

# Friday Night [under the] Lights... 2015



*Happy Friday.*

You know, the opening of a FNuL discussion is actually one of the toughest parts about writing it. It's the hook. It's the greeting – the establishment of that brief bond between writer & reader. Sometimes I spend more time trying to figure out what to say in the beginning than I do for the rest of the discussion.

In a way it's like an email you send to someone you haven't seen in a while.

"Hi Cindy – *Hope all is well*". Hope all is well. That's really nice. Better than "I hope not everything in your miserable, pathetic, non-productive, useless, annoying world isn't too bad."

☺. Happy face.

But these first few lines are the FNuL equivalent of a First Impression, right? If you like what you see and read, you're much more likely to want to read more. It's a more rewarding way to spend your time. If not, you choose to move on and read something else.

I am convinced that first impressions are extremely important in life – both personal & professional. As a matter fact, research published in 2006 by a psychologist named Todorov determined that it takes an average person just 1/10 of a second to make a first impression in a relationship setting (so I suppose it's more accurate to say love at first 1/10<sup>th</sup> of a second sight). The occupational psychology literature is a little more forgiving and suggests we have a full seven seconds to make a first impression.

What's important to remember is that first impressions aren't just related to people, they apply to situations and settings as well. That's why people sometimes choose wine because of a cool label. It's why realtors tell us to boil cinnamon before showing a house so the smell will make a positive impression on a potential buyer.

It's really valuable to pay attention to the impressions we make, both as individuals and as an organization.

If we approach patients in a way that conveys we're caring (and by the way, not *fake* caring but real-live *true* caring), we are clean, neat and act professional by introducing ourselves and being attentive to the patient, their first impression will be that we are here to help, and we know what we're doing (which better be the case or you're in the wrong biz...).

If we're sloppy, engaged more with our partner than the patient and don't focus on the caller's needs, chances are pretty good they'll feel like we don't really care, we don't know what we're doing and they'll wish there was a 9-1-2 option.

It's easy to talk about first impressions and how important they are, it's a whole different story to maintain a constant, healthy awareness and make sure everything good about you and what you do is conveyed every time you connect with another human being.

Positive first impressions open the door for a person and an organization to shine brightly in everything they do. Negative first impressions give us a tremendous opportunity to try and salvage at least some minimal positive impact. Take your pick.

And so, after a bit of FNuL rambling about how to start off a weekly discussion on a positive note, I've chosen to search the Internet to provide you with something of value to start out tonight's issue.

A little morsel of trivia that you can pass along to your friends to help make great first impression.

Here it is – *did you know on this day in history in 1968 the ABC Masters bowling tournament was won by Pete Tountas?*

See how easy it is? Sure beats me just saying "hope all is well" ...

## What EMS can learn from a few bugs in ice cream...



You have, no doubt, been reading about the recent *Listeria* contamination in the Blue Bell creamery in several states. Several patients have fallen ill and some have died.

As any bacterial contamination is, it's a devastating event on many levels. The company has voluntarily recalled all their products and has stopped production until they are 100% confident that the plants are free from contaminants.

But there's a really interesting part about this story. And all of us in public service can learn from this...



It's not about the bacteria. I'm not going to dive into the pathophysiology of *Listeria* infection, signs, symptoms and response. It's not that.

Last night, I went up to the grocery store by our house to pick up some material to create an award winning meal (unfortunately, there's always some assembly required which derails the whole project – that's my excuse, anyway).

I walked past the ice cream freezer and there was a bunch of people just standing there talking about the recall.

But they weren't saying they would NEVER eat that Blue Bell ice cream ever, ever again. They weren't bad-mouthing their training or cleanliness or anything else negative from the news.

They were talking about how responsible Blue Bell was, how they hoped this was only a short pause for the company and how they looked forward to the day that Blue Bell was back on the shelves. One lady even said she wasn't getting any "alternatives" because she didn't want to "break her Blue Bell habit".

As I was driving home, I kept thinking about how dedicated those people were to a specific brand (by the way, if you've never tried it, please do when they take care of the little life-threatening infection issue they're dealing with). It would be so easy to be angry, disgusted, point fingers, etc., but they weren't. They knew Blue Bell had a big problem and they were wishing them a rapid recovery.

If I were having this discussion with Jeff McCollom [AMR Senior VP of Innovative Practices] he'd look at me and say – "Of course. Brand loyalty".

When a customer / client (our world – patient / community) has developed such respect for an organization through repeated exposure, they stand by even in the tough times. They have come to trust that organization because of every interaction, every reference, every story they have experienced (or to tie this discussion together nicely, every *first impression* they have).

This could easily destroy a company overnight. But Blue Bell has done such a great job during every single one of their non-Listeria days that they have everyone pulling for them to get them back.

In a message from their CEO several days ago, he made several points that reinforced their reputation for doing what's right. It was honest and addressed the issues head on. Here's some of what he said...

- We're committed to doing the 100 percent right thing, and the best way to do that is to take all of our products off the market until we are confident that they are all safe.
- We have brought in one of the world's most respected food safety microbiologists to inspect our plants and systems to help us get to the bottom of this issue.
- Through further internal testing, we learned today that *Listeria monocytogenes* was found in an additional half gallon of ice cream in our Brenham facility. While we initially believed this situation was isolated to one machine in one room, we now know that was wrong. We need to know more to be completely confident that our products are safe for our customers.
- As Blue Bell moves forward, we are implementing a procedure called "test and hold" for all products made at all of our manufacturing facilities. This means that all products released will be tested first and held for release to the market only after the tests show they are safe.
- At this point, we cannot say with certainty how Listeria was introduced to our facilities. We continue to work with our team of experts to eliminate this problem.
- We are heartbroken about this situation and apologize to all of our loyal Blue Bell fans and customers. Our entire history has been about making the very best and highest quality ice cream and we intend to fix this problem. We want enjoying our ice cream to be a source of joy and pleasure, never a cause for concern, so we are committed to getting this right.

So what this Little Creamery in Brenham, Texas teaches us is the huge value of earning our reputation and the respect of the people we serve. Every single day. Every single time. Every single patient. We sometimes don't do a very good job at that. But when we do, just like Blue Bell is doing, the power of that is tremendous.

We can do the same thing (not Listeria in the ambulance...). We can pay attention to every detail so our patients develop the same devotion to the men, women and organization that takes care of them.

*One first impression after the other...*

## Extended expiration dates on DuoDote autoinjectors...

The FDA alerts health care providers and emergency responders of expiration date extensions of certain drugs when they approve limited quantities to be used past their printed expiration date. This is an important way to maintain drugs that are used very infrequently (or in the case of DuoDote, almost never). This particular extension applies to auto-injectors manufactured by Meridian Medical Technologies.

On 03/27/2015 the FDA alerted health care professionals and emergency responders of updated dates through which DuoDote auto-injectors, manufactured by Meridian Medical Technologies, may be used beyond the manufacturer's labeled expiration date. To help ensure patient safety, these products should have been — and should continue to be — stored as labeled.

This posting updates FDA's May 13, 2014 alert, which notified health care professionals and emergency responders of a two-year extension of the labeled expiration dates of certain lots of DuoDote auto-injectors.

The FDA is not requiring or recommending that the identified lots be relabeled with their new use dates. However, if replacement DuoDote product becomes available during the extension period, then it is expected that the DuoDote lots in this update will be replaced and properly disposed of as soon as possible.

If you have questions, please contact David Twiss or Brad Leissa at [brad.leissa@fda.hhs.gov](mailto:brad.leissa@fda.hhs.gov) or Brooke Courtney at [brooke.courtney@fda.hhs.gov](mailto:brooke.courtney@fda.hhs.gov).

## 61,883 is the number to beat...



It's that time of year. The AMR World CPR Challenge is scheduled for Wednesday May 20, 2015. Each year this event builds on the previous years' numbers. The World CPR Challenge is the brainchild of Doug Petrick [AMR General Manager]. The idea was hatched over some two carbon fragments and has been an amazing adjunct in our battle against sudden cardiac death.

If you need any support with your media efforts Tawnya Silloway and Kim Warth are waiting to assist you in any way, please reach out to them - we want to make sure you have the most successful event possible.

## What the Heck...

This one speaks for itself.



I don't need the details and I'm not interested in the offer, thank you.

## Epilogue...

There's a pirate ship out at sea and the captain asks his pirate in the crow's nest to keep on the lookout. The guy in the crow's nest says "I see a boat a few miles off, but they're gaining fast."

The captain says "Quick someone get me my red shirt. That way if I get hurt, the crew won't see and we won't lose morale."

The lookout says "They're getting closer and now there are five ships!"

The captain says "Quick, someone get me my brown pants!"

---

That's it from my world. *Happy Friday.*

As always, thanks for what you do and how you do it with those first impressions...

*Ed*

---

Edward M. Racht, MD  
Chief Medical Officer  
American Medical Response  
[ed.racht@evhc.net](mailto:ed.racht@evhc.net)