

Team Effort Means Quick Response To Residents, Visitors In Need

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A deputy radios that things don't look quite right at the old woman's home on Morgan Road. The gas stove has been knocked over. The valve was left on. He wants a detective to look things over.

The sheriff has been monitoring the radio traffic and telephones the 911 center. He wants to notify the chief deputy, the chief detective, the patrol lieutenant, the State Bureau of Investigation and the coroner. Hill picks up the phone and starts dialing.

A caller reports a minor traffic accident in Long Beach. Allen alerts a deputy and keys the information into a computer linked to the N.C. Highway Patrol.

Covington's domestic dispute appears to have cooled down. But as a former policeman, he knows that these are among the most dangerous situations an officer can face. He radios back to the deputy every few minutes to check on him.

"Sometimes you just get a gut feeling that things aren't right," he says. "I know if I was out there alone in a life-threatening situation, I'd want somebody checking on me."

A convenience store clerk calls to report that a gasoline customer has driven off without paying. Allen alerts a Shallotte police officer.

A detective radios the sheriff that there appears to be "no foul play" at the house on Morgan Road. An ambulance reports itself en route from there to The Brunswick Hospital.

Another call comes in, reporting that someone has passed out at the Sunset Beach Pier. Probably from the heat. Hill sets off the pagers and broadcasts the rescue message. Allen alerts the Sunset Beach Police. Covington calls the bridge tender to make sure it remains open for emergency vehicles.

The shift members work together like a well-rehearsed musical group, trading duties and filling in for each other without a word of instruction. Most calls are answered on the first ring. Chairs roll back and forth across the floor as telephone messages are relayed to the appropriate dispatcher.

Covington takes another call. A 911 hang-up. The screen displays the number of a pay phone at the Welcome Center on U.S. 17. He dispatches a deputy and calls back. No answer. He looks up the office number and calls. No problem. He notifies the deputy.

Someone reports a fight in progress on Hewett Burton Road in Bolivia. One combatant has been cut. Allen radios a deputy. Hill pages rescue.

Emergency Medical Technicians Tammy Brown and Allen Howarth jump into an ambulance and report that EMS-72 is "10-17" (en route to the scene).

Howarth switches on the lights and siren and pulls on a pair of rubber gloves. Brown checks a street map for the location. Trees fly past in a blur of green. Ahead of the speeding ambulance, it seems as if cars take forever to hear the screaming siren and pull over.

"Right now we don't know if this person has a little cut on his finger or if he's totally cut up," Howarth said. "Until we do know, we have to prepare for the worst."

"C-Com to EMS-72," Allen's



RESCUE WORKERS prepare to transport a heart patient from Ocean Isle Beach to The Brunswick Hospital.

voice comes through the radio. "Authority of deputy on scene, 10-22 (disregard) the call. Subject has been taken by POV (personally owned vehicle)."

The gloves, the siren, the lights go off as EMS-72 slows down and turns back. Brown fills out another ambulance call report, one of many that will indicate that they prepared for the worst, hoped for the best and came back empty.

Brunswick County's EMS system is designed with numerous layers of back-up and multiple levels of response. When an emergency call goes out, several units react immediately.

A fast-moving "first responder" goes straight to the scene to assess the situation and begin stabilizing the patient. Sometimes it is a deputy with EMT training or a rescue volunteer in a private vehicle. Or it may be one of the two EMS shift supervisors, whose vehicles are equipped to provide everything an ambulance has, except transport.

Simultaneously, ambulances roll from the nearest volunteer rescue squad and the county EMS center—in case both are needed or one breaks down. First responders often have the patient ready to transport when the ambulance arrives, saving precious minutes that can make the difference between life and death.

Meanwhile, C-Com has been handling its usual variety of traffic: Several minor traffic accidents. A few brush fires. More domestic disputes. The usual breaking-and-entering reports. An aborted water rescue. A complaint from a woman who says somebody threw a shark in her face. A grandmother inquiring about her missing grandson, who turned out to be in jail.

Allen takes a call from a woman reporting "a dog locked in a car" in Calabash. She broadcasts the information to a deputy. There is an unusually long pause before he responds.

"A dog blocking a car?" he asks. "That must be an awfully big dog or a mighty small car!"

The center erupts in laughter before Allen composes herself and re-

peats the broadcast, enunciating the words "locked in."

Another call comes in and it's back to business. An elderly woman

with a history of heart problems is complaining of chest pains at the Ocean Isle Beach Motel. It is one of the most frequent—and potentially

serious—rescue calls.

EMTs Gayther Simmons and Michael Parks have an ambulance rolling in less than a minute. They expect to be waved off, since other volunteer squads are much closer. But they keep moving, fast, as if they are the only unit for a hundred miles.

When the screaming ambulance crests the bridge to Ocean Isle Beach they see the flashing lights of a volunteer unit that has just arrived on the scene. First responder Terri Davis has the patient "packaged" and ready to go. The county ambulance will make the transport, allowing the volunteer squad to keep its vehicle in the area.

"If possible, we try to take it easy with cardiac patients," said Simmons, explaining his relatively placid maneuvering toward The Brunswick Hospital. "The lights and siren can upset them."

He keeps Davis aware of any sudden changes in direction as she continues working on the patient, a 68-year-old West Virginia woman. Simmons announces that the ambulance has reached a long straight section of roadway, allowing Davis to start an intravenous injection.

Outside the emergency room, Davis fills out the report and Simmons readies the ambulance for an-

other run as the patient's family awaits word of her condition. They are relieved to hear good news from the doctor and impressed by the service she received.

"They were there very quickly," says Geneva Jennelle. "Everyone did such a wonderful job."

Back at C-Com, Covington, Allen and Hill brief their night-shift replacements and unwind for a few minutes before driving home. Another phone rings. They glance at the control panels to see which red light is flashing.

This time a different hand reaches for the receiver. "Brunswick County 911...Do you have an emergency?"

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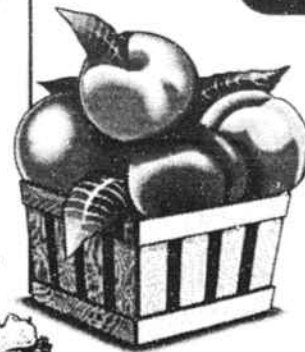
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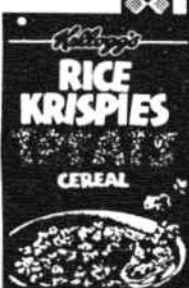


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