspends provider
- II. OEMS Temporarily suspends provider
- III. Plead Guilty, on deferred adjudication
- IV. If clean after one year, reduced to misdemeanor conviction



NFPA 1917 Compliant?

# One Ambulance, Two Patients

- I. Call for a MVC, 2 patients
- II. Single resource response  
(Intermediate and new basic)
- III. Both began assessing both patients independently. Basic with front seat patient, Intermediate with rear patient.
- IV. Second ambulance requested\*



# One Ambulance, Two Patients

- I. Basic patient loaded into ambulance
- II. Second patient had collar placed
- III. (No support personnel on scene at this point)
- IV. Crew left with patient one...
- V. C'Mon Man!

# One Ambulance, Two Patients

- I. Intermediate issued a citation and a one year suspension
- II. Basic issued a correction order

# But it is in Our Supply Room!

- I. Enhanced provider notes one of their own is not feeling well
- II. Provider “binged” the night before and now feeling the effects
- III. Enhanced starts IV and provides anti-emetic drug
- IV. Problem? Is It?



# But it is in Our Supply Room!

- I. No documentation, no prescriber signature
- II. Theft of “drug” and supplies
- III. Agency knew and said nothing
- IV. VBOP violation, OEMS violation
- V. C’Mon Man!
- VI. Provider issued citation and 30 day suspension, Agency issued citation

# Just a Few Drinks...

- I. Member hears on pager of a call - it is a relative
- II. Member drive to event - it is on his way home\*\*\*\*
- III. Member concerned about relative - interferes with on-scene crew
- IV. C'Mon Man!

# Just a Few Drinks...

- I. Law enforcement on scene arrest member, charged with DIP
- II. Immediate temporary suspension by OEMS - health safety and welfare
- III. Convicted in court
- IV. Back with agency as driver (EMS suspended for 1 year) and rumored to be an officer too!

# 1<sup>st</sup> Degree

Judge denies bond for man accused in Sunday slaying

By Candace Sipos -- [csipos@nvdaily.com](mailto:csipos@nvdaily.com)

WINCHESTER -- A Winchester man charged with first-degree murder and using a firearm in the commission of a felony in the slaying of a West Virginia man early Sunday will remain in jail without bond.

Bradley Scott Gregory, 27, of Winchester, was found at the scene of the shooting at 1373 S. Timber Ridge Road at 1:10 a.m. Sunday, according to Capt. John Heflin of the Frederick County Sheriff's Office.

Gregory got into an argument at the residence with Michael Scott Shirley, 27, of Berkeley Springs, W.Va., according to court documents. He then got a handgun from his vehicle, loaded it and shot Shirley in the chest, the documents say.

Shirley was dead when officers arrived at the scene, Heflin said.

Gregory admitted to the shooting, according to the documents. Gregory retrieved the unloaded firearm from his glove compartment and the magazine from the center console. Frederick County Commonwealth's Attorney Glenn R. Williamson said.

# 1<sup>st</sup> Degree

Gregory appeared before Judge David S. Whitacre via video in Frederick County General District Court for a bond hearing Tuesday, but Whitacre said he would not grant bond due to the nature of the crimes.

Whitacre asked Gregory if he wanted to comment on Williamson's request to hold him without bond at the Northwestern Regional Adult Detention Center, but Gregory declined.

Williamson also asked that Whitacre revoke Gregory's concealed weapon permit.

Technicians performed an autopsy on Shirley Monday at the Northern Laboratory in Manassas, but Heflin said he will not know the results for at least eight weeks.

Investigators will provide the results to the commonwealth's attorney for use in court, he said.

Investigators have not released any additional details about the incident, including whether alcohol or drugs were involved.

Gregory told Whitacre he has been unemployed since Dec. 12, when he quit his job as an assistant manager of the Underground Casino and Lounge in Bunker Hill, W.Va. He said he has no source of income and lives with his girlfriend.

Whitacre authorized a court-appointed attorney for Gregory and set his preliminary hearing for March 13 at 3 p.m.

# “Not Quite Dead Yet...”

- I. Provider has friend notify insurance company of alleged “death”
- II. Insurance company requires notarized documents
- III. Provider orders a seal...



# “Not Quite Dead Yet...”

- I. Stamp company requires govt approval for certain stamps
- II. Commonwealth Attorney allowed process to move forward to build case
- III. Monies sent to PO Box, girlfriend obtains (\$774K)

# “Not Quite Dead Yet...”

- I. Charged with 3 federal felonies
- II. C’Mon Man!
- III. Claimed “terminally ill with emotional cancer”
- IV. 30 month federal prison
- V. Suspended from OEMS, all certs

# Past Work History, Who Looks?

Application for Employment

Please Print

Equal access to programs, services and employment is available to all persons. Those applicants requiring reasonable accommodation to the application and/or interview process should notify a representative of the Human Resources Department.

Name \_\_\_\_\_ Applicant ID # \_\_\_\_\_

Address \_\_\_\_\_

Telephone # (\_\_\_\_) \_\_\_\_\_ Cellular/Other Phone # (\_\_\_\_) \_\_\_\_\_ E-mail Address \_\_\_\_\_

Position(s) applied for \_\_\_\_\_ Date of application \_\_\_\_/\_\_\_\_/\_\_\_\_

**Referral Source** (Please check the appropriate category and list the source.)

<input type="checkbox"/> Walk-In _____	<input type="checkbox"/> School _____
<input type="checkbox"/> Employee _____	<input type="checkbox"/> Job Fair _____
<input type="checkbox"/> Advertisement _____	<input type="checkbox"/> Staffing Agency _____
<input type="checkbox"/> Company's Website _____	<input type="checkbox"/> Government Employment Agency _____
<input type="checkbox"/> Other Internet _____	<input type="checkbox"/> Other _____

If necessary, best time to call you is \_\_\_\_\_ AM/PM  
 Home  Cellular/Other

May we contact you at work?  Yes  No  
If you work, number and best time to call  
 (\_\_\_\_) \_\_\_\_\_ AM/PM

If you are under 18 and it is required, can you furnish a work permit?  Yes  No  
 If no, please explain: \_\_\_\_\_

Have you submitted an application here before?  Yes  No  
 If yes, give date(s) and position(s): \_\_\_\_\_

Have you ever been employed here before?  Yes  No  
 If yes, give dates: From \_\_\_\_/\_\_\_\_/\_\_\_\_ To \_\_\_\_/\_\_\_\_/\_\_\_\_

Is this application a request for reemployment following an extended military leave of absence from this company?  Yes  No

Are you legally eligible for employment in this country?  Yes  No

Date available for work \_\_\_\_/\_\_\_\_/\_\_\_\_

What is your desired salary range or hourly rate of pay?  
 \$ \_\_\_\_\_ Per \_\_\_\_\_

Type of employment desired:  Full-Time  Part-Time  
 Educational Co-Op  Seasonal  Temporary

Will you relocate if job requires it?  Yes  No

Will you travel if job requires it?  Yes  No

If they have been explained to you, are you able to meet the attendance requirements of the position?  N/A  Yes  No

Will you work overtime if required?  Yes  No  
 If no, please explain: \_\_\_\_\_

Are you able to perform the "essential functions" of the job for which you are applying (with or without reasonable accommodation)?  
This question is not designed to elicit information about an applicant's disability. Please do not provide information about the existence of a disability, particular accommodation, or whether accommodation is necessary. These issues may be addressed at a later stage in the selection process by law.

Yes  No  Need more information about the job's "essential functions" to respond

Driver's license number required if driving may be required in the job for which you are applying: \_\_\_\_\_ State \_\_\_\_\_

Have you ever been bonded?  Yes  No

Answering "yes" in the following question does not constitute an automatic bar to employment. Factors such as date of the offense, seriousness and nature of the violation, rehabilitation and positive applied for will be taken into account.

Have you ever pleaded "guilty" or "no contest" to or been convicted of a crime?  Yes  No  
 If yes, please provide date(s) and details: \_\_\_\_\_

Have you entered into an agreement with any former employer or other party (such as a noncompetition agreement) that might, in any way, restrict your ability to work for our company?  Yes  No  
 If yes, please explain: \_\_\_\_\_

AN EQUAL OPPORTUNITY EMPLOYER

# Past Work History, Who Looks?

- I. Another regulatory agency contacts OEMS
- II. Applicant lists certified as EMT-Intermediate and previously a Cardiac Tech.
- III. Uhm,...NO!
- IV. C'Mon Man!

# 84 in 16, What a Bargain!

- I. Course announced
- II. Multiple dates and various providers attend
- III. CE reports generated
  - I. 84 hours of CE for attending only 16 hours of training!
- IV. C'Mon Man!
- V. Someone did not get the same hours, thus we were informed
- VI. Hours removed from students
- VII. Instructor - coordinator cited

## Virginia ALS Continuing Education Worksheet – All Levels

Virginia Office of EMS  
Division of Educational Development  
1041 Technology Park Drive  
Glen Allen, VA 23059

804-888-9120

AREA #				Description	Hours You Have Now	Hours You Still Need
	E	I	J			
<b>Alarms, Breathing and Cardiology</b>						
71	2	1	1	Provide ventilatory support for a patient		
72	2	2	0	Attempt to resuscitate a patient in cardiac arrest		
73	2	1	0	Provide care to a patient experiencing cardiovascular compromise		
74	2	2	0	Provide post resuscitation care to a cardiac arrest patient		
-	8	6	1	<b>TOTAL</b>		
<b>Medical Emergencies</b>						
75	1	1	1	Assess and provide care to a patient experiencing an allergic reaction		
76	1	0.5	0	Assess a patient with possible overdose		
77	1	0.5	0	Assess and provide care to a near-drowning patient		
-	3	2	1	<b>TOTAL</b>		
<b>Trauma</b>						
78	0.5	0.5	0.5	Perform a rapid trauma assessment		
79	1	1	0	Assess a patient with head injury		
80	1	0.5	0	Assess and provide care to a patient with a suspected spiral injury		
81	1	1	0	Provide care to a patient with a chest injury		
82	0.5	0.5	0	Provide care to a patient with an open abdominal injury		
83	1	0.5	0.5	Provide care to a patient with shock/hypoperfusion		
-	5	4	1	<b>TOTAL</b>		
<b>Obstetrics and Pediatrics</b>						
84	2	1	0	Assess and provide care to an infant or child with cardiac arrest		
85	2	2	0	Assess and provide care to an infant or child with respiratory distress		
86	2	1	0	Assess and provide care to an infant or child with shock/hypoperfusion		
87	2	2	0	Assess and provide care to an infant or child with trauma		
-	8	6	0	<b>TOTAL</b>		
24	78	78	3	<b>MANDATORY CORE CONTENT TOTAL</b>		
<b>Flexible Core Content</b>						
					HAVE	NEED
<b>Alarms, Breathing and Cardiology</b>						
88				Assess and provide care for respiratory distress in an adult patient		
89				Perform techniques to assure a patent airway		
90				Use oxygen delivery system components		
91				Assess and provide care to a patient experiencing non-traumatic chest pain/discomfort		
-	4	6	6	<b>TOTAL</b>		
<b>Medical Emergencies</b>						
92				Assess and provide care to a patient with an altered mental status		
93				Assess and provide care to a patient with a history of diabetes		
94				Assess and provide care to a patient experiencing a seizure		
95				Assess and provide care to a patient exposed to heat or cold		
96				Assess and provide care to a patient experiencing a behavioral problem		
97				Assess and provide care to a patient with a suspected communicable disease		
-	5	4	0	<b>TOTAL</b>		
<b>Trauma</b>						
98				Provide care of a patient with a painful, swollen, deformed extremity		
99				Assess and provide care to a patient with a burn injury		
-	1	1	0	<b>TOTAL</b>		
<b>Obstetrics and Pediatrics</b>						
100				Assess and provide care to an infant or child with suspected abuse or neglect		
101				Assess and provide care to an infant or child with a fever		
102				Assess and provide care for the obstetric patient		
103				Provide care to the newborn		
104				Provide care to the mother immediately following delivery of a newborn		
-	4	4	0	<b>TOTAL</b>		
<b>Operational Tasks</b>						
105				Use body mechanics when lifting and moving a patient		
106				Communicate with a patient while providing care		
-	2	1	1	<b>TOTAL</b>		
24	18	7		<b>FLEXIBLE CORE CONTENT TOTAL</b>	HAVE	NEED
48	36	10		<b>CATEGORY 1 HOURS REQUIRED PER LEVEL</b>		
24	12*	26		<b>CATEGORY 2 HOURS REQUIRED PER LEVEL (*MINIMUM REQ 36 HRS)</b>		
72	48	36		<b>TOTAL HOURS REQUIRED PER LEVEL</b>		

No more than 10 hours in Category 3 can be used to fulfill Category 2 requirements



# Letters of Support!

- I. A concern was presented to OEMS
- II. A person was allowed to be affiliated with an agency, but according to criminal history, should not be
- III. Several letters from fellow members, indicating how compassionate the person is

# Letters of Support

Title Attachment # 2- 26 Felony  
Convictions

- I. Agency insisted only used person as a driver
- II. C'Mon Man!
- III. Was a long time member of agency, working part time for agency\*\*\*\*\*

# If It Works Orally...

- I. Provider fought off Noro-virus for entire shift...
- II. Provider and partner go to house to hydrate
- III. Starts IV (not sure who did)
- IV. Thought, if it works well PO, how about IV?



# If It Works Orally...

- I. C'Mon Man!
- II. Injects about 1cc of Pepto-Bismol
- III. Immediate pyrogenic reaction, 911 called
- IV. To ED where OMD is working, RSI
- V. Transferred to Level II trauma center, 3 day stay

# If It Works Orally...

- I. Both providers immediately suspended by OMD
- II. Temporary suspension by OEMS
- III. Provider recovered
- IV. Both with significant remediation
- V. Citations to both
- VI. Really?,,,,,, Really?

# Who Needs P/P?

- I. “According to the website EMT classes are suppose to be 121 hours long. However, this one being taught...’
- II. Information verified
- III. Course physician notified
- IV. Instructor immediately suspended

# Who Needs P/P?

- I. No verification of CPR prerequisite
- II. Many hours missing of didactic
- III. Minimal practical skills
- IV. Course completion signed off = many without any required clinical hours
- V. C'Mon Man!

# Who Needs P/P?

- I. OEMS worked to locate replacement instructor
- II. Missing didactic and clinical completed
- III. Some students not allowed to test originally...
- IV. Instructor status suspended, needs to redo if still desired...

# A Little For the Patient...

- I. Employer notifies OEMS of an infraction by employee
- II. Provider “lost” 500 mcg of Fentanyl
- III. Able to demonstrate that employee “diverted” drugs
- IV. Significant amount of diversion over long period of time

# A Little For the Patient...

- I. Employee also a licensed provider
- II. Temporary suspension by OEMS
- III. Completing an intervention program under licensing board
- IV. Once completed, can reapply for OEMS certifications





# Because I am, I Can!

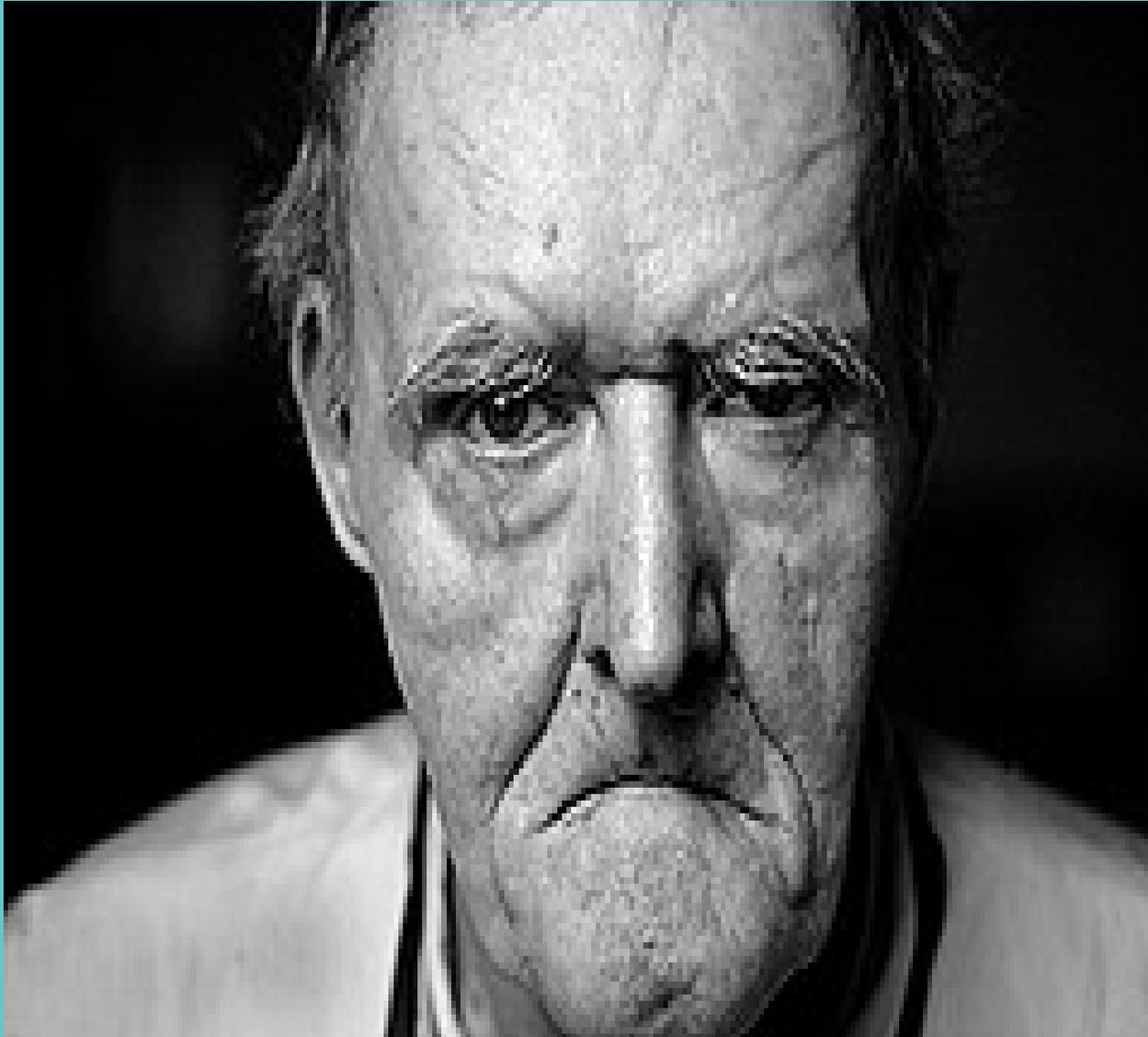
- I. An officer of an agency calls OEMS because one of his junior members describes...
- II. Course OMD contacted
- III. Not happy!
- IV. Sponsor of program not excited about the information either

# Because I am, I Can!

- I. Instructor felt it important that students understand how to assist
- II. Showed students how to start IV's, on herself and then on each other
- III. Figured she taught an Enhanced course and because a license provider, could teach skill too...

# Because I am, I Can!

- I. OMD withdrew support for course
- II. IFFC scheduled
- III. EMT-Instructor status revoked  
(although voluntarily surrendered)
- IV. Why is this important?



# They Are Not Sick Enough...

- I. Frequent user of local EMS system calls again
- II. Provider appears very upset at patient
- III. Partner not sure what is going on,
- IV. Patient complaining of elevated BS and chest pain

# They Are Not Sick Enough...

- I. ALS Provider “lectures” patient
- II. BLS provider appeals to ALS provider
- III. BLS provider runs 12 lead, ALS provider pulls ambulance over to allow 12 lead to be run...
- IV. OMD not happy
- V. Agency and OEMS suspension

# What Child Labor Laws?

- I. DICO called by local facility
- II. Patient with bacterial meningitis
- III. DICO follow-up reveals a person under 16 riding on call
- IV. Turns out - this has been going on for some time
- V. Agency and Chief who allowed this cited!

# Simply put, C'Mon Man!

Thank you for your time and attention!

Hopefully, you will not be in  
the next edition of  
“The REAL Stories of EMS”