



## **LIFEFLIGHT OF MAINE**

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### Address Service Requested

Dispatches is published by LifeFlight of Maine for members of the state's Emergency Medical Services community. Comments and suggestions may be directed to the Central Maine Medical Center Communications Department. Telephone: 795-2475. E-mail: [cmmc@cmmc.org](mailto:cmmc@cmmc.org)  
For more information about LifeFlight, call toll-free 877-262-2525.

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#### *... Helipads continued*

participating hospitals by assisting in community development efforts, soliciting major corporate gifts and by providing technical assistance.

LifeFlight of Maine views the construction of additional helipads as both an access and a safety issue. The statewide program will assist hospitals and healthcare clinics in creating on-site, dedicated, lighted and protected helipads as well as upgrading communication systems.

In developing helipads throughout Maine, LifeFlight's goal is to eliminate, wherever possible, the need for secondary transportation between hospitals and landing sites. Dedicated, lighted helipads enhance safety for the patient, EMS and hospital crews, ground support personnel, and the helicopter crew.

A key component will be an annual campaign for broad-based support involving Maine businesses, community service groups, and individual sponsorships. LifeFlight management and medical services will be involved throughout the duration of the fund-raising program.

Participation of sponsoring organizations, their employees and volunteer leadership is essential to the overall success of the project. The fund-raising campaign's planners feel the project will appeal to communities who wish to support local hospitals and ensure that residents receive the full benefit of critical care air medical transport.

For additional information, contact Darryl Gentry at 795-2986 or 973-5055.

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#### *... Critical care in the air continued*

helicopter's critical care setting and the caregiving team of John and flight paramedic Paul Knowlton. Knowing each minute mattered, John and Paul made sure Keith was secure and comfortable and then gave the go-ahead to pilot Don Dorsey to send LifeFlight back on its way to EMMC.

Thirty-seven minutes later, John helped transport Keith from the helicopter to EMMC's Heart Center. Twelve minutes after arriving, Keith was in one of the Heart Center's catheterization labs receiving the advanced care he required.

Back home and healing well, Keith wrote to LifeFlight about how much John's reassuring ways meant to him. John feels being personally remembered by a critically ill patient is a special compliment. "When someone comes through a major medical crisis, with countless people caring for him, and he remembers your name, you know that you've connected with the patient, and that's what it's all about."

Since its first lift-off in September of 1998, LifeFlight has offered hundreds of Maine patients like Keith critical lifesaving care and transport.

# DISPATCHES

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## LIFEFLIGHT AIDS IN SAVING LIVES

by Randall Dustin

Bill Allen awoke one night recently to find himself in the midst of a nightmare.

"I went to bed early and woke up about nine o'clock vomiting blood," Bill said. He asked his mother to get him to nearby Bridgton Hospital.

The Bridgton Hospital emergency staff was triaging Bill when he began vomiting again. Bill said it was then that the seriousness of the situation became clear to everyone. The Bridgton Hospital Emergency Department (ED) called Philip O'Connor, M.D., a gas-

troenterologist who practices at Central Maine Medical Center. Dr. O'Connor in turn called the CMMC Emergency Department to discuss Bill's transfer to CMMC. The CMMC ED suggested that Dr. O'Connor consider using LifeFlight.

"It was the best decision I ever made," Dr. O'Connor said. "He probably would have died in the ground ambulance on the way over. Somewhere in the middle of Casco or Poland he would have had no blood pressure."

Eight minutes after lifting off from CMMC the LifeFlight helicopter touched down in the parking lot at Bridgton Hospital. Flight nurse Cathy Case and flight paramedic Brian Chipman loaded Bill aboard and pilot Ed Pascu took the airship aloft for the return to Lewiston.

"I was very comfortable during the flight," Bill said. "Just to see them over there to pick me up that fast was reassuring."

While emotional reassurance is always important to emergency patients, what Bill desperately needed at the time was blood. He had already exhausted Bridgton Hospital's reserves of his blood type. "It was coming out of me just as fast as they could put it into me," he says. As the helicopter flew east towards Lewiston, Cathy and Brian



From left, flight nurse Cathy Case and flight paramedic Brian Chipman, Bill Allen of Harrison, and Philip O'Connor, M.D., a gastroenterologist who practices at Central Maine Medical Center. Bill probably wouldn't have survived the transfer from Bridgton Hospital to CMMC without LifeFlight's assistance.

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## Pilot Profile

### MISSION STATEMENT

To provide a statewide medical helicopter service that transports critically ill and injured patients. LifeFlight will provide the highest quality of care and follow rigorous safety standards.

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**LIFELIGHT OF MAINE**

## AL SABAKA JOINS FLIGHT TEAM

### Pilot, Lewiston

By Randall Dustin

Anyone meeting LifeFlight pilot Al Sabaka for the first time might be struck by a couple of things – his humility and sense of humor.

"I think of myself as a taxi driver," he says. "I'm proud to be able to carry on board the professionals who do the real work."

Al's career in aviation began in 1966 when the U.S. Army decided he'd make a good helicopter pilot. The following year he was sent to Vietnam to pilot gunships. Although he was shot down several times, the danger of the assignment didn't sink in until later. "I was 21 years old, bulletproof and stupid. Combat flying is something you get sucked up into," he recalls.

His year of combat experience presented its own unique lessons, some of them darkly humorous. "One thing I learned is that you never have enough gas on board unless you're on fire," he says.

After his discharge from the military in 1970, Al, his wife Donna and their children, Amy and Jason, moved to Maine. Though he was born and raised in Ohio, he considers himself a Mainer by heredity. "My mother was born and raised in Maine. Her entire family was from Maine," he says.

Though he tried his hand at various occupations during the 1970s, Al was never far from a helipad. In 1978 he started his own helicopter charter service and succeeded in "making a small fortune out of a large fortune." He later joined Boston MedFlight, a medical helicopter service start-up operation managed by Pennsylvania-based Keystone Helicopter Corporation. By the early 1990s, he was flying independently in Alaska for

various commercial interests and government organizations. In 1998 he "signed on again" with Keystone.

With more than 30 years experience as a helicopter pilot, Al is well aware of the "high level of interest" that most people have in his profession. For his part, he sees his role in providing emergency medical services as secondary to the work done by the direct care providers. "Delivering the professionals and equipment safely to the scene is what saves lives," he says. "With a medical helicopter, it just hap-



pens that they're in a fast machine. I find my job interesting, but I don't need it to be very exciting."

"I particularly enjoy EMS work. It's extremely gratifying. It's challenging, it's interesting and I love the mixture of professions involved. I learn things on every flight. I just don't like the work to be too exciting," Al says.

## WHEN MINUTES COUNT: THE NEED FOR HELIPADS LIFEFLIGHT ANNOUNCES FUNDRAISING PROJECT

Maine is a predominantly rural state served by over 30 community hospitals. These hospitals, assisted by local Emergency Medical Services, provide the first line of response for stabilizing critically ill and injured patients who need levels of service not available locally.

In order for patients in rural Maine to access a full range of specialty medical services, they sometimes must be transported to hospitals with advanced services. Sometimes these transports to an appropriate medical or trauma center must be done very quickly. Often critical care services must be provided during transport. LifeFlight of Maine provides this critical response.

LifeFlight of Maine has identified safety as its number one priority. An essential element of safety is the infrastructure that supports communications and landing areas. LifeFlight presently has a designated landing site for every hospital and rural healthcare clinic in the state, but only four Maine hospitals have dedicated, protected and

lighted helipads. This means that many patients must be transported by ground ambulance between the hospital and the landing zone. This secondary transport results in lost time, increasing the potential for a patient's condition to deteriorate. In many cases the lack of a helipad requires transport between a hospital and an airport, adding up to 20 minutes of ground transport time before a patient can receive definitive care.

LifeFlight has mounted an 18-month fund-raising effort dedicated to raising \$1.7 million. The goal is to create a funding program for 50-percent matching grants (up to \$50,000 per hospital) for community hospitals to construct helipads. Conceived as a two-phase fund-raising program, the effort will invite major gift stakeholders and grass roots advocacy to support the project.

Nine hospitals in Maine have signed on to the helipad construction project to date. In addition to working with community service organizations, LifeFlight will support

*Continued on page 6 ...*

*... Bill Allen continued*

infused Bill with another unit of blood. His doctors would later say that this inflight transfusion probably saved his life.

When Bill was wheeled into CMMC's Endoscopy-Minor Surgery Department for a diagnostic work-up just an hour had elapsed since Bridgton Hospital first contacted Dr. O'Connor. As Dr. O'Connor examined the 24-year-old Harrison man, nurses hung another unit of blood. Since ground ambulance crews are not allowed to administer blood products, the last two units of blood given to Bill during emergency care may not have come in time had he been transported to CMMC by road.

Dr. O'Connor discovered that Bill's severe bleeding was coming from a large tear in a duodonal artery. The damage was caused by a stomach ulcer that had leaked caustic digestive fluids onto the artery, weakening its structure. Dr. O'Connor called in surgeon David Rideout, M.D.

Dr. Rideout says his role in caring for Bill "was not very glorious compared to what everyone else did." He credited the emergency care teams at Bridgton and CMMC, as well as the LifeFlight crew and Dr. O'Connor, for saving Bill's life.

"He certainly would have died had he not received the care he had at every step along the way. Had he not been attended by very well trained people, he probably would have died on route. He was bleeding so much that he had two near-death episodes requiring resuscitation. Having LifeFlight, the ED personnel and Dr. O'Connor making all the right calls saved his life."

Dr. Rideout said his role in repairing Bill's damaged artery involved a "very straight forward procedure." But by the time his condition turned for the better, Bill's care-providers had administered 12 units of blood.

Bill uses nothing but superlatives to describe his care at Bridgton

Hospital and CMMC. As for LifeFlight: "If it wasn't for them, I wouldn't be alive. Had some things been different, I wouldn't be here," he said from his bed at CMMC. "LifeFlight was Johnny-on-the-spot. They're awesome. It's like they have ESP."

Dr. O'Connor agreed that Bill's experience demonstrated an EMS system functioning at its fullest capability. "It really worked out the way it's supposed to work out," he said.

As he recounted his story, Bill conversed with Brian and Cathy as if he'd known them a lifetime, often asking them to fill in details. Apparently Bill's family feels the same kinship with the LifeFlight crew, especially his mother who was in continual contact with Cathy throughout the ordeal. "My mother says this woman right here is the greatest woman who ever walked the face of the earth," Bill said, waving his hand in Cathy's direction.

## Training



LifeFlight of Maine's Bangor operation participated in Mass Casualty Incident Training at Gouldsboro Community Center, where a mock car-bus crash was staged. Also participating were fire departments from Gouldsboro, Winter Harbor and the United States Navy, as well as County Ambulance. The exercise gave local EMS providers the opportunity to learn how to set up a landing zone and identify patients requiring air transport.

*Photos courtesy of the the Ellsworth Weekly*



## LEWISTON PROGRAM COORDINATOR BRINGS MORE THAN 25 YEARS OF EMS EXPERIENCE TO LIFEFLIGHT OPERATION

by Randall Dustin

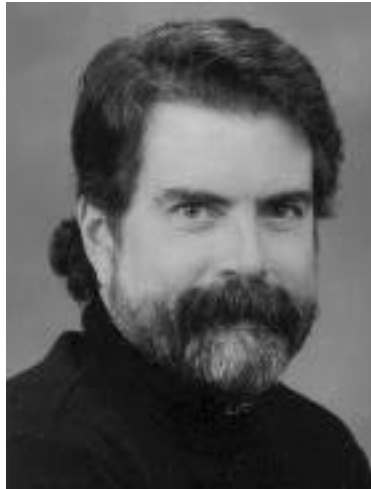
Paul Marcolini, program coordinator of LifeFlight of Maine's Lewiston site, brings a certain intensity to his work – but that shouldn't surprise anyone who knows anything about him.

Paul began his career in emergency medical services more than 25 years ago when he trained to do high-angle and technical rescue. His work with the New York Park Service sometimes involved technical helicopter extrications requiring rope rescues in highly inaccessible areas. But usually the assignments were "goofy stuff" like pulling wayward tourists out of the Niagara Falls Gorge. "The dramatic, high angle stuff was far and few between," he says.

After four years with the Park Service in his native New York, Paul returned Outward Bound as an instructor. His work with the organization took him to North America, Europe and East Africa. During these years, he gained significant experience as a mountaineer, eventually leading expeditions on Kilimanjaro and Mount Kenya in Africa, the Italian Alps and the volcanoes of Mexico.

His experience with Outward Bound also allowed him to "combine the two things I like to do – mountain climbing and emergency medicine."

When Paul left Hurricane Island Outward Bound after some 17 years, he was the organization's director of special programs for the Northeast. In this role, he was responsible



for creating new programs. "A lot of my job was involved in startups, which is why I was attracted to the LifeFlight startup in Maine," Paul says.

Prior to beginning his work with LifeFlight, Paul simultaneously worked in a variety of jobs. He was marketing coordinator for Tri-County Emergency Medical Services (TCEMS) and worked as a paramedic for several western Maine ambulance services. He served as executive director of Wilderness Medical Associates in Bryant Pond, an organization dedicated to providing emergency medical education for outdoor professionals. He is also quality improvement coordinator for TCEMS, chairman of the Maine Emergency Medical Services Education Committee, and a member of Mahoosuk Mountain Search and Rescue, based in Bethel.

His wife, Evie, also works as a paramedic and is research coordinator for Maine Medical Center's Emergency Medicine Division. The couple lives in Locke Mills.

Paul sees LifeFlight of Maine as "a combination of speed and critical care. It is another adjunct to the excellent EMS system that is already in place in Maine. It increases the options that are available to hospital and prehospital care providers. It allows other EMS providers to use the skills of the flight team and the speed of the aircraft to save lives. For the patient it means getting to the right facility as quickly as possible."

## CRITICAL CARE IN THE AIR

by Elizabeth Sutherland

Where do you turn for help when you are in pain, and shock, and far from the lifesaving medical attention you need quickly? Faith in your own well-being can shrivel when something goes wrong medically. But Machias resident Keith Willard found calming reassurance in the whirling rotors of LifeFlight's helicopter and in the steady countenance of flight nurse John Macone. Time-tested compassion for others and pure desire to help is an integral part of John – from his career

choice right down to the look in his eye.

John was on duty as an intensive care unit (ICU) resource nurse when he was paged to the LifeFlight crew quarters. A Downeast Memorial Hospital patient needed emergency care from Eastern Maine Medical Center's (EMMC) Heart Center of Eastern Maine. John's position as a resource nurse, an ICU registered nurse with the cross-training necessary to

help out in any part of the hospital, means that he has the flexibility to go where he's most needed. That freedom allows him to leave on a moment's notice to do something he's always wanted – be a part of a medical helicopter service.

When LifeFlight landed in Machias, Keith Willard was transferred from the care of Downeast's emergency department providers to the

*Continued on back page ...*