

We Were Just Doing Our Jobs, Sir



Jonathan Bethards was born in Lodi, California, but raised in Stockton. He graduated from Lincoln High School in Stockton in 1996. He went to Delta after graduation but as he states, “I was burned out on education so I went to a vocational school of sorts and got my EMT (Emergency Medical Technician) certificate/license and was hired on with a small ambulance company.” He worked on a 911 ambulance in Stockton (mostly downtown and northwest) in 1999 until he was hurt on the job in 2003. He came back to Delta College when his workers compensation case was settled to start his reeducation in the fall of 2013. “I struggled to adapt at first but now maintain a GPA of 3.23. I haven’t decided on a major yet, trying to find a career that I can do physically and won’t crush my soul (haha). I’m a big-time sports fan—Raiders, A’s and Lakers . . . also big time into the Thunder and Ports and go to the games a lot.” In his free time he enjoys hiking, hunting, fishing, and photography with his family, his girlfriend Evan, and his springer spaniel Budd. “I owe my current success at Delta to the great staff, especially Mr. Powell and Dr. Hutcheon of the English Department and Señora Ciccarelli—a superb Spanish teacher. I never really enjoyed writing, but love to read and I believe this has helped immensely with my writing skills.”

The man’s family stood around us in a circle; I could feel their eyes on us as we worked feverishly under the blazing afternoon sun. This isn’t going to work, I thought to myself. I glanced over at my partner, Oscar, and I could tell he was thinking the same thing. We didn’t have much time left until we had to call it, but neither of us was letting up yet. This was definitely not how I saw my first shift back from vacation going.

My time as an Emergency Medical Technician (EMT) on a 911 ambulance may have lasted for only five years, but they were very interesting years. I will freely admit that a majority of our shifts were spent just hanging out at quarters; but some days we would just get slammed, and this was looking like one of those days.

After an afternoon full of the usual calls, mainly non-life threatening, and with the temperature soaring in the low 100’s, Oscar and I were ready for a short nap in the cool confines of our quarters. We were a few blocks away from our air-conditioned station when we heard exactly what we didn’t want to hear: “Unit 92, are you clear for a code 3 call?” I cringed as I picked up the microphone from the radio and responded, “Unit 92 is clear and available.” Dispatch proceeded to have my unit and Stockton Fire Engine 6 sent out to a “man down” call in the middle of the street. I told Dispatch we were en route and gunned the engine as Oscar flipped the sirens and lights on. Code 3 driving isn’t nearly as fun as it may look; legally we’re

only supposed to go 15 mph over the limit. We have to watch out for all the numbskulls and space cadets on the road as we navigate our way to the call.

We reached the scene at about the same time as the SFD; I quickly ran around the back of the rig and threw the monitor, airway bag, and our main bag on the gurney. I yanked the gurney out of the rig and made my way through a large group of people standing around a man lying in the street. I

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looked down at my partner, who had been assessing the patient, and read his body language and hand signals. This was not going to be an easy call. The man, who was in his late 50’s and had an extensive medical history, was non-responsive and had no discernable pulse. As I hooked him up to the monitor, we could all see why he was non-responsive; he was in respiratory arrest and ventricular fibrillation. In other words, this man was in a world of hurt.

My partner and the fire medic were getting ready to deploy the defibrillation paddles and the fire EMT was doing chest compressions as I readied an IV setup and prepared the epinephrine; I had been in this situation before and knew we would need these at a minimum. Upon seeing my partner apply gel to the paddles and the man’s chest, a woman became hysterical. The fire captain was putting forth a valiant effort to restrain her but was failing. The rest of the family started to become increasingly confrontational and angry. “Why the

hell aren't you doing anything?" I heard from behind me. "Get off your asses and FIX him or...or so help me I'll SUE you," screamed the woman, who was now engaged in some serious hand fighting with the captain. Now, clearly we were trying to help the patient, but when panic and love combine, a situation can change from stressful to violent in an instant.

The fire medic got the IV in on the first try and was now trying to get an airway into the lungs. This was not an easy job as he had to keep stopping to clear the patient while Oscar defibrillated him, push another round of epinephrine into the IV, or keep the patient's increasingly agitated family members back so we could do our job. On his third attempt, the medic got an airway, and almost simultaneously we heard an unmistakable sound. It was the sweetest sound I think that I had ever heard. It was the slow but steady beeping of the patient's heart, represented by a beautiful normal sinus rhythm on our monitor.

Oscar and I, sweat pouring down our faces, exchanged a quick smile and then looked over at the fire crew. They were equally soaked in sweat and were smiling even wider than we were.

"Why did you stop?" screamed the woman. "Why are you all smiling like a bunch of assholes? MY HUSBAND IS DYING!" The fire captain had finally had enough and gripped the woman by her fleshy arms. "Ma'am! Your husband isn't dying: we got him back!" That was it for the woman and her family; they all broke down and cried and started thanking us in between sobs.

**"Get off your asses and
FIX him or...or so help
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The patient, though not out of the woods, was doing far better

than he was when we arrived on the scene; after all, he was breathing on his own and his heart, though slow, was beating on its own. I couldn't believe it; this was the first patient we'd revived who hadn't immediately crashed again. As we loaded him into the rig for transport to Saint Joseph's, he opened his eyes and tried to say something. "Sir," I said, "don't try to talk. You have a tube down your throat. You're going to be okay, and your family is going to meet us at the emergency room." Tears started to roll down the man's cheeks, and he looked me right in the eye. I could tell that he was trying to thank me. "You're welcome," I said as I choked back tears of my own and put my hand over his: "We were just doing our jobs, sir."

