

The Chirurgeon's Burden

Newsletter For An Tir Chirurgeons

ISSUE #11 – October, 2006

Editor: Lianna Stewart, MC, GdS

Words from our Kingdom Chirurgeon



This month is a sad one. Karl Redstone is a loss to our realm, a man I will personally miss; a fighter and constable I enjoyed working with for years.

Adding to that sadness are the ongoing repercussions of the rampant speculation by shocked and grieving people - and a few who just love a good twisted-up story.

I need to clarify a few points, and I hope these will all be “well, of course!” reminders for all:

No chirurgeon gave nitroglycerine. No first-aiders may administer or even *suggest* a medication, OTC or prescription. Many first-aiders know when to *offer* an OTC or are trained to *assist* a patient taking certain of their *own* prescription medications. Actually, we're now told to hand a little packet of antibiotic ointment (or a tube with cautions to spread the ointment on the *Band-Aid* not the wound!) so we cannot be deemed to have “determined a dosage” of antibiotics by how big a glob we use. We cannot say “I think you should take...” We can say “I have a bottle/tube of...” Laugh at the silly lawsuit-happy people, but don't give them your tail feathers as a target.

The Canadian WCB III (kind of an EMT) that ran the scene correctly assessed her patient and was correct and timely in asking someone to call 911. As with several of our sites, getting the call *out* was a bit of a challenge. Try to know and tell your bystander *where* to stand to make a call if needed. It is essential to note that *no-one* may *ever* tell you not to call for an ambulance. Ever. People can refuse to let the EMTs treat them; they cannot refuse your summoning of them. Ever. No ambulance service I've ever run into can charge for responding to a call. I say again, they do not bill you for showing up. The patient can ask them their terms for treatment; I know some companies may charge in other regions, but I've never seen one that could even charge for treating you. They

bill for the *ride*. With that said, it is never OK to send someone who might need CPR or any other treatment en route in a car or most private vehicles. You simply can't do it. You especially can't do it with only the patient and driver. Ongoing care requires a driver, a person with training in emergency medical care, a work area and supplies... which is the point of ambulances. If a patient like this is determined to go in a private vehicle, again, let them tell the EMTs that. Get witnesses signing that a patient refuses care or that a patient refuses your advice to seek any further care. An example would be a cut hand that you know needs stitches or real cleaning. Give them the infection speech anyway. Again, don't make your tail feathers a target for their insurance company if that hand gets gangrenous or something. (I've really seen and treated it! Ask me the story someday...)

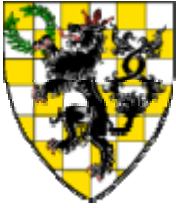
On the subject of CPR and AEDs - suffice to say you can't do *either* on someone who doesn't need it - in a first aid scene, talking is a pretty good indicator that the air and blood are in fact moving, right?

On reporting, treatment reports go only *up* the *chirurgeonate* reporting chain. The autocrat and seneschal may know *who* was transported. Remind them that there are almost always other people they can ask for the other information they want! Please, please ask what you can say before you say it, there's little I can fix afterward.

Remember that chirurgeons handbook - keep it not only nearby but *read*. The training book and techniques of your certifying body and the Chirurgeons Handbook are what will protect you as you treat - *if* you document! Don't leave yourself in a "he said she said"; over the years and across the kingdoms, our treatment reports have warned off several insurance companies looking for someone to bill.

In Service,

THLord Tvorimir Danilov, MC, GdS, JdL, WOAW
Kingdom Chirurgeon, An Tir



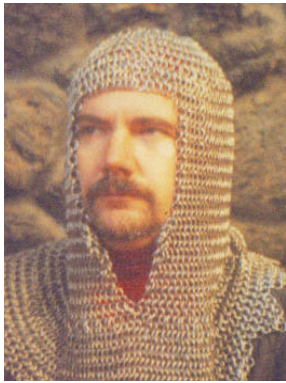
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Words of Wisdom from Bjorn on Sprains



A long time ago when I first entered the Fire Service an Orthopedic Surgeon shared something with me regarding joint and muscular injuries. I call it "The rule of Sixes." It applies to this situation (SCA injuries) as well. It goes like this: After you receive an initial injury you really need at least six days of rest for recovery from a light-to-moderate sprain. If you don't

rest or if you receive another sprain in that six day window then you're looking at at least six more weeks to recover if a secondary injury occurs. If a tertiary injury occurs you're looking at up to six months of recovery time, and another six years for a fourth injury, if it ever recovers at all. Of course the severity of the injury will also dictate recovery time or if recovery is possible.

Bjorn's Biography:

THL Bjorn in Gauzki began his SCA life in the Barony of the Flame in Mid Realm in A.S. XV. He has traveled the world living in the Far West (Pacific), Atenveldt, Artemisia, Ansteorra, and Calontir with short jaunts to Trimaris, Lochac, and Meridies. He currently resides in the Outlands. Bjorn was recognized as a Master Chirurgeon in A.S. XXV and has served as the Kingdom Chirurgeon for the Outlands. Mundanely he is a retired U.S. Air Force Fire Officer (Assistant Chief). His favorite phrase is "It's not my emergency; I'm just here to help, somebody get me coffee NOW!!!" Bjorn still characterizes himself as a Master Chirurgeon, saying: "This title was given to me by a Guild that I love and respect and I refuse to yield its use. It is not an SCA title." (Editors note: We do not dispute the new titles given by the BoD but are simply quoting the author's self-description.)



Caelin on Andrede has words of wisdom regarding HIPPA and our paperwork:

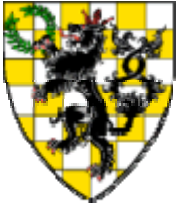


I have been trained as an EMT (with ACLS and PHTLS-advanced). One of my friends is a mid level manager in one of the largest health care insurers. One of my fellow Chirurgeons is a legal assistant to an attorney who sues people like us. I have consulted with a malpractice attorney this very week. Everything I have been able to discover

says "If it is not documented it happened as the plaintiff says it happened." No paperwork means you have no defense against a law suit. The insurance companies say "you cannot have too much documentation" and they are the experts on reducing liability. They live or die based on their knowledge of it.

There are many examples in the SCA, but one from last year is illustrative. I have removed any data from these discussions that would identify any patient. A man presented to the Chirurgeon's Point at Pennsic with a bad cut. We did minimal paper work and passed him immediately to EMS. They cleaned the wound and provided stitches (there was a Doctor on site). He came back a few days later. We again did minimal paper work on him and passed him back immediately. When he got home it became infected. Perhaps he did not keep it clean. We don't know. He got very sick. He missed work and therefore lost his job. He was not insured. He decided to sue the SCA. We pulled the documentation and showed the attorney we had acted reasonably on both occasions. There was no law suit against the SCA. I'm not aware of any law suit against the EMS group or the Doctor.

I was War Chirurgeon at Gulf War when a similar situation happened. The excellent paper work on our treatment of the person (there is no EMS on site) and our recommendations for further treatment by his doctor convinced his attorney there was no case here.



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Without the documentation I believe law suits would have been filed. Even if the jury believed us, we would have been out the costs of the trial, and the plaintiff would have been a poor man out of a job versus a corporation.



Here are Geoffrey Kempe's words to Their Highnesses of Avacal:



"Your Highnesses, Your Excellencies, Your Lordships and Ladyships, My Lords and Ladies, good gentles all; and my apologies to any titles I've miss in my nervousness:

My name is Geoffrey Kempe. Some of you will recognize me as a chirurgeon in training. I am here to explain the role of chirurgeons and the chirurgeonate and to clear up a couple of misunderstandings about first aid in the SCA.

The Chirurgeonate is the first-aid organization within the SCA. Its role is to provide first aid at SCA events. Members of the chirurgeonate provide first aid on a volunteer basis, and at no cost to the recipient.

And to answer the next favourite question: No, we do not practice period techniques. I do not carry leeches, except of the gummy variety; if you want to help me by grinding up rubies, I'm not interested in how you plan to apply them; and I will NOT taste your urine on a bet!

I will, however, provide the best modern first aid care I can to anyone who needs it.

Since anyone can carry and use a first aid kit, with or without training, you might wonder why the SCA bothers to organize its first aiders.

The Chirurgeonate exists for several reasons, most of which boil down to one word: teamwork.

As an organized group, there is managerial control, discipline if, when and as needed, and there are uniform guidelines on how to handle combat injuries. The SCA can also compile injury statistics and evaluate the management of first aid at events. The benefit for the injured fighter is that a chirurgeon will have a clue on how to get you out of your armour or farthingale with minimal damage to equipment or clothing. And we won't treat you like a freak in funny clothes. We also help mundane EMS responders as necessary, and can help explain how to deal with SCA-specific injuries.

So, why am I standing here yelling and taking up valuable court time? I'm recruiting, that's why! In all of Avacal, the Chirurgeonate has exactly TWO members. There's me in Sigelhundas, and there's Madieleen in Montengarde. There are no chirurgeons in Myrgan Wood, none in Borealis, or Vinjar, or Rhuddglyn.

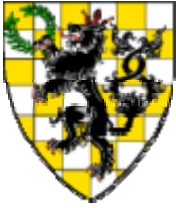
We don't have enough Chirurgeons to bother with a Principality Chirurgeon. His Lordship Tvorimir Danilov is our Kingdom Chirurgeon and acting Principality Chirurgeon for Avacal. And he's mundanely in Renton, Washington!

I would love to see at least three chirurgeons in every shire and barony, but I can't put shillings in that many beer steins, so I'm looking for volunteers.

If you have mundane first aid and CPR training, or higher certification, and would like to help make our game even safer than it is, I can offer three benefits.

First: as a warranted chirurgeon, you're recognized by the SCA as having a certain minimum level of training, and are familiar with SCA-specific injuries – in short, you're a known quantity.

Second: as a warranted chirurgeon, you'll have the benefit of an exchange of information on SCA-related first aid, a shared set of policies that will allow you to work effectively with people you haven't met before, and the organizational means to delegate and share the workload at an event. And many hands make light work.



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Third: as a warranted officer of the SCA, you may be covered by the SCA's liability insurance. The need for this is smaller here in Avacal than in the USA, and we won't dwell on the negative, but it can help if things go badly.

So, if you're trained in first aid and CPR and you would like to help your Principality, your shire or barony and your SCA family and friends, please come and talk to me any time today, or look for me on the Avacal Circus. You can also ask for my contact information from the Troll or Autocrat of this event.

Thank you for listening patiently, and thank you Your Highnesses for allowing me to speak."

Geoffrey's Biography

Geoffrey Kempe was born in the year of our Lord 1076, and is the last surviving of four children. He has his letters, and helps others with theirs. History has unkindly forgotten to record much of Geoffrey's life; however, he traveled four years ago from King's Lynn to Sigelhundas, where he is now shire Herald, and relieves the boring life of a chirurgeon in training by practicing spinning and illumination.

Neil Slater is married, has three children, and is employed in the Arts, Culture and Heritage division of the City of Regina. He is a photographer, proofreader, former professional musician, avid cyclist, and lapsed astronomer. He would like more time to devote to the fiber arts, persona development, calligraphy, watercolors, and woodwork.



Pennsic in the early days: A first hand account

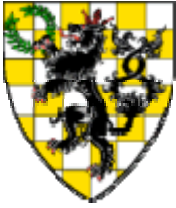
Greetings from the "Old Bird of the Night" of Pennsic.

Hmmm I suppose an "Old Bird of the Night" might also be just an "Old Bat" ☺ - who has been traveling beyond the "Dar al Harb" (translation "Halls of War") and who is currently resting the caravan and engaging in the advanced study of letters in Outremer...

In the third hour before dawn today, even way out here, I received word of the occurrences concerning the Chirurgeons at Pennsic. Although I attempted to ignore the exhausted, long distance, carrier pigeon who managed to locate the caravanserai ("Hammam Mashi" – roast pigeon, is a great delicacy in my homeland) one of them did get through my feline guards, and managed to deliver the message to M'Lord husband, who was searching for a late night snack. Fortunately for the pigeon, I have taken up the vegetarian ways of the lands near the great river Ganges, and M' Lord, not wishing to upset my gentler sensibilities toward non-human creatures, allowed the pigeon to deliver its message, and instead of giving in to his taste buds' desire for roast pigeon on lettuce leaves, located one of the small paper sacks of fried, salted, plant root matter, that passes for snack food out here in this forsaken region. Of course the poor carrier pigeon needed to be liberated from its burden, so M'Lord husband, despite my protestations of not wishing to avail myself of the "secret knowledge" contained within the message, recited it to me.

Before I could come to my senses, the evil spell contained in the message had taken hold, and after three years of resisting temptation, I once again had the desire to seek out this place where certain sorcerers ply their dark magical arts, using nothing but the ether, to allow mere mortals to communicate without the use of pigeons. Although the sorcery is strong, it has not totally infringed upon my desire to remain unemotionally involved in the issues presented here. I do regret the weakness that has come over me, but with the help of the benevolent creator of the universe, I can add only factual information to this place and hopefully avoid adding any words that would be hurtful to any party here.

The reason I have chosen to comment here is not because of what has immediately occurred at Pennsic within the past 24 hours, but because of some of the comments I have read in the threads here concerning what has occurred. Much to my dismay, it seems that some of you believe that this is the first year that there has been a professional EMS presence at the Pennsic War. I will assume for the sake of civility that you have not been to Pennsic in the past 16 years, or so, or for some reason, you have been to Pennsic during that time and have never



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had a need to have knowledge of the EMS service that has been on site now for the better part of the last ten, out of those 16 years, and that you have no knowledge of the effort that went into building the unique relationship local EMS since the year 1984. Matter of fact, last Pennsic in which I was in attendance, not only did we have full time, professional EMS coverage on site from Sunday of war week, which included full basic and advanced life support capability – including a video com link to one of the premier teaching hospitals in the US, located in Pittsburgh. For two years prior we had the benefit of a fully equipped medical aid station staffed during the battle days and other hours by physicians in the Emergency Medicine residency program at that same institution. In addition to what I have mentioned, we also had 2 resident physicians from the same teaching hospital who the year prior to the residency program, served many hours on-site treating patients gratis.

I might add that we also had Chirurgeons working full time as well.

How do I know all of this??? I was the EMS liaison for Pennsic to the mundane world from the year 1985, until 2003. That folks, is a lot of years. My first war was Pennsic 12- nicknamed "The Great Pennsic Pass Out" due to the number of people who passed out from heat-, in which I was primarily a fighter and a marshal - I joined the SCA to fight, fence and generally relieve the stress from my job and being a full time RN student at "Ball buster U.". I never intended to be a Chirurgeon when I joined the Society.

I became a Chirurgeon at the local level when my seneschal found out what I did in mundania, and announced at a Shire meeting "...WE GOT ONE!", and then proceeded to tell me that it was my "lucky day" and that I was now an officer of the Shire! Yes, folks, back in the OOOOOLD DAYS when the slimy things inhabiting the deepest depths of the sea still walked the earth (hey, I'm a big Lovecraft fan) every local group that wanted to host an event HAD TO HAVE A CHIRURGEON by SCA policy! I was also told that I would not be able to fight at my home groups' events because I had to provide first aid help, if needed... after which myself and the seneschal had our own personal version of the Monty

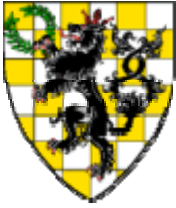
Python "Argument Clinic" sketch, which she won. The only way I could fight at my own groups events would be if I could cajole, convince, artfully bribe, or Shanghai, another warranted Chirurgeon from a neighboring group to take over for me for the day. Back then, Chirurgeons were in short supply, so I could usually count on sitting next to my first aid kit for the day, and polishing my armor, waiting for something to happen. Since my group was small and hosted one or two events a year, I accepted the situation, and merely looked upon my duties as my contribution to a group which I then loved.

Then came PENNSIC 13 in 1984.

About three months prior to Pennsic 13 I saw an announcement in my kingdom newsletter from the Kingdom Chirurgeon, asking for volunteers to help out with the staffing for "Chirurgeons Point." To the best of my recollection, the announcement asked for any Chirurgeon attending Pennsic willing to give "just a few hours" of their time to contact the Kingdom Chirurgeon, and give days and hours they would be in attendance, and what days they would be willing to volunteer about 4 hours of their time. After my experience at Pennsic 12, and wanting to be a good citizen of the SCA, I contacted the Kingdom Chirurgeon and told her that I would be available the beginning of the week, but under no circumstances would I be available after the battles started on Friday, as I was going to be fighting. She told me where the point was located, and to meet her there on Monday afternoon of War Week.

Monday of War Week arrived, and I went to the intersection of two roads at Pennsic after dinner, and found Chirurgeons Point – at the time it consisted of one 2 person dome tent, one K-Mart issue plastic 3 foot high, plastic coated, pup tent for supplies, 1 picnic table and a blue plastic picnic tarp set up over the picnic table.

I was told that the hardest hours to staff were the overnight hours, and since I am more of a night person, I volunteered to do night staffing for the first part of the week. I was then asked "do you have your first aid kit with you?" and then was shown the little K-Mart plastic tent that contained ONE box of DONATED assorted bandaging material - some of what looked like left-overs



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from WWII – from which I was free to replace any supplies I had used from my personal kit. When I asked how to contact EMS if I needed them, I was asked if I had any change in my kit, and was then directed to walk/run to the pay phone up near the Cooper's Store!

Soon after arriving I was introduced to the few intrepid Chirurgeons who would be working during that week, some of whom are still serving the populace. I think we may have numbered about eight in all. Pennsic was a lot smaller then, just a little over 2,000 people in attendance, but that was still a tall order for the number of Chirurgeons if there was a disaster, or something "really bad" happened. The part of Cooper's Lake that was being used for camping was a lot of area to cover on foot, and if there was an emergency down around the lake, we had to hoof it from "up top" about four blocks up the main road, after crossing the little bridge on the paved road from the Cooper's store, which was our location.

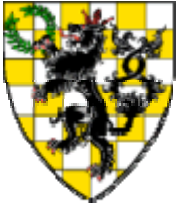
A lot happened that week- we had several calls for help with asthmatics – ALL OF THEM DOWN AROUND THE LAKE, ALL in the middle of the night! These respiratory calls culminated in the appropriation of the first golf cart. One night, myself and another Chirurgeon decided to commandeer the autocrat's golf cart for respiratory emergencies down around the lake (this was after we had hoofed it three times in one night) - of course we didn't think it was fair to wake the autocrat when it was easier to quietly detach the cart from its' charger and quietly re-attach it to its' charger an hour before the autocrat awakened. [☺] Our system worked well until we had five asthma calls in one night.

The autocrat's husband came out of his tent in the morning, got into the cart to pick up his crowned heads to take them to a breakfast meeting, and got about twenty feet down the road when the cart came to a stop. It would have remained a total mystery to the good Duke as to why his cart didn't re-charge during the night if the two very tired Chirurgeons, still waiting to be relieved of duty, were not rolling off the benches of the picnic table with laughter at the Duke, who was trying to figure out *why* his cart had failed him! The Duke walked back to his tent, and we, still laughing, soon saw a very determined autocrat in full Elizabethan garb striding towards us. We

realized we were BUSTED, and did make our best medieval apologies to the lady autocrat, along with the explanation of the number of respiratory emergencies we had been getting in the wee hours (all were asthmatics who needed to go to the hospital by car for breathing treatments and we used the cart to get them from the lake area up to the parking lot to reduce their time to get to the hospital.) After listening to our best explanations mixed with our best groveling apologies, the kind autocrat (an asthmatic herself) said: "If you need a G-d D----d golf cart, I'll get you a G-d D----d golf cart, just keep your hands off of mine!" Thus, the Chirurgeons at Pennsic received their first "rapid response vehicle."

The first "bad thing" struck very late Tuesday night of War Week-and that was the first appearance of what was to become remembered in history as "The Pennsic Plague." People started appearing at the point very late Tuesday night, then in an increasing number throughout the wee hours into Wednesday morning, with the same symptoms of a rapid-acting intestinal virus that first caused explosive diarrhea, then vomiting. My realization of how rapidly this virus was spreading came when the chirurgeon who had been my partner on the overnight shift for the first few days of the week was napping in the dome tent, and then all of a sudden came flying out of the opening of the tent toward the nearest porta-castle. The way he later described the onset of the plague was "My body gave me the signal that I had five seconds to exit the tent, before my body fluids started exiting me, and three seconds were already gone. When I got to the porta castle, it was everything out, two orifices, no waiting!"

Upon seeing the 12th case, on Wednesday in the early morning, we notified Rannveigr Harkonarsdottir, later to become Vicountess Rannveigr of Aethelmarc, who in mundania is an M.D. She did the logical thing of contacting the CDC and asking what actions we could take to limit the spread of this virus. With the help of the Royalty, Heralds, Autocrat staff, and many others, we went into battle against a this microbial threat, quarantining porta castles, issuing announcements about the importance of covering food in the camps, hand washing, dish washing and controlling flies by "closing the lid" after using the porta castles. We had a wonderful Chirurgeon and other gentles lend their artistic talent to



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help us spread the message by drawing cartoons that were posted in the porta castles, and on the bulletin boards around the camp, and published in the Pennsic newspaper to reinforce the message. In the end, if memory serves me correctly, nearly 185 cases of the plague- and only a few needed to go to the hospital for re-hydration.

We also had a wonderful large household – The Great Darke Horde – who generously cleared out two of their largest tents in order to make a men's and women's dormitory-style nursing area where plague victims could be sent to receive care in the form of accompanying victims to the porta castles when they were in the throws of diarrhea, dumping puke buckets, wiping brows, and re-hydrating with fluids. I suspect this area went a long way in controlling the spread of "The Plague." The Horde also furnished the Point with a walkie-talkie that was used for calling their special "plague transport" when someone presented at the Point who needed to be nursed through the virus. In addition to all of this work with the plague victims, the Horde never stopped reminding the group of now severely overworked chirurgeons that anytime they liked, they were welcome to visit Horde Hill and partake of some of the sixty gallons of hot chicken soup that was always on. All of the disposable cups, spoons, puke buckets, liquids and the washing of blankets and sheets at the laundromat were provided at Horde expense without ever asking for anything in return! I will say that as long as I live, I will remember the Horde and what they did for the people of Pennsic 13 – it was an unselfish act of such a proportion that it properly belongs in the songs of the bards who sing the legendary acts of chivalry in Pennsic history.

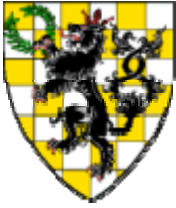
By Friday of war week, the plague was well contained, and I did indeed take time out to enjoy taking part in the carnage of the first of the large battles, as well as attending one heck of a party Friday evening. I managed to not step anywhere near Chirurgeons Point. Saturday morning came, and at 0800 I was armored up and ready for the woods battle, where I had my first experience slogging through the swamps in full armor and sinking up to my knees in mud – my boots never recovered. I still have them, and the mud is still on them. After the woods battle was over, it was time stow the armor, and then go to wait in line at the solar showers for the chance to enjoy a

nice, long, hot shower and become an identifiable human being for War Court, which was to begin after dinner, at o'dark thirty.

Saturday's weather had been hot, but otherwise beautiful. Shame that I failed to notice the red sky we had at dawn that day. When the sun set Saturday evening, I was walking from my camp to the barn for War Court, when the sky literally developed a green glow. Within ten minutes, and before I reached the barn, the thunder, lightning, wind and rain began. Instead of making the barn, I headed back to camp to help out with stabilizing pavilions, as the wind was now literally howling, and several pavilions were already flying around the grounds. In addition to the storm in general I realized that the temperature had dropped about twenty degrees, and now I was not only soaking wet, but cold.

After returning to camp, I changed into dry, warm garb, put on my rain cloak, and went to see where my help was needed in the camp. Soon I was in a very large homemade, flimsy, round pavilion, holding one of the spears that were being used to brace the frame in order to keep it joining the other UFO's that had filled the Pennsic sky when the winds started to howl. The thunder, lightning and wind became louder as the storm moved directly overhead; speaking was reduced to shouting in short phrases, as that was what could be heard over the storm. Then, in the middle of all of this happy weather, I heard the signal that was used to summon ALL chirurgeons to the Point because something "REALLY BAD" was happening and we needed all hands on deck. I wasn't sure I heard the first three blasts on the marine air horn, but I definitely heard the three blasts when they were repeated. I was excused from Pavilion holding duty in camp to leave for the Point.

When I arrived at the point, there were several soaking wet gentles in all stages of discombobulation and the beginnings of hypothermia standing under our blue tarp. I then spotted a van, parked in front of the point, that had Rannveigr's legs hanging out the side door, and knowing that she was the most likely person to have used the air horn, I tapped her leg and asked what the problem was – she then turned around very quickly, and said: "Go as fast as you can go up to the store and call 911 – tell them we



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have a fourteen year old female having seizures secondary to alcohol induced hypothermia.”

I reached the phone in record time, despite the weather and the UFO's from all over the camp that were literally swirling around in the wind. When I called 911, a woman answered and when I told her we needed an ambulance and why, she said “What was that?” I then repeated myself, and she said, “I still don't understand WHY you need an ambulance.” Then I repeated the problem once more, very, very slowly, word by word... this time she said “Listen here, I don't know what language you're talkin' but it ain't English, can you speak PLAIN ENGLISH???” So I then spoke PLAIN ENGLISH and told her we had a “fourteen year old girl who got into her parents liquor, got too cold, and was now having fits, snapping and twisting like a pretzel and she ain't stopping!” The response this time was “Why didn't ya just say so in the first place? Ambulance is on the way, it'll be about thirty minutes, or mebbe closer to fifty; they're busy cause of the storm.” Such was the state of EMS dispatch in Butler County PA in 1984.

After my experience with the language challenged dispatcher, I made my way back to the point as quickly as possible and told Rannveigr what they said and she said, “More than half an hour? You have to be joking!” When I told her I definitely was NOT joking, her face turned a “whiter shade of pale.” I was sent in search of someone who could possibly have their own oxygen tank on site, who might be willing to share if they had extra, and more blankets to pad the inside of the van to keep the girl from injuring herself in the throws of her seizure. I managed to locate someone who was willing to give up their spare oxygen cylinder and a cannula (the only delivery device available) and brought all back to the van. Rannveigr said that she would take the responsibility for the oxygen, and we managed to put the cannula on the seizing girl. Thank God the seizures slowed in their frequency because it took the ambulance forty-five minutes to reach Cooper's Lake, and then we were told that even though New Castle was closer (fifteen minutes as opposed to Butler's thirty) they were a Butler County squad and New Castle was in Lawrence County, and they would only go to Butler Hospital. When asked if advanced life support was available, they said “No, and even if the one medic we

have was available, we wouldn't call her out for something as simple as a seizure.” The look on the EMT's face spoke volumes. We were definitely being dismissed as a group of nut cases. The child's parents heard the exchange, and just shook their heads. Within another twenty minutes, the girl was loaded and on her way to Butler, still seizing.

Here endeth the first part of the genesis of the EMS presence at Pennsic... Part two to come as soon as I sharpen another quill... (Next newsletter)

Samirah al Mansur, AoA, SC, OP etc., etc.
Former "Old Bird of the Night" at Pennsic



Pictures from the Archives



An Tir's Fortieth Year Rapid Response Vehicle

From Left to Right: THL Robert Trinite, Dame Rowan O'Callaghan, THL Tvorimir Danilov, and Lady Fjörleif Hrafnarsdóttir.