

Week 5 Participation

Reply #1 Day 1– to Dr. Opeyemi Ojo’s post on Topic 5 DQ 1

Hello Dr. Ojo,

Since I worked as a New York City Emergency Medical Technician (EMT), I have experienced many disaster scenarios in my short 4-year career. The one that comes to memory as the most impactful disaster was the stuck Amtrak trains in the Summer of 2017. That summer day was hot, and it didn’t help with the stranded train when they lost power and had no air conditioning. All efforts on the train conductors and Amtrak staff members resulted in no deaths, but multiple elderly patients were suffering from heat emergencies. The many patients that suffered the heat-related complications had more to worry about, especially all the first responders and civilians. There was a threat of an active shooter that incited panic that swept over the entire Penn Station, Amtrak Station, and Madison Square Garden while the stuck train disaster was occurring. There was a loud sound, which had was mistook for the gunfire, which caused a massive stampede of panicked civilians that left even more victims from being trampled. These first responders, civilians, and I were not aware of what had happened at the moment, but we still had a job to perform to provide aid and safety for all patients and victims. We even had to instill a strong sense of confidence and bravery for the scary event that many believed had taken place.

Reply #2 Day 1 – to Ami Mantych’s reply on my post on Topic 5 DQ 1

Hello Ami,

Separate from the pandemic, I had personally experienced a disaster where I needed to debrief and talk to a wise comforting person. About two and a half years ago, I responded to a 911 call for a person who was in traumatic arrest. Long behold, I knew my patient's identity, and he was a friend, as well as a colleague. He was off-duty when he was riding his motorcycle when he had veered off and crashed, possibly from another motor vehicle colliding or cutting him off. Immediately, upon making contact with the patient on the scene of the tragic accident, I realized it was my friend/colleague. I couldn't panic at the time because I knew I had to save his life. I was the more experienced emergency medical technician on the first arriving ambulance, yet I was the member who was closest to the victim. I was afraid and upset, but I, along with the other responding paramedics and certified first responder firefighters, performed the best lifesaving treatment we could to attempt in saving his life. Sadly, the result was the doctors at the local hospital, along with my team and my effort, wasn't enough to save his life. I needed to speak with a few people, not necessarily a chaplain, but a professional therapist and even my family/loved ones after that tragic scene. After that assignment and after the news was official that he wasn't able to be revived, my teammates and I spoke with a man who knew our job and was a professional therapist in dealing with these kinds of trauma. He provided me with comfort and reassurance that I needed to learn to accept the outcome was out of my control. I was able to vent my frustrations and feelings of sadness without being judged, and the weight-bearing of the