



Dave Morton

# STAT MedEvac I

By A.J. Caliendo | Photos by Wade Massie

**A**nyone who lives near a hospital has no doubt heard, from time to time, a rumbling, whirring sound coming from the sky. More likely than not, that is the sound of a life being saved. The sound of an emergency medical helicopter.

In Washington County, that means STAT MedEvac I, a team of highly trained, professional and caring individuals who staff the center at Washington Hospital, the site where the company started as Angel One when it was formed in 1982 as an arm of the Center for Emergency Medicine. Now the 501(c)3 nonprofit company based at the County Airport in West Mifflin has 16 bases throughout Pennsylvania, Ohio and Maryland.

Jim Houser has been a crew member at the base since 2001 and also serves as STAT MedEvac's Coordinator of Business Relations and Development. Sitting in the comfortable but utilitarian "living room" in the apartment/office suite maintained by the company on the hospital's eighth floor, Houser talked about why he decided to get involved in a business that requires extensive training, life and death pressure and 24-hour shifts.

"It's funny how a lot of us find our way here accidentally," Houser said with a chuckle. "I became a volunteer firefighter and immediately fell in love with the EMS (Emergency Medical Services) component. I can still to this day remember the first patient that we had who required Stat MedEvac and when I saw the helicopter land I said 'that's what I want to do,' and here I am today."

Along with his status as an EMT, Houser is certified as a paramedic and a registered nurse.

Washington Base Site Coordinator Jeff Lejeune holds those same credentials. He got his initial EMT training while waiting for word on the status of his application to the Pennsylvania State Police. That was the beginning of a new career path that Lejeune never regretted following.

"There are very few people who can say they love their job," he said. "I love my job!"

## How Can They Do Such a Depressing Job?

This revelation might come as a bit of a shock to those who wonder how anyone could love a job that must often be stressful and depressing, involving as it does, close contact with very ill or severely injured human beings. Lejeune put that theory to rest.

"That's a common misconception about EMS being depressing," he said. "Yes, you see horrible things happen to people (but you get to) help people in their greatest time of need. It's really an upbeat job. Occasionally you see a negative outcome when a person doesn't survive, but many times we're able to make a difference in somebody's life."

Houser concurs with that sentiment and adds that not all of the difference making is in the treatment and the medicines.

"Not long ago we had a situation where, unfortunately, the patient was traumatically injured and there was nothing that could be done, but my partner and I were able to spend time with and comfort his wife. (That's when) you know you're helping somebody."

Lejeune agrees.

"We carry over \$100,000-worth of equipment aboard a five-to-

seven million dollar aircraft, but what they will remember is us just holding their hand or the words of comfort that we give.”

## What is the Price of Safety?

That kind of help comes directly from the human heart and soul, but other types of assistance necessary to save lives come with a high price tag that, according to Lejeune, his company is more than willing to take on.

“They don’t spare any expense when safety is involved,” he said.

That expense begins with 21 helicopters, sticker priced at more than \$5,000,000 per unit. Those EC135 or 145 turbojets have seats for the three-person crew—pilot, paramedic and nurse who travel on every mission and room for two gurneys for carrying patients to their destination. The twin jet engines turn the rotors and give the aircraft its strength of power for take off and provide for safe flying if one engine should fail.

The helicopters are also equipped with hard landing skids that spread upon impact to soften the concussion of a tough landing and all are outfitted with advanced auto pilot, color weather radar, a global positioning system and windshield wipers the size of the uprights on football goalposts. A satellite tracking system updates the aircraft’s position once per minute.

All of this is necessary because, as Lejeune puts it, “Aviation is inherently safe but terribly unforgiving.”

For patient care and safety, the onboard medical equipment gives the aircraft intensive care capabilities, enabling the crew to handle any situation that arises.

“The equipment that we carry on board is amazing. We take care of any age group from birth to geriatrics,” Lejeune pointed out.

Personal equipment for the crew is also state of the art. The helmets are equivalent to those issued to military flyers as are the black and gold flight suits made from a heat and flame resistant fiber called Nomex. Night vision goggles attach to those helmets to help both pilot and crew identify landmarks below.

Universal type-O negative blood from the base’s cooler is always on board as are various instruments for relieving cardiac and respiratory difficulties that often accompany trauma.

Then, of course, the human factor comes into play.

“We always say that we fly at the most comfortable level of the least comfortable person on the aircraft,” Lejeune said, noting that federal regulations—and common sense—dictate that the helicopter does not fly in extreme weather conditions. All pilots in the group are meteorologists and the base contains sophisticated weather equipment that allows them to evaluate the advisability of flying. When they can’t fly, the team might still go to the site, but they and their supplies will get there in an SUV.

## Rested and Ready to Go

When they are not flying or preparing to fly, the crew members—who

work a 24 hour shift followed by a minimum of 24 hours off—are encouraged to rest and sleep because, as Lejeune points out, “We deal with a lot of equipment and medication. We have to be on our toes at all times.”

Fortunately, the facility provides for a little R&R and a good night’s (or day’s) sleep when the opportunity presents itself. The living quarters consist of a common room with comfortable chairs, a stereo and a TV. There is a small, fully equipped kitchen with a pot of coffee available at all times along with a stove and microwave, allowing the crew—like the army—to travel on its stomach.

Further down the hall, instead of the dormitory style bunk beds that one might expect to see at such a facility are three large, comfortable looking bedrooms, one for each crewmember on duty. “They take good care of us,” Houser said of his company. “We have comfortable quarters so that we can rest and relax and will be fresh when they need us.”

When the time does come to wake up and save lives, Lejeune said that he can be dressed in his flight suit (if he isn’t already wearing it) in a matter of 30 seconds and the crew can do the safety checks on the helicopter and get in the air within five minutes of being awakened by the shrill, almost ear-piercing alarm that is set off when a call comes in.

## The Team’s the Thing

Both men emphasize that everything that goes on before, during and after a mission require the attention and cooperation of many people. Each flight must have one pilot, one nurse and one paramedic on board for each mission. Meetings are held at the beginning of every shift to cover the responsibilities of each crew member and to ensure quick reaction time when a call comes in because, in emergency medicine, time is usually the all important factor between saving or losing a life.

Or, as Houser puts it, “Speed, our ability to get into areas a plane couldn’t get into and the crew, the team, those three components have made (Stat MedEvac) just a great tool for patients.”

That team also extends to the first responders who follow state regulations known as triage guidelines to make the decision as to whether air transportation is needed at the site and the hospitals who receive the patient either from the accident scene or another hospital (a procedure called an inter-facility mission.)

“It truly is a team effort,” Houser said emphatically, “The patient is sick and they need us but it also requires the EMTs to be on the scene, the fire department to set up... (and) the state police (to clear the area for landing.) And after we get the patient, we still have to get to the trauma center. It’s an unbelievable amount of effort to take care of somebody.”

Fortunately for those who need immediate, extensive medical care, there are capable, dedicated people willing to exert that effort every day. □

