

I'm Clear, You're Clear, The Chihuahua is Clear...

They say that the measure of a man's intelligence is the degree to which he agrees with you. By that standard, Dr. Mark Brothers and I now regard each other as certified geniuses. Not that we interact a great deal in the clinical environment; being a lowly EMT Basic, I simply drop off my patients at the hospital, bow respectfully, and back slowly out of his presence.

But today is a different story. Today the all-powerful physician and the lowly EMT are on an even footing, because when it comes to Trivial Pursuit, I bow to no man. I am the "King of Obscure and Arcane Facts." Mark Brothers, if not my equal, is at least good enough to sit at my right hand. We have been paired off as partners in a game of Trivial Pursuit, and we are beating the other teams like a rented mule. We are humiliating people. For six games straight now, we have run the board, winning with nary a question missed. For the past two games, it's been everybody versus us.

We're hanging out at the Fort Sperry station, celebrating Chennault Ambulance's third month of business, and things are looking good. Call volume is increasing, we've upgraded our capabilities, and rumor has it that we'll even be getting paychecks any day now. Life is sweet. Since I've been getting paid in promises, I've moved into the Fort Sperry station to save money. The only drawback to living in the station is that I am perpetually on duty. Every morning, I wake up and stumble to Bob Graham's office and knock on the door.

"Am I on duty today?" I'll ask, and wait patiently as Bob becomes lost in thought, shuffling through the duty roster he keeps in his head.

"Yep," he invariably says. "We can use you." I will then obediently trudge to the bathroom, shower and put on a jumpsuit. But, I don't mind. This stuff is so fun, I'd do it for free. (Well actually, I *am* doing it for free right now.)

The emergency line rings, interrupting our game and sparing the rest of the crew further humiliation at the hands of my MD partner and myself. "Cardiac arrest at 137 Owl Creek Road," Bob calls. "Let's go." I am Bob's partner today. After two months spent as the attendant on most of our calls, our upgrade to EMT-Intermediate service has seen me demoted back to driver. I don't like it; I start paramedic school in two months, and I need the patient care experience.

"I think I'll ride with you on this one," Dr. Brothers muses as we get up from the table. *Oh crap, just what I needed.*

I say nothing, just sprint to the rig with Dr. Brothers in tow. On the way to the call, I can hear him curse softly from the back as I make a few hard turns.

"Hang on, Doc!" I call unnecessarily. "Rough road ahead!" In the rearview mirror, I can see him hanging onto the overhead bar for dear life. "Why don't you toss the suction, the jump bag and the AED on the stretcher?" I call back to him, adding, "and spike a bag of saline, too!" Bob looks over at me and grins, shaking his head.

At the house, there is a woman doing CPR on a fifty-ish man lying on the living room floor. Several other relatives are standing around sobbing quietly, and a hyperactive little Chihuahua is bouncing from the couch to the chair to the floor, yapping excitedly. The woman doing CPR is crying and there is snot running from her nose which she absently wipes away as Bob places the AED on the floor next to the man.

"Ma'am," he asks gently, "what happened?" The woman doesn't answer, just stares vacantly and cries, wiping her nose with her sleeve. There is a smear of bloody vomit on her lip. Delicately, I move her to one side and hand her off to Dr. Brothers, who is standing around looking lost.

"Hey Doc," I suggest, "why don't you find out what happened, and have someone gather up his medications? Hand me the suction before you go." Dr. Brothers hurriedly hands me the suction unit and escorts the woman into the other room, talking quietly to her. The Chihuahua snaps at my hand as I suction the vomitus from the man's mouth and Bob attaches the AED pads. I swat impatiently at the dog, who returns the favor by snapping at me again and growling ferociously.

"Uh, can one of you corral the dog?" I ask pointedly at the group of relatives standing nearby. A young woman, perhaps the victim's daughter, snaps out of her reverie.

"Sweetie! Stop that! Stop it this instant!" she scolds, snapping her fingers. "He's really a sweet puppy," she apologizes.

Sure he is, lady. Why is it that every psychotic little ankle-biter has a name like Sweetie or Sugarpuss, instead of something that fits, like Tasmanian Devil or Charles Manson?

For his part, Sweetie ignores her, jumping from the couch to his master's chest and back. Irritated, I bat the dog off the man's chest as I begin chest compressions. I hit him a little harder than I intended, sending him somersaulting across the rug all the way to the fireplace. Sweetie bounces back up like nothing happened, and contents himself with jumping back and forth from the couch to my back, nipping at my hair and shirt collar with each circuit.

"Sweetie!" the woman cries, anguished. "Please leave the nice man alone!" I ignore them both, moving up to the man's head to ventilate as Bob presses the ANALYZE button on the AED.

"Shock indicated!" the AED announces.

"Everybody clear!" Bob shouts, looking at the AED and pressing the SHOCK button...
...just as Sweetie completes another pinball circuit, landing squarely on his master's chest, right between the AED pads.

"POP!" goes the AED, accompanied by an agonized yelp and the stench of burning dog hair. Sweetie ricochets across the couch and retreats for safer parts, yelping piteously all the while.

"What was that?" Bob asks, turning back to the patient with a frightened expression.

"If the dog wasn't in v-fib, he probably is now," I comment dryly. "Apparently, 'clear' is not a command in his vocabulary."

The AED interrupts any further conversation by reminding us in its telephone-operator voice that the patient is still in v-fib, and one of us should press the SHOCK button. Bob just shakes his head wonderingly and, looking at the patient this time, presses the button again.

"Kachunk!" the defibrillator discharges, causing the man to arch his back in a prolonged spasm. Within a few moments, the man coughs and starts breathing raggedly. Bob and I share a triumphant look.

"No shock advised," the AED tells us unnecessarily. "It is safe to touch the patient. Check breathing. Check pulse. If no pulse..."

There is no need to check breathing or pulse, or begin CPR as the AED politely suggests. Dead people do not vomit and roll their eyes wildly. I quickly stick the suction catheter in his mouth to clear his airway. Soon, the man is breathing better, but still coughing and retching. I switch the oxygen tank to a non-rebreather mask and place it over his face.

"What happened to the dog?" Dr. Brothers asks as he escorts the patient's wife back into the room. "He came through here like his tail was on fire or something..." he trails off as he sees our patient.

"Ma'am?" he nudges the woman, who looks up, startled. He just smiles, gesturing toward her husband. She gasps and kneels at his side, sobbing again, but in a different way than before. The man says nothing, just closes his eyes and squeezes her hand as he coughs and sucks deep, shuddering breaths of pure oxygen. I take a little time gathering up our equipment. The woman continues holding her husband's hand all the way to the ambulance, disengaging only briefly as we load him on the stretcher.

Since Dr. Brothers is with us, Bob lets me ride in the back on the way to the hospital. Dr. Brothers has a bit of trouble getting an IV. "Damn! Can you ask Bob to take it easy for the next couple of minutes?" he asks, frustrated. There is sweat dripping from his nose as he makes his second stick at a vein.

"He *is* taking it easy," I tell him. The ambulance is barely moving forty miles an hour, and I can see Bob's eyes in the rearview mirror, watching Dr. Brothers as he makes his second, successful attempt. "Besides, we'll be at the hospital in two minutes."

Dr. Brothers has his eyes closed, concentrating as he auscultates heart and breath sounds. "Crap," he mutters disgustedly. "I can barely hear. Lungs sound clear, I guess. He may have a systolic murmur."

"They call it 'diesel engine,' Doc," I tell him wryly. "Now you know why we palpate so many blood pressures."

"This machine doesn't even have a printer or a screen!" Dr. Brothers mutters in frustration. "We need a real cardiac monitor, and some lidocaine, and maybe some dopamine..." he looks around in frustration for a drug box that isn't there.

"We're not a paramedic service yet," I remind him. "But the AED does have some interesting features. For instance, it has a voice recorder that activates when you turn the unit on. Where do you think we get the tapes you review?"

"You mean that..." Dr. Brothers asks, looking suspiciously at the AED.

"Yep," I confirm with an evil grin, "everything is recorded for posterity, including Sweetie's electrocution."

"Good Lord," he breathes. "Well, at least no one will hear it but me."

"Well, we *could* make copies of the tapes before you get them," I muse. "Purely for record keeping purposes of course."

"You do that," he threatens with a grin, "and I'll withdraw my recommendation for paramedic school."

- **ISBN-10:** 1887321047
- **ISBN-13:** 978-1887321044