

Doctor Seeks Changes In Emergency Medicine

A leading surgeon in the field of accident treatment wants a continuing analysis of the operation of the entire emergency medical service system from the scene of the accident through

hospital discharge.

"Until this is done," Dr. Charles F. Frey of the University of Michigan told an international meeting of physicians, "we will not continue to im-

prove emergency medical service."

He further recommended that emergency medical services be planned on a regional basis, that the public be fully informed about the need and opportunities for improvement.

IN A REPORT to the third triennial congress of the International Association for Accident and Traffic Medicine, Dr. Frey noted that accidents are the leading cause of death in the United States for persons aged 1 to 37.

Many of these deaths and injuries could be reduced with improved emergency service, Dr. Frey reported.

"The hospital phase of emergency medical service needs improvement," he emphasized. He cited one study where one-sixth of soldiers injured off duty and treated in civilian hospitals died unnecessarily. These deaths were attributed to a combination of physician and hospital errors of "omission and commission."

IN STUDIES he conducted in Washtenaw County, the potential for salvage existed in 18 per cent of the cases of those dying from motor vehicle accidents. They might have been saved had rescue workers been trained in emergency aid in breathing and blood transfusion. This, he said, illustrates the need for better training of the rescue worker and the recruit-

ment of professionals.

Adequate wages through tax levies or subsidies are necessary to guarantee professional rescue workers who will continue to render service as a lifetime career," Dr. Frey said.

At present, he noted, the annual personnel turnover of ambulance personnel in Washtenaw County is 10 per cent, whereas that for police and firemen is only 6 per cent.

"AMBULANCE PERSONNEL receive only the minimum wage of \$1.60 an hour. They work in 24-hour shifts, on and off. In order for them to earn a living wage, they must work seven to ten 24-hour shifts every 14 days."

"Men who want to raise a family cannot continue to work, no matter how well motivated, under these conditions," Dr. Frey noted.

In order to retain and train a corps of professional rescue workers, society must pay them adequately. The community must express its support through tax support just as it does for the police and fire departments.

Dr. Frey said regional centers for emergency treatment are necessary because only they can provide the facilities and manpower adequate to treat accident victims.

He said 70 per cent of motor vehicle deaths occur in rural areas and in communities with populations under 2,500. A California study showed mortality

rates were greater in rural and mountain counties than in urban counties.

Reasons for this included less adequate surveillance, longer distance to aid from the accident for the ambulance, fewer personnel, and less adequately trained ambulance crews, poor communication between ambulance and hospital, and less adequate transport and equipment.

"RURAL MEDICAL facilities were found less capable of managing the injuries of accident victims," he continued "as there were often no physicians, operating room crews, or X-ray technicians in the hospital round the clock, nor were adequate blood banking facilities available."

He noted that many rural hospitals never will be able to afford the staffing specialists and blood banks to provide adequate emergency medical service.

"There is no sense improving transportation to such hospitals until they can offer better quality care for the injured patient," Frey said. "There are, small rural medical facilities should either be bypassed or act as resuscitation stations."

To develop a regional plan the activities of organizations responsible for emergency medical service without certain geographic limits must be coordinated and integrated "through a

regional council composed of participating members."

Planning is the responsibility of physicians who can best recognize deficiencies in emergency room equipment, training of rescue workers, standards for ambulance services, the need for rapid transport and communication, availability of blood and other factors.

Physicians also, he added, "have a responsibility to inform the public of the need to improve emergency medical service."

"THE MEDICAL PROFESSION can best appreciate and inform the public that the way to improve the care of the injured and ill in rural and mountain areas of the United States where mortality is highest, is through tax support and the regional planning of emergency medical service."

"Why has the community been slow in recognizing the need for tax support of emergency medical services whereas it supports fire and police departments?" Dr. Frey asked. "Historically the community has faced the problem of fire and violence for thousands of years. In response, it has organized police and fire departments."

"Only in the last 30 years has emergency medical service become a practical reality. Until the advent of the helicopter and better design of rescue vehicles, it was not possible to deliver victims of injury to a medical facility for hours or days."

"On reaching a medical facility 30 or 40 years ago, there was very little that could be done

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Winter Sports

Winter sports enthusiasts will find that several facilities are in operation at Stony Creek Metropolitan Park near Utica and Kensington Metropolitan Park near Milford.

A more lengthy period of lower temperatures are needed

In Full Swing At Metro Parks

to get sports facilities open at Metropolitan Beach near Mt. Clemens and Lower Huron Metropolitan Park near Belleville.

STONY CREEK METROPOLITAN PARK near Utica reported ice is four to five

inches thick on Stony Creek Lake, with open water in the middle of lot lake and no skating at present. Pike, bluegills and crappies inhabit the lake.

There are three rinks at the Winter Cove picnic site on the lake, with one for general skating plus two hockey rinks. A warming shelter is at the site. Skating hours are 9 a.m. to dusk.

There is some snowcover in the park, with the hills at the Oakgrove picnic site good for sledding. Toboggans may be used, but there are no developed toboggan runs in the park.

The nature center and nature trails are open daily, except Mondays (and Christmas and New Year's Day). Hours are 9 a.m. to dusk. The nature center is closed mornings during the week, when it is used by school groups.

Park hours are 8 a.m. to 10 p.m. For additional information call the park: Phone 781-4242.

KENSINGTON METROPOLITAN PARK near Milford has six to eight inches thick on Kent Lake in the 4,300-acre park. There are only a few shanties on the lake. Bluegills and crappies are the primary catches.

The ice rinks are located in front of the boat rental building, with two for general skating and two hockey rinks. The ice is in fair condition and could improve with colder temperatures. Limited food service is available. Hours vary. Skating hours are 10 a.m. to 10 p.m. daily, depending upon weather conditions.

The park's four toboggan runs are closed at present, with three developed runs for advanced tobogganists and a smaller run for children. Light snow cover will probably provide adequate sledding conditions. These facilities are located at the Winter Sports Area and there is a warming shelter.

The nature center and nature trails are open daily, except Christmas and New Year's Day. Trail hours are 9 a.m. to dusk. During the week the building is closed mornings for school group use.

Park hours are daylight to 11 p.m. For additional information call the park: Phone 685-1561 (Milford).

PARK PERSONNEL suggest all persons use care on all lakes in southeastern Michigan since winter conditions vary from day to day.

Metropolitan Beach near Mt. Clemens, Hudson Mills Metropolitan Park and Delhi and Dexter-Huron Parks, each northwest of Ann Arbor, and Lower Huron Metropolitan Park near Belleville are also open "year-around."

For information on winter facilities at these parks persons may contact: Metropolitan Beach (HO 3-4381 or WO 3-3021); Lower Huron Metropolitan Park (687-9181); and for Delhi, Dexter-Huron and Hudson Mills Parks (426-8211).

Persons, who have not yet received a Metropark Guide, may request one by writing to Metropark Guide, % Huron-Clinton Metropolitan Authority, 1750 Guardian Building, Detroit, MI 48225 or calling 961-5865. The Metropark Guide for 1969-70 was introduced in August of this year.

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A If a drop in pressure occurs, the downhole safety valve works, within seconds, to seal in the gas in the underground storage fields.

Q What could cause a drop in pressure in the gas storage fields?

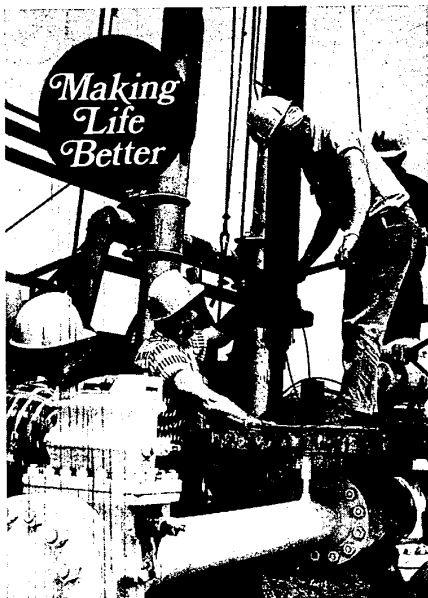
A Wellheads stand above the ground, so they are exposed to the elements and to the possibility of accidental damage by aircraft or surface vehicles. If a wellhead should be damaged or ripped away, a drop in pressure would occur. The downhole safety valve would react automatically.

Q What about gas pipelines? How does Consumers Power guard against pipeline leaks?

A The company uses mobile leak detection units to survey 15,000 miles of natural gas transmission and distribution mains each year. These units sniff out a leak or break in the system and mark it for repair. Each year the company also digs up, cleans, inspects and re-tests many, many miles of older gas pipelines.

Q Are these safety precautions adequate to prevent any interruptions in gas service?

A These are just a few of the company's safety measures. Most importantly, the gas control center in Jackson oversees the company's entire gas distribution system. Within this center, a complex data acquisition and control unit scans 600 checkpoints in the gas system throughout the 12,512-square mile gas service area. Every two minutes this electronic watchdog checks gas pressure, flow, density, temperature and specific gravity at each checkpoint. It alerts technicians before a serious problem has a chance to develop.



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