



A Typical Day for an EMT

Adapted from <http://www.shmoop.com/careers/emt/typical-day.html>

EMT Wendy Cureall starts her 24-hour shift at midnight. The private company that employs her is under contract to cover a suburban community Monday through Friday. Volunteers take over the duty on weekends.

Wendy's partner, Luke Tardy, has not arrived at the ambulance station yet. The ambulance, aka "the rig," needs to be checked at the start of each shift. A written checklist has to be completed to be sure that all medical equipment is working, enough supplies are on hand, and the vehicle itself is ready to drive. It's embarrassing to have to stop for gas on the way to the hospital. The last crew to use this rig was responsible for replacing any supplies they used, but you never know.

Rig check takes about two hours. It's a hassle to do, but you don't want to be on an emergency scene and find out that you don't have something you need. Example: During this rig check, Wendy finds out that one of the portable oxygen tanks is empty. The last crew used it and neglected to refill it. If you need to change tanks on a job and the spare you grab is empty, the patient could end up hurting, i.e. not breathing.

Wendy and Luke finish the rig check at 2:30am and head for the cots in the squad room. With any luck, it will be a quiet night of uninterrupted sleep. At 3:45, Wendy is sleeping deeply when some strange noise intrudes. It's the sound of her radio alarm activated by the 911 dispatcher. She heads out to the ambulance bay where Luke is already starting the rig.

The call is for a collapsed elderly male at a private residence. Luke knows where the street is without asking the dispatcher for directions. One of an EMT's responsibilities is to know the area they cover, including street names. One nice thing about being dispatched at 3:45am is that there isn't much traffic. Luke will not need to use the siren, which is good, because you never know how motorists will react.

Pulling onto the patient's street four minutes later, the house with the patient is identified by the flashing lights of two police cars outside. Wendy is first out of the rig. She grabs the first aid and respiratory kits. Luke brings the oxygen bag and defibrillator.

A police officer at the door directs her upstairs. The patient is sitting on the hallway floor leaning against the wall flanked by a police officer and a younger woman...



his daughter? He is conscious and turns his head to face Wendy, which causes her stress level to fall dramatically. It's always a relief to find your patient alert and breathing. The woman reports that the man, whose name is Hector and is her father, apparently got up to go to the bathroom. She woke up with a loud noise and found him unconscious on the hallway floor.

While Luke takes Hector's health history from the woman, Wendy starts her examination. Talking quietly to the patient while she works, she finds that his vitals are satisfactory, but notices several problems. His speech is slurred and he is leaning to one side. He has trouble formulating answers to her simple questions, like his age. Wendy goes downstairs out of earshot to call in her findings to the ER physician. He agrees with her suspicion that Hector has probably suffered a stroke. The faster a patient is treated after the onset of a stroke, the better the outcome, so Wendy wants to get him to the hospital quickly.

Luke and one of the police officers carefully move Hector to the ground floor using a stair chair. There, they transfer him to the stretcher that Wendy has brought from the rig. The transport to the hospital is uneventful. At this hour, 5am, there is no waiting, so the EMTs can quickly transfer the patient and leave. No one thanks them for their work.

Wendy says it is too late to go back to sleep. Luke offers to buy breakfast. He is still trying to make up for the siren scare back at the station. Wendy is on her second bite of pancakes in the diner when the radio alarm goes off. The 911 dispatcher: "Mountain View nursing home requesting transport for a patient with dehydration." Wendy heads out to start the rig while Luke pays.

The lobby of the nursing home is completely dark and empty as Wendy and Luke enter with the stretcher and first aid kit. They have no idea what room the patient is in. Wendy goes right and Luke goes left as they search for a staff member. Eventually, Wendy spots a maintenance worker at the end of a corridor. He calls for the duty nurse on his walkie talkie. She soon appears and guides Wendy and Luke to the right room.

The smell as they enter is overwhelming. It is obvious why the patient, an elderly woman named Maria, is dehydrated. She has been suffering from diarrhea in her bed. After taking the patient's vital signs, Wendy starts her on an IV as per the ER doctor's orders. The EMTs and nurse carefully lift Maria from the bed to the stretcher for an uneventful run to the hospital. By this hour, the ER has begun to fill up, so the EMTs must stay with their patient for 30 minutes until a bed opens up. After the patient has been moved, they disinfect the stretcher and are ready to leave.



They are scheduled to stand by at a high school football game at 4:00pm. Until then, they spend the time at the ambulance station taking a nap, watching TV, and playing cards. They also spend time on the computer taking online courses for the continuing education credits they will need for re-certification.

When they arrive back at the station, the dispatcher calls them out to an MVA (motor vehicle accident) on Treadway Avenue. Upon arriving at the scene, they find a young female driver behind the wheel of a subcompact. Apparently she didn't see the back of the tractor trailer truck stopped in front of her. (Want to bet she was texting?) Wendy realizes that extrication tools will be needed to get the woman out of the car. She confirms that the police on scene have already dispatched the fire department with its hydraulic tools known as the Jaws of Life. Firefighters live to cut up cars. While waiting for the firefighters, Wendy squeezes into the back seat of the car to stabilize the woman's spinal column while Luke takes her vitals through the window. It seems that the driver is more frightened than injured, but spinal injury is always a possibility in an MVA so Wendy applies a cervical collar. The firefighters arrive to remove the car door and they help the EMTs to put the driver onto a spineboard and move her into the rig.

The rest of the shift is uneventful. The relief crew arrives at 11:45pm and makes small talk with Wendy and Luke. As these two get ready to go home, the radio alarm goes off at 11:58. Technically, Wendy and Luke are still on duty, but the relief crew offers to take the call if they get an IOU for dinner. Wendy and Luke gratefully promise to pay up.