



EMERGENCY SCENES

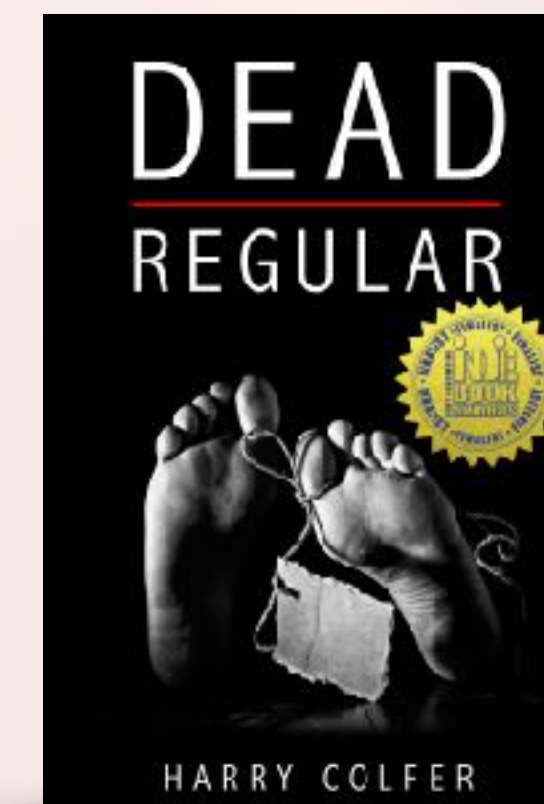
Paramedic characters to die for...

INTRODUCTION

- * Who is Harry Colfer?
- * Do writers get it right?
- * Some EMS basics
- * Cardiac arrests
- * Other misconceptions
- * Paramedic mindset and attitude
- * The darkest humour
- * Some take-home messages

WHO IS HARRY COLFER?

- * Paramedic credentials
 - * United Kingdom
 - * Australia
- * Writing experience
 - * Novel series
 - * Ambos Tales from the Frontline
 - * Awards
 - * Website: www.harrycolfer.com



“

Right... Well, he's no big-name author,
but he might know a bit about emergency stuff...

”

DO WRITERS GET IT RIGHT?

- * Why does no one like watching medical dramas with me anymore?
 - * “So... do they look dead?”
- * Facebook Group: EMS Humor
 - * “What things do books and movies get wrong about EMS?”
 - * About two hundred responses
 - * Everything
 - * Cardiac arrests
 - * Staff attitude & fitness



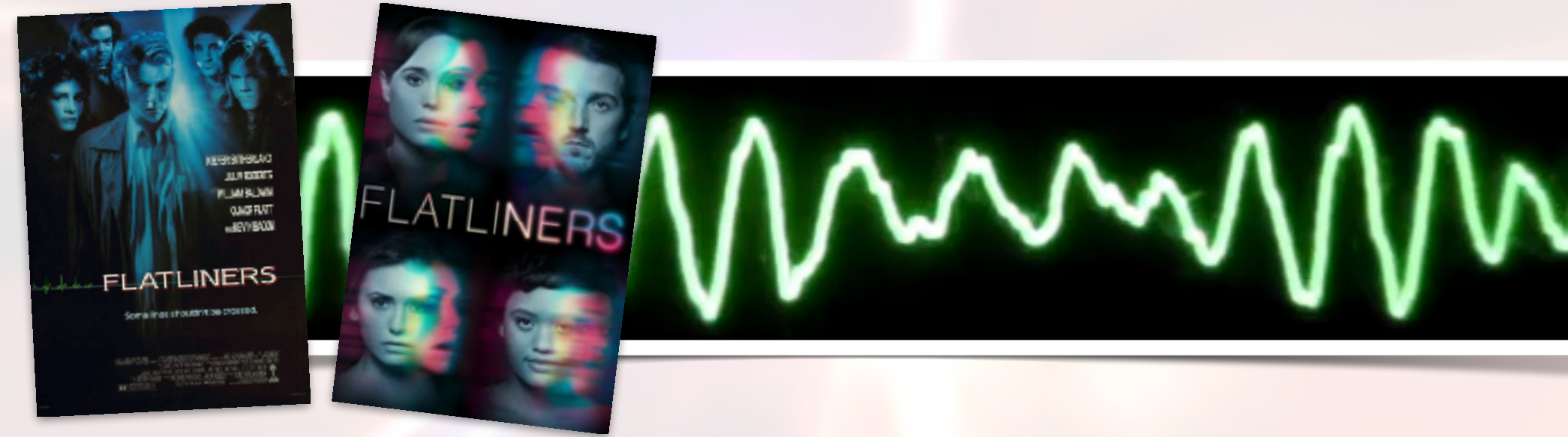
SOME EMS BASICS

- * What to call the ambulance personnel that arrive in your book?
 - * Paramedic? PTO? ACP? CCP? MICA? AEMT? EMT? Responder?
 - * Not ambulance driver!
- * Location and date of your story is vital for credibility
 - * Ambulance v firetruck v helicopters
 - * Staff numbers & qualifications, urban v rural, state v private
 - * Doctors rarely (if ever) work on ambulances
 - * So many changes in the last 50 years



CARDIAC ARRESTS

- * The 'Flatline' explained
- * Defibrillators
 - * Ventricular fibrillation
 - * Paddles
- * CPR just keeps blood circulating
 - * CPR induced consciousness v inappropriate CPR
 - * Recovery times
- * Cardiac arrest v heart attack (ECG v EKG)



OTHER MISCONCEPTIONS

- * Sedation (it takes time!)
 - * Intramuscular v intravenous
- * The term 'shock'
 - * Emotionally upset v poor perfusion
- * Paramedics never run!
 - * And it's not due to lack of fitness... mostly...
- * Most cases ambulances go to are not high acuity
 - * These days we have very little downtime



MINDSET & ATTITUDE

- * What's a good job?
- * Essentials of every job:
 - * Gloves, paperwork, and a touch of empathy
- * Managerial scrutiny (Teflon v Velcro)
- * We love our TLAs
- * Recent massive change in staff demographics
- * Paramedic humour often comes in the darkest form...
 - * The tradition of story telling



“

Trapped inside her brick tomb, the heat of a Queensland summer had only accelerated her putrefaction. Her skin looked like a delicate parchment straining to contain the darkening soup within and, where her body was in contact with the floor, she appeared to be melting into the carpet. All around the edges of her legs, dark tissue fluid was oozing out into a widening pool, like black coffee overflowing from a trainee barista's cup.

The local insect life was having a field day. Lines of ants were crawling up and down the wall, transporting our regular patient piece by piece. Although the screens had limited the number of flies, some had joined the party as maggots wriggled at the corner of her eyes and several swam in the surrounding coffee pool.

I turned to my colleagues. “Anyone for CPR?”

Alan smiled. “Well, I was hoping we would see some ICP interventions. Do you have any drugs that'll bring this one back?”

“Let me check my bag. Nah. I guess we've got to look on the bright side.”

“What's that?”

“With all these bugs around, at least she didn't die alone.”

Alan smirked. “Jono, that's so wrong on so many counts.”

”

Dead Regular by Harry Colfer

TAKE-HOME MESSAGES

- * Books, TV dramas and movies make a lot of mistakes
- * Paramedics are a strange breed with a warped sense of humour
- * The location and time of your story is critical
- * Research what EMS response happens in your story's location
- * Perhaps contact the local ambulance station
 - * For quick questions use the 'Just ask...' on my website
 - * Consider using Graham Bartlett's manuscript review service

