

YOU'RE DAMNED IF YOU DO.....

....and you're damned if you don't. When it comes to vehicle rescue, answers or opinions are not always simple...

By Eric J. Rickenbach

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As a vehicle rescue instructor, I often have pictures and articles of various collisions sent to me with the oft repeated question: "what would you have done?" While I sometimes reply with potential suggestions and points to consider, many times I cannot or choose not to provide a point of view. I do believe that conducting a post-incident analysis is important but that only works when the key players at an incident are present, and even then some answers will be elusive.

This is the case of an article shared with me about a collision that occurred recently in the United Kingdom. The "cliff notes version" of the incident is that a passenger vehicle was struck by a large truck, after which the car's two occupants self-extricated. They then went and sought refuge in an uninvolved car that belonged to someone who had stopped to aid at the accident and subsequently advised arriving emergency services of neck pain. The roof of the Good Samaritan's vehicle was subsequently removed in an effort to extricate the accident victims on a stretcher/board. The question from the person who wrote me was on the order of "was it necessary to do that to an uninvolved vehicle?" My short and immediate answer was and is "I don't know."

Now, before everybody starts thinking that this is an article to callout or condemn the actions of the rescuers in this particular incident, it is not. When incidents like this occur, I look at each one as a potential learning

experience, not just for the persons directly involved, but for the rest of the emergency services community as well.

The first question that I always consider – and the one that always needs to be the overriding

may have played a role in the rescuers decision making process. Lacking the full story, people engage in discussion, which tends to lead to arguments as opposed to learning points. This was true in this case, as

can happen just about anywhere in the world, but what he was able to provide added some additional information as to what the rescuers on the scene faced and probably led to their decisions and actions.



Medical crews assess the original accident scene and question the 'relocated' accident victims

Pictures of the 'uninvolved' car from BBC footage

decision maker at incidents - is whether the rescuers efforts were in the best interests of their patient. We tend to forget that rescue is a patient-care function. And when that occurs, our vision and actions become somewhat skewed. We start to look at the vehicles and what we can or cannot do to them, regardless of whether it is best for the patient.

Too many times, people will armchair quarterback an incident based solely on media accounts and a few post-rescue pictures without the benefit of firsthand knowledge. There is usually a lack of the minute details that

while I researched this incident I came upon plenty of commentary – both pro- and con. Some of the comments supported the rescuers and others threw them under the bus for what transpired.

I am fortunate to have an instructor friend in the UK, and I reached out to him to see if he could provide additional facts. While his service was not involved in this specific incident, he was able to provide some additional insight. He first pointed out that information was limited on the patients because of privacy laws, something that

In this particular case, the accident involved a passenger vehicle and a large truck. The occupants in the car were both over 60 years of age and while able to self-extricate, they were left standing in cold and wet weather. Emergency services took a while to arrive on scene and the victims accepted an offer to shelter in an uninvolved vehicle.

When the rescue services arrived and began to assess the patients, additional signs and symptoms appeared that led the rescuers to the conclusions that full immobilization was best and

to accomplish this they wished to vertically remove the patients. The only way to complete this was to do a total roof removal.

With the information from the media and that additional information that my friend was able to provide, there are several questions that immediately come to mind from the patient care perspective:

1. What was the mechanism

It was cold and wet. Were the combination of the excitement of being in an accident, coupled with the effects of weather on the patients masking other more subtle signs and symptoms?

These are just three of the patient care points specific to this incident that immediately come to mind. All of these will require consideration when making treatment decisions.

patient oriented rescue.

As an aside to all of this, I realize that there is growing debate in the EMS community today about when, why, and how to apply spinal immobilization in any given scenario. However at this point, based on my research on the topic, there is no firm consensus as to what is best. Obviously, more research needs to be done, and good rescuers

even have taken into account that this was an uninvolved vehicle? Will the responders have more to fear from a lawsuit for cutting an uninvolved vehicle than they will for potentially paralyzing their patients?

Too often, the public safety community is very quick to condemn their counterparts' actions without the benefit of "being there". While opinions can aid the learning process in some cases, those opinions first need to be based on facts. In many cases, all the facts are not known, but from a learning perspective we can still pose the questions in a manner that promotes learning (and not just to criticize or poke fun at other rescuers).

In this case the two casualties were later released from hospital without injury which is probably what prompted most post-incident comment but the rescuers rightly looked at all of the available incident information and made decisions for a patient-oriented rescue based upon that information, their training, and their experiences.

West Sussex Fire & Rescue Service crews are directed by the requirements of SE Ambulance Service Paramedics



of injury? How serious was the damage to the vehicle involved in the collision? Did the involved vehicle's occupant safety systems perform correctly?

Again, lacking the benefit of 360 degree size-up, if nothing else, we have to consider the fact that the vehicle was hit by a large truck so there was certainly the possibility of cervical injury and plenty of examples of seriously injured casualties walking post-incident.

2. Both of these victims were over 60 years of age – are there geriatric considerations that must be accounted for? What were their previous medical histories?

We know that musculoskeletal injuries are more prevalent in older patients than they are in younger folks, and you also need to consider if either of them had some underlying medical complications that affected the decisions made.

3. Were the victims suffering any type of environmental complications?

Based on the information I have, it seems that the rescuers on-scene were considering all of these points, and acting in the

will follow that debate to learn from it.

So what is the best answer in this case? "You're damned if you

Note: The accident referred to in this article occurred on the 8th January 2013 on the A27 near Arundel in West Sussex in

A textbook roof removal on a vehicle not actually involved in the accident



best interests of their patients. If rescuers are asking themselves these questions as they work an incident, they are performing a

do and you're damned if you don't." Could the patients have been removed without taking the roof off? Should the responders

the South of England. Link to BBC story: <http://www.bbc.co.uk/news/uk-england-sussex-20944339>