

**EMS 50TH
Anniversary
Celebration**



March 21, 2019

1969 1970 1971 1972 1973



1974 1975 1976 1977 1978



1994 1995 1996 1998 1999



2015 2016 2017 2018 2019



Heart and Hand

*There's no method of predicting
What the next response requires;
How the people will accept you,
Be it hearts, or minds, or fires.
But it really doesn't matter
What your duty now demands;
Cause the challenge is in knowing
That a life is in your hands.*

*You'll bring hope to someone hopeless
While the others wait in tears.
You'll see someone's candle flicker
Then spring back to glow for years.
And of course, there will be some
Who can't deny the final bow,
So you'll pull yourself together
And renew your silent vow.*

*Take the Hippocratic hand to
Those who need it, where and when
Other help cannot be granted.
Be a comforter to men.
Be the one who uses heart and hand,
To keep a life intact
Cause you care - O Paramedic,
And you know, and think, and act.*

H. Eiland

Thank you...

to the outstanding men and women who have worked tirelessly to develop the foundation of the EMS system that we have today.

F&A is proud to sponsor the EMS 50th Anniversary Celebration recognizing a fine group of hard working individuals.



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1969 at Harbor General Hospital





Los Angeles County Emergency Medical Services Agency
in partnership with



County of Los Angeles Fire Museum Association
host the

EMS 50th Anniversary Celebration

Los Angeles County Fire Museum

9834 Flora Vista Street

Bellflower, CA 90706

5:00pm



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Harbor General Hospital's First Paramedics



First Paramedics Trained at Harbor General Hospital - 1969

Robert Belliveau, Dale Cauble, Gary Davis, Gerald Nolls, David Phillips, Robert Ramstead, William Crow, Rocky Doke, Richard Neal, William Rideway, Mike Stearns, Ed Arnold, Ralph Brownell, Walter Hartsucker, Chaude Griggs, Dennis Grogan, Jim Nelson

Daniel Freeman Hospital's First Paramedics



First Paramedics Trained at Daniel Freeman 1970

Charles Bender, Lee Gustafson, Bill Miles, Roy Berlsom, Tim Conde, Richard Kissam, Dan Morgan, Tarry Schwartz, Dale Geldert, Dennis Kirvin, David Pickert, Renny Bowden



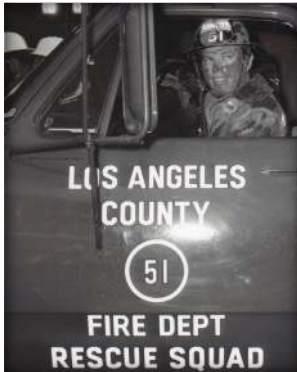
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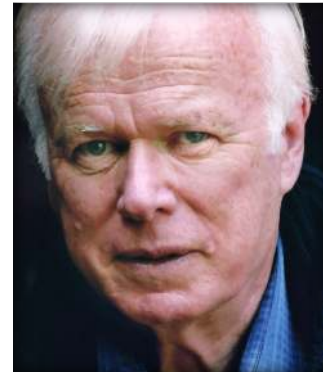


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50th ANNIVERSARY PROGRAM



Special Guest and
Keynote Speaker
Kevin Tighe
from the show
Emergency!



5:00pm—6:00pm

Guest Registration

Hors d'Oeuvres, Cocktails, Sparkling Water
(Limited Hosted Bar - Cash Bar)
Historical Photo Presentations

6:00pm—8:30pm

Sit-Down Dinner

Welcome / Introductions

Cathy Chidester, Director, LA County EMS Agency
Paul Schneider, President, LA County Fire Museum

Los Angeles County Fire Department Honor Guard

EMS: Fifty Years of Service Excellence and Beyond

Daniel H. Birman Productions, Inc.
Daniel H. Birman, President
Megan Chao, Vice President, Development and Production

LA County Board of Supervisors Scroll Presentation

Janice Hahn, Fourth District

7:15pm—7:45pm

Break— continue Dinner



7:45pm—8:45pm

EMS Through The Decades

- 1969 – 1979 Cathy Chidester
Carol Bebout
Dr. Ronald Stewart

- 1980 – 1989 Virginia Hastings
Chief Larry Miller
Chief William Bamattre

- 1990 – 1999 Dr. Samuel Stratton
Chief Anton Beck
Dr. Baxter Larmon

- 2000 – 2009 Carol Meyer
David Austin
Dr. Jodi Nevandro

- 2010 – 2019 Dr. Marianne Gausche-Hill
Chief Daryl Osby
Jenny Van Slyke

Great Save by EMS

Andre Raya, Captain/Paramedic
Los Angeles Fire Department

Closing Remarks

8:45pm—10:00pm

Guest Mingle

10:00pm

Anniversary Celebration Ends



1969 1970 1971 1972 1973 1974 1975 1976 1977 1978 1979 1980 1981 1982 1983 1984 1985 1986 1987 1988 1989 1990 1991 1992 1993 1994



HISTORY OF EMERGENCY MEDICAL SERVICES IN LOS ANGELES COUNTY

Los Angeles County has one of the largest and most diverse Emergency Medical Services (EMS) systems in the country. It serves over 10 million residents in 88 cities, covers over 4,000 square miles of deserts, mountains, valleys and beaches, and attends to virtually every prehospital care situation that can be expected to occur in the County's urban, rural, and wilderness areas.

Prior to the establishment of the official EMS system in 1970, there was no consistent method for responding to sudden injury or illness. The patient may have self-transported to a local physician or hospital; bystanders may have rendered care and/or transportation; local physicians may have visited the patient at home; or an ambulance (usually owned and operated by a private mortuary) may have been called to take the patient to a nearby hospital or local physician. The mechanisms of transport and treatment of emergency patients in Los Angeles County varied from city to city and often from neighborhood to neighborhood.

Over the past fifty years, many geographic, political, organizational, medical, and economic issues have melded together to influence the growth and development of the EMS system. Los Angeles County has been at the forefront of this development; from initiating one of the first paramedic training programs in the country to influencing the passage of many local, state and national laws. Today, Los Angeles County continues to be a national model in the field of emergency medical services.





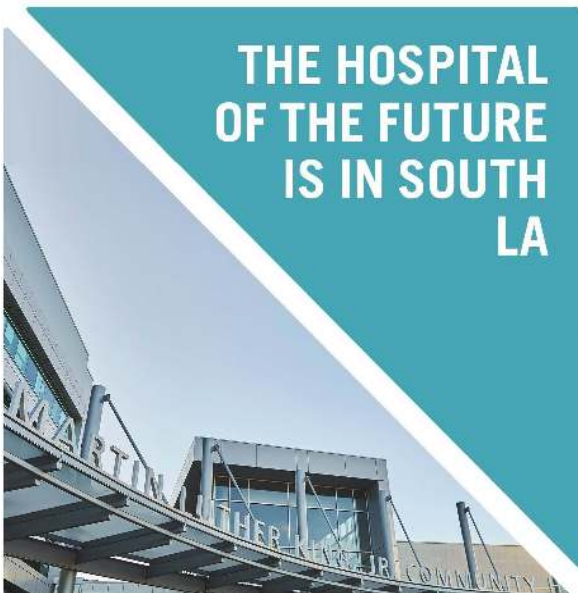
HISTORY MILITARY INFLUENCE

Throughout history, military campaigns have driven the progression of transportation and treatment of the ill and injured. Minimizing the number of deaths and facilitating the recovery of the injured have always been major concerns during warfare. As a result, many present-day emergency techniques and services are based on military instituted studies and programs, such as the development of ambulances, transport litters and field hospitals, Military Anti-Shock Trouser (no longer used), rapid extrication, triage, and early treatment.

Los Angeles County, along with other areas of the country began to recognize that deaths from various diseases and trauma could be prevented by rapid transportation and early field treatment of patients. This concept was validated during World War II when mortality rates decreased as soldiers were treated and rapidly transported to military field hospitals.



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Martin Luther King, Jr. Community Hospital

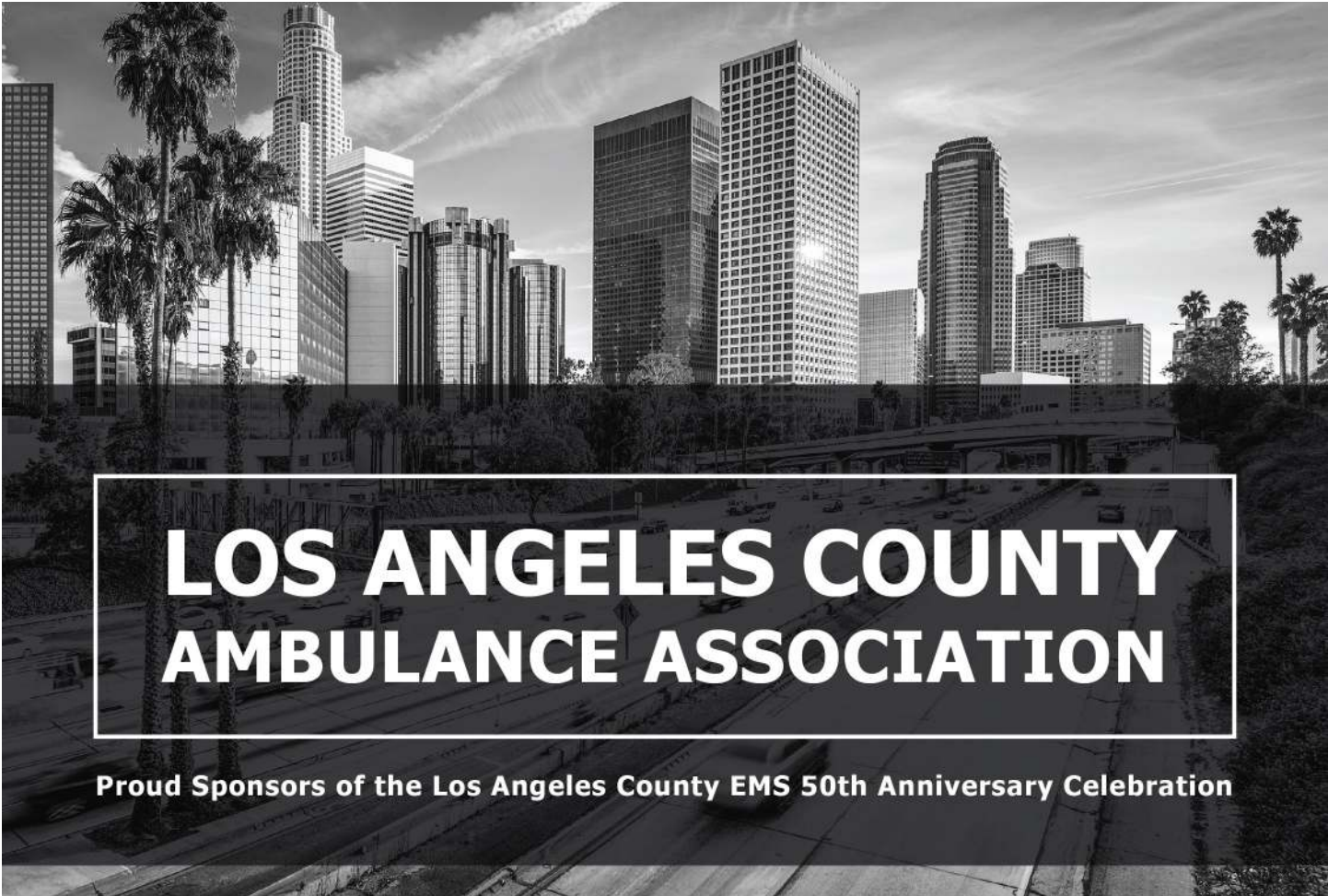


Congratulations to the Emergency Medical Services (EMS) Agency on celebrating 50 years of public service in Los Angeles County.

Thank you for your commitment to our community!



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CONGRATULATIONS TO THE
LA COUNTY EMS AGENCY
for their



LACCA Officers

LOS ANGELES COUNTY
AMBULANCE ASSOCIATION

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HISTORY

RESEARCH INFLUENCE

Between 1963 and 1967, the concept of emergency care in the United States was being broached on several fronts.

Committees on trauma, shock and anesthesia and special task forces from the National Academy of Sciences-National Research Council (NAS-NRC) examined the status of emergency medical care provided to victims of accidental injury. The resulting NAS-NRC report, titled Accidental Death and Disability: The Neglected Disease of Modern Society (1966), drew critical attention to the topic of ambulances and ambulance attendants and led to the establishment of standards for training, equipment and dispatch. The report also recommended the use of “pilot programs” to determine the efficacy of providing physician-staffed ambulances for care at the site of injury and during transportation.



During the same year, Congress passed the Highway Safety Act of 1966, which was prompted by the high number of deaths caused by traffic accidents each year. This act provided a major impetus for the development of a national EMS system and the standardization of an educational curriculum for emergency medical technicians.

Meanwhile, physicians in the United States were studying ways to improve the survival rate of cardiac patients. They were aware of prehospital care efforts throughout the world, including a Russian program in the early 1900s, which dispatched a doctor, nurse and a special physician’s assistant to treat patients in the field. In 1961, Germany began using ambulances staffed with a physician to treat patients in the field. Six years later, the first published study defining a Mobile Coronary Care Unit (MCCU) was conducted in Belfast, Ireland by Dr. Frank Pantridge. He demonstrated that heart attack victims who were treated early in the field by physicians in ambulances had lower mortality and better long-term survival rates.

**CONGRATULATIONS EMS ON
50 YEARS OF PROVIDING HIGH
QUALITY, INNOVATIVE SERVICE
TO THE CITIZENS OF
LOS ANGELES!**

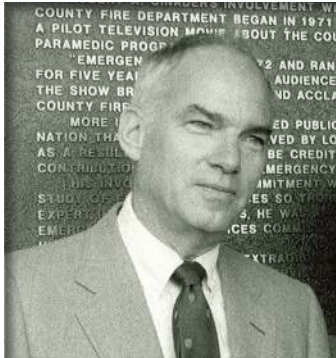
**MAY THE NEXT 50 YEARS SEE
EVEN GREATER ACHIEVEMENTS!**

**DR. DAVID HILL
AND
DR. MARIANNE GAUSCHE-HILL**



HISTORY

PILOT PROJECTS



Dr. J. Michael Criley

In Los Angeles County, Drs. J. Michael J. Criley and Walter Graf were also working to improve the survival rate of heart attack victims.

While each physician took a unique path in his search for improved cardiac care methods, both were instrumental in molding pre-hospital care medicine and providing the foundation from which it has developed. Ultimately their paths converged and their original concepts expanded into what became the Mobile Intensive Care Unit Paramedic.

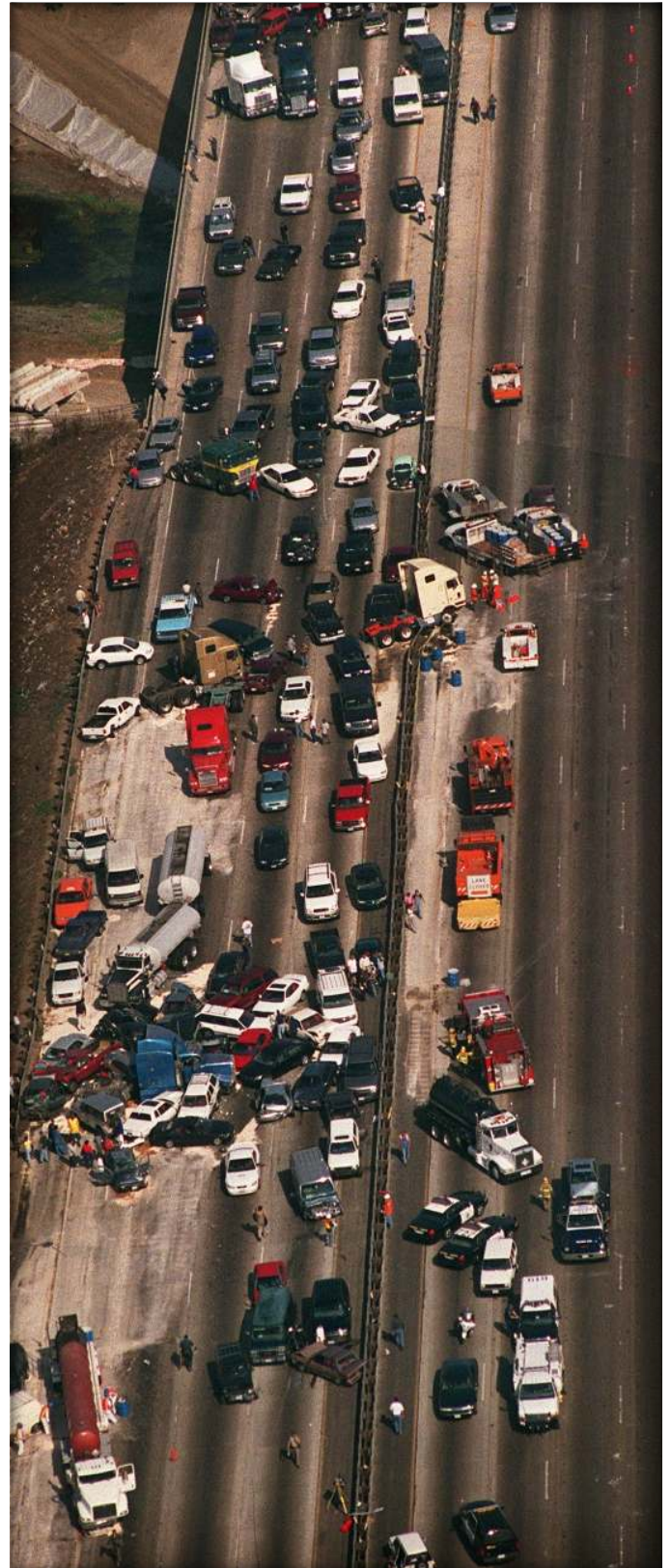
In 1969, Dr. Walter Graf, President of the Los Angeles County Heart Association, spearheaded a MCCU program in the Inglewood-Centinel area. A large, white vehicle owned by McCormick Ambulance and referred to as the “Heart Car” was equipped with a cardiac monitor, defibrillator, and radio communication equipment purchased through donations. The Heart Car was one of three such ambulance programs in the United States, the others being in New York City, New York and Columbus, Ohio.



Dr. Walter Graf

With the success of the pilot program, rapid transport and treatment en route to the hospital had proven to be an effective means to decrease morbidity and mortality.

...continue—page 17...



A chain-reaction pileup 710 Freeway—Nov. 3, 2002



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50 years of service



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HISTORY PILOT PROJECTS

Soon afterwards, the Board of Supervisors and community leaders met to consider the best way to deliver emergency care in the County. After lengthy debate, they decided to train fire department personnel as paramedics based on a variety of factors: the fire department’s existing infrastructure, the availability of personnel 24 hours a day and 7 days a week, the wide distribution of fire stations throughout the County, the existence of an established communications system, and a history of successfully training firefighters to provide first aid. Spearheaded by Supervisor Kenneth Hahn, the new pilot program would train firefighters as paramedics to provide emergency services throughout Los Angeles County.

In 1969, six firefighters from the Los Angeles County Fire Department and 12 firefighters from the Los Angeles City Fire Department were trained at Harbor General Hospital (HGH) under the guidance of Dr. Criley and Critical Care Nurse Carol Bebout to be the County’s first paramedics. Within the same time period, Dr. Graf began training paramedics at Daniel Freeman Memorial Hospital.

On December 8, 1969, Rescue Heart Unit, a green Plymouth station wagon obtained from the Division of Forestry became the first official Los Angeles County Fire Rescue Unit placed into service. Headquartered at



Fire Station 59 on the grounds of HGH, the station wagon was quickly repainted fire engine red and lettered “Rescue Heart Unit.” This unit was capable of communicating with HGH, but did not have telemetry equipment in place to transmit data on heart activity. Within a few days of service, Squad 59 registered its first patient save, Clement Demuth, who was resuscitated from a full cardiac arrest after choking on food in a restaurant.

Whenever a call came in, the red station wagon would roll out of Fire Station 59 at the same time a cardiac nurse from HGH’s Coronary Care Unit (CCU) was alerted to the “run.” The nurse would race down four flights of stairs to meet up with the rescue unit just as it was pulling up outside the back door of the hospital. The nurse

would ride along with paramedics, since the law at that time permitted only doctors and nurses to administer medication and defibrillate patients. After about six months of operation, difficulties arose in continually “borrowing” a nurse from the CCU each time a call came in.

Efforts were underway to alleviate this problem, but medical legislation would have to be passed to allow paramedics to legally administer care without requiring the accompaniment of a nurse.



HISTORY WEDWORTH-TOWNSEND PARAMEDIC ACT

Enter the Wedworth-Townsend Paramedic Act. This act proposed that firefighters be certified to perform some of those procedures traditionally reserved for doctors and nurses. It defined the role of the Mobile Intensive Care Nurse (MICN), further defined the paramedic practice and allowed paramedics to function without the presence of a physician or nurse.

Dr. John Affeldt, Medical Director of the Los Angeles County Department of Health Services, worked with five others, including Drs. Criley and Graf, on the content of the proposed state law. The office of County Counsel transformed this content into appropriated statutory language and the draft legislation was presented to the Board of Supervisors in January 1970.

Soon after, Senator James Q. Wedworth and Assemblyman Larry Townsend jointly introduced the bill in both houses of the State. Together with Supervisor Hahn, Senator Wedworth and Assemblyman Townsend drove the bill through legislative process against opposition by many powerful interest groups.

Assemblyman Larry Townsend (left) and State Senator James Q. Wedworth (right), sponsors of the Wedworth-Townsend Act, join with Supervisor Kenneth Hahn in watching Governor Ronald Reagan sign the historic bill into law on July 14, 1970.



In a direct effort to stifle opposition, language was included to allow only a county with a population greater than six million to initiate a pilot program. Los Angeles was the only county in the state to qualify under this restriction at that time. By eliminating the other counties from mandatory or voluntary participation in the pilot program, legislators from those counties would not feel responsible for having to take part in it.

It appeared to many in the medical community that this new paraprofessional would “de-professionalize” other areas in medicine. For instance, the paramedics were being given the authority to administer medications. Even nurses had only owned this privilege for a relatively short period of time.

...continue—page 21...



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Avanti Hospitals is proud to support the Emergency Medical Services' (EMS) 50th Anniversary Celebration

Thank you to all the men and women who work tirelessly each day to serve their communities. We are grateful for your service, today and every day.

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Los Angeles, CA

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HISTORY WEDWORTH-TOWNSEND PARAMEDIC ACT

Therefore, it is understandable that both the California Nurses Association and the Emergency Department Nurses Association opposed the legislation. Since long standing professional medical codes were being modified, the Medical Society opposed the legislation. Additionally, the California Ambulance Association and California Bar Association opposed the bill, citing concerns that there was no legal recourse for malpractice against the paramedic.

Governor Ronald Reagan was set to veto the bill.

Upon hearing the news, Supervisor Hahn immediately flew to Sacramento to meet with the Governor. While explaining how the paramedic program would extend throughout the county, Supervisor Hahn placed his thumb on the Governor's desk and drew an imaginary circle. He explained that his thumb represented Daniel Freeman Hospital and named the surrounding cities to be serviced by paramedic units: "This is Inglewood, this is Culver City, this is Hawthorne."

Governor Reagan stopped Supervisor Hahn and said, "Do you mean this program will cross city boundaries?"

The Supervisor responded, "yes it will."

Governor Reagan recounted how his own father had died of a heart attack due to the refusal of an ambulance crew to cross jurisdictional boundaries.

On July 14, 1970, the Wedworth-Townsend Act was signed into law.





HISTORY

“EMERGENCY”

By 1972, the paramedic program was well under way, supported by federal grants and expanding to cities throughout the country. NBC-4 Producer Robert Cinader became curious about the potential of a television program featuring this new paramedic program. He initially visited Los Angeles County Fire Station 7’s paramedic squad and subsequently spend time with Station 36. Following negotiations with the fire department, the television show “Emergency!” was produced. One important stipulation for the show was that: “All emergency incidents portrayed must have actually occurred and must be presented in an authentic fashion.”

Randolph Mantooth was recruited to play John Gage and Kevin Tighe was selected to play Roy DeSoto. This prime-time television show was so successful in its portrayal of the County’s paramedic program that when the word “paramedic” was mentioned, people across the nation visualized the familiar Squad 51 truck and the actors who played the role. Numerous employees of the



County Fire Department, particularly Battalion Chief James O. Page and Public Information Officer Friend, were involved in the production of the show as technical advisors and script consultants. Many of the firefighter paramedics served as technical directors, extras and consultants to the program’s producers. “Emergency!” introduced the public to paramedics and was instrumental in the development and expansion of paramedic services throughout the nation.



After the show “Emergency!” was taken off the air, the 1972 Dodge “Squad 51” was generously donated by Universal Studios/NBC-4 to the Los Angeles County Fire Department. It was then subsequently donated to the County of Los Angeles Fire Museum. In 1998, following the reunion of the “Emergency!” show cast, the Museum sponsored the restoration of Squad 51 and began a tour across the United States, culminating in Washington D.C. in 2000. Along with props and equipment from the show such as the biocom, defibrillator and turn-out-coats, the original paramedic training text written by Dr. Ron Steward was donated to the Smithsonian Institute’s National Museum of American History. Squad 51 remains the property of the County of Los Angeles Fire Museum and can be seen at various community events.



Mr. Cinader served as a Board of Supervisor’s appointee to the Emergency Medical Services Commission for many years. Along with Drs. Criley and Graf, Cinader played an instrumental role in developing the County’s Trauma Center Network. Mr. Cinader was a good friend to EMS and brilliant advisor. After his death in 1982, Los Angeles County Fire Station 127 was dedicated in his name.



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HISTORY STAFFING ORDINANCE

In 1979, the Board of Supervisors adopted a Motion requiring Advanced Life Support (ALS) Units be staffed with two licensed paramedics. This issue became extremely complicated and saw the formation of a paramedics union, the United Paramedics of Los Angeles (UPL). UPL addressed the “constant manning” staffing problems both city and county fire departments experienced before and after Proposition 13, which capped property tax rates in the state and resulted in loss of funding to city and county services, including firefighter personnel.

Though we remain a two-paramedic system, staffing configurations have been developed and unit apparatus have been augmented to meet the needs of our communities. Today, paramedics can be found working on helicopters, boats, bicycles, and private ambulances, providing care during interfacility transport.

EMERGENCY MEDICAL SERVICES COMMISSION

Prior to 1979, there were two advisory commissions for emergency medical services in the County. Both the County Paramedic Commission and the state-mandated Emergency Medical Care Commission were disbanded by the Board of Supervisors and replaced with a new Emergency Medical Services Commission, which represented all major elements of the County’s EMS system. Today, the EMS Commission is made up of nineteen members and is advisory to the EMS Agency, making recommendations on policy, system issues and conducting public hearings on EMS-related issues.

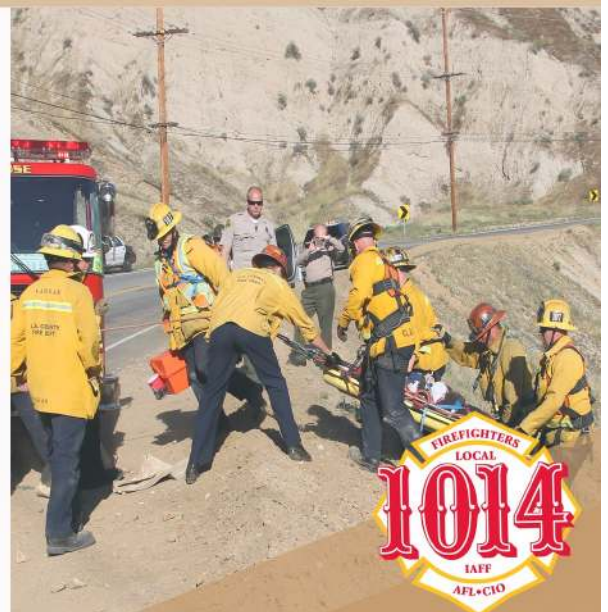
CONGRATULATIONS ON 50 YEARS OF LEADING THE NATION IN EMS SERVICES

On behalf of the 3,200 Members of the Los Angeles County Firefighters, IAFF Local 1014, we congratulate the Los Angeles County Emergency Medical Services (EMS) Agency on 50 years of service to Los Angeles County.

Our Los Angeles County Fire Department was the first Fire Department in the nation to train Paramedics under a nationally accredited paramedic program with the passage of the Wedworth-Townsend Paramedic Act of 1970.

We are proud to be part of the long tradition of innovation in health care. Responding to over 400,000 calls for service each year, our EMS providers offer first-class emergency medical services to the 4 million residents we serve across the incorporated communities of Los Angeles County and our 59 contract cities.

The Los Angeles County Firefighters Local 1014 Executive Board





HISTORY

DESIGNATION OF CLEAR OPERATIONAL AUTHORITY

The passage of the Wedworth-Townsend Act of 1970 allowed for the continuation of paramedic services in Los Angeles County. Additionally, it authorized the Department of Health Services to certify and decertify paramedics but it did not designate a body of authority.

In 1979, an informal group of physicians, nurses, and paramedics calling themselves the Paramedic Study Group critically examined the Los Angeles EMS System. The group came to the conclusion that “someone,” an authority body with clear operational authority, needed to assume the overall responsibility for the coordination, evaluation, and administrative development of the County’s paramedic program.

These issues were addressed with the Emergency Medical Services Act and Emergency Medical Care Personnel Act (Senate Bill 125) was signed into law in November 1980. This law mandated state responsibility for EMS by designation of a state EMS Authority and local EMS Agencies. The Los Angeles County Board of Supervisors authorized the county’s Department of Health Services to fill this role, and for the first time in the paramedic program’s history, a clear line of authority for such issues as approval of EMS training programs, designation of paramedic base hospitals, certification and recertification of prehospital health care personnel, and standardization of both equipment and public education became centralized within one organization.


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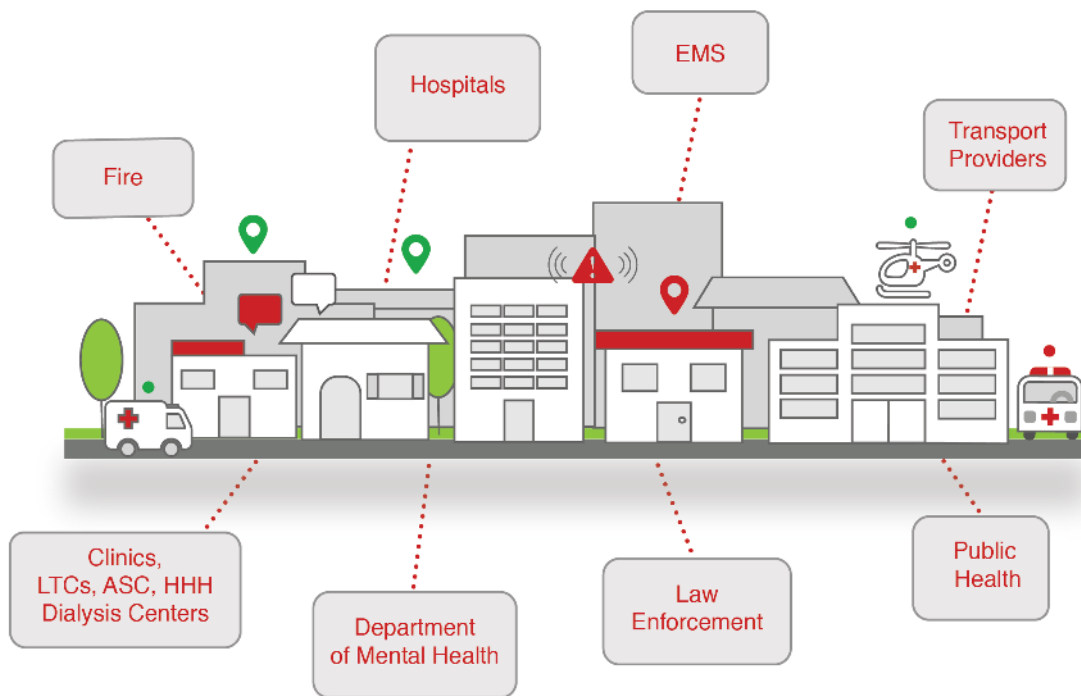
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HISTORY

IMPLEMENTATION

Today, emergency medical services (EMS) operate under the Health and Safety Code and Title 22.

While individual cities have implemented their EMS programs with slightly different configurations, the local EMS Agency ensures that the emergency care provided to the public is coordinated. Today, our paramedics' and EMTs' practice policies and procedures are developed with input from constituents through the EMS Commission and are much more likely to be based on solid research.

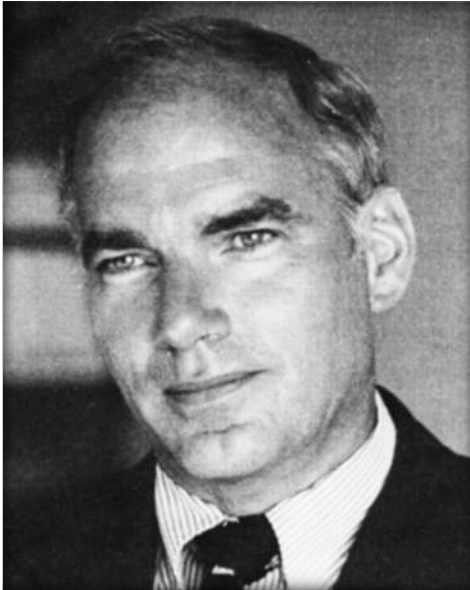
We are proud of the pioneering and leadership role that the Los Angeles County has played in the EMS arena. Today, the County's emergency paramedic provider agencies respond to over 700,000 9-1-1 calls a year. Approximately eighty percent of the calls to fire departments are for medical emergencies and paramedics have proven to be extremely resourceful and creative when applying core emergency medical skills under adverse conditions.

With the advent of new medications, equipment, technology and research, the future will continue to call for changes in prehospital care practice. However, the cornerstone of prehospital emergency care is truly the frontline paramedics and EMTs who play a vital role in the safety net of emergency services for the County and provide compassionate and quality care to the communities they serve.





Dr. J Michael Criley



The training of paramedics in Los Angeles County began in 1969 at what was then called Harbor General Hospital. Nurse Carol Bebout and I adopted the training curriculum from one that we developed to train nurses for the Coronary Care Unit (CCU), which consisted of basic cardiac physiology, physical assessment, electrocardiographic (ECG) heart rhythm analysis, emergency drugs, CPR, and defibrillation.

After completion of six months' instruction, six Los Angeles County Firefighters—Robert Belliveau, Dale Cauble, Gary Davis, Gerald Nolls, David Phillips, and Robert Ramstead—were assigned to a defunct fire station on the Harbor General campus. There they used a decommissioned station wagon from the Forestry Service to respond to rescues. The name put on the vehicle was “Heart Rescue Unit” and there were seeds and weeds in the storage area

where they carried medications, resuscitation equipment, defibrillator, and Bio-Com (radio transmission of ECG).

Between rescue calls, the newly trained paramedics worked in the CCU, examining patients, starting intravenous (IV) lines, and participating in the management of life-threatening arrhythmias and resuscitations from cardiac arrest. The principal focus of training was on cardiac emergencies since it was known at that time that cardiac arrest caused by arrhythmias could potentially be overcome by prompt CPR, intravenous medications, airway support, and defibrillation. Physicians and nurses at the base station receiving emergency responses and ECG transmissions from the field provided consultation and supervision.

When emergency rescue calls were received, the paramedics, accompanied by a CCU Nurse would descend the fire escape and drive to the scene in the “Heart Rescue Unit.” The nurses' presence was required because the enabling legislation (Wedworth-Townsend Bill) was not enacted until the following year. The late Supervisor Kenneth Hahn personally coerced Governor Ronald Reagan into signing the bill despite objections from physicians' and nurses' lobbies. Seventeen paramedics have been trained for service in the Los Angeles County and City Fire Departments when the legislation was finally passed.

A Paramedic Training Institute was developed on the Harbor campus in order to increase class size and provide service to the millions of residents in the Greater Los Angeles area. The training curriculum was expanded to cover other life-threatening emergencies, including trauma, poisoning, and drug overdoses.

The synergy that developed between the paramedics and the emergency rooms that receive the patients mutually strengthened both modalities. It stimulated the development of prehospital emergency services and led to better emergency rooms across the country and abroad.



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UCLA SCHOOL OF MEDICINE
DEPARTMENT OF MEDICINE
1000 CARSON STREET
TORRANCE, CALIFORNIA 90509

June 12, 1981

The Honorable Supervisor Kenneth Hahn
Supervisor, Second District
County of Los Angeles Board of
Supervisors
866 Hall of Administration
500 West Temple Street
Los Angeles, CA 90012

Dear Supervisor Hahn:

Although I am extremely flattered and honored to have my name on the Paramedic Institute, I would have preferred that the Institute bear your name. Without your energetic support, all of the well-intentioned ideas that any of us might have had to develop a pre-hospital emergency system in Los Angeles County would have been in vain, and in my heart, I will always give you the credit for making it possible.

Once again, let me thank you for taking prompt action in helping the Paramedic Training Institute overcome their space problem. The new construction is now complete, and we look forward to showing it to you. I only wish it could have your name on it instead of mine.

Sincerely,

J. Michael Criley, M. D.
Professor of Medicine and
Radiological Sciences
UCLA School of Medicine
Chief, Division of Cardiology
Harbor-UCLA Medical Center

JMC:af

CC: Ronald Crowell, M. D.
Virginia Price

JUN 16 1981



Dr. Walter Graf



A major advance in patient care occurred in 1963 with the institution of the Coronary Care Unit (CCU). This was started by a general practitioner in Missouri who had an important idea, to utilize a separate hospital area to observe and monitor patients with heart attacks and authorize nurses in such units to initiate emergency care procedures when potentially lethal heart rhythms occurred. Rather than waiting for a physician to be called to the patient, which decreased the likelihood of a favorable outcome, these nurses would be trained in arrhythmia recognition, CPR, and appropriate medication needed for intervention.

It took three to seven years for the hospitals of Southern California to latch onto this concept but Daniel Freeman Hospital was the first hospital on the west coast with a CCU, just three weeks after the original report came out in the Journal of American Medical Association. The hospital administration converted two patient rooms to a CCU, three shifts of nurses received special

training, and the medical staff approved specific emergency orders for all CCU patients. It was obvious that rapid emergency care by on-site nurses saved lives which would have otherwise been lost because of the time lag for physician response.

From this experience came a new development. Dr. Frank Pantridge, of Belfast, Ireland, knew that fifty percent of heart-attack patients died en route to the hospital. They died mainly from the first hour frequency of fatal heart rhythms which were preventable and correctable. So in 1966, he developed a program with St. Mary's Hospital, a physician and a nurse were dispatched from the hospital wherever there was a call for an ambulance to transport a heart-attack patient. The fifty percent mortality disappeared.

In this country, several modifications of the Belfast program were tried. In Pasadena, a physician was dispatched with each ambulance on a heart-attack call. But it became impractical to have doctors sitting around waiting for such calls. In Dade County, Florida, paramedics were taught how to defibrillate and were dispatched with a nurse. The patient's EKG was radioed to a hospital physician who could then authorize the use of the paddles under nurse supervision. By 1971, there were 26 similar programs in American cities. In one mid-western city, an attempt was made to utilize police department as paramedics but the department refused to cooperate. Here, in Los Angeles, Dr. Michael Criley at Harbor General Hospital initiated a program training a group of firemen in EKG rhythm recognition and having them go on ambulance runs along with a nurse. The concept of using just a CCU nurse to accompany the patient in a modified ambulance was put into effect at Daniel Freeman, Centinela and Hawthorne in 1969 under a pilot program sponsored by the L.A. County Heart Association. The ambulance, stationed at McCormick Ambulance Company in Inglewood, became an extension of the CCU. Borrowing a nurse from the CCU to ride in the ambulance created a small time delay and was not without other problems. But many lives were saved.



The ideal way to shield these patients while being transported to the hospital would be to have trained ambulance personnel or firemen (i.e., paramedics) aboard. But state law would have to be written to allow this, as L.A. County Supervisor Kenneth Hahn pointed out to me. To achieve this, he induced Senator James Wedworth to allow me to meet with him in Sacramento and the law was written. Senator Wedworth brilliantly inserted one sentence which insured the passage of the Act by both houses. The sentence began, “Any county with a population over six million may do the following.” Since Los Angeles County was the only one with a population over six million, this law did not apply to any other county and their representative could not reasonably object to it. So it passed easily.

However, then Governor Ronald Reagan phoned Kenny and said, “Kenny, I have to veto this bill because the C.A.N. is against it since the paramedics will be doing more than nurses do, and the C.M.A. is against it because patients will go to base station hospitals where their doctors may not be on staff and some other doctor will take over, and the C.Bar.A. is against it because the law holds the paramedic free from malpractice suit.”

Kenny flew up to Sacramento, sat down with Governor Reagan, and convinced him to sign the bill on July 14, 1970. Less than three weeks later, on August 3, 1970, Daniel Freeman had interviewed and selected interested paramedic candidates from L.A. County Fire Department, hired nurse and physician instructors, developed a curriculum, purchased all necessary training equipment, hired clerical support, developed didactic and skill training tests and criteria, made multiple housing arrangements for clinical training, and arranged for ambulance run training for the students and the first paramedic class trained under the Wedworth-Townsend Act was started. The scope of paramedic function was rapidly expanded to include additional emergencies and the training period was lengthened from thirteen days to two months, to five and a half months, and now, to seven and a half months.

In the past hundred years, medicine has gone from the Middle Ages to the Renaissance and paramedics are one of the jewels in the crown of medical care.



“Heart Car”— implemented in 1969 by Dr. Graf as one of the first Cardiac Care Units in the United States



Carol Bebout

One of the first Mobile Intensive Care Nurse (MICN) to “man” the base station and ride along with the paramedics was Carol Bebout, whose story follows:



Things were changing in the late 1960's. Many people were pushing for an emergency medical system that would more efficiently handle the needs of the public in the field setting, beyond basic first aid. Dr. J. Michael Criley, Chief of Cardiology at Harbor General Hospital, went to Ireland to study a colleague's emergency response system, which only addressed cardiac issues. When he returned, he envisioned the basics of a system that would put trained personnel in the field to treat cardiac emergencies. In Dr. Criley's model, firefighters were the primary source of pre-hospital care because they were already in the field responding to emergencies and rendering first aid. Firefighters had already been given training in CPR, they worked 24 hours and had an established communications system.

Carol Bebout, who was the head nurse of the Coronary Care Unit (CCU) at Harbor General, was pressed into service, first to teach in the paramedic program and then to ride with the Mobile Intensive Care Unit (MICU) teams as a licensed personnel.

Squad 59 (stationed on the grounds at Harbor General), Squad 127 (based in Carson) and Los Angeles City Rescue 53 (based in San Pedro), were the first units chosen for paramedic training in 1968-69. The first paramedic course was comprised of two months of didactic education, one month of clinical education, and two months of internship in the field with a CCU nurse. After initial training was completed, a suitable vehicle was sought. The first paramedic ambulance was a surplus 1959 station wagon donated by the forestry service. According to Bebout, besides having to stock the vehicle and clean it, the wheel wells had to be cleared of sprouting tree saplings, a large siren was added, and the number “59” was painted on the unit, signifying Squad 59, the first Mobile Intensive Care Unit in the County.

Bebout remembered that the fun began when a call came in, Squad 59 would radio the CCU. The designated CCU nurse would then have to run down four flights of stairs at the west end of the hospital to the street corner and wait for the squad to pick her up to go on a call. After assessing patients in the field, the run would then be handled by cardiology fellows and medical residents who were staffing the CCU.

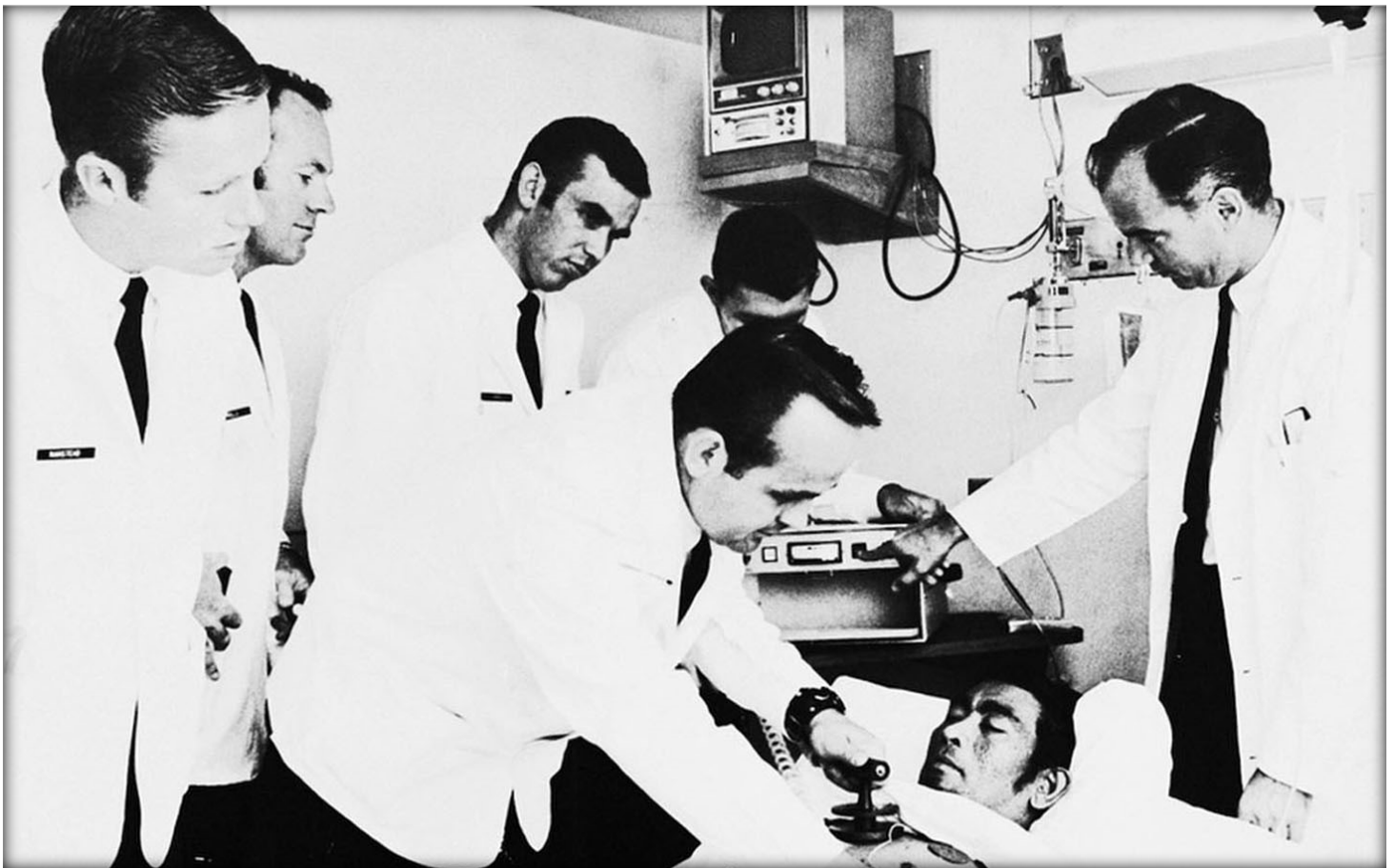
Another unit, which was offsite, would have to house the CCU nurse during the student's internship phase. The Battalion Chief would relinquish his quarters for this nurse who was scheduled to work a 24-hour shift. Bebout recalled the many times she watched as the firefighters would play cards to see who would do the dishes. She said that in the time it took to play the games, the dishes could have been done many times over, but that of course would have taken away the challenge.



Things were always changing. Calls would come that were not cardiac related but began to involve all types of medical emergencies as well as trauma. Both the paramedics and nurses found that they were all learning a great deal from each other. The nurses had clinical experience while the firefighters had a lot of field experience.

As the program progressed, public relations campaigns were being done. The television series “Emergency!” was making the public aware of the EMS program. Bebout was a technical advisor to the show, and the character of Dixie McCall was the first MICN was loosely based on Bebout’s experiences. Other films about EMS were produced and the programs were then shown in front of civic groups, fraternal organizations and government agencies. The plan was to garner support from any and all sources. Bebout mentioned that they felt like pioneers and were always getting “arrows to the chest” in their quest to grow this program. Eventually, large numbers of paramedics were trained. CCU nurses finished their training as the new MICNs so they could replace the doctors who were manning the radios.

Bebout wrote the very first MICN exam based on the paramedic curriculum and Harbor General Hospital housed the very first paramedic base station in the County. Her hard work and dedication enabled the paramedic program to develop the quality system we have today.



**Dr. Criley with the first Paramedic Training Class in Los Angeles County
Robert Belliveau, Dale Cauble, Gary Davis, Gerald Nolls, David Phillips, Robert Ramstead**



Dear Graduates and Friends,

In the winter of 1970, Randy Mantooth and I met for the first time in Jack Webb’s office to discuss the filming of a television pilot. I thought it would be a flash in the pan; one job that might lead to another. “EMERGENCY!” A reasonable title. The paramedic program? What’s that? Sure, I’ll do it. Randolph who?

And now, here we are – thirty-seven years later. The youth I portrayed at that time is gone, but the evidence of the EMS Program, and how it has sustained itself with each passing class, is contained within this yearbook.

As actors, our contribution was to inhabit the characters of Los Angeles County Firefighter-Paramedics Roy DeSoto and John Gage. To this day, people still come up to me on the street, or in the supermarket, and say, “Sorry to bother you, but I became a paramedic because of you.” Or, “You’re the guy from *EMERGENCY!* I’m a firefighter; hope you don’t mind if I shake your hand.”

Randy and I never tire of shaking hands with firefighters; never tire of the privilege of being included in the same company with men and women who work in EMS and serve our communities.

We were actors to begin with, and are actors even now. Many roles played. Many episodes remembered. However, the opportunity to portray a Fireman and Paramedic, and to be included in any history of the program, is nothing less than an honor.

Those of you who have graduated your classes have taken up the proud tradition. Congratulations to all of the 200 classes, and to the 200 that will follow. Thanks to the Governor, the Board of Supervisors, the Chiefs, and all the people who support you. It is with great pride that Randy and I, and the cast and crew of *EMERGENCY!*, express our continuing gratitude upon being included within the memoirs of the Los Angeles County EMS program.

Sincerest regards,

Kevin Tighe





March 29, 2007



Dear Friends and Graduates,

Little did Kevin Tighe and I know back in the early 1970s, when we worked on the set of *EMERGENCY!* with the graduates of the first Los Angeles County paramedic class, that we would be asked to speak at the 100th class graduation in 1986. Nor, could I have possibly envisioned that I would also speak to the 200th graduating class some twenty years later. Whether it was luck or fate that led us here, it has been an unimaginable privilege for Kevin and me to have our names associated with the paramedic program that forever changed the face of emergency medicine as we knew it.

Paramedic is defined in the dictionary as: *a person trained to assist medical professionals and to give emergency medical treatment.* In reality, the meaning of the word transcends the definition. Since the inception of the Los Angeles County program in 1969, the word “paramedic” has come to mean the difference between life and death for millions of Americans.

The technology of pre hospital care has seen tremendous advances in the last thirty-eight years. The role of the EMS professional continues to evolve in scope and significance. The road, never easy, will continue to face challenges in the years ahead, but the paramedics’ responsibility to improve the lives and welfare of the people in the communities they serve has, and always will, remain constant.

There is absolutely nothing nobler on earth than a person who puts his or her life and reputation on the line for the singular purpose of saving lives. I encourage you in your career as a firefighter, as a paramedic, to carry that ideal with you on every run -- no matter the hour, no matter the circumstance.

Sincerely,

A large, stylized handwritten signature in black ink that reads 'Randolph Mantooth'.

Randolph Mantooth





RONALD REAGAN
GOVERNOR

State of California
GOVERNOR'S OFFICE
SACRAMENTO 95814



February 21, 1972

Mr. Gaylord E. Ailshie
Director, Paramedic Training
County of Los Angeles
Department of Hospitals
1100 North Mission Road
Los Angeles, California 90033

Dear Mr. Ailshie:

There are times when words are not enough to stress the success of any effort undertaken by any person or persons in attempting to save a fellow human being's life.

Your efforts and those of the staff at Harbor General Hospital in providing an outstanding paramedic training program for those young men who have answered the cry for better emergency medical training is another example of California's leadership in making progress towards improving the traffic safety environment in this country.

The paramedic graduating class of February 25th will return to their respective jurisdictions trained and ready to respond to life saving calls. I know these young men will look to the future for even more impressive ways in which to improve traffic safety in their communities.

My personal congratulations to you, the staff, and the graduates.

Sincerely,

Ronald Reagan
RONALD REAGAN
Governor



Ambulances and Ambulance Companies

There are 33 private ambulance companies licensed by the County. Each company is required to demonstrate adherence to the Health and Safety Code and ambulance regulations established by County code. While some ambulance companies such as American Medical Response, Care, Schaefer and McCormick provide transport of 9-1-1 patients by Exclusive Operating Area Contracts, others provide backup services and mutual aid during large-scale, multiple casualty incidents and inter-facility transportation. Private ambulance companies have provided paramedic first responder services and backup services in the County since 1970.

In 1969, the McCormick Ambulance Company provided the “Heart Car,” a vehicle equipped to treat cardiac patients and used in the pilot Mobile Critical Care Unit program with Dr. Graf in the Inglewood-Centinel area. Al Carr and Tim Conde from McCormick Ambulance were among the first paramedics to graduate from Daniel Freeman in 1970. The early ambulance companies in the County included: Aids/AME, Professional, Wilson, Medivac, Schaefer, McCormick, Goodhew, Adams, Risher, Community and Crippen.

The Los Angeles County Ambulance Association (originally called the Southern California Ambulance Association) was chartered in 1948 by the fathers of the ambulance industry in Southern California: J.H. Goodhew (Goodhew Ambulance Service), Carl Dolphin (Dolphin’s Ambulance Service), Walter Schaefer (Schaefer Ambulance), Ysidro Reyes (Santa Monica Ambulance), and O.B. Bowers (Bowers Ambulance). Today, the Association represents licensed providers in the County and serves as a collective voice on issues relevant to the ambulance industry.

First Helicopter Ambulance Service

The Los Angeles County Fire Department’s first helicopter ambulance service began operation in March 1970, providing emergency air ambulance care on 112 miles of major freeways and highways in the northwestern part of the county. The air ambulance was part of a pilot program coordinated by the UCLA Graduate School of Business Administration.

“This large area was selected for this pilot program,” explained then Los Angeles County Fire Chief Richard H. Houts, “because it is a heavily traveled, yet remote area of our county. Patients often experience long delays in ambulance service and in time required to transport victims from an accident to a hospital, which may be 30 miles distant.”

The helicopter-ambulance was based at Station 18 on Sierra Highway in Mint Canyon. It responded to all medical emergencies on the 34-mile stretch of the Antelope Valley Freeway (Highway 14), the 42-mile stretch of Interstate Highway 5 (Highway 99), the 30-mile stretch of Highway 138, and all other portions of the mountainous 450-square mile area. The units were not limited to major roads and freeways but responded to off-highway incidents as well.

Four hospitals participated in receiving patients from the helicopters. They were InterValley and Golden State in Newhall-Saugus, Swan Memorial in Palmdale and Antelope Valley in Lancaster.

For emergencies requiring the helicopter-ambulance, the California Highway Patrol, Los Angeles County Sheriff’s or Fire Departments initiated the call, and a conventional contract ground ambulance was notified as a backup. Fire units were sent to assist in first aid and rescue.

The fire department helicopter-ambulance, a 206 Jet ranger, can fly at 120 miles per hour carrying two stretcher patients, a pilot and a fireman-attendant. Firefighters assigned to the program received advanced medical emergency training at Harbor General Hospital. If more than two people were in need of immediate transportation to the hospital, the helicopter made a return trip from the hospital, or an ambulance was used.





CHRONOLOGY OF EMS IN LA COUNTY

- 1969: Dr. Walter Graf implements “Heart Car”
 - 1st paramedic class began training at Harbor General Hospital
 - 1st LA County Fire Rescue Unit (Squad 59) placed into service
- 1970: Wedworth-Townsend Act was signed into law by Governor Ronald Reagan
- 1972: TV series “Emergency?” was first televised
- 1973: The Emergency Medical Services Act of 1973 signed into law
- Late 1970s: Continuing education programs were put into place, paramedics were required to recertify through written and skills examination
- 1979: EMS Commission was established by County Ordinance
 - Board of Supervisors adopted the Advanced Life Support (ALS) Unit Staffing Policy, which requires two certified paramedics to staff any ALS Unit
- 1980: Emergency Medical Service and Emergency Medical Care Personnel Act were signed into law
- 1983: Designation of the first 8 Level I Trauma Centers
- 1984: The EMS Act was amended to allow local EMS Agencies to create exclusive operating areas for private EMS providers such as ambulance companies
- 1985: Designation of Emergency Department Approved for Pediatrics (EDAP)
- Late 1980s: Testing and certification of paramedics were transferred from local counties to the state
- 1994: By statute, paramedic certification is changed to licensure and testing is eliminated from the re-licensure process
- 1997: Designation of the first 5 Sexual Assault Response Team (SART) Centers
- 2003: Designation of the first 5 Pediatric Medical Critical Care Centers
- 2003: Designation of the first 11 Disaster Resource Centers
- 2006: Designation of the first 3 STEMI Receiving Centers
- 2009: Designation of the first 10 Stroke Centers
- 2012: Implemented regionalized system of care for cardiac arrest patients who sustain a return of spontaneous circulation (ROSC) - these patients are routed to the STEMI Receiving Centers
- 2014: Designation of 2 Ebola Treatment Hospitals
- 2018: Designation of the first 13 Comprehensive Stroke Centers
- 2019: Full implementation of Provider Impression Field Treatment Protocols





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School of Medicine



2019 SYSTEM DEMOGRAPHICS

72 9-1-1 Receiving Hospitals

- 38 EDAP (Emergency Department Approved for Pediatrics)
- 10 Pediatric Medical Centers
 - 7 Pediatric Trauma Centers
- 15 Trauma Centers
- 21 Paramedic Base Hospitals
- 36 STEMI Receiving Centers
- 19 Comprehensive Stroke Centers
- 31 Primary Stroke Centers
- 62 Perinatal Centers
- 49 Hospitals with Neonatal Intensive Care Unit
 - 8 SART (Sexual Assault Response Team) Centers
- 13 Disaster Resource Centers

EMS Provider Agencies

- 32 Public Safety EMS Provider Agencies
- 33 Licensed Basic Life Support Ambulance Operators
- 16 Licensed Advanced Life Support Ambulance Operators
- 15 Licensed Critical Care Transport Ambulance Operators
- 5 Licensed Ambulette Operators

EMS Practitioners

- 4,287 Accredited Paramedics
- 8,168 Certified EMTs by LA Co EMS Agency
- 853 Certified Mobile Intensive Care Nurses

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Captain Paul Schneider, Los Angeles County Fire Museum

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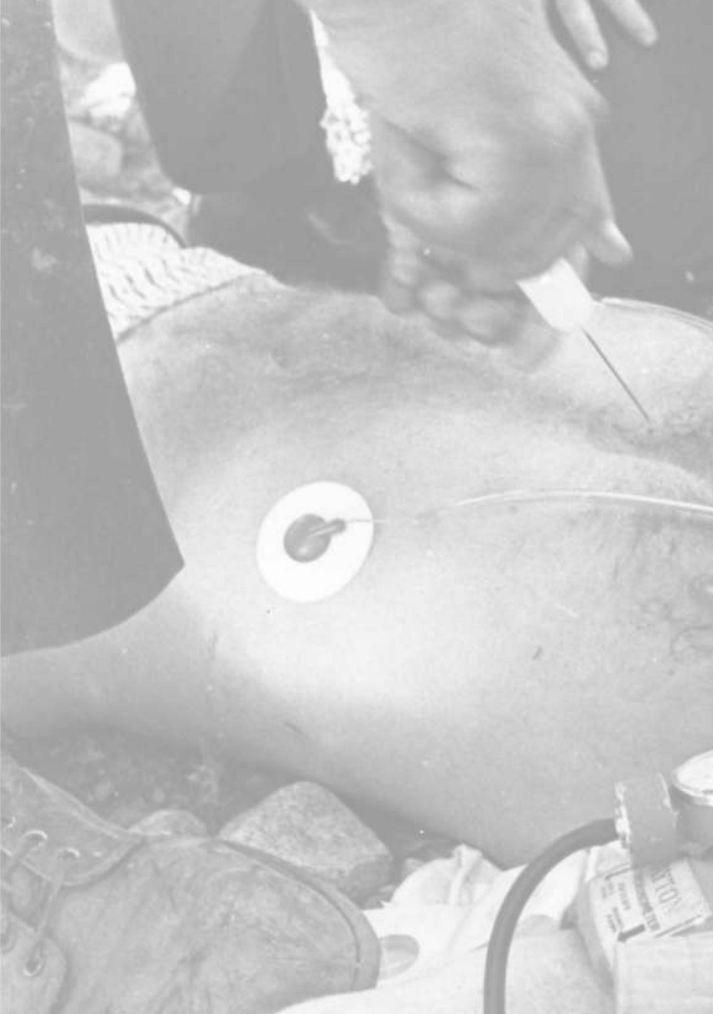


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