I was sitting in the ambulance base after teaching DT4EMS a class not too long ago, when a medic began to tell me about how he controlled an “uncooperative drunk”. This seasoned medic began to describe how he placed his knee across the throat of this intoxicated patient. To make matter worse this guy was a supervisor.

I asked “why” he used his knee and he replied the patient was cursing at him and wasn’t allowing treatment to take place. Several thoughts rushed through my mind at the time…… First was “why” did the medic feel he needed to use deadly force upon an “uncooperative” patient? I think the answer there was two fold.

First and probably the most deadly was machismo. I think machismo was getting to him because he wanted to show his male side, that he was tough. The second was a lack of training and/or preparation. He apparently had no training on the levels of force and didn’t’ realize putting something (a knee) across the throat of a person was considered, in a lot of places, to be deadly force.

Lets’ take a step back to why most people enter into EMS. The overwhelming majority entered because they have a true desire to help others. People start as either a First Responder or an EMT. Some move onto becoming a paramedic because they want to be able to “help” even more.

Something that gets lost in the training and the street experience is Good Customer Service. You remember, the Golden Rule…… the whole “Do unto others”, well where does it go? The crazy schedules of EMS providers, the poor diet, rough on the family life lifestyle sometimes leads us to forget “why” we got into the business to begin with.
It seems to leave a lot of providers for an undetermined amount of time, surfacing again with those who seem to outlive the average career span in EMS. It is some of the old-dogs that start to show compassion and understanding again. They find their “bedside manner” all over again.

Simple words like “I’m sorry” or “Excuse Me” said with sincerity can calm an escalating situation. Using “please” we need to….. can help move a person toward allowing treatment or transport to take place. We joke a lot about “Sign here” but that should not be tolerated as a standard in EMS.

Good customer service means doing more than what is expected. It is to go that extra step to make patients and their family feel important. During PALS classes I like teaching the “Coping with Death” station. I can give good customer service tips to the participants.

I can share my experiences with the participants. As a medic I received very, very little training on telling a family member their loved one was dead. As a police officer I had to deliver death notifications and received …. Yep you guessed it…… little training on “how” or “what” to say. I ask you…… in a code with a prolonged down time….. who is you real patient? Who needs good customer service too?

I write this for several reasons. Many assaults that occur in EMS are preventable. One of the absolute best ways is to remove machismo. You know, the whole “I control the scene” attitude and get back to caring. EMS shouldn’t be about how people look at you as an individual, but how well the patients “perceive” our treatment of them.

Sometimes we get so fixed into “what” physically we must do during a call, we forget it is EMOTION that people remember.

Think about it like this. Have you ever gone to a restaurant and the food was OK, but the service was outstanding? You went back didn’t you? The reason was someone made you “feel” important, like they really cared about YOU. That is good customer service in EMS. Making the patient and their family believe you care.

I can tell you from personal experience, when I learned to apply good customer service both as a paramedic and as a police officer I was in a lot less fights. So in other words I found good customer service to be a great “tactic” in my self-defense jump-kit.

I still believe a person should train in Defensive Tactics for those situations that do unfortunately arise, but good customer service can help many bad ones from ever happening.

About the author: Kip Teitsort is a full-time EMS educator with over 15 years experience in EMS and 11 years in law enforcement. He is the creator of the DT4EMS program. For more articles on scene safety visit www.dt4ems.net