

Shock and Awe

Category: Emergencies

written by Joe Amaral | November 15, 2022

My ambulance partner and I responded to a 9-1-1 call for a person with difficulty breathing at a department store, but we couldn't find anybody needing medical attention. A worker pointed to the metal ladder at the back, saying there was a guy working on the roof, and they hadn't seen him in a while.

Carefully, we climbed the long ladder to the industrial rooftop and found a man behind an AC unit in the baking sun. His hands were purple and his face beet red. He said he felt short of breath for an hour before calling, thinking it was anxiety.

I questioned him and placed him on the ECG leads, petrified to see he was in a rare, lethal rhythm called pulsing ventricular tachycardia at a rate of 300 beats per minute! His blood pressure was very low (30/15)!

I needed to cardiovert him immediately. As I placed the defibrillator pads on his chest, he started saying he was fading, "going home." I shocked him and, fortunately, one spark brought his heart rate and rhythm back to irregular but almost normal!

I started an IV. Meanwhile, my partner did a 12-lead ECG (to monitor the electrical activity of the heart). His vital signs began improving immensely.

We had to figure out how to get the patient off the roof. Generally, we would do a cliff rescue type of operation or a helicopter hoist. But time was critical for this patient. These would take way too long.

The fire department had placed a 30-foot ladder and rigged a rope system, putting a harness on the patient to lower him down. This guy was so metal he thought he could walk over to the roof edge and climb down himself. It was the fastest way, though not the most advisable, but we had no other options.

The dude handled it.

We attached him to the ladder and a safely strapped fireman, just in case. He gingerly made his way down to the gurney and waiting ambulance, and we rushed him to a cardiologist.

The patient recovered and was released home with a new pacemaker-defibrillator to shock him should he decide to repeat this adventure.

It was a great success story, and a chilling example of our frontline first-responder EMS job. Ours is a dynamic, ever-changing, think-outside-the-box type of wilderness medicine where we must brainstorm new ideas in critical situations and work together to achieve a desired outcome: saving a life.

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