

# **FANWOOD RESCUE SQUAD**

Spring/Summer Newsletter 2023





### PRESIDENT'S CORNER

Every May, rescue squads across the country celebrate National EMS Week. While this week is meant as a week of commemoration and thanks for the services EMTs and Paramedics provide, it also serves as a reminder that we are still considered the "redheaded stepchildren" of the Emergency Services community. We are a forgotten group. You see, there is no law or ordinance that mandates a town to provide emergency medical services to their residents. In fact, many of the rescue squads in our area were borne out of public concern for the medical well-being of a community. The Fanwood Rescue Squad was started under that same premise. The Fanwood Rescue Squad was started in 1948 by a group of residents from the community who felt that there was a need for emergency medical services in the borough of Fanwood. That mission blossomed and has become the current Fanwood Rescue Squad, Inc. This year, the Fanwood Rescue Squad turns 75! This has been made possible with the assistance of many people in the community.

Unfortunately, volunteer emergency medical services are at a critical breaking point in this day and age. Due in part to economic challenges, volunteerism is at an all-time low. Many squads in the area have shuttered their doors due to a lack of volunteers. Outside of New Jersey, many communities are served by a hospital-based or contractor-based EMS. When you call 9-1-1, you expect an ambulance to be there, just like you would a police officer or a firefighter. The difference between EMS and police/ fire is that laws have made sure that you get a police officer or a firefighter to your door when you need it. In Fanwood, when you call 9-1-1, those that come out on the Fanwood ambulance are members of our community, volunteers themselves, who take time out of their days, away from their families, to help you and your family, with no expectation of compensation. For our Fanwood neighbors who did not grow up in Fanwood, many of them are used to the contracted ambulance services. In Fanwood, those that grew up here in town have known the Fanwood

Rescue Squad and their distinct yellow-brown ambulances, and have often been greeted by those they have grown up with.

Volunteer rescue squads rely on the kindness and generosity of the members of the community, whether it be with volunteer time, monetary donations, or something else. The Borough Council and residents have been financially generous and very supportive. The Squad has been able to pay all of its bills without concern for where the next donation is coming from. For that, we are grateful. Now, we ask our Borough constituents to consider donating their time to our squad as well. The Fanwood Rescue Squad relies on volunteers to continue operating. We are looking for members of the community to join our squad, become EMTs, and help us with furthering our mission - getting an ambulance to someone in need. Will that be you?



Karolyn Buckridee M.D., EMT

#### PLEASE SUPPORT US - DONATE TODAY!

The Fanwood Rescue Squad is a 100% volunteer organization, and not a municipal entity. Your generous donations are used to maintain our emergency vehicles, and to purchase life-saving equipment and supplies.

We are an official 501(c)(3) non-profit organization. Your gift is tax-deductible as allowed by law.

Many companies match employee donations. Does yours? Double your impact!

Save postage and the environment, donate online at fanwoodrescue.com/donate







Welcome to the newest member of the FRS Family! Congratulations to our Medical Director Dan Friedman and his family on the birth of Lucy on March 21, 2023!

## **FANWOOD RESCUE SQUAD**

### IT'S ALL ABOUT THE "E"



#### by Patty Buckridee

At the Fanwood Rescue Squad, we trade in a currency that is stamped with an "E". We wear patches that are imprinted with, "EMT"; we transport patients to a hospital "ED" or "ER" but do we really understand what the "E" really means?

Once upon a time, you could go to the hospital emergency room and get a problem taken care of. In these days of medical hyper-specialization, doctors can't be expected to be jacks of all trades. As a result, hospital emergency rooms, or emergency departments, as they are referred to these days, have largely become a conduit for definitive care, but are not in and of themselves the source of definitive care anymore. Therefore, their purpose has shifted from fixing the problem to stabilizing the patient and referring them to the specialist who will then ultimately fix the problem.

There are advantages and disadvantages to this approach, with the advantages far outweighing the disadvantages. The major disadvantage is that it kicks the timeline for definitive care slightly further down the road, however, it is offset by the advantage of funneling the patient directly into the care of the best possible provider for the patient's ailment, thereby ensuring the best possible outcome. A physician who has specialized in Emergency Medicine is not a surgeon, or an orthopedist, or a cardiologist, and if those are the specialties that you need, those are the physicians by whom you should be seen. The ED physician will refer you to exactly the specialty that you need once he/she has stabilized you and diagnosed whatever has brought you to the ED, and that is the strength of a hospital emergency department. The crux of the ED is the "E". E = Emergency and an emergency in general suggests a life-threatening condition. One of the reasons why healthcare costs have spiraled out of control in the United States is that people have come to use the emergency department of hospitals for reasons that could have been more quickly, more efficiently, more effectively, and more inexpensively handled at a walk-in urgent care facility or one's own doctor. Hospital EDs are frequently overrun because they are required to treat every patient that enters their premises, and they are not permitted to turn anyone away for any reason, including inability to pay, which explains the inordinately long wait times that many patients experience when they go to a hospital ED.

Additionally, many people believe the myth that if they are taken to a hospital ED in an ambulance that they will be seen more quickly, and nothing is further from the truth. The nurses in a hospital ED reception area use triage principles to decide who gets seen first, and those with more serious and potentially lifethreatening conditions will always be seen first, regardless of when or how they arrive. It is NEVER a first-come/first-served basis in a hospital. This myth also may have dangerous and potentially deadly consequences because it ties up already scarce resources for patients who may have been better served elsewhere and may not leave any resources available for people who emergently do need them. It's all about the "E".

The next time you are thinking of dialing 9-1-1 for an ambulance, please consider asking yourself the following questions:

- Is this really an emergency?
  - Examples of life-threatening emergencies:
    - · Chest pains
    - · Difficulty breathing
    - · Altered mental status, convulsions, seizures
    - Unconscious, unresponsive, or inappropriate responsiveness
    - Trauma, such as an attack/assault, bleeding, broken bones, burns, fall, motor vehicle accident, penetrating injury, such as a gunshot or stabbing, etc.
    - Overdose, poisoning
  - If the patient is having symptoms of a life-threatening condition they have had in the past, this is an emergency!
- Does this emergency involve an infant, child, or an elderly person?
- · Is this something that my doctor could handle or could I go to a walk-in facility?

Obviously, if you are in distress, please do not hesitate to call 9-1-1. The dispatch operators are trained to help you determine what type of assistance you may need. And as always, the Fanwood Rescue Squad is here to help.



### **SPOTLIGHT**

#### **EMMA NOBILE**

My name is Emma Nobile and I am a senior at Scotch Plains-Fanwood High School. I joined the Fanwood Rescue Squad in January of 2022 and



I am currently a provisional member working towards obtaining my EMS certification. In the fall I will begin studying biomedical science at McGill university, as I hope to pursue a career as a neurologist. What I love most about the FRS is the environment they have cultivated and the experience I have been able to gain through riding. I believe the real-world experience I gain from being a member is unparalleled, as I am surrounded by a community of individuals who share my interest and passion for science and medicine. Additionally, being a member has provided me with not only emergency medical care skills, but also leadership skills.

One very notable aspect of FRS is the sense of community, as every member is more than willing to provide provisional members like myself with guidance and encouragement. My love for science and medicine stems mostly from my curiosity about pathophysiology, and believe me, I have no shortage of questions. Members are always willing to have discussions with me, and assure me that my voice is heard. I wholeheartedly believe that there is no better way to gain clinical experience as a high school student than being involved in EMS, and I am grateful to be granted the ability of getting a head start on my future.