

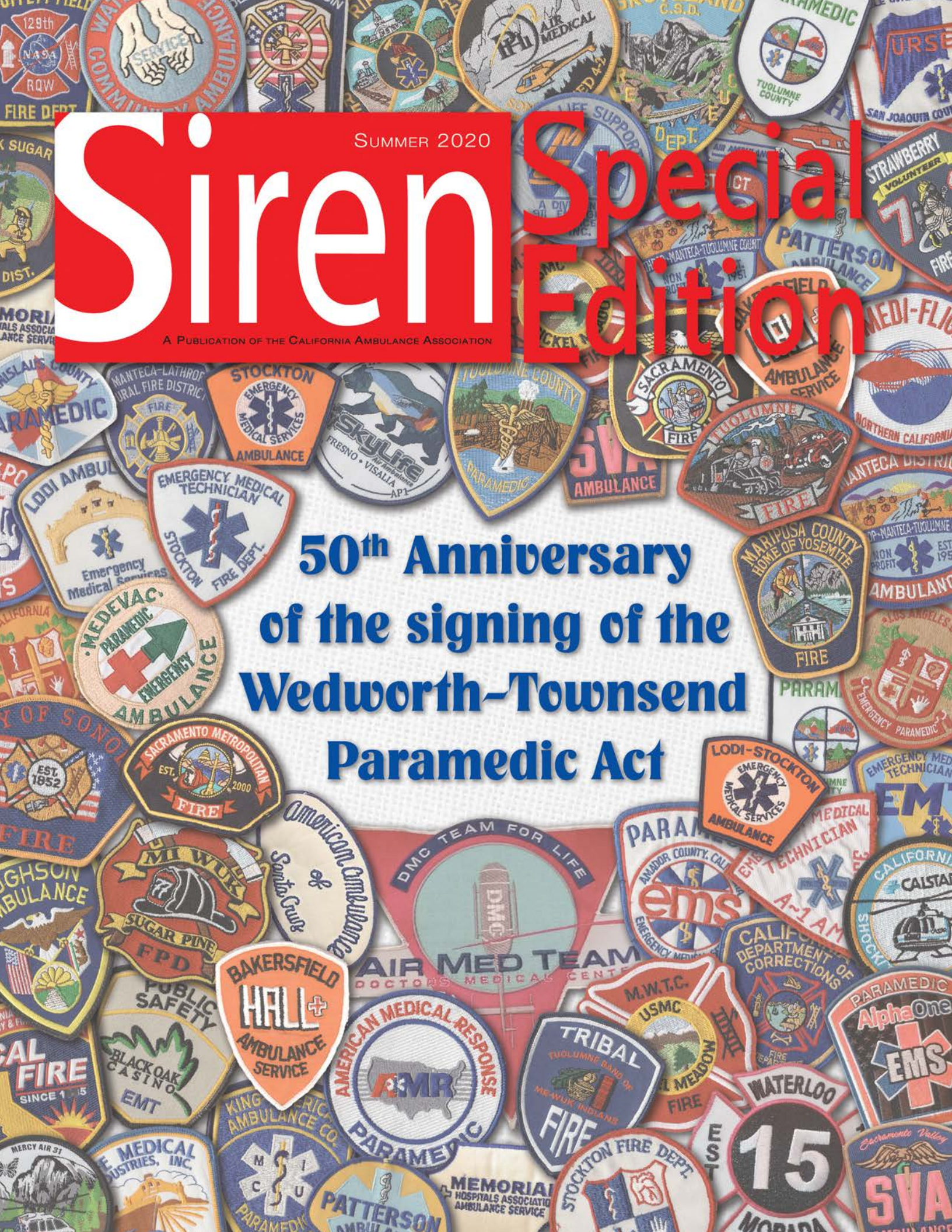
SUMMER 2020

Siren

A PUBLICATION OF THE CALIFORNIA AMBULANCE ASSOCIATION

Special Edition

50th Anniversary of the signing of the Wedworth-Townsend Paramedic Act





CAA Vision

Assure delivery of excellent pre-hospital care to the people of California by promoting recognized industry best practices.

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Administrative Director | Kim Oreno | koreno@the-caa.org

Accountant | Tricia Schrum, CPA | tricia@camgmt.com

Meeting Planner | Jennifer Blevins | jennifer@camgmt.com



California Ambulance Association

2520 Venture Oaks Way, Suite 150
Sacramento, CA 95833
(877) 276-1410 (toll free)
(916) 924-7323 (fax)
www.the-caa.org



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Circulation among California's private ambulance providers, elected officials and EMSA administrators.

President's Message



Todd Valeri | President

Welcome to this special edition of the Siren. We could not let the 50th anniversary of the Wedworth-Townsend Paramedic Act, and the creation of the first licensed paramedic program in California, pass without note.

California has a rich, deep history of EMS and prehospital patient care that developed well before 1970 and we are delighted to deliver it all to you. We go back to 1868, when LAPD – yes, the police! – operated ambulances and free-standing emergency departments, known then as “Receiving Hospitals” and move through time to celebrate all our history. This Siren commemorative edition truly celebrates events in our California prehospital legacy and the personalities that have played a part to shape both state and national EMS delivery.

Please take time to read about the inventions we know so well today and their Californian origins, including Rick Kendrick and his extraction device and Glenn Hare and his traction splint. Going further back into the annals of innovation, also follow the story of Dr. Enloe’s 1901 Log Flume Ambulance in Chico!

I would also like to thank Randolph Mantooth for writing the welcome letter to this edition. Many of us got into EMS after seeing the exploits of Johnny Gage and Roy DeSoto on the TV show *Emergency!* Randy’s involvement and support of all things EMS has extended far beyond his on-screen persona in advocating

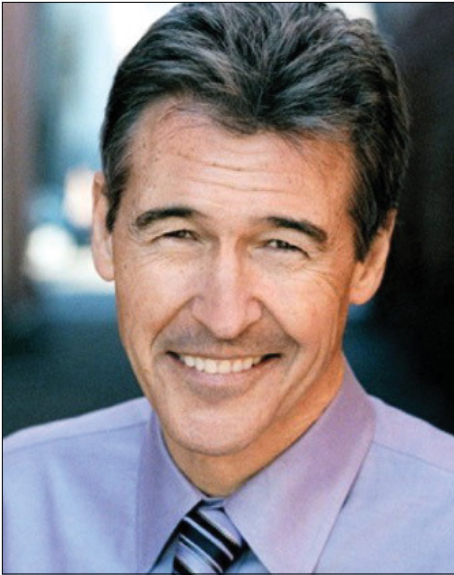
for and supporting the role of prehospital providers across the nation. On a personal note, we discovered the real life Johnny Gage, a paramedic currently working with my service here in Fresno, and perhaps in a future edition of the Siren, we can compare the working EMS life of the 1970s Johnny with the current 2020s provider!

I also wish to express my appreciation to Kristy Van Hoven, director of the National EMS Museum, for providing the content, stories, images and enthusiasm to this project. The impetus for this Siren edition was born out of the virtual exhibition, “California Responds: The legacy of California Emergency Medical Services.” In turn, “California Responds” was sponsored and supported by CAA members, GMR and Hall Ambulance, as well as the California Emergency Medical Services Authority.

Our history continues to be written, particularly as we face the challenge of a lifetime in COVID-19, which has placed all ambulance services and agencies firmly on the front line. Eventually, we will look back and reflect on these times and the fact that we played a major part in the victory in the pandemic that will eventually come.

Thank you all for your current service and please enjoy this edition of the *Siren* as we reflect on our past milestones, achievements, heroes and history.✱

Welcome Message



Randolph Mantooth
Actor, "John Gage" on *Emergency!*

Fifty Years of Wedworth-Townsend

On July 15, 1970, California Governor Ronald Reagan signed a legislative bill into law. This obscure, little known bill changed emergency medicine forever. It was called the Wedworth-Townsend Paramedic Act. This highly localized piece legislation would become instrumental in creating the Pre-Hospital care system we have today. The lives it has saved are incalculable.

It was written for any city in California that had a population of 6,000,000 or more. This stipulation was a, not so clever, way of saying Los Angeles would be allowed to conduct their pilot program utilizing mobile intensive care paramedics for the delivery of emergency care to victims at the scene of an emergency. The law had a finite life of two years. That, of course, was amended many times until it was signed into permanent law.

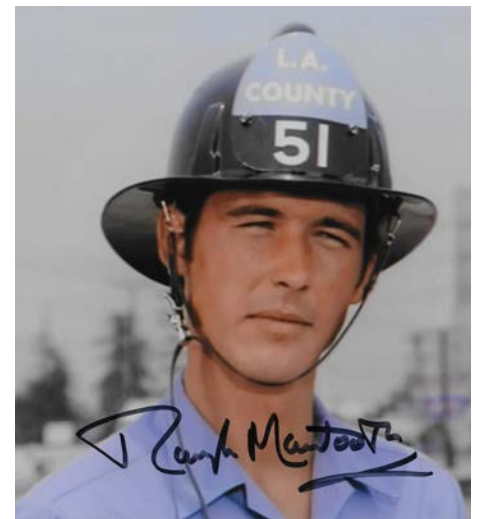
The question often posed to me is, did I realize the importance of the Wedworth-Townsend Act when I first shot the pilot of *Emergency!* The short answer is no. My main concern then was to show up for work on time, know my lines and do my best not to get fired. But, as the show progressed, Kevin and I began to see the impact paramedics were having on the country. The television-show, "*Emergency!*" of course, did not create paramedics. The men who wrote, legislated, and passed the Wedworth-Townsend Act deserve that credit. What

the show did do, however, was let the genie out of the bottle. It provided a showcase on a national platform revealing a brand-new concept of pre-hospital care to the public.

On a personal level, James Q. Wedworth, Larry Townsend, Kenneth Hahn, Dr. Walter S.Graf and Ronald Reagan had a heavy hand in saving my life! Saving my sisters life, as well. They have saved lives in numbers I can't even imagine, let alone calculate.

I thank them for that. The world thanks them.

Randolph Mantooth
Santa Barbara
July 15, 2020





Since the dawn of human civilization there has been a need for emergency response to care for the sick and injured.

It is through this need for care that the Emergency Medical Services can trace its roots.

From early battlefield medicine to modern response teams, those who provide crucial emergency response are at the heart of their communities and in no place is that more evident than in California.



ANSWERING THE CALL: CALIFORNIA'S EMS LEGACY

FRONTIER MEDICINE



Although emergency response for the sick and injured started in the earliest settlements on the land that is now California, emergency response was scattered and relied on volunteers, police,

and firefighters who were usually trained quickly and with basic life-saving skills in an effort to get the sick or injured to the hospital as quickly as possible to receive medical attention.

When lumber and mining ruled the west and companies sprang up across California, many hired surgeons and physicians to provide basic care for their employees. These territorial physicians, usually trained in medical schools back east, treated rampant disease outbreaks, horrific industrial accidents, gunshot wounds, and other traumatic injury with very little resources, basic medicines, and usually with outdated tools and equipment. One may have literally 'just rubbed some dirt on it' to stop the bleed in frontier California.

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Dr. Newton Thomas Enloe, M.D.

Newton Thomas Enloe was born in Barton, Missouri in 1872. In 1895 he earned his medical degree from the Missouri Medical College in St. Louis after which he continued studies in Chicago and at the New York Polyclinic. In 1901, outside of Chico in northern California, he began his career as the resident physician to the Sierra Lumber Company. Logging had (and continues to have) a reputation as one of the most dangerous industries, with horrific accidents and serious injury a daily occurrence. It was not uncommon for loggers to be struck by donkey engine cables, lose limbs in machinery, be entangled with derailed log cars or to become crushed between heavy logs.

As attending physician and surgeon in the logging camps, Dr. Enloe was forced to innovate treatment and transportation to ensure his patients were as comfortable as possible and had the best chance at survival from a traumatic injury. In order to ensure quick, and "comfortable" transport for the injured loggers, Dr. Enloe designed and built a log flume

"ambulance" that would transport the patient, and an attendant, down the 25 miles from West Branch to his facility in Chico for further treatment. This unique patient transport essentially looked like a buckboard wagon with room enough for a patient to lay and the attendant to sit and help navigate the log down the flume to a waiting wheeled ambulance that would take the patient to Enloe's hospital in the town of Chico.



In 1907, Enloe left the camps and set up a home and practice in Chico. He continued to treat lumberjacks from the area as well as provide medical service for those in town. In 1913 he opened a small 38 bed hospital that has since grown into Enloe Medical Center, a state-of-the-art medical facility serving Chico and the six-county area. Dr. Newt Enloe died in Chico in 1954, a true pioneer and leader in California medical care and patient transport.



— Beth Ann Krah, Board Member, National EMS Museum & family of Dr. Newt Enloe

Answering the Call: *California's EMS Legacy*

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While most people in EMS are well aware of the role of the fire service in southern California's EMS system, the extensive role of police departments like the Los Angeles Police Department are less publicized. Not only did LAPD operate the city's ambulances for decades, but they also operated a citywide system of freestanding (and free) emergency departments, known as Receiving Hospitals.

The first, the LAPD Central Receiving Hospital, was founded in 1868 as a contagious disease hospital, whose goals later morphed into providing emergency care to the public, care for injured police officers and firefighters, and care for prisoners. By 1948, there were 10 Receiving Hospitals spread across Los Angeles of various sizes, from a 16-bed hospital complete with operating room down to a rented storefront with a contracted on-call physician.

In 1908, LAPD acquired their first ambulance, a 1908 Studebaker Electric Patrol Ambulance. By 1948, the LAPD Receiving Hospital ambulance service operated three physician staffed and eight attendant staffed ambulances, contracted with private services for five more ambulances who collectively responded to 40,000 calls annually, dispatched by nurse dispatchers from three police locations.

Dr. Charles F. Sebastian, M.D.

Dr. Charles F. Sebastian, son of Police Chief Charles Edward Sebastian, grew up in the shadow of the Police Receiving Hospitals in Los Angeles and LA County. He was familiar with the sights and sounds of the poorest hospital system in the state and was driven to attend Stanford Medical School, where he graduated in 1922 and returned home to take a post at the Central Police Station and Receiving Hospital. In 1927 the Georgia Street Receiving Hospital opened, and Dr. Sebastian transferred to the new hospital to continue his work with the poorest emergency cases in the city. As Dr. Sebastian rose through the ranks, he found himself appointed superintendent of the four city hospitals in 1949.

Despite his many successes at the Receiving Hospitals, Dr. Sebastian recognized a growing issue with the increased use of motorized vehicles and the horrific injuries sustained by victims in traffic

accidents. His concern came to a head in 1952 when Ambulance Attendant, Jack Gilson, died after being thrown from a vehicle during a run. Dr. Sebastian had already witnessed two other attendants die in similar circumstances and feared it was a matter of time before more lives were lost so he developed a system of straps that would hold passengers to their seats. The early seatbelts were quickly installed in all 13 city ambulances preventing an immeasurable number of casualties during ambulance runs across the city.

Dr. Charles Sebastian fought tooth and nail for his hospitals and all who worked for him. He retired in 1961 and in 1970 the last of the Receiving Hospitals supervised by Dr. Sebastian closed its doors for good. If he were alive today, he would be astonished by the innovation in ambulance safety and the work paramedics can accomplish while en route to the hospital.

Throughout the 1930's, 40's and 50's private ambulance services also started to increase operations across California, in Los Angeles J. Walter Shaefer founded his ambulance service in Los Angeles in 1932. His goal was to become an innovator in patient care and transport throughout Southern California. Shaefer Ambulance became the first service to engage in fixed wing medical response, launching their air medical unit, Shaefer Air Service, in 1947. True flight para-medicine was still decades away, but patient transport by air would become a staple in the years to come. Shaefer Air Service was the first air medical service in the United States to receive Federal Aviation Association (FAA) certification as an air ambulance and was the second civilian air medical service in the world!



Like Los Angeles, San Francisco also had a free Emergency Hospital system, with six emergency hospitals ranging in size from 26 beds on three wards down to a first-aid station at the beach. The first Emergency Hospital ambulance was a 1913 Pope-Hartford motor ambulance with the service expanding over time to meet the increasing demand for emergency medical services. By 1932, the Emergency Hospital ambulance system answered five calls a day. By 1951, the Emergency Hospital ambulance system operated 14 ambulances with 49 Ambulance Stewards (the San Francisco title for Ambulance Attendant) and Ambulance Drivers. Interestingly, Ambulance Stewards both carried and actually administered medicines, including morphine, aspirin, and epinephrine.

The 1920's saw the birth of rescue squads and major innovations in life-saving we take for granted today but it would be another 40 to 50 years before EMS and advanced critical care would arrive on the scene. The Emergency Medical Services as we know it today was officially born in 1966 with a federal publication called *Accidental Death and Disability: The Neglected Disease of Modern Society*, also known in EMS as *The White Paper*.

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Answering the Call: *California's EMS Legacy*

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A study concluding in 1965 discovered that 52 million accidental injuries killed 107,000, temporarily disabled over 10 million, and permanently impaired 400,000 Americans at a cost of \$18 billion and growing public apathy towards accidental injury was epidemic.

AMERICA WAS FACING A SAFETY CRISIS, AND SOMETHING HAD TO CHANGE

In 1966 the joint publication by the Committee on Trauma and Shock, special task forces from the Division of Medical Sciences of the National Academy of Sciences, and the National Research Council reviewed the national accidental injury study and formulated recommendations to reduce the number of accidental injury, disability and death. Included are recommendations on emergency first aid, trauma registries and oversight committees, natural disaster response, research, and long-term recovery and rehabilitation.

In Los Angeles a study during the 1960's on heart attack patients had confirmed results Dr. Frank Pantridge was reporting from Ireland; that those who received immediate care from a Mobile Coronary Care Unit were more likely to survive their heart attack than those waiting to receive care once they arrived at a hospital.

Dr. Pantridge hypothesized that an immediate correction of the v-fib could, and should, be performed at the scene of the cardiac event to

increase the chance of survival. However, the major obstacle was defibrillators of the day relied on a main power supply to operate. Believing that defibrillators should be as prevalent and as immediately available as fire extinguishers, Dr. Pantridge set about creating the first portable defibrillator.



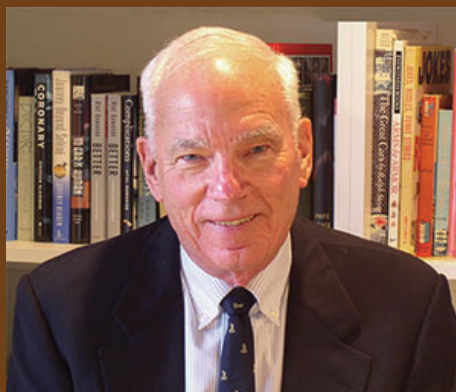
Dr. Pantridge and the Pantridge 280

In the winter of 1965, Pantridge converted the mains in an old ambulance to operate his new "portable" defibrillator and put the ambulance into service. The mobile coronary unit was responsible for ten successful resuscitations in its first two years. Pantridge and his team worked to improve their defibrillator design, eventually arriving at the Pantridge 280. A small red instrument that weighed 3 kilos with only one removable paddle, while the other was part of the main unit. This was the first truly light weight portable unit used in the Emergency Medical Services. By 1967 the success of Dr. Pantridge's mobile coronary care unit had piqued the interest of cardiologists in the United States. After listening to Pantridge speak on the success of the Mobile Coronary Care Units, Dr. J. Michael Criley, Dr. Walter Graf and other cardiologists across the US developed mobile intensive care units in their hometowns.

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J. Michael Criley, M.D., FACC, MACP

John Michael Criley graduated from Stanford University School of Medicine in 1956 and has since become a pioneer in cardiology and medical education. Dr. Criley was instrumental in the founding of the Los Angeles County Fire Department's Paramedic Program in 1969, the first hospital-based paramedic training program in the country. The initial program Dr. Criley conducted at Harbor General Hospital consisted of a select group of firefighters from the Los Angeles County Fire Department and from Los Angeles City Fire Department who were trained in life-saving techniques with a focus on heart attack victims. Dr. Criley convinced both the medical and public safety community, along with politicians, that a well-designed pre-hospital delivery of emergency coronary care could be performed by well-trained civilian personnel and contribute to better patient outcomes for cardiac emergencies. The Harbor General training program helped set the precedent for paramedic training across the country.



For over 50 years, Dr. Criley has been a leader and innovator in medicine and EMS. Through his leadership roles as Chief of the Division of Cardiology and full-time faculty at Harbor-UCLA Medical Center, as well as his extensive research in cardiac care, Dr. Criley has created legacy ground-breaking care that is provided to patients

worldwide. For his lifelong pursuit of care and medical education, he has been honored with a number of awards including the title of emeritus professor of Medicine and Radiological Sciences at the UCLA School of Medicine and the Paramedic Institute is now named the Dr. J. Michael Criley Paramedic Institute in his honor. Dr. Criley continues to serve and mentor students and colleagues in California and beyond.



Answering the Call: *California's EMS Legacy*

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Carol Bebout, RN

Carol Bebout was working as the head Critical Care Nurse at Harbor General Hospital when Dr. Criley developed the Los Angeles Paramedic program in 1968. Bebout graduated alongside the first class of Harbor General's paramedics and became the first Mobile Intensive Care Nurse in the state of California. In addition to working alongside emergency room colleagues, Bebout ran calls and trained a team of mobile intensive care nurses to staff the new mobile coronary care units 24 hours a day.

In addition to training paramedics alongside Dr. Criley and later at the Daniel Freeman Hospital in Inglewood, Bebout also worked alongside other EMS pioneers, Jim Page as well as Drs Criley and Lewis on the show *Emergency!* as a script reader, ensuring accuracy in procedures and operations. Although she recounts, "the need

for drama was an overriding concern. Fortunately, the really big blunders did get fixed," citing a defibrillating on the wrong side of the chest as an example.

Carol's dedication to paramedic education has led her to be one of the most influential educators in EMS as her early work with Criley and the LA training program helped guide the national curriculum for paramedics today.



On September 12, 1969, under the direction of Drs. Criley and Graf, along with Critical Care Nurse Carol Bebout, a select group of firefighters and ambulance personnel from the Los Angeles County and Los Angeles City Fire Departments started training as Mobile Intensive Care Paramedics. The idea was that these newly trained Paramedics could provide the crucial prehospital care and set the stage for the future of emergency critical care.

In December 8, 1969 Squad 59, dubbed the "Rescue Heart Unit," hit the streets of Los Angeles County becoming the first official paramedic unit placed into service in California. LA city's rescue ambulance hit the streets shortly after.

However, the success of the mobile heart units was limited by a California law that required a state licensed physician or registered nurse to administer invasive coronary care and thus, had to be available for rescue calls in addition to their other hospital based duties. This model proved to be difficult during the best of times and impossible at the worst and a change was brewing....

In January of 1970 things were heating up in regard to mobile intensive care. Two studies were conducted to evaluate the training and effectiveness of the Mobile Intensive Care Paramedics while Kenneth Hahn (elected official to the County Board of Supervisors)

and his personal physician Dr. Walter Graf worked on proposed legislation that would allow paramedics to provide invasive care in the field.



After receiving support for a new bill from the County Board of Supervisors, Hahn met with Senator James Q. Wedworth and Assemblyman Larry Townsend who introduced the bill to both houses of the state legislature. Despite initial plans to veto the bill, on July 14, 1970 Governor Ronald Reagan signed the Wedworth-Townsend Paramedic Act after losing a family member to a coronary event.

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James Q. Wedworth

James Q. Wedworth was born in April 1919 in Illinois. In World War II he served in the United States Navy, returning to the states after his service. He, along with his family, settled in Los Angeles where he owned a bicycle shop. Wedworth was elected to Hawthorne City Council in 1953 and was chosen mayor in 1958, holding both positions until his election to the state Senate in 1966 on the Democratic ticket. In addition to being a co-author of the

Wedworth-Townsend Paramedic Act, he is most notably remembered for his service as vice chairman of the Senate's Education Committee during the turbulent years at San Francisco State University and introduced campus reform measures to the senate during his tenure.

Senator Wedworth retired from politics after nearly 25 years and operated a horse boarding farm until his death in 1998 at the age of 79.

Your favorable consideration of this measure would be sincerely appreciated.

Respectfully yours,
James Q. Wedworth
JAMES Q. WEDWORTH

Answering the Call: *California's EMS Legacy*

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Larry Townsend

L.E. "Larry" Townsend was born in Memphis, Tennessee in October 1930. He served in the United States Navy and found his way to Torrance, California after his service where his family set up their home. He served as a member of the Civil Service Commission in Torrance before being elected to the state Assembly in 1966, representing the 67th Assembly District on the Democratic ticket. Townsend died of a heart attack while in office in 1973, three short years after the signing of the Wedworth-Townsend Paramedic Act and the development of the Mobile Coronary Care Units in Los Angeles.

The Wedworth-Townsend Act more clearly defined the roles of critical care nurses and mobile critical care paramedics. It granted the paramedics the ability to perform critical care measures without the presence of a physician or nurse. It essentially laid the groundwork for today's pre-hospital response and the roles of today's paramedics. This legislation went into immediate effect for the

"preservation of the public peace, health or safety within the meaning of Article IV of the Constitution...."

With the success of the Los Angeles paramedics pilot program and the signing of the Wedworth-Townsend Act the need for unified training and protocols was demonstrated and the LA programs continued to grow.

During the 1970's the public was also getting their first taste of the Emergency Medical Services with the show *Emergency!* which debuted January 15, 1972. *Emergency!* followed the adventures of fictional firefighter-paramedics Johnny Gage and Roy Desoto of Squad 51. Although the show was fictional, many of the scenarios were inspired by true events and Jim Page, dubbed one of the fathers of EMS, was the technical consultant and Dr. J. Michael Criley, later Dr. Ron Stewart, were medical consultants on the show.

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Randolph Mantooth



Born Randy DeRoy Mantooth in Sacramento, California, to Sadie and 'Buck' Mantooth, he was the oldest of four children. Following his studies at Santa Barbara City College, he received a scholarship to the American Academy of Dramatic Arts in New York. There, he was discovered by a talent scout from Universal Studios while performing the lead in *Philadelphia Here I Come*. Upon returning to California, Mantooth slowly built up his resume, taking roles in *Adam-12* (1970), *Marcus Welby, MD* (1970) and others. In 1972 he brought to life fictional firefighter-paramedic Johnny Gage in the

new TV series *Emergency!* which quickly became a must-watch show for viewers across the country and shot Mantooth and his castmates into stardom.

To train for their roles, Mantooth, Kevin Tighe sat through the new paramedic classes in Los Angeles and met with emergency

nurses and physicians to learn more about the work of firefighters, paramedics, and the emergency teams.

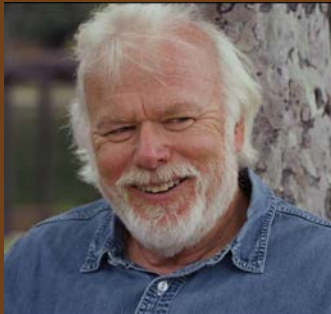
This ignited a life-long passion for both Mantooth and co-star Kevin Tighe in supporting paramedics across the country for the next four decades. Randy continues his work with first responders, making appearances and speeches at events across the country. Mantooth brings a perspective and insight into the startup and history of pre-hospital treatment in the field. Mantooth's dedication to promoting and advocating for the fire service and EMS also derives from personal reasons, his own life being saved from carbon monoxide poisoning at home during the run of *Emergency!* "I owe an incredible debt to firefighters, EMTs, and paramedics ... a debt that no one can really pay back, but you can try. That's why it's so important for me to do what I do." Mantooth's work as an advocate for EMTs also extended to the Native peoples. In May 2012, he filmed an Emergency Preparedness video to be distributed to tribal leaders with Monte Fronk in Minnesota at the Mille Lacs Ojibwe Reservation. Mantooth served as a moderator recently in a project done in conjunction with the Los Angeles County Fire Museum, *Pioneers of Paramedicine*. Mantooth and Tighe are spearheading a documentary on Paramedics, which will start filming mid or late fall 2020, showcasing the Paramedics past, present and future.



Answering the Call: *California's EMS Legacy*

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Kevin Tighe



of Great Britain before returning to the United States and signing with Universal Studios. In 1972 Tighe auditioned for the new show *Emergency!* where he landed the role of firefighter-paramedic Roy DeSoto. Along with castmate Randolph Mantooth, Tighe sat in on paramedic classes and trained with the new firefighter-paramedics in Los Angeles.

Jon Kevin Fishburn was born in Los Angeles, California in 1944. In 1949 the family moved to Pasadena where the young Kevin started acting in community theater. He continued acting throughout high school and went on to attend Pasadena City College before receiving an undergraduate and MFA from the University of Southern California in 1967. Tighe was drafted into the Army after USC and served at Fort Knox for two years.

When he returned to Southern California, Tighe picked up acting again landing roles at the Taper Theater and Ahmanson Theatre in Los Angeles. He then went on to perform with the National Theatre

The show ran for six seasons and Tighe and Mantooth are credited with helping popularize paramedicine across the country, inspiring generations to answer the call to become EMTs and first responders. Tighe (and his character Roy DeSoto) have appeared in other shows as well as narrating an episode of NBC's *GO!* with Mantooth about LA County paramedics.

In addition to his continued success as an actor, Tighe continues to work as an advocate and speaker for firefighters, paramedics, and other first responders, often making guest appearances with Mantooth at events around the country.

On November 16, 1973 the Emergency Medical Services Systems Act became a federal public law. The Emergency Medical Services Systems Act defined EMS nationwide as a service that "provides for the arrangement of personnel, facilities, and equipment for the effective and coordinated delivery ... of health care services under emergency conditions...." The law also ensured federal funding for the feasibility research and establishment of EMS training and systems across the country. As well as a federal oversight committee to monitor the effectiveness of the federally funded systems. By the end of the 1970's the Emergency Medical Services had not only survived but thrived in its first decade.

Over the next decade, professional associations were organized to advocate, lobby and coordinate the emerging paramedic professionals across the state. In 1979 the first professional organization was formed, California Fire Rescue and Paramedic Association (now known



as California Rescue and Paramedic Association), was formed to coordinate advocacy and lobbying for EMS professionals. CRPA was one of the first advocacy groups for EMS and EMS personnel in the country. In addition, CRPA hosted an annual professional conference for paramedics.

In the 1980's EMS was growing strong in communities across California. In addition to Fire based EMS services, hospital and private company services continued to grow, while third party and public EMS services reached across the sectors. The coast guard, law enforcement, and lifeguards trained with EMS recruits and working paramedics to supplement their professional training.

Emergency physicians and nurses continued to work closely with paramedics providing advocacy and lobbying in areas where their professional paths crossed, such as cardiac care and non-critical patient transport among other areas, in addition to assisting in training and research as opportunities arose.

As more services became active and EMS as a whole became more organized and centralized, the need for a statewide organization to provide oversight and communication across the sectors statewide became evident. In 1981 the California Emergency Medical Services Authority (CEMSA) was founded. It is one of 13 departments within the California Health and Human Services Agency. Led by a physician with extensive experience in emergency medicine, the Authority is responsible for paramedic licensure, EMT regulations, trauma centers and systems, ambulance service coordination and disaster medical response. In 1981 the California EMS Authority, under the directorship of Dr. Roger Taylor, formed three committees to write the regulations for all EMS providers; EMT-Basic, EMT-Intermediate and EMT-Advanced standards emerged and helped to solidify training and certification requirements for those entering the field of EMS.



By the end of the decade there were building blocks for a national curriculum and certification for EMTs, ensuring basic standard training at each level of practice. In the 1980's Dr. Walter Graf was also working on a standard training curriculum for paramedics. He knew that, like other allied health staff, EMS needed professional medical standards in education, and he convinced the American Medical Association to assist in accrediting paramedic programs.

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Answering the Call: *California's EMS Legacy*

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For his effort, AMA recognized Dr. Graf and the Daniel Freeman Hospital program as number one in the country.

Walter S. Graf, M.D.

Walter Samuel Graf was born in 1917 in New York City and was raised in The Bronx. After graduating from the City College of New York he studied medicine at the University of California, San Francisco in 1942. With the war building in Europe, the new Dr. Graf joined the Army and served as a physician in Europe and North Africa before returning stateside to start a private practice in Los Angeles.

Dr. Walter Graf specialized in cardiology and is now recognized as one of the pioneering cardiologists in Los Angeles who, like Dr. J. Michael Criley, watched the development of the mobile cardiac care units in Northern Ireland under the direction of Dr. Frank Pantridge and recognized the need for such units in Los Angeles. In the late 1960's Dr. Graf became concerned that cardiac patients were not receiving life sustaining procedures during emergency transport and was sure that the number of fatalities due to cardiac arrest could be limited if

specific cardiac care was provided on scene and during transportation to the hospital. In 1969, while President of the American Heart Association, he developed the Mobile Critical Care Unit – a chevy van staffed by a registered nurse with a portable defibrillator on board. In addition to developing the MCCU at Daniel Freeman Memorial Hospital, he also started the Mobile Intensive Care Paramedic training program which became the first accredited paramedic training program in the United States.

Additionally, Dr. Graf worked with Los Angeles city and county officials, as well as state officials, to create and pass legislation that would allow trained paramedics to practice within and across city and county lines, ensuring seamless patient care and transportation for those in need. Dr. Graf continued to be involved with paramedic education and advocacy until his death in October 2015 at the age of 98.



For the first time since its inception, EMS was formalizing the building blocks that would train generations of emergency medical technicians (EMTs) and paramedics across the United States. Today Californians continue to be innovators in emergency medical response and education with advances in technology, safety and medicine being researched and implemented through services across the Golden State. California has been, and will continue to be, an important player in the national story of the Emergency Medical Services. *

Jim Page, JD

Jim started his career in emergency services in 1957 as a firefighter in Monterey Park, California. Years later, after a lifetime of service as a publisher, writer, attorney and state EMS director, he returned to Monterey Park as Chief in the department where he started. That turn of events, however unlikely, seemed typical of Jim, who never let the odds get in the way of a good idea.

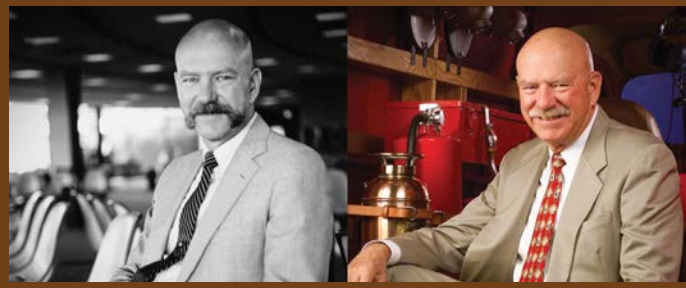
One of his greatest accomplishments – again filled with contradictions – was his lucky (in his words) involvement in the creation of the TV show *Emergency!* Jim had a font of stories from those experiences and was forever struck by what he learned about the power of storytelling to entertain and inspire. As the founding publisher of JEMS, the Journal of Emergency Medical Services, that lesson was never lost on him through hundreds of essays, articles and speeches, which usually had a message, but always entertained.

Jim's ideas took hold, inspiring thousands and changing the very way in which we thought about how

society should care for people in urgent need, without judgment – and always with consideration for those, in Jim's words, 'who give countless hours to training and preparation, who forsake opportunities for wealth, who disregard their own convenience and safety caring for ill and injured people.

People came to call Jim 'the father of modern EMS' not because he was a researcher or an administrator, nor because he held a position of power in government. It was because he was a promoter of great ideas, and he had the gumption to express these ideas through whatever medium presented itself, be it a TV show, a magazine, a conference, a public meeting, a book, a video, or an official report. He concluded his biographical sketch, which he provided to people who would introduce his speeches and other appearances, with the note, "Mr. Page is a father of four, a grandfather of six, and a collector of vintage fire trucks." He died in Carlsbad in 2004 at the age of 68.

— Keith Griffiths, Founding Editor, JEMS



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Answering the Call: *California's EMS Legacy*

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Baxter Larmon, PhD, MICP



including work as an ambulance attendant, NREMT-B, Lifeguard-Paramedic, Firefighter, Firefighter-Paramedic, EMS Educator, Researcher, Author, and Professor.

As an innovator and a pioneer in the area of EMS Research, Dr. Larmon has worked tirelessly to build EMS into a recognized and respected medical profession. Dr. Larmon founded the Prehospital Care Research Forum (PCRF) more than 15 years ago with the goal to promote, educate and disseminate EMS research. Under the direction of Dr. Larmon, PCRF has published more than 600 abstracts, in two major EMS Journals, and has educated more than 500 EMS professionals in EMS research workshops. In addition to his work with PCRF, Dr. Larmon has more than 100 journal publications, four textbooks, and more than 35 video productions to his name as well as presenting regularly at conferences covering nearly every topic affecting EMS and prehospital care today.

write the forward to the only EMS text dedicated to research, *An Introduction to EMS Research* published by Prentice Hall Publishing. Among his other distinctions, Dr. Larmon was appointed as one of the founding members to the National EMS Advisory Committee to represent the interests of EMS researchers. He is one of the founding directors on the board of the National Association of EMS Educators and helped establish the organization. Along with a long list of awards, in 2018 Dr. Larmon received the Ronald Steward Lifetime Achievement Award from The National Association of Emergency Medical Services Physicians.

Dr Larmon has dedicated his life to the professionalism of EMS. Research has been his instrument to reach this goal. Dr. Larmon's current interest is in the areas of Best Practice, Evidence Based Medicine, Community Health and Patient Safety.

On a personal note, Dr. Larmon lives in Southern California and is married to a lovely lady who he shares his other life's passion with, surfing!

— Jeanne O'Brien, Secretary, National EMS Museum

Dr. Larmon is currently a professor of emergency medicine at the David Geffen School of Medicine at University of California at Los Angeles (UCLA) and Emeritus Director of the UCLA Center for Prehospital Care. He has been actively involved in Emergency Medical Services (EMS) for more than 45 years

In 2000, the Journal of Emergency Medical Services named Dr. Larmon as one of the most influential persons in EMS for his work in EMS research and education. Subsequently he was asked to

Dianne Reichle

Dianne and her husband Allen were running Springs Ambulance Service in Palm Springs when Dianne decided to get more involved with the patient care side of the business after being a radio dispatcher in her community for six years. She enrolled in a paramedic training program in 1971 and started her rigorous training alongside her male classmates. Although she faced many challenges associated with being a woman in a male dominated profession, she persevered and completed her 290 hours of training in 1972. When she graduated the program and earned her paramedic certification on August 1, 1972, she became the first woman in the country to be a certified paramedic.

Glenn Hare



Glenn F. "Bud" Hare was born in 1931 in Ravenswood, West Virginia. In 1943 his family moved to Encinitas where his father bought a pool hall and motel. After high

school Hare served in the Army before returning home and joining the San Diego Police in 1962.

In the 1960's one of his many assignments was as an ambulance driver in the San Diego Police Department and as he says, "I learned more about first aid than I cared to know." But the assignment also led to the invention of one of the most recognized pieces of EMS equipment today The Hare Traction Splint. The splint was designed to provide quick stabilization to a lower leg injury while simultaneously getting the leg into traction at the time of stabilization.

Originally fashioned from bicycle parts, a toilet seat cover, and gears from a washing machine, the traction splint was the most successful and widely

used of Hare's inventions (which ranged from a stabilization collars to a fog detection device for drivers. In 1967 Hare founded the company DynaMed in Carlsbad and worked for 32 years inventing, manufacturing, and selling the traction splints and other devices. In 1969, Hare started publishing *Emergency Product News* (later shortened to *Emergency*) featuring products and stories about emergency response. He later started another publication, *Police*, targeting those in public safety who respond to emergency medical calls.

Glenn Hare died October of 1999 due to complications from a heart attack. His legacy continues with the DynaMed brand and the traction splint that changed the way we stabilize leg fractures in the field.

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Answering the Call: *California's EMS Legacy*

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Harvey Hall



The prologue leading to the first chapter of the Hall Ambulance story began on a dare – literally. In 1960, Harvey L. Hall was working as a hospital orderly when a friend, employed as an ambulance attendant, dared him to go on a ride-along. The experience was so exhilarating that the next day he embarked on what would result in a 58-year career as a servant to humanity.

Even in those early days, his passion and dedication were readily apparent. A 1967 article in *The Bakersfield Californian*, which detailed his heroic efforts to save a child, contained a quote that would set the stage for the kind of ambulance service Hall would eventually build. Asked how he felt after delivering the child to the hospital, Hall said, "It is my duty to perform to the greatest

of my ability. I am dedicated to the ambulance industry ... towards upgrading the profession and being able to preserve lives."

With a decade of experience, Hall was ready to start his ambulance service built on his ideals of care, compassion & community. On February 10, 1971, he commenced operations of Hall Ambulance from his residence on H Street in Bakersfield. For the next 47 years, now known as the Founder's Era, Hall Ambulance Service established itself as a respected provider of high-quality ambulance service based on delivering exemplary patient care.

Hall believed strongly in staying at the forefront of advancements in emergency medical services and investments in technology. This included becoming the first local ambulance provider to provide paramedic service (1975); creating career opportunities with the Hall EMT Academy (2001); introducing regional ground and air, interfacility transport solutions with Hall Critical Care Transport (2009); and, assuming dispatch responsibility for all ambulance requests in Kern County (2015).

On May 19, 2018, just two weeks and seven hours following diagnosis, Harvey L. Hall lost his battle to Creutzfeldt-Jakob Disease, a rare, invariably fatal prion disease, for which there is no treatment

nor cure. Mr. Hall's impact on the industry and public safety was evidenced when an honorary procession of 40 ambulances, fire engines, and law enforcement vehicles, from across California, made their way through the streets of Bakersfield arriving in front of Rabobank Arena for the Community Celebration Honoring the Life of Harvey L. Hall.



Hall was posthumously honored in 2018 with the California Ambulance Association conferring Emeritus Status for his distinguished service to the science & art of ambulance services; and, the American Ambulance Association honored him for his dedication to improving the industry by presenting the Robert L. Forbuss Lifetime Achievement Award. In 2019, the CAA renamed its Presidents Award in his honor to the Harvey L. Hall President's Award of Excellence.

— Mark Corum, Hall Ambulance

Keith Griffiths



After graduating with distinction from San Diego State University with a degree in Journalism, Keith embarked on a career in EMS media. In 1979, with the late Jim Page, Griffiths co-founded the *Journal of Emergency Medical Services* serving as the founding editor for the publication. JEMS, as it is known in the industry, was a leading EMS journal for over 40 years. In 1995, Griffiths handed over the reigns of JEMS to A.J. Heightman and founded RedFlash Group, a national consulting firm specializing in marketing and communications for EMS, health care and public safety.

In addition to work in the EMS communication sector, Griffiths serves as the chair of the James O. Page Charitable Foundation and the Liaison Committee for the International Academies of Emergency Dispatch. He has served on a number of boards and is often seen connecting people and organizations at national conferences. Recently, Griffiths has also answered the call to assist with exhibitions at the National EMS Museum.

Throughout his career Griffiths has used his gifts as a story-teller and networker to bring together amazing groups of stakeholders to build partnerships to support growth and innovation in EMS across the United States.

Thom Dick



Thom Dick is an EMS veteran of 42 years, 23 of them as a full-time EMT and paramedic in San Diego County. While there he served as Hartson's first paramedic, and most recently served as Quality Care Coordinator for Platte Valley Ambulance, a decorated hospital-based 911 service in Brighton, Colorado. He received the first Laerdal Award in 1981 as NAEMT Paramedic of the Year, and more recently the Jim Page Award for leadership. Thom has authored more than 500 articles in a dozen journals, and was one of the original four staff members of JEMS. He also authored four books, including all three editions of *People Care*. As of this writing, Thom and his wife of 49 years, Susan are happily retired in Brighton, Colorado.

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Answering the Call: *California's EMS Legacy*

Continued from page 11

Rick Kendrick



Richard L. Kendrick was born in 1948. Kendrick served in the US Navy from 1968 to 1971 as a Damage Controlman 2c. In addition to managing ship stability and repair he was responsible for emergency training and was trained in shipboard firefighting, first aid, and decontamination. When he was discharged from active duty Kendrick attended Miramar College where he graduated with a degree in Fire Sciences and earned his EMT certification.

In 1972, Kendrick joined the El Cajon Fire Department as a firefighter-EMT and started to develop training programs for emergency medical response scenarios. In 1975, Kendrick took a job as Assistant Crew Chief at the Cajon Speedway Fire/Rescue team and in 1980 joined the Los Exploradores Search and Rescue team. All the while Kendrick was hard at work looking for ways to improve extraction and transportation equipment to use in the field. In 1978 he started his first business venture Medi-Ked, Inc. to produce and sell the newly developed KED (Kendrick Extraction Device) product, one of the most widely used extraction devices to date.

Kendrick has continued to innovate (holding seven patents for patient care devices) and develop equipment for emergency response since the launch of the first KED line and you will likely catch him at industry conferences when they let him out of the office to play with all the new toys on the emergency response market.



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The California EMS Family:

The National EMS Museum is honored to celebrate the legacy of paramedics and the emergency medical services in California. The innovation and dedication of those who have served and continue to serve across the state are an inspiration to the country. Without the pioneering leadership, research, and practice our national EMS system would not be what it is today. As we continue to face new challenges in 2020 with the ongoing COVID-19 pandemic and community unrest, we are reminded that EMS is essential in every community and our work has a positive impact every day for those in crisis.

Thank you to our brothers and sisters in the field keeping us safe and providing us with the best care possible in our times of need. California is an amazing home due to the amazing first responders who work the frontlines across the state.

We'll see you down the road!

Kristy Van Hoven
Director
National EMS Museum



Thank you to those who shared their stories and donated objects & photos to our celebration:

Global Medical Response	Laura Lipp
Hall Ambulance	Allyn Pierce, The Pandra
Alameda-Contra Costa Medical Association	Bob Johnson
California EMS Authority	Clarence Teem
Alpha One	Chris Lloyd
Sacramento Valley Ambulance	Dan Holmes
Steve Spurlin	Gary Riggs
Joe Mangenello	Jeff Reagor
Dr. Baxter Larmon	Lou Meyer
Tom Scott	Scott Bognuda
Doc Clinchy	BC Scott Byous
Mike Williams	Tom Arjil
Keith Griffiths	Tony Ott
Scot Phelps	Deb Guthrie
	Chris Scott

PRESERVING THE LEGACY, INSPIRING THE FUTURE

THE NATIONAL EMS MUSEUM

The National EMS Museum is dedicated to preserving the legacy of the Emergency Medical Services in the United States. By collecting historic equipment, books and tools of the trade the Museum showcases how EMS has developed over the last 150 years, from battlefield ambulance wagons to the all-inclusive Mobile Response Units. Through the study of the past, we inspire EMS practitioners to develop new tools and procedures to provide better and more effective emergency care to our patients and communities.

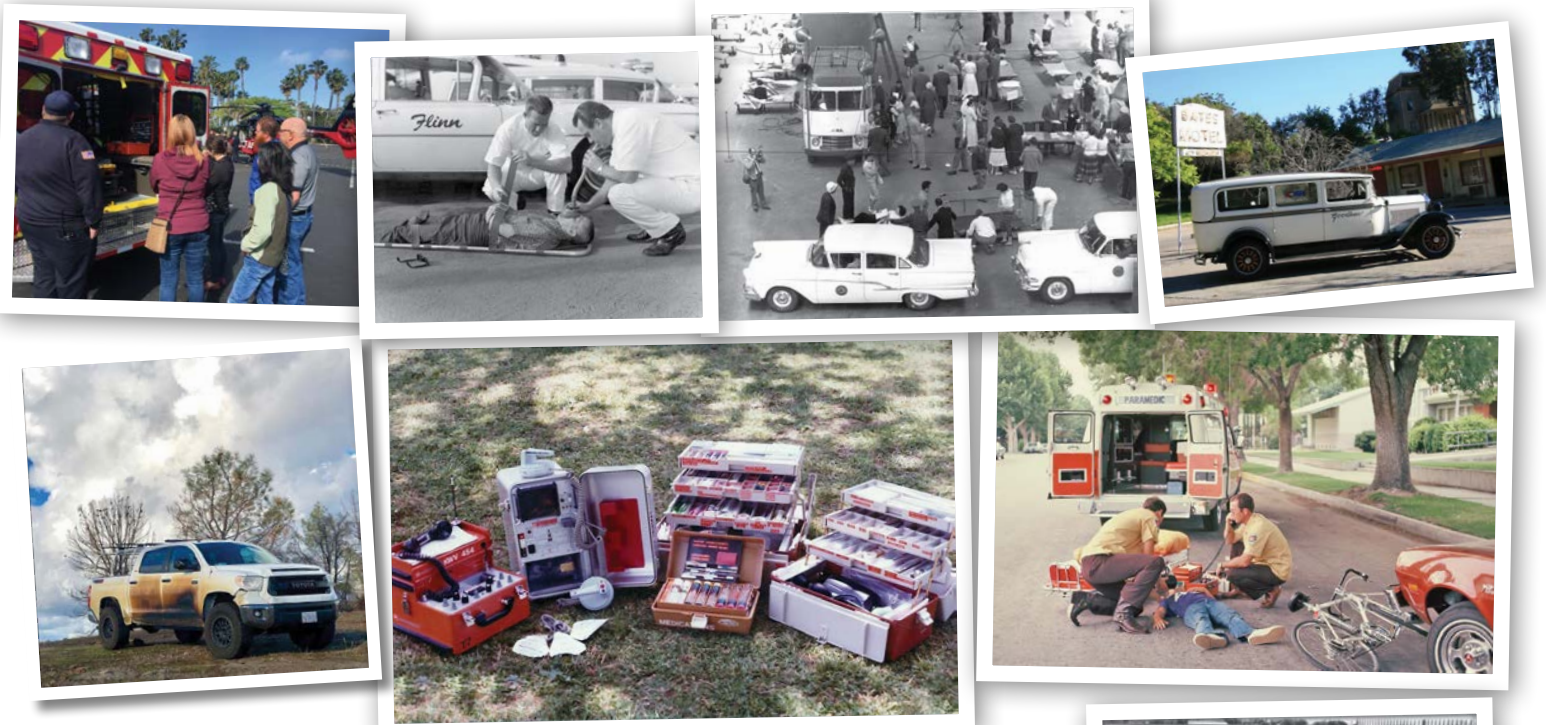
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Historic Photos




Miller-Meteor with chassis by Cadillac

The 1973 Miller-Meteor line of ambulances consists of three spectacular performers—the big Lifeline with 54" headroom (shown here), the Volunteer with 48" headroom (page 6) and the Guardian with 43" headroom (page 7). Experienced operators from coast to coast are sold on Miller-Metors—and many of them will buy nothing else—because of the extraordinary capabilities and features of these first-line emergency vehicles. Here are some of the reasons for choosing 73 Miller-Metors: Chassis and body specifically designed for heavy-duty ambulance service. The Cadillac professional chassis (continued on page 6)





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The California Ambulance Association is now welcoming non-members to subscribe to the *Siren* magazine. Published quarterly, the *Siren* is a comprehensive source of information on issues that are important to the ambulance industry. Contents include feature articles, association educational and networking events, legislative updates and analysis, member news and much more.





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