

Discussion 9

Everything Creative

FIREFIGHTERS

[BEGIN MUSIC]

DIETER UCHDORF: The desire to create is one of the deepest yearnings of the human soul. We each have an inherent wish to create something that did not exist before. The more you trust and rely upon the Spirit, the greater your capacity to create.

NANCY HANSON: I'm Nancy Hanson, and this is Everything Creative. This program explores a wide range of creative ideas, talents, and experiences through interviews and group discussions. Join me now for an interview with firefighters from Salt Lake City Fire Station No. 5.

[END MUSIC]

NANCY HANSON: Welcome back to Everything Creative. I'm Nancy Hanson, your host, and joining me today, we're at Salt Lake City Fire Department Fire Station No. 5. This is so exciting: We're actually taking you out on the road today. Joining me today we have Captain David Dixon and some of his crew. And David, thank you for letting us come and be here today.

DAVID DIXON: You're welcome.

NANCY HANSON: Why don't you go ahead and introduce yourself and let us know a little bit about the station and what you guys do here, and we'll just talk to some of your crew.

DAVID DIXON: Okay. My name is Dave Dixon and I'm the captain here with the City, and I've been on the job—it'll be 24 years in about 2 weeks, so I've been around for a while. This is Fire Station No. 5. We have what we call a dual company house, so I have a crew of 8 or 9 guys here. We have two captains here, a captain over each apparatus. Basically we have a fire engine. If you remember a fire engine is the one with a pump and a hose on it. Everybody calls it a fire truck: It is not. On that engine we not only respond to fires but we also respond to medicals here. That engine is what we call a medic engine so we have paramedics on that rig and we'll respond to ALS calls—anything that's advanced life support. We also have an aerial apparatus. Our fire truck has a large aerial ladder and a lot of forceful entry tools, ground ladders, things like that. They also respond on medicals, but they respond on what we call the BLS calls, or the basic life support. So everybody on the Fire Department has to be an EMT. And in addition we also have paramedics. One thing unique about this station is we also cover the heavy rescue for the whole city. We have what we call a jump rig: It's not staffed all the time; we take that when we need it. We do all the technical rescue things like confined space, high angle, structural collapse, trench collapse, anything really unusual or out of the ordinary. That's kind of a rundown on what we basically do.

NANCY HANSON: And this is the only station that has that rig?

DAVID DIXON: That's correct. In the city. Yup.

NANCY HANSON: Great. Why don't we move over next to, why don't you maybe explain or talk about the guys a bit?

DAVID DIXON: Okay. Well, like I said, at this station we have nine guys on our roster. We usually staff each rig at least four-handed. Occasionally we get five-handed, like we are later today, but we usually have one of those individuals that will swing out and fill out other positions. On the engine we have the captain and then we have what we call an engineer: He's our driver operator. We have an engineer on the truck and on the engine. And they have to know hydraulics, pumping, and they need to know the rigs as far as setting up the aerial apparatus. On the engine we have two paramedics, which we've got Anthony here to talk with us today, too. On the truck we have EMTs. We've got Billy Oliver who is our new boot. A boot is the newest, youngest guy on the job. He's our probationary firefighter. He's the guy that everything rolls down the hill towards him if we don't want to do it. [LAUGHING] He's the guy that answers the phone, answers the door, and answers all the questions, does all the tours [LAUGHING]...

NANCY HANSON: And Billy just smiles through the whole thing; he's just like...

DAVID DIXON: [LAUGHING] I know he's just sitting here smiling so I'll let him talk.

NANCY HANSON: ...happy to do it; happy to be here.

WILLIAM OLIVER: I'm more than happy to do it. It was a lot of years in the making, so I'm more than happy to do all of it.

NANCY HANSON: And how long have you been here?

WILLIAM OLIVER: So I've only been here about eight months or so. I spent six months up at Station 13, up on the east side a little further. Been here about two months. Loving it here. There's dual company like Captain Dixon said. So we have an engine and a truck. Lots of things going on; lots of training. Lots of stuff to do, tours, and this stuff, so I'm loving life.

NANCY HANSON: Great. I love your excitement.

ANTHONY BURTON: Well, I'm Anthony Burton I'm one of the paramedics, as Captain Dixon said, on a fire engine. We respond to all the advanced life support medical calls as well as fires. I've been with Salt Lake City for a little over two years. I started in EMS fire rescue about 13 years ago, but new to Salt Lake City.

NANCY HANSON: Okay. Should we go with Vinnie?

DAVID DIXON: There's one other thing I should say about this station. In addition, like all the other stations where firefighters or paramedics, paramedic is considered a specialty as is engineer. We also have hazmat specialists, ARS specialists, which are the airport fire and rescue guys. Everybody here also has to have our HRT specialty. So it's one thing that's

actually on top of everything else we have. So we actually have quite a bit more training, things we need to do here than, really, in any other station or department, I think.

NANCY HANSON: Yea, cool. So on each shift you definitely—I mean, this is kind of a double question to ask, but you have to make sure you have someone that, I mean, it's staffed purposely.

DAVID DIXON: Yea. We have three shifts: We have an A, B, and C Platoon. And so at this station to be here you have to be HRT and our other responsibilities, too.

NANCY HANSON: Alright. Let's hear from, from Vinnie.

VINCENT MARTINEZ: Oh. My name is Vincent Martinez. I've been with Salt Lake City now since about 2001. And in the last five or six years I've been working here at Station No. 5 as a heavy rescue. I work on the truck. Quite often I'm the tillerman: drives the back end of the truck. Really enjoyed it here. This is a great home, close to my house.

NANCY HANSON: That makes it nice.

VINCENT MARTINEZ: I walk to work...

NANCY HANSON: Oh, cool.

VINCENT MARTINEZ: ...generally.

NANCY HANSON: Well good. I always, I just, I just love to ask this question, you know, especially for you guys being firefighters. Is this something that—I mean, we can just go around and you can answer this individually—something that you always wanted to do? You know, little boys and fire trucks and fire engines—I have now learned the difference. Is that something that you aspired to be when you were a little boy? Dave, why don't we start with you?

DAVID DIXON: With me? Actually it wasn't. I came about this kind of in an unusual manner. I was in my early 20s and just had no idea what I wanted to do for the rest of my life. Knew all sorts of things I didn't want to do. I have a lot of hobbies. I used to do a lot of rock climbing, a lot of white water kayaking, things like that. Free time was a premium for me: That was something that was very, very important. I have to admit that, that was one of the main attractions to this job was our schedule. We work 24-hour shifts; we work hard when we're here, but we have a lot of time off. And my sister had a good friend that was on the department—he's still on here now—and he's really ultimately the reason that I got here. And I remember he was saying, you know, he told me that he was trying to figure what he wanted to do when he grew up, and he thought the fire department might be a good thing in the interim. And he got on here and found out he doesn't have to grow up. So it's kind of the same thing with me. And it's been a good career. There are things I really like about it. There are things I didn't understand about it. There's a lot more to it than most people think.

NANCY HANSON: I'm sure.

DAVID DIXON: Like firefighting for example: They think you go to a fire, you just spray it with water. Well, there's a lot of tactics involved. There are a lot of things you need to know and do

and especially now where we've become so specialized not only with medical responses. I'm a paramedic also, and I really enjoyed that. And then also with our heavy rescue things. There are a lot of different facets to it. And even a simple—well, it's not so simple—simple firefighting operation entails a lot of things, and there's a lot of organization, a lot of skills, a lot of thought processing goes on. There's a lot more to it than the public even has an inkling of.

NANCY HANSON: Yea, I'm sure.

DAVID DIXON: And so it's been good there.

NANCY HANSON: And you know like a little kid that's like, wow, that looks like fun, you know, or that looks interesting or dangerous and all of those things that, you know, they're attracted to about the job. You get in and realize, wow, there's even more to that than I thought, you know?

DAVID DIXON: There is. It's funny; it does have risk which is part of what I like. All of my hobbies have risk; I like that. And part of what I enjoy doing for me personally is sort of mitigating that risk, both in my hobbies and in my work. It's not crazy: We do calculated risk. Like, I don't, I don't risk my life or risk the life of my crew, but the whole thing is trying to maintain a balance, you know, as far as what you're willing to risk and how much you can manage that, so....

NANCY HANSON: Right. Okay. Billy, talk to us about what led you to become a firefighter.

WILLIAM OLIVER: I was kind of similar in some sense. Like, I actually didn't grow up around it, was never really even aware of it until I was about 24 or so, 23. I was just kind of trying to find something to do for the rest my life. I wasn't happy with anything I'd done. I just, I wanted something with more meaning. I saw a few documentaries and visited a few stations, and then it, it all just rolled in after that. I knew that this is what I wanted to do for the rest of my life. So I started schooling and training and switching jobs and doing all the stuff to try and prepare myself to become a firefighter, because it's actually a pretty lengthy process for some people. Some people can get in within six months to a year; other people take three years to seven years, so....

NANCY HANSON: Well we can talk about that for a second. I'm curious about what the training involves, what's required.

WILLIAM OLIVER: Pretty much a minimum any more is to have your EMT, your basic; that way you can do basic life support. That's usually sought beforehand. Any education is highly sought upon. And you can get your Fire One Certs for the state or anything else.

NANCY HANSON: So there are obviously classes that you would take to be certified?

WILLIAM OLIVER: Yea, there are all certifications that all kind of helps you advance. And a lot of times you just need to do, like, interview trainings so you can interview better. They count all those little things.

NANCY HANSON: Dave.

DAVID DIXON: I was just going to add: Most fire departments have a testing process, and they typically, for example, we usually test about every two years, and then we'll come up with a two-year hiring list. And, you know, they vary the test: Some have a written; some have more of an oral interview type. I mean, they may mix and match some of those. They also have a physical agility portion which you have to pass. But right now it seems like most people have to test several times with several departments to get on anywhere. It's...

NANCY HANSON: It's pretty intense.

DAVID DIXON: Yea, and it's in demand and you're competing with a lot of people, so it's tough to get on nowadays.

ANTHONY BURTON: When I grew up my Dad was a technical fireman and for search and rescue for the county. And when I was little I was one of their patients. So I kind of grew up around the rescue side...

NANCY HANSON: Yea.

ANTHONY BURTON: ...and as well as I was obliged to play victim to some of the paramedics. So I was kind of really excited for all of that just growing up. I always had a real desire to help people in that worst situation. And that's really what we do here. We take some of these worst scenario, worst case scenario and we try to make it better. Usually people don't dial 911 for the little things.

NANCY HANSON: Mm-hmm.

ANTHONY BURTON: Now that's more and more common.

NANCY HANSON: Yea.

ANTHONY BURTON: People do, but the true emergency call it's somebody's worst case scenario. We try to improve it. So I always kind of went down that path towards emergency medicine and rescue; was always geeked up on that. In high school I received a scholarship that was part of a pilot program in the state of Utah for high school students going to EMT school. I didn't know how that was going to pan out because we were all pretty young—I was 17—and it's been a good success since. But, so I went to EMT school and then immediately started with the volunteer department and progressed into a paid department and worked in a few ERs and eventually quite a few years later ended up here at this position.

NANCY HANSON: I love this: It gives, you know, people an idea of, maybe, of ways they can get in and can have experiences that can help them decide, is something I want to do.

ANTHONY BURTON: Yea.

NANCY HANSON: Okay. Vinnie.

VINCENT MARTINEZ: Oh, looking back ever since I was a child I remember working in as a crossing guard and enjoyed the emergency operations. I was always interested in Police and Fire. It was at the age of 18 when I joined the military and went into fire protection with the

Air Force, and I'm still in; that's been almost what 26 years ago. So I worked as a firefighter there. But that got me the training to work with Salt Lake City to get hired on. It's a job that I really enjoy and, as the captain mentioned, I love the schedule. I love helping people. And in this line of work it's more of a, it's like a team: We work together. I've always enjoyed team sports. There's no other way it would work. But it's been a great job. It's very dynamic and it's always changing. Years ago it went from just basic firefighting to EMS and then hazardous materials; there's aircraft rescue. We have several specialties—and that's what I like about this job. If there's something you want to get trained in you can always pursue that, which only makes your career that much stronger.

NANCY HANSON: Right. It seems like there's a lot of variety and a lot of opportunity in that.

VINCENT MARTINEZ: There is.

NANCY HANSON: Well, I could ask you questions and talk about this all day. This program, of course, is about creativity. And it's interesting that we would come, choose to come, to a fire station and to talk to you guys about creativity, because a lot of people think I'm not creative; you know. I don't do anything creative. I think the point of having this program is so we can talk about how, you know, what everybody is and that's just part of being human. I had an experience when my, I had a little baby this was my first baby, she was, like, six weeks old and I had her in her car seat and I was ready to go and I went to get my shoes and I came back and she was gasping for air and she could cry out but couldn't suck back in. And, of course, I panicked, so it's like you were talking about. This was my, this was just the worst thing's happened in my life. I didn't know what to do; had no idea. So, of course, I grabbed the phone and called 911. And I think that's, you know, we've all be trained to do that, and I'm sure you guys get some of those calls, where it's like, wow, you know, we came out for this. But that is everyone's, you know, worst nightmare. And so the paramedics came out. There actually was a guy who was in my neighborhood I didn't know that well; he was there. And when they came in, you know, they looked at this little baby, and they were, like, oh, almost this look of "Oh, we don't like little..." I know little babies are hard and, like, noooo! You were supposed to be the heroes; you were supposed to come and save me; and I can hand this over to you now. And so there were some creativity going on there because they all kind of were looking at each other, like, wow, and they put some oxygen on her and that wasn't really helping and tried patting her on the back. And one guy said, it was like a light bulb just went on; he was like, "Hey, do you have one of those little blue suckie syringe things that they give you in the hospital?" "Oh, yea I have one of those." He said, "We should carry one of those with us." So I went down the hall and got it and, of course, they just, you know, sucked out her mouth and nose and she was okay. We still got to take the little ride in the ambulance to the hospital after that, but I think now, as a mother with some experience, I probably would think about that and do the same thing, just common sense. But you get in panic mode. But I just thought it was interesting for those guys to kind of, they had to take a minute and look at each other and go "Hmmm. What could this be?" And it was simple: just she spit up and aspirated. It was not, you know, as life-and-death as, I guess, I thought it was. But, wow, I just wanted to kiss them all, you know? I'm sure people just appreciate so much. Even if it's, you know, a little thing to you, if it's a big crisis to them,

to see you guys come. Because you are, here come the guys and they're going to take care of it for me. So that must be rewarding to be able to help people, to feel that, a sense of that, and to realize you're making a difference, you know, every day no matter what it is you get called out to do. You're making a difference. Does that ring true to any of you?

DAVID DIXON: Yea, that's what, that's who we enjoy. You know, it's interesting to talk about, things have changed. We have a lot of pediatric training now, but it's funny because lot of people are afraid of kids, and you talk about, you know, Vinnie mentioned how we do things as a team. It's interesting how the dynamics shift on different calls. There are certain people that are more comfortable with children; usually if you had plenty of children, you're a lot more comfortable (laughing), like I'm probably more comfortable with kids than Billy is. And so we shift gears, you know. We have different responsibilities, but we'll shift gears on a call and everything. I think, you know, you talk about that, what's an emergency for someone. When I used to teach paramedics school, you know, I tell new people we need to remember that we're called there; it might not be an emergency for us, but generally the reason—again, I say “generally” because there's a lot of 911 abuse now, and that's a real frustration—but in general we get called because someone lacks the resources to deal with whatever the situation is. It may be physical resources, it may be emotional resources, you know, intellectual resources, whatever it is. We're there for that. I think that's where we, that's our reward, I think, I mentioned to you earlier one thing I see that's a real calming thing among all the people in the fire services: We're sort of control freaks and we like to solve problems. You know, we're problem solvers. We like to go somewhere where something's not right or where something needs to be fixed, and that's what we do. We try to go in somewhere and fix it, and that's part of the reward of all that. That's, a lot of ways we're control freaks.

NANCY HANSON: [LAUGHING] Okay. So maybe I can get some specific examples from you guys if you can think about times when you really felt you had to use your creativity in figuring out what to do. I'm sure there are those moments where maybe an idea would come to you that you're like, wow, that, that's what we're going to have to do; that's what's needed at this time. Where do you see creativity playing into to your job and what you do?

ANTHONY BURTON: I think we're, we're pretty creative on just about every call because they're all unique—whether you're going on to a standard garage fire or standard medical problem. They're all different and we can't just say, “Okay, this is going to be a cookie cutter call: boom, boom, boom.” No matter what, if you do that, something's going to throw you to the side, because they're all dynamic and different. So I do think we're creative on just about every call, whether it's figuring out how to get somebody out of a trapped situation or simple things of there's just two of you there and I need to figure out how to put this IV bag somewhere so it can hang. So you're creative; you'll tape things to lamp shades, or you'll hook it on to a ceiling fan. But I think we're creative on just about everything, just because of the little dynamics. Something's are a little bit more creative, sometimes we get a little bit carried away...

NANCY HANSON: [LAUGHING]

ANTHONY BURTON: ...but we're creative on most things.

DAVID DIXON: I was going to say: We have a lot of real set things in our training. For example for our medical stuff, we have specific protocols; we have specific algorithms that we need to follow; for our fire functions we have what we call evolutions, things that are designed for different, different tactics in things we do. But with each of those you have to be really flexible and you have to be creative in the way those things are put together. For example, when I watch my paramedics out with a patient, you know, I look at, there are a lot of good paramedics and they learn their skills. But the thing that separates an exceptional paramedic from a good one is someone that has the ability to, to draw out what he needs from the patient, from the individual, in terms of not, not just in, let's see, not just in terms of what's going on and assessing them but also getting them to do what we need them to do. You know, it's almost a sort of manipulation type thing. Maybe that's not the right word, but the really, really good ones are those that can really exercise some real good interpersonal dynamics and things like that.

NANCY HANSON: Exact the cooperation that they need.

DAVID DIXON: Yea. And that's the hard part. You know, they could train monkeys to do an IV or whatever; those things. But it's knowing when and how and convincing everybody else, you know, what type of care needs to follow or whatever; that's what's important. And even on a fire, for example, as an officer, if I'm first in on a fire, the things I, there's a lot more to think about than people think. If we're going up there, I'm getting dispatch information. I need to set, sort of, set the scene for the, for how the fire's going to go. I need to make assignments. And so you come there; you're thinking about the occupancy; who's going to be in there; you're thinking about the construction; you arrive there you need to figure out how much fire involvement there is in there. I mean, we've got formulas for how many BTUs we're expecting in that fire, and that determines how many hose lines you need out there. Again it's not just squirting water on there.

NANCY HANSON: Right.

DAVID DIXON: It's very calculated. You need to figure out how you're going to deploy things. You have different operational objectives. I mean, obviously our first thing is life safety, then you want to protect property. So you have this sort of hierarchy of things you need to tick off. And all this is happening in seconds because you're, you're right there. You have to start deploying things to, to meet each of those objectives. And so there's a lot of things at every level, even if you're just what we call a tactics level or at a task level—I mean, where, you know, where you're given a specific task. You're not told exactly how to do that. We may say perform search and rescue; or you're fire tact; or you need to do ventilation or whatever. Even at the lowest task level there's a lot of variability there, and people need to be creative in how they're going to put their training and experience and our operational procedures together to actually accomplish that. And, like he says, it's always different and it never goes how you think it is. And so at the same time while you're doing one thing you have to be considering what your next option is, especially in our heavy rescue things. We have a standard word, you know, we say we always come up with two solutions. We may use one, but we're deploying another option in case that first one doesn't work. So again it's, kind of, always dynamic there.

NANCY HANSON: Right. And you, like you said, you never know what to expect. I'm sure confidence is a huge, huge issue that you got to go in there with the confidence that, you know, I'm going to be able to figure this out; I'm going to be able to assess this and take care of situation; and also to carry that air of confidence to help people to feel calm and safe. Talk about that for a minute.

DAVID DIXON: Sometimes we have to bluff.

NANCY HANSON: [LAUGHING] Yea, I'm sure. It's all going to be okay.

ANTHONY BURTON: I think we do that with all of our patients. You have to set a good trust level as well. They have to see a good reflection of confidence in order to gain that trust. Quite often especially if you have an injured child, they're separated from their family members. They have Mom injured in a vehicle and the child, so you're taking them in two different ambulances. And now you have to be creative in the way you interact and gain that trust with that child. And I've had quite a few scenes where initially we get there, we've got a screaming, freaked out kid, and 20 minutes later we're on our way to the hospital, and they're offering their arm out in gesture for us to start an IV, and they'll hold it there because you explained to them what needs to be done; you gained their trust, and they trust you. The next thing you know they're calm, quiet, and you start a little IV on them, and they do fine.

NANCY HANSON: Amazing.

ANTHONY BURTON: But there's a lot of creativity that goes into the way you interact with each. You know, each child has their own comfort and mental level, so you have to deal with them on their level and gain their trust.

NANCY HANSON: Right. And try different things.

ANTHONY BURTON: Yea...

NANCY HANSON: ...to see what's going to work and what's going to....

ANTHONY BURTON: Occasionally they won't offer that arm out...

NANCY HANSON: Right.

ANTHONY BURTON: ...but they need it, and so the next thing you know you're, you're taping their arm to a board and...

NANCY HANSON: [LAUGHING]

ANTHONY BURTON: ...and you get things done whichever way you have to.

NANCY HANSON: Billy, do you have any, any examples, anything you're thinking about that you've seen so far in your, your young career where you've had to use creativity or you see that at work?

WILLIAM OLIVER: I've been through academy, there's not, we don't exercise a ton of creativity. It's, it's pretty stick to the book. And then if something goes wrong you do have to adjust. And I, like Anthony said, I think that's an element of everything we go on. You're always, like,

because I'm always trying to prepare myself for each calls we go and figure out what I'm going to do in advance, and pretty much always by, like, the time I step out something's changed and, like, I have to completely rethink of whatever I'm doing. It's just, kind of, like, staying on your toes. I can't think of any one instance that I had to pull out some, you know, wild creativity, but it's just a constantly changing dynamic.

NANCY HANSON: Yea. You just have to be prepared and ready and you know what you know [LAUGHTER].

WILLIAM OLIVER: Yea, and that's kind of, they always say you always go back to the training that you last had, so....

NANCY HANSON: Yea.

DAVID DIXON: See, I was going to say he probably sells himself short when he says, "Oh, I haven't", you know, when he talks about recruit school. They're very regimented there and again they learn all these evolutions, but I think they have to be a lot, I think he uses a lot more creativity there than he thinks, just in the way they interact with each other. I mean, I look at the way he has to come in and to interact with this crew. Fire service is very different than any other workplace because we're here for 24-hour shifts—yea, 48 now; we're now, we do back-to-back now; so we're doing 48-hour shifts—and it's different. This is a family. I mean, it's probably like a big dysfunctional family...

NANCY HANSON: [LAUGHING]

DAVID DIXON: ...but there are a lot of dynamics that go on here. You're here for a long time for one thing, but you're also put under extreme circumstances, you know, and that, it causes, it can help a lot of camaraderie, a lot of bonding and things like that you can't get anywhere else. It can also stir a lot of discontent, a lot of, you know, I mean, it's, it's different than people have any idea, and I think just in your day-to-day relationships you've got to be real creative and real flexible in terms of how—actually these guys would all say that this doesn't describe me at all [LAUGHING]; I'm not flexible at all...

NANCY HANSON: [LAUGHING]

DAVID DIXON: ...but, you know, I look at him coming in. He, for example, he's not been here long, but he's fit right in really well. He's had to learn how to deal with us and with being the boot...

NANCY HANSON: Right.

DAVID DIXON: ...and again especially where he's new and inexperienced, I mean, as I watch him whether it be on a fire scene or medical, he's really having, having to be creative and be flexible and learn new things and try different things; and, again, I think he sells himself short. I don't think he really sees what's going on with him, but maybe, of everyone on the job right now, he's having to be the one that really has to use a lot of that more than the rest of them.

NANCY HANSON: Okay. Let me just set the stage here. We're at the station where we're upstairs and we're in the kitchen and there's actually, well, there's nine, nine of you here, but we're only hearing from four. The others are, they're chicken. [LAUGHING].

DAVID DIXON: [LAUGHING] Exactly.

NANCY HANSON: They're looking on. And, and that is one question I've had, is how, you do have to work as a team and as a group, and you didn't really pick these guys, you know, necessarily—well, maybe you did [LAUGHING]—but you are a family in a way and I just wonder about how that is when you go home and when you come back here, and how kind of different that is, if you have to sort of switch gears, you know. Like, okay, now I'm—I don't know. It just seems you have this two separate lives and these two separate families and homes. How do you feel about that?

DAVID DIXON: For me it's interesting because, like, for example, last night we're now doing 48, 48-hour shifts. I'm talking to my wife. I'm, like, okay, what's going on? You know, I'm trying to figure out—she's busy too. She's an RN at a busy emergency room and we've got funky schedules; and so I'm saying "What's going on in the next few days or whatever?" I talk about, it's almost like I have this life and I have my other life. And so, like, when we used to work 24-hour shifts, before I go on shift I'd say, "So what's going on tomorrow?" Well, I didn't mean tomorrow when I'm working; I mean tomorrow when I'm home....

NANCY HANSON: When you're home.

DAVID DIXON: You know, this life; tomorrow. And so it's kind of funny. I sort of do a, a complete—I don't want to say a disconnect, it's not like that, but it's almost like I have two separate lives. You know, there's my fire department day, you know, and that schedule, and there's, okay, now I'm back to my real life...

NANCY HANSON: Exactly.

DAVID DIXON: ...so it's completely a shift gears a little bit.

NANCY HANSON: Yea, you have to.

WILLIAM OLIVER: It is an interesting tangent. I, like, my own family's kind of scattered across the country, so I'm like the only one here right now, but it's, like, this is kind of my family when I come here. And then you go back to. you just go back home. And it is, like, my girlfriend's still in Colorado still so we talk, but it's, like, there's a weird disconnection between the two lives. You have a whole life going on here that maybe they don't understand or they don't hear about, and sometimes there's a whole lot there that you don't get to be a part of. It's cool, it's cool to be here, yea, but I think it's, it creates kind of a disconnection sometimes.

NANCY HANSON: Yea.

WILLIAM OLIVER: That's hard to work through.

NANCY HANSON: That would be a, a part of the challenge of the job.

WILLIAM OLIVER: Yea.

DAVID DIXON: I want to say just one thing: It's very different with different individuals I've seen. There are a lot of people that were really against going to this 48-96 schedule because they don't want to be gone that long. Other people are really for it because they think it gives them more quality time at home. I think it's interesting a lot of the wives or husbands of people that are working here depends on how they are. My wife's super independent. It's, you know, "Go away; [LAUGHING] leave me alone for a few days." And there are, I know, as a matter of fact, a very good friend I came on with years ago who's no longer on the department had real issues. His wife just could not handle him being gone for 24 hours and it created some real, you know, some real issues at home.

NANCY HANSON: Sure.

DAVID DIXON: And especially if you have problems, things going on with kids, either sick kids or stuff like that. I found each, just looking at people, it, the dynamics are different with each, each family...

NANCY HANSON: Right.

DAVID DIXON: ...you know?

NANCY HANSON: And when you're here what, when you guys are here—this is just a question everyone has: What do you do when you're not [LAUGHING]...

DAVID DIXON: [LAUGHING] When we're not running on emergencies?

NANCY HANSON: Yea.

DAVID DIXON: We're actually busy, or we should be busy. I mean, obviously we take some down time. But typically for example, you didn't see us this morning. We're just coming back after four days off. We spent quite a lot, we go through every bit of equipment, all our meds, all our drugs and everything, all our equipment. We make sure everything's functioning; obviously we have to make sure that everything's going to function perfectly when we need to use it. So we do that initially; that's our first order of the day. We have to do routine station maintenance, whether it be yard work, mowing the lawn we do once a week or [LAUGHING] housework or whatever. You know. We have paperwork responsibilities. But in addition to that it's expected that we do so many inspections a month. You know, we do hydrant inspections where we check all the hydrants in our district once a year, and that we kind of rotate those through the platoons, through the different shifts, as to which ones we check. We do business inspections, fire inspections, and those are party for code enforcement, but I think of even more importance it's for us to become familiar with the areas, identify hazards, maybe do preplans, things like that. Again it's part of that state of readiness that we should be in. And then there's also an expectation that we do so many hours of training per month, so, like, this afternoon we'll probably be doing some heavy rescue training; got some drill maybe that we want to do. So we're pretty busy through the day. I mean, we also go, like, at this station we usually go down to the grocery store nearby here sometime during the day to buy our groceries for the shift rather than bringing everything in. Some stations everybody fends for

themselves. Here, and I like the stations better that tend to have a supper club, and I think there's, there's little more cohesiveness there, or whatever, but...

NANCY HANSON: Yea. I was talking to some of the other guys earlier, and how I often will see you know firefighters in the store [LAUGHING], you know, and they're all together and I ask why does it take five of you to buy the groceries? And the answer was in case we...

DAVID DIXON: In case we get a call.

NANCY HANSON: ...we get a call.

DAVID DIXON: And that's the thing people need to realize. We're not, we're not goofing off.

NANCY HANSON: Right.

DAVID DIXON: When I go down to the grocery store we'll be there a little while. We're on the radio, we're all there with our rig and we respond from there.

NANCY HANSON: You're ready to go.

DAVID DIXON: Yea. And so we're ready to go. And so we go and do that and we have someone cook. It's nice when you can have a guy who likes to cook on your crew. Everybody hates it...

NANCY HANSON: [LAUGHING]

DAVID DIXON: ...so we have this, like, closely guarded book with, you get a check everyday you're here; the guy with the most numbers cooks.

NANCY HANSON: [LAUGHING]

DAVID DIXON: You know, yea, it's right there. And we'll watch it like crazy because people like to cheat and....

NANCY HANSON: So you mean it's a punishment? You have to cook because...?

DAVID DIXON: Oh we all hate to cook. Yea. So we rotate...

NANCY HANSON: I feel the same way. [LAUGHING]

DAVID DIXON: Yea. [LAUGHING] I know. So...

NANCY HANSON: [LAUGHING] So it's a myth, then, that, you know, firefighters are...

DAVID DIXON: No. Some stations, great cooks...

NANCY HANSON: Really.

DAVID DIXON: ...guys that love to, not at this.

INTERVIEWEE: We've got a couple of good cooks here, Dave Fry, but he won't cook for us full-time anymore, so...

DAVID DIXON: Yea, you can see we've got, this is closely guarded. We rotate...

NANCY HANSON: Interesting.

DAVID DIXON: So like I say, we do stuff through the day. After about, you know, like, we usually do inspections or training, morning and afternoon, again interspersed by whatever calls we may have, or other, you know, sometimes we do PR events or we're out doing other things. We usually have work-out time in the afternoon or early evening, and then generally after about 5 o'clock the time is pretty much yours. Again that varies: Sometimes we'll have late drills or have other things we need to attend: community council meetings, or whatever. And so then the time is yours again unless we get a call.

NANCY HANSON: Right.

DAVID DIXON: We usually are allowed to go to bed about 9 o'clock. You know no one ever goes to bed that early here because they're up several times after that. But again we have our dorms or private rooms or whatever, depending on the station, and time's yours. Some guys will watch TV; some guys will get on a computer; some guys read; some guys do a lot of working out. I mean, there's, we got a pretty good work out facility at every station. I mean, obviously, it's in the department's and in the public's best interest to keep us fit, so we do have, we have nice exercise equipment, and most of the guys stay pretty fit.

NANCY HANSON: Maybe you can talk about that for a minute: just having, just how physically taxing it is and how hard it really is, I mean, to even to walk in the suits, because, you know, a lot of us had the chance to try those on, and we're like, "Whoa! I can't even lift my arm!" You know, must be...

DAVID DIXON: I've talked too much. Let the other guys speak.

INTERVIEWEE: It can, I mean, it's like doing all your normal activities and then just adding way more heat and, you know, whole lot more restriction in your movements. There's a lot of ways you can just, you need to stay cardiovascularly fit by running and doing a lot of that. There's a big work out craze, a couple of them, like P90X and Cross Fit—Cross Fit being a pretty key fire fighter workout. But it just focuses a lot on, like, full body movements, because that's, I mean, that's what it is. Everything you're doing, you're kind of exerting almost all of your energy using your whole body to do whatever it takes to get something done or something lifted or something moved. So it's pretty taxing if you throw on all the gear. You get hot real quick. So you need to be, you need to be ready to go as best you can.

NANCY HANSON: Have any of you had any of those experiences that are almost I don't know super human where that adrenaline just kicks in and you're able to do things, you're like, "Whoa! I did that?" Or no? No?

DAVID DIXON: Every call. [LAUGHTER] Yea, I don't know if I'd say that, actually. I can't think anything specific like that.

INTERVIEWEE: I think it kind of brings in, like, the team part to it, too. Like, if there's something we can't figure out, then that's when you kind of start looking at your teammate or your buddy or your captain to see and they'll recommend something, and there's your next part; you've got your next goal; and keep moving.

ANTHONY BURTON: But I think that's part of the regimented part and recruits school and our paramedic and EMT schools; is they're very regimented and they have a standard protocol and sequence you would do things. Sometimes you'll go on a major vehicle extrication with people trapped and they call those smooth and quickly but when you get back to the station and you're cleaning things up, all of a sudden you start thinking, "Wow! We did that, that, and that?" Like, you don't really recall doing those things....

NANCY HANSON: Yea.

ANTHONY BURTON: ...but you did. And...

NANCY HANSON: Yea. I guess that's what I'm talking about. And when you come back are you just sometimes just wiped out and exhausted?

ANTHONY BURTON: And sometimes you are. Some of them are extremely mentally taxing. And some of them you just functioned; you know, you blocked most of what was going on in the background and you did your task; you handled the situation. You didn't really realize that you did it, so it's not that super human strength situation but you handled an extreme situation without really, I mean, you're consciously doing it but later you think, "Wow! I did all those things..."

NANCY HANSON: Yea. Exactly.

ANTHONY BURTON: ...in three minutes? Wow!"

NANCY HANSON: Maybe you can talk about that for a minute. How do you kind of separate some of the, the horrible things you see when you go out on these calls and not carry those around with you?

ANTHONY BURTON: Usually the support group is our crew. And as it, as a paramedic I, I see all of the crews that I work with, and it's my responsibility to make sure everybody is, they're emotionally fit after the call. And people have a hard time in certain situations.

NANCY HANSON: Sure.

ANTHONY BURTON: Some do fine in some things and the one little thing will set them off. So we really talk amongst ourselves. A lot of people have a hard time taking it home.

NANCY HANSON: Yea.

ANTHONY BURTON: It's hard to talk to a spouse that doesn't really relate to what you really went through. And some things you really don't want to share with your families because they're pretty terrible. I know Dave has kind of a unique situation: His wife is an ER nurse, so he can share some of those things because she understands. My wife is a school teacher so she sees rosy, happy, you know, first graders all through the day, so it's harder for me to share some of those things. She understands that I had a bad call but she doesn't need to hear all of the details. So I talk amongst my crew and share those here.

NANCY HANSON: Yea. I'm sure being able to have that support is so important.

ANTHONY BURTON: Yea. And sometimes people do great for three, four months, and then it hits them. And we'll always kind of check on each other. And you can usually tell when somebody's having something going. And it may be just something with their children at home or maybe a call that happened two days ago, but we're usually on top of each other; you know, what's going on? We'll razz them a bit until they usually open up, try to figure out what's happening, try to help them out.

DAVE DIXON: I want to add a couple of things. I have to, kind of, second what he says. It's interesting over my career to see how things affect different people. Like he says: Different things for different people. You may go on someone that looks like your child; you may be having issues at home, things like that, that come here; so you never know what's going to affect you. And I know for me, personally, it's like I have a series of snap shots in my head, you know, of some things I don't even want to talk about. And it's interesting how different crews are little different. Again some, some aren't as cohesive as others. I think individuals do better individually in crews where they do have more of that cohesive atmosphere where they're able to let things out. Like he says, I'm extremely lucky that I can go home. My wife was a paramedic for years and then was an ER nurse. I can go home and download anything, you know, and that's good. But I know a lot of people, you know, try to go home, and their wife, "I don't want to hear about dead babies", you know, whatever. And that's hard. And people, and it causes problems. I mean, I've seen it cause problems in relationships where people are, where some of the people here are not able to take home and they need to be able to down, sort of process it and download it somewhere. And on our crews I think we do most of that here. If you were to live with us for a while and go on calls and then come and see how we interact, like, right here at kitchen table, you'd think we were the most, just, hard-hearted, I mean, some of, you know, some of the things we, we kind of make light of some things, I mean, yea, like, really off-color, timing is really bad, but a lot of that is how we process those things that no one should be having to deal with.

NANCY HANSON: Right.

DAVID DIXON: You know? And so, yea, we're irreverent at times and everything, but we keep it here.

NANCY HANSON: Right.

DAVID DIXON: You know? But it's a way for us to process that and to download it. And then sometimes if that doesn't work, yea, sometimes it gets deeper and you need to actually get things off your chest. We also have, departments now are real good about offering what we call critical incident stress debriefing which, really, they have formal things where they might get a psychologist or whatever come in there with a group, pull everybody. Well, you know what? We do that after every bad call...

NANCY HANSON: Right.

DAVID DIXON: ...right here in the station...

NANCY HANSON: Yup.

DAVID DIXON: ...at the table. And we're lucky here in that, for example, I know a lot of police officers. My wife was actually a deputy sheriff and paramedic for years and contrasting our system here and how it is with police: They don't have that opportunity; they don't have that same kind of atmosphere; and it, it seems like they have to keep a lot more of it in. And I've seen a lot more problems there because they're not able to process it, let it out, talk about it, deal with it, and then move on.

NANCY HANSON: I'm sure you've seen guys over your career who you know from other stations that just, they just can't handle, they can't handle the job. You know, maybe they get into it and go "Wow, I didn't realize it wasn't going to be this tough on so many different levels. "

DAVID DIXON: We see a few though I found you look most people that get here it's, it's like I say it's not easy to get on the job.

NANCY HANSON: Yea. So by the time...

DAVID DIXON: Most people that get here are usually make a full career out of it. But there are some people that come here and they just don't fit [LAUGHING].

NANCY HANSON: Yea.

DAVID DIXON: You know? Either they don't fit with the job or we've, often we've had people who just don't fit with the people. It seems most of the people that have, in my career, that have left the department here, it's because they have problems actually getting along with the people that they have to work with.

NANCY HANSON: Yea. It's obvious it takes a really special kind of person to be able to do what all of you do.

DAVID DIXON: One thing we talked about how we want to go on emergencies, we want to help people, and we don't always, we don't always just do emergencies. I mean, we stop, we'll stop, push your car if you're broken down. I mean, we're there to help people; do whatever, you know, and we don't mind. You know, we get a lot of calls where we have someone that's fallen out of bed. We do that all the time in the middle of the night, and you know what? I don't mind doing that for people that are in the position where they lack the resources; they have no other recourse. But I found one of the most frustrating things for me in my career now is that things have shifted more and more to where we're getting more and more bogus calls: a lot of 911 abuse; a lot of people that just kind of milking the system more; you know, expecting Big Brother to take care of everything; and that's frustrating. And for me that's, that's caused more frustration than, than the bad things that maybe we see. It's caused more burn-out, if you will, and I think we're probably all in agreement there, aren't we? But I'm not sure how to, I'm not sure how to really fix that...

NANCY HANSON: Yea. Well what can you do about that?

DAVID DIXON: ...other than maybe...

NANCY HANSON: You show up on the call and just go, "Oh, one of these."

DAVID DIXON: Yea. When we're there we'll do what we have to do. We're there to help at any time. I don't, I don't ever want anybody to feel like they shouldn't call 911 when they really need help.

NANCY HANSON: Right.

DAVID DIXON: But I think people really need to remember that they need to think about, for example, if I'm out on something that I shouldn't be out on and there's something else that's serious in my district, you compromise their, you compromise their care. You know, and people need to be somewhat considerate about that.

NANCY HANSON: Right.

DAVID DIXON: Again I'm not sure how to fix that, but that, at least personally, and again from all the guys I talk to, that's been one of the most frustrating things or causing the most burn-out or whatever is that we don't mind going, we don't mind working hard, but make sure it's something for real, you know?

NANCY HANSON: Right.

DAVID DIXON: Don't just play with the system. And that's one of the problems we see nowadays.

NANCY HANSON: What percentage of calls would you say are, you know, medical calls that need paramedics versus fires, and what, what types of calls do you mostly get?

DAVID DIXON: Yea. I was going to ask him, too. Basically, and we could get you the exact numbers, but basically I would say that 80 percent of our calls are medical versus about 20 percent being either fire or hazmat or rescue type, you know, that type of stuff. Of those we go on anything and everything. Basically if you dial, if you have a problem, unless it's specifically a police matter...

NANCY HANSON: Mm-hmm.

DAVID DIXON: ...it's us.

NANCY HANSON: It's you guys.

DAVID DIXON: Unless it's specifically a matter for just the police, we go. So we go on every type of medical: car accidents; falls; shootings; stabbings; heart problems; diabetics; drug overdoses; drunks [LAUGHING]. You know? Whatever.

NANCY HANSON: Right.

DAVID DIXON: We get a huge mix of things there. I'd say any other type of emergency might fall into that other thing whether it be fires or....

ANTHONY BURTON: I think we also do quite a bit of social work in the community whether it's, and this is, some people get frustrated on these where it's not really the true medical emergency, it's someone that's on the ground, can't get up, but oft times that could be as simple as putting them back in the bed, and you know, wish them, them a good night; or it could be drawn out to a week-long process of getting ahold of adult protective services

and getting them the protection and care they need because they can't live on their own. And sometimes those are frustrating things because it's a long process. We may show up there for three nights straight getting somebody out of bed and back in the bed, things like that. So we end up being kind of the social work aspect of, of the community which isn't our true role but we do it.

NANCY HANSON: Interesting.

ANTHONY BURTON: And we don't mind doing it.

NANCY HANSON: So is that, is it more exciting I would imagine when you get that call that it's really a fire?

DAVID DIXON: [LAUGHING]

NANCY HANSON: Is there just a different feeling about that? Because it seems like, you know, if it's the 80-20 kind of thing when you get the call about the fire, probably pumps you up a little bit more. You're all nodding your head and smiling....

DAVID DIXON: We'd much rather go on a fire call than a medical any day, not just because we don't get as many but it's, fire is pretty exciting.

NANCY HANSON: Talk about that for a little bit.

DAVID DIXON: Let James talk about it here.

JAMES MCNEILL: I'm going to jump in on this. I'm kind of, we're sitting here in the background and we got our captain here, John Maddox, We've got another engineer, Dave Fry; we've got Darrin Whitaker; Chris Burk; myself, James McNeill; and the PIO, Mark, over here. But, you know, you've been hearing a lot about Dave talking, and I have to admit that I am Dave's worst nightmare some days were more like a little sliver underneath his fingernail, and he tells me that every day. But I got to admit I love Dave like a brother. You know, you speak about the whole family thing. I've worked with Dave, Vinnie, John, the other Dave that's back here for as long as I've been on this job, and I've been on this job going into my eighth year. Vinnie, he's been my partner since from Day One, so, you know, Vinnie and Dave and the other Dave and John have, we kind of grow together and we learn and we tease just like brothers. And to be honest with you I see these gentlemen here are, we, we spend more time with these gentlemen than we do with our own families. Even when you go home to your wife, yea, fine. You may spend two or three minutes with your wife, or two or three hours, but we spend 24 hours with these guys. Anyways, to cut down a little bit on the time, we get on these fires, we know what people's, what they're good at, what they're, Vinnie is good at this and Dave is good at this, and you know, Dave's a medical guy and you been talking to engine guys, paramedic engine. Well there's also a truck at this station, and we, we kind of clash with these guys and tease with them. They like the medical stuff; we like the fire stuff; that's what we got into it for. I basically see this being an Eagle Scout and getting paid for it.

NANCY HANSON: [LAUGHING]

JAMES MCNEILL: I grew up in Scouting; it was awesome. You know, you tie knots, you help sick people, you know, you do stuff, and when we get on this job it's, you're getting paid to become an Eagle Scout. You're scouting every day.

NANCY HANSON: [LAUGHING]

JAMES MCNEILL: So, you know, when you roll up onto a fire, you know, we get a lot of dispatch and they kind of have to filter that, but your dispatch information, when you hear the multiple calls, smoke showing, you pull out of the station and you see that call on the smoke from a mile away, you know you got yourself a ripper. So at that point...

NANCY HANSON: [LAUGHING]

JAMES MCNEILL: ...we, you know, we get into this, and you click the mode from saying "Oh, this is just a routine call, that it's going to be nothing and boring call" to "Okay, now we're going to, we're going to have some fun." And I remember started, oh, it's been 17 years ago, but my second day on the job, we, I started with another department, but my second day on the job, we pulled up to a fire where I could see the flames, and we were a good four miles away from the, the place. The hotel down south was on fire. Talk about a, a rush. I mean, you, your training goes back in, you know you got to pull the hydrant, you got to do this, and, you know, you have different tactics you use. Obviously you're not going to go in on that one because there's no life available left, but it's still a rush. You can feel the heat; you, you see the green grass across the street go from green to yellow to brown to black. And then it starts the next building on fire. And to me, when you get on the, and they're very rare, I think you may have, well, I've had three or four fires my whole career that have been so big that there, you put them in your journal and it's like, "Okay, this was cool."

NANCY HANSON: Hmm.

JAMES MCNEILL: And we make it in the newspaper, we have some fun stuff that, you know, I don't know if you guys talked about this, but the guy in the newspaper, and Dave's been talking most of the time here, he'll be buying an ice cream...

NANCY HANSON: [LAUGHING]

JAMES MCNEILL: ...because it's an unwritten rule, the unwritten rule at any fire station around the country that you're, you get your picture taken, you're doing this, you buy the crew treats.

NANCY HANSON: Well, how are you guys going to figure that out between all of you?

JAMES MCNEILL: Because Dave dominated the conversation. [LAUGHTER] And I told you when you got here we'll give our two cents worth, but Dave will give you two dollars worth.

NANCY HANSON: He who speaks the most, huh? [LAUGHTER]

JAMES MCNEILL: So I think the fire themselves, I think another thing about this particular station with the heavy rescue, that's where the ropes and the knots come into play. And, you know, I had an instructor on a heavy rescue course that he says until you've been on a real heavy rescue call, you'll be addicted for the rest of your life. And when you go on and you pull

somebody out of something to where all the other firefighters in the, in the city, they can't handle it; that's why they're calling on you. And so when you get to go do that, that is, in the same adrenaline rush as the fire is you get to handle a situation that, that normal firefighter can't handle. But the atypical call, you know, you're going to do something that, that they can't, and it's kind of rewarding to see; yea, we're a special team here; we got a good group of guys; a lot of them back here aren't going to talk on the radio; they're not going to want to get their picture taken. But each and every one of the guys here have their special things: Dave is good at this; Burton's good at, well, I tell Burton that he really needs to go medical division because he cares so much for these, the wellbeing of people...

NANCY HANSON: Right.

JAMES MCNEILL: ...and that's because he's had background in hospital care.

NANCY HANSON: Right.

JAMES MCNEILL: Some guys have care or specialties in construction or, or, who knows. Everybody's got a good thing, and we mesh very well at this station.

NANCY HANSON: And really bring something different to the table and that makes a great team.

JAMES MCNEILL: And when you get on a call, speaking of creativity, you know, the whole program, you bring those pros, you bring those benefits that these guys have to the, to the table, to where you can have a good call and everybody adds something to it.

NANCY HANSON: Right. Thanks, James. Thanks for stepping up to talking to us.

JAMES MCNEILL: Yea, well...

NANCY HANSON: So great to hear from...

JAMES MCNEILL: ...if I have to buy ice cream, I'll just share it with the, the guys that are sitting back here that don't want to talk. [LAUGHTER]

NANCY HANSON: Have any of you had the opportunity to be helped yourself, maybe by a paramedic or firefighter, you know, been on the other end, on the receiving end of this whole thing?

JAMES MCNEILL: I'll just say one thing and then I'll give the microphone to Dave Fry here. But my Dad had a, my Dad's getting a little on in years, and he had a diabetic problem that came in. And it's funny because here we, I feel we have some great paramedics here at this station. On our crew. And so I see how they interact with the patients, and when you call 911, maybe get a different agency, a different city coming to you, you know what's supposed to happen at that call but they just don't seem to be doing it the same way that our crew should be doing. And they have, you know, good, good things and bad things about how their crew works. But my Dad had a diabetic problem and, you know, when I called—I had my Mom call 911 because I was helping my Dad. But at the time I say, because they'll go through their rundown and say okay and dispatch has a certain number of questions. It seems like it may take forever to get that information out, and you're just saying I told my Mom, I said, this is what I need: I need a rescue engine; I need this; I

need this; and I need this. And it was interesting how come across that maybe I was a little bit bossy...

NANCY HANSON: [LAUGHING] Maybe.

JAMES MCNEILL: ...maybe I was a little bit demanding, but I knew exactly what needed to happen for the benefit of my Dad, and I didn't need you to go through the questions: "Is he doing this? Or is he doing that? Okay, well then, do this." You know, because they have a certain thing and a certain list, and they have to do it legally, and, and that's none of my business. But I knew what I needed to be done for my Dad, and I was telling my Mom to tell the dispatch lady and, sure enough, they gave us the stuff and when they rolled up, it does seem like they take forever to get there, but if you look at the dispatch time and the arrival time, it's the same as us.

NANCY HANSON: Right.

JAMES MCNEILL: I just think that maybe when your kid or your father, your siblings, or, are involved in that, it, you have to...

NANCY HANSON: Time slows down.

JAMES MCNEILL: ...time slows down and you have to stop and realize, "Okay, well, they're going to have to get in the rig, if they're shopping or if they're in the shower, they have to, so, yea, you start looking at what you've done...."

NANCY HANSON: Yea, we can promise you we're not going to be thinking about that when we call 911 [LAUGHING].

JAMES MCNEILL: Yea, well, we as firefighters, we do have to think of that, so...

NANCY HANSON: It's reality.

JAMES MCNEILL: Anyways, on that note I'm going to pass the microphone to somebody else.

NANCY HANSON: Any other comments?

DAVID FRY: Yea, I'm David Fry. I'm the engineer on the engine. And one of the reasons he handed me the microphone is about two years ago at a fire I got severely dehydrated and I started getting shaky and the other paramedics on the, the other paramedics on the crew looked at me and said "What's wrong?" Because they could tell just by my look I was sheet white, kind of wobbly, so they took me out to the rehab area, stripped my heavy equipment off—they didn't mention it, but that's 40 to 60 pounds of equipment that we're actually wearing. So at that point I was administered an IV, thrown in back of an ambulance, and escorted up to the hospital where I had to stay for another hour. I knew what was wrong with me but the fire department didn't want to deal with the way I wanted to; they wanted to deal with it the right way and give me an IV and some fluids and send me to the hospital for some care. So that was my experience being on the other end.

NANCY HANSON: Did that give you a little bit of a, I don't know, maybe a different understanding of what it might be like to be on the other end?

DAVID FRY: Most of us are pretty self-effacing when it comes to things like that, so we did...

NANCY HANSON: Yea.

DAVID FRY: ...it's like "I'm okay, guys, leave me alone, I'll recover." So, somewhat embarrassing...

NANCY HANSON: Yea.

DAVID FRY: ...to be honest with you. I'm sure we go on patients who will want to cover their heads when they're going through lobbies of their apartment buildings or stuff because they don't want to be seen by their friends, so yea, I could understand that part.

NANCY HANSON: Yea. Interesting. Okay. Well, thank you so much for have, for taking the time in your busy schedules to let us come today and be here at the station. We so appreciate it. And just hearing all of you talk about it, I can tell you, you love what you do, and I think you're lucky that way to kind of found that thing that, that feeds you, that, you know, that's worth kind of all the, all the bad stuff that's involved with it. But, you know, you can tell that you, that you love what you do, and we as the public so appreciate you. I always, I will, you know, see paramedics and see you guys in different place, and I want to just go up and I'm just like "I just know you're so cool because you're a firefighter; It's just you have to be." So we so appreciate it, and thanks for letting us come and, and showing us around. It's been great. Thanks.

INTERVIEWEE: Thank you.

INTERVIEWEE: Thank you.

[BEGIN MUSIC]

NANCY HANSON: You've been listening to an interview with firefighters from Salt Lake City Fire Station No. 5.

[END MUSIC]