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From the Editor

with Greg Friese, Editor-in-Chief

My lowest moment as a paramedic

I still regret a euphoric comment to my partner after lifting a morbidly obese patient



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Editor's Note:

Treating and transporting a bariatric patient can require coordination with outside agencies, as well as specialized lifting and monitoring equipment. Bariatric patients have the right to expect professional and timely emergency care, with consideration given to their unique assessment challenges, and providers have the obligation to deliver such care without risking their own health.

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"You're a beast!" I blurted it out from the head of the cot to congratulate my partner at the foot of the cot, in the moment after we completed a series of [complex and difficult patient moves and lifts](#).

Those words, meant to be celebratory, mark the lowest moment in my experience as a field provider and come back to me more often than just about any other patient memory. It's a moment that still makes me feel regret and shame.

Between me and my partner was a morbidly obese, middle-aged woman. She had a leg injury and was unable to self-ambulate from her bedroom. We devised and communicated a plan for the patient to push herself from her bed to the cot as we pulled the bed sheet onto the cot. The patient followed our instructions, was appreciative of our deliberate movement, and was [reflecting our kindness](#) back to us. She undoubtedly was aware of how difficult her weight made lifting and moving for us.



All patients, regardless of their size or chief complaint, need to be treated with respect and dignity. (AP Photo/Mark Lennihan)

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Once she was on the manual, unpowered cot, we rolled the patient down a narrow hallway. We needed to change the cot height before we could carry the patient and cot out of the house. I explained to the patient we needed to lift her into a higher position and that she should hold her arms across her chest and not reach out to the walls as we lifted her. The patient did exactly as I asked.

After making eye contact with my partner to ensure we were both ready, I said, “[lift on three; one, two, three](#)” and we lifted the patient in one smooth, powerful movement. That’s when I spoke to my partner, my mouth just inches from the patient’s ears, “You’re a beast!”

Instantly the patient’s smile became a frown and she withdrew into a shell of silence. To the patient, I was no longer a caregiver, but a bully teasing her about her size and weight.

My partner’s reply, “Huh?” made it clear he hadn’t even heard me. I stammered to explain my words and apologize to the patient, but I couldn’t find the right words and it was clear our caregiver-patient relationship was ruined. We rode silently to the hospital with just nods and short responses to my ongoing [assessment questions](#).

RESPECT AND DIGNIFIED TREATMENT FOR ALL PATIENTS

A significant percentage of EMS patient encounters are for patients who are obese or morbidly obese. Obesity is often secondary to the patient’s actual complaint, but the patient’s weight and size present a significant challenge for EMTs and paramedics.

All patients, regardless of their size or chief complaint, need to be treated with respect and dignity. I failed my patient that afternoon with words – though not about her or intended for her – easily construed as a slander about her size.

ASK FOR AND USE ADDITIONAL RESOURCES

I don't recall why we decided to rely on muscle and pride to lift our patient, rather than [requesting additional resources](#). Her complaint was non-emergent. For reasons unclear to me then and now, we worked with urgency and performed a two-person lift, even though it was successful, that put us, the patient and our rapport with the patient at risk.

More than ever EMS providers have [tools available to assist with lifting and moving bariatric patients](#). Ideally, EMS providers also have leadership support to request more resources from nearby ambulance crews, firefighters, or medical first responders. Two more providers would have made the lift a routine moment for us and the patient.

CELEBRATE SUCCESS AT THE RIGHT TIME

I was proud of myself and I was proud of my partner for a successful lift of a heavy patient. We were both fit, but not powerlifters. We [came up with a plan to lift and move the patient](#). The successful lift gave me an adrenaline-surged feeling of accomplishment. The same feeling, I get after bench pressing a new personal record. It was a moment worthy of celebration, but my celebration was at the wrong time.

As EMS professionals, we regularly solve complex and challenging assessment, treatment and transport problems. Find the right way, time and place to celebrate your successes. I wish I'd saved a congratulations to my partner for after the call, not during the call.

About the author

Greg Friese, MS, NRP, is Editor-in-Chief of EMS1.com. Greg has a bachelor's degree from the University of Wisconsin-Madison and a master's degree from the University of Idaho. He is an educator, author, national registry paramedic since 2005, and a long-distance runner. Greg is a three-time Jesse H. Neal award winner, the most prestigious award in specialized journalism, and 2018 Eddie Award winner for best Column/Blog. Ask questions or submit article ideas to Greg by emailing him at greg.friese@ems1.com and connect with him on [LinkedIn](#).



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