

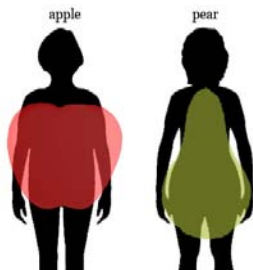
MCLEAN COUNTY AREA EMS

JANUARY 2011

Diet – Ugh!!!!

Written by Greg Scott

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Well the New Year has come upon us and I'm sure some of the members within our EMS System have made a New Year resolution to lose weight. There is nothing wrong with a desire to lose weight unless you make this commitment and don't follow through. Don't get me wrong as I have done this hundreds of times before in my lifetime. I challenge everyone in our EMS System to search for ways to just live a healthy life during 2011. This may be to give up something that is unhealthy, make healthier food choices, or a regular exercise routine.

According to the Centers for Disease Control and Prevention (CDC), adult overweight and obesity ranges are determined by using weight and height to calculate a number called the "body mass index" (BMI). BMI is used because, for most people, it correlates with their amount of body fat.

- An adult who has a BMI between 25 and 29.9 is considered overweight.
- An adult who has a BMI of 30 or higher is considered obese. (CDC, 2010)

The CDC also reports the following statistics:

- The State of Illinois population had a 26.5% obesity rate as of 2009
- Between 1980 and 2000 the obesity rate doubled in U.S. adults
- With physical inactivity and unhealthy diet being the primary behaviors leading to obesity, only about 25% of U.S. adults eat the recommended five or more servings of fruits/vegetables each day; more than 50% of U.S. adults do not get the recommended amount of physical activity
- As of 2003, the direct health costs attributable to obesity were estimated at \$75 billion

The U.S. Fire Administration reports that the climbing obesity rates within society are affecting personnel and the infrastructure of emergency services (2007). The American College of Emergency Physicians and the National Association of EMTs conducted studies that found nearly half of EMS providers had suffered back injuries due to lifting extremely heavy patients (USFA, 2007). This same article indicated that costs are increasing to emergency service agencies due to increased resources being dispatched to assist with bariatric patients as well as the need for increased weight capacity for EMS related equipment (USFA, 2007).

If you are setting out on a healthier lifestyle in 2011, just know that you can do it. Just remember that success is based upon the principle of mind over matter and it is possible! It is important with any change in lifestyle to have a dedicated support system and have individuals willing to be accountability monitors.

I wish everyone a happy and safe New Year in 2011. I wish success to each of you with any endeavors that you decide to undertake. If anyone is working on a healthier lifestyle during 2011, I would welcome to speak with you about any challenges you may encounter. As always, keep up the great work that you do for the patients in our system and never forget to take care of the EMS responder as well.

References:

Centers for Disease Control and Prevention (CDC). *Overweight and Obesity*. Obtained December 14, 2010 from <http://www.cdc.gov/obesity/defining.html>

U.S. Fire Administration (USFA). *Infogram 39-07: October 4, 2007*. Obtained January 12, 2011 from <https://www.usfa.dhs.gov/fireservice/subjects/emr-isac/infograms/ig2007/39-07.shtm>



Details, Details, Details...

Written by Becky Altic

When it was announced that this newsletter was going to center around weight loss, all I could think was "who would ever listen to me on *that* topic?!" Anyone who knows me knows that I struggle to keep my weight under control. Not only that, but I couldn't quite figure out how to connect this to Quality Assurance. So I put off writing this article as long as I could, and in the meantime, tackled something else. My weight! Last week, I found a connection.

I have tried many diets in the past, lost and gained back 40-50 lbs. a few times, but always maintained that it wasn't a knowledge deficit that made me fail. I thought I was pretty familiar with most of the programs, philosophies, methods out there. The thing was, I kept doing the same thing over and over, and kept gaining the stinking pounds back. They say that a sign of insanity is doing the same thing over and over, expecting different outcomes. Hmmm.....maybe it was time to try something I hadn't.

One of the things I dislike about dieting is that you have to completely obsess about food. You are either thinking about what you are about to eat, what you have eaten, or what you will eat next. I don't like that. I need something simpler. Almost all of the methods suggest a combination of diet and exercise, but some suggest something else in addition to this. Something I have avoided. Food Journaling. UGH! For those of you that aren't familiar with food journaling, it involves not only tracking what you ate, but when you ate, how you felt before and after eating, and more. All I could think was that in addition to obsessing about food, I would also have to write about it. That always seemed like just too much.

For Christmas, my son gave me a journal. I thought I would go ahead and use it to track my food intake. I lasted about 3 days. Handwriting every measurement of every morsel of food was very time consuming. Then I remembered a website that I had visited last year, but never fully explored. It has a vast library of food lists, restaurant food, brand names, and is very easy to use. It has drop down boxes to pick your times from, a section to journal your feelings when you ate, a section to chart your water intake, a section to chart your fitness, and so much more. It makes it easy to keep track of what I have done with my day. It is all there in black and white, and I can look back at what I've been doing, to spot opportunities for improvement. (Any of this sounding familiar yet??)

The records I keep on this site paint a picture of exactly what was going on in my head when I made good choices and when I made poor choices. It's all there. I don't have to rely on my memory. Memories fade over time, days seem similar, the same foods gets eaten, common stressors pop up, but I don't have to worry about getting things mixed up. Not as long as I keep good records. And that is how this all relates to Quality Assurance.

You use a computerized database to store the information from your runs. It, too, has drop down boxes with frequently used options, and when the option you are looking for isn't there, it has the narrative section. That is one of the most important parts of your record. It should tell the patient's status before and after you perform an intervention, unusual circumstances, the choices you made, and why. It tells the story in a way that simply listing what you did cannot. It is what can differentiate one run from another, and if thoroughly done, allows you freedom from having to remember the details. When the narratives leave me guessing, I have to ask questions. That may involve a visit. I know nothing personal, right? But I don't think any of you like it when I come to visit you. (I promise I'm not mean. Really.)

For this year, I am making a commitment to keep records of what I eat, in hopes that by taking a different approach, I will get a better outcome. I'd encourage you to make a commitment to take the time to write thorough narratives. If you feel you don't have time, ask for it. I'm always amazed at how helpful others can be, if we just ask. Then, let's see how things look by the end of the year. Maybe we will both be lucky enough to see less of me!

Belly Fat, What's That?

Written by Barb Humer

Visceral fat, also known as organ fat or intra-abdominal fat is located inside the peritoneal cavity, packed in between internal organs and torso, as opposed to subcutaneous fat which is found underneath the skin, and intramuscular fat which is found interspersed in skeletal muscle. An excess of visceral fat is known as central obesity, the "pot bell" or "beer belly", in which the abdomen protrudes excessively. Even though there is a county song that says he likes his girl with a "beer belly", it isn't good for you. Central obesity is associated with a statistically higher risk of heart disease, stroke, hypertension, insulin resistance and Diabetes Mellitus Type 2. To determine if you are centrally obese, Dr. Oz suggests taking a tape measure and measuring around your waist where your belly button sits and dividing it by 2. That measurement should be 1/2 of your height. Most women's waist should measure 32 or less and most men should measure 37 or less. Most people who are "apple" shaped are considered at risk. What shape are you? What is the best way to lose belly fat? You all know the answer to that.

Reduce the amount of calories you consume

- Lack of calories will set into motion the processing of excess body fat to make up for the lack of calories
- Daily exercise of any kind
 - Instead of grabbing a snack or that dessert after dinner go for a walk
- Drink less beer and mixed drinks
 - Alcohol and mixers are full of calories. You also have bloating after drinking alcoholic beverages which tend to distend the belly.

I know working in EMS All of these things are difficult but if you want to live longer you need to give it a try.



You Got Schooled

Written by Michael Crabtree

Over the past few months, the initial education program of the McLean County Area EMS System has seen many new developments. Most notably, our program has recently completed an initial program self-study to become an accredited site for paramedic education.

The Commission on the Accreditation of Allied Health Education Programs is an accrediting body that is sponsored by numerous professional groups, most notably the American Medical Association. Its main goal is to attest to the quality and legitimacy of allied health training programs.

Accreditation is something relatively new and rare in EMS education. In order to become a respiratory therapist, x-ray technician, or any variety of allied health professional, you must first graduate from an accredited program. Paramedicine is one of the last areas of allied health to not require practitioners graduate from an accredited program. This is changing. As of January 1, 2013, all paramedic candidates for the National Registry exam must graduate from an accredited paramedic program. Reciprocity for state licenses will only be granted if the individual graduated from an accredited program.

Currently, only two programs in Illinois are accredited: Loyola University and Trinity (Quad Cities). Accreditation is a process to protect the student and public. Accredited programs must follow strict guidelines to ensure quality of education and learning opportunities. As such, our program will see many changes as we build upon our strengths and rectify our weaknesses.

During this time, and at any point in the future, I welcome your feedback and ideas to improve the initial paramedic education within our system and our program. Please feel free to share with me any suggestions you may have as we strive to make our system's program the best in the area.

I encourage you to learn more about this process and what it means for you and our system at www.caahep.org and www.coaemsp.org

Side note: Those of you who completed a paramedic course prior to the January 2013 deadline will not be affected by the new standard. As it stands now with the National Registry, you will still be able to take the National Registry exam as long as you can show no breaks in licensure from your initial course completion. More information on this policy can be found on the registry's website, www.nremt.org.

Healthy Recopies

Submitted by Greg Scott

Veggie Pizza

2 packages crescent rolls

Cream:

1 pkg Hidden Valley Ranch Dressing Mix

1 1/2 Fat Free Cream cheese (8oz)

1 cup Miracle Whip Free

1/2 cup chopped of each of the following:

cauliflower, carrots, broccoli, celery, green

Onions, green pepper, tomatoes, mushrooms

or any combination

80z. low fat shredded cheddar cheese

Bake crescent rolls @ 375o according to package directions, and cool (9-11 min.)

Spread cream over cooled crust.

Sprinkle with veggies and 1 cup cheddar cheese.

Makes 1 pizza.

Turkey Chili

1 lb ground turkey

1 pkg French cut green beans frozen

1 green pepper chopped

1 large onion chopped

1 large can low sodium V-8

1 can no salt tomatoes

1 jalapeno pepper chopped (optional)

1 T chili powder

1/2 T Ground Cumin

1/2 T Paprika

Light Salt

Pepper

Garlic Powder

Brown ground turkey with onion and pepper. Add seasonings. Put in large pan with remaining ingredients, cook to boil then simmer for 30-60 minutes. Add more seasoning if necessary.