

January 2011 Newsletter

Firefighter Emphasizes Self-Awareness: Firefighter George Dennis Tells His Deep Vein Thrombosis (DVT) Story

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Advocate Outreach Program Update

The Advocate Outreach Program continues into 2011. An average of five departments per week have been contacted, with an average of ten firefighters attending each session.

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The way in which firefighters are cared for in the fire service is on the precipice of great change. We all know that complications rising from this profession-plus all the stress of normal life for firefighters and their families-can create situations where we all need help from time to time. Ensuring that care is available whenever needed, and that the care delivered represents the best practices under current evidence informed standards, is the objective of Firefighter Life Safety Initiative 13.

Western Region Moving Forward with Everyone Goes Home® Milestones

Year 6 of the Everyone Goes Home® program has started off with a lot of energy and enthusiasm from a number of Everyone Goes Home® advocates committed to the mission and goals of accomplishing the 16 Firefighter Life Safety Initiatives. There are dedicated advocates in every Western State with the exception of South Dakota and New Mexico. Contacts are being made in both of those states to recruit advocates and representatives for the Advocate Outreach Program.

Everyone Goes Home® Program Introduces Metro Advocates Section

Since the creation of the position, the Metro Advocate Coordinator (MAC) has been employing a variety of traditional and non-traditional approaches in order to facilitate the implementation and integration of the 16 Firefighter Life Safety Initiatives within metropolitan fire departments across the nation. The ultimate goal of these efforts is to reduce the number of line-of-duty deaths occurring in these larger departments.



INITIATIVE SPOTLIGHT

Spotlighting one of the 16 Firefighter Life Safety Initiatives each month

Initiative #12 - National protocols for response to violent incidents should be developed and championed.

- » **EveryoneGoesHome.com:** [Firefighter Life Safety Initiatives Research Database](#)
- » **USFA:** [NETC Learning Resource Center](#)

More Information: [16 Firefighter Life Safety Initiatives](#) | **Share a Resource:** editor@everyonegoeshome.com

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Courage to Be Safe® Training

North Dakota State Fire School - Minot, ND

February 26 - 27, 2011

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Do you have an suggestion for the newsletter? Tell us about it! Please send your comments, articles, or news about what your department is doing to keep firefighters safe to editor@everyonegoeshome.com.

Firefighter Emphasizes Self-Awareness: Firefighter George Dennis Tells His Deep Vein Thrombosis (DVT)

Story By Firefighter/Paramedic George Dennis (Retired)
Courtesy of FirefighterCloseCalls.com

George's persistence helped save his life after his first pulmonary embolism was misdiagnosed and his initial DVT was not treated.

I reported for one of my 24-hour shifts as a Firefighter/Paramedic in November 2007. There was a carbon monoxide call that required me to be on a ladder for an extended time. I had to maintain a "leg lock," which is a way a firefighter hooks a leg onto a ladder, so that s/he can work safely. It keeps hands free, and eliminates any danger of falling. On top of everything else that happened, I fell through a window on another call when I assisted an elderly woman who was stuck. I later noticed pain in the leg that I used in the "leg lock," but passed it off as typical "aches and pains" of my job.

I was off duty the next day, but hung around to have coffee and share stories with the incoming crew. I went home shortly thereafter. Later that morning, I felt congested and coughed up bright red blood a couple of times. At first, I thought it was a bloody nose due to the dry heat in the firehouse. Then I noticed wet sounds in my lungs with my next breath, and I felt "gurgling" in my right lung along with the bright red blood. I knew something was very wrong at that point.

I went to the ER by ambulance, and tried to stay calm and to suppress any panic I felt enroute, because I could feel my heart rate increasing. At first, I was diagnosed with hemorrhagic bronchitis and a deep vein thrombosis (DVT) in my right leg, the same leg I had used in my leg lock. I was sent home on an antibiotic, under the care of my primary care doctor. I was also told to take Tylenol® and aspirin, although no blood thinners were ordered at this time.

This all seemed so strange to me, because I considered myself healthy, and did not have fever, shortness of breath, or other symptoms of bronchitis. Within the month, I started coughing up bright red blood again while I was watching TV. This was a repeat of the horrific feeling of gurgling in my lungs and my associated fear. Again, I was rushed to the ER where I was admitted to the hospital by my primary doctor. A pulmonary angiogram showed a pulmonary embolism (PE) in the upper lobe of my right lung. This was actually a second PE, although the first was misdiagnosed as bronchitis, and this second one developed before I was able to see either a hematologist (blood disorder specialist) or pulmonologist (lung specialist). I had not yet been put on Coumadin®. I think I may have saved my own life because I knew enough to question the original diagnosis of bronchitis.

I was finally put on Coumadin® which precipitated more bleeding in my lung, so a filter was placed in my inferior vena cava (IVC) to block more clots from entering my lungs, which was removed the following month. After my Coumadin was adjusted to keep my INR between 2.0 and 3.0. I was told to wear compression stockings. After the right dose of Coumadin® was determined, I became stronger physically. I worked light duty for several months, which meant that I went on inspections. I also developed pleurisy or inflammation of the lung membranes, during which time it was more difficult to keep my INR steady.

I was taken to the ER again about 9 months after my first "missed" PE, because I started coughing up blood once again without any warning, this time while on Coumadin®. I received 6 units of Fresh Frozen Plasma, several doses of vitamin K, and underwent a coil embolization to treat a ruptured blood vessel in the region of my previous PEs. Typical causes of clots were ruled out, such as any inherited clotting disorders or cancer. There is no history of clotting disorders or blood clots in my birth family.

Later that same month, I felt unwell yet again, and I was advised by my doctor to return to the ER. A CAT scan showed multiple PEs: 5 in the left lung, 4 in the right lung.

My lung capacity is reduced to about 60%, and the circulation to my lower legs is limited. I continue to wear compression stockings, and will need Coumadin® for the rest of my life. All of this started when I was only 37 years of age, fit, and without any health problems. It has been a long road. My fellow firefighters think that because I do not show any physical disfigurement, that there is nothing wrong with me. They don't realize that PEs can be fatal, or how upsetting it is to me that blood clots ended a career that I loved. I went from the life as a professional firefighter, with a high level of physical activity, and from someone who hiked, camped, and fished often to a sedentary life. My usual activity came to a screeching halt, due to pain in my chest where the coil is, leg pain, and persistent shortness of breath. I want to stay vigilant to any change in my condition, and I see my life as an emotional, physical, and psychological obstacle course, which will not be easy.

Right now, I am just happy to have made it to 41! I still get goose bumps and chills down my spine whenever I think of how close to the brink of death I was, and how lucky I am that I survived, despite a delay in a correct diagnosis.

On August 23, 2010, Firefighter Dennis was hospitalized in the ICU again when the coil in lung had torn. This required an additional 2 coils to be placed, original coil repaired and injecting "embospheres" to finish clotting off 3 arteries to that area of lung. This certainly be a lifelong condition and I am thankful for every day I have.

On November 11, 2010, I was air lifted to Fletcher Allen Medical Center due to a ruptured bronchial artery in my right lung. A series of coil embolizations were used to repair the artery. While in ICU on November 12, 2010, I began coughing up blood again and due to another area of the bronchial artery and intrathoracic artery ruptured in my right lung. Again, several coil embolizations and injection of embospheres were used to stop the bleeding. The right lung being the effected lung from the beginning has undergone a great deal of unrecoverable trauma. I am home resting, as my doctors and a team of specialists weigh the risks of potentially removing the right middle and lower lobes.

Again, I cannot emphasize the importance of firefighters self awareness regarding not only their health, but even the most routine tasks that can result in death or severe injury that leads to a life altering experience.

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Using Public Education from the 16 Life Safety Initiatives to Prevent Line-of-Duty Deaths and Injuries

By G. Crawford Wiestling
Everyone Goes Home® State Advocate

Some national firefighter survey information being developed indicates the top two concerns for firefighter personal survival are: cardiac arrest and being struck or killed while working incidents on our nations' roadways. The rate at which all roadway workers are being struck or killed on the roadways is alarming. The ResponderSafety.com website tracks all of the incidents where workers or emergency responders are struck or killed. A daily check of this website shows that almost daily a roadway worker is being struck by an inattentive motorist. The problem is multiple disciplinary and does not effect only fire and EMS personnel. It affects law enforcement, towing and recovery operators, and highway workers. Examining recent statistics in Minnesota, look at how our firefighters are being killed, strike bys. Adding the number of state patrol and police vehicles that are being hit and the injuries to police officers only adds to the growing problem.

The problem has become so acute that agencies ranging from the federal government to local grass roots organizations are trying to develop strategies to cope with the ever growing affect of the inattentive motorist and the chaos they are creating on our roadways. The Emergency Responder Safety Institute, a committee of the Cumberland Valley Volunteer Firemans' Association, along with other fire service organizations have or are developing training programs and best practices (SOGs and SOPs) for roadway responses to protect our emergency responders.

Initiatives to stop motorists' irresponsible activities while driving including texting, cellular telephone use, and drowsiness are subject to legislative activity and media awareness. Move-over laws are now adopted in 47 states. Public safety announcements are being prepared to emphasize the critical issue of the inattentive driver and roadway worker safety.

To clarify the EMS and fire service position on the strike by issue, the Federal Highway Administrations document



Chief McColl and State Advocate educating school districts driver education classes about the hazards of responding to emergencies on the roadway.



Student drivers listen intently to firefighter responder safety education.

the "Manual of Uniform Traffic Control Devices" identifies all companies, agencies or others who respond to or work on our nations' roadways as "roadway workers" and are required to work or perform under the conditions of the MUTCD. States receiving Federal Highway money are required to adopt the MUTCD in a given time period. The National Traffic Incident Management Coalition, a project of the Federal Highway Administration, has developed the "National Uniform Goal (NUG)," a project to implement three objectives: Responder Safety; Safe, Quick Clearance and Prompt; Reliable Interoperable Communications. The NUG training initiative is currently being implemented across the country.

Firefighter Life Safety Initiatives

The 16 Firefighter Life Safety Initiatives developed as result of the Firefighter Life Safety Summit held in 2004 and adopted as the primary function of the National Fallen Firefighters Foundation's Everyone Goes Home® program becomes the delivery platform to assist the fire service and others with developing programs and changing the culture. Its focus is on the way the fire service is managed and operates with direct emphasis on firefighter safety and survival issues. The overall goals of the National Fallen Firefighter Foundation are dedicated to assisting the families of our fire fighters who die in the line-of-duty and to reducing the number of line-of-duty deaths and injures that occur each year.

While it can be stated that several of the 16 Firefighter Life Safety Initiatives apply, Life Safety Initiative 14 has been deemed the predominate platform for educating the driving public on this critical firefighter life safety issue. In this case, the primary objective is to educate the driving public about the hazards associated with inattentive driving habits in order to help protect firefighters and all emergency responders working incidents on our roadways.

Thinking Outside the Box

The Savage Fire Department has been working with the 16 Firefighter Life Initiatives for several years and has been proactive in adopting procedures and acquiring the necessary safety equipment to protect firefighters and other personnel when working on the roadways. A couple of years ago, a Savage Police Officer was struck while working an incident on a major highway. The fire department has teamed with the police department and undertaken extra efforts to educate the driving public of the hazards associated with inattentive and impaired driving.

The fire department, working with a state advocate of the Everyone Goes Home® Program, was introduced to the CVVFA's Emergency Responder Safety Institutes' training programs through ResponderSafety.com. A resource in the Responder Safety tool box is a DVD called, "Sarah's Story." This is a true story of a young teenage driver in the state of Michigan who struck a state trooper working along the side of a roadway. The training DVD portrays the actual events of the incident and follows the case through the courts including sentencing of the young driver.

The DVD of Sarah's Story has become the delivery platform for the Savage Fire Department initiative to educate the motoring public. The city produced a Public Safety TV program with its top public safety officials, the Everyone Goes Home® State Advocate, and brought in the county prosecutor to extol the virtues of not striking a roadway worker.

From the initial program, with its powerful message, fire officers considered the need to get it even closer to the

driving public. From that the Independent School District was contacted and arrangements were made to have the instruction introduced into the school district's driver education program. By getting the program in front of the young driver education students, the critical issue of protecting emergency responders and workers on the roadway has proven a special impact, especially to the young drivers who are deemed to be the most likely to be inattentive or impaired.

The Savage Fire Department Project

The critical firefighter life safety issue of working to reduce or eliminate the possibility of a firefighter or anyone being struck by an inattentive or impaired motorist is directed by the Savage Fire Department Chief Joel McColl. Chief McColl is the liaison between the school district's driver education instructors. Chief McColl maintains the contacts and scheduling of the class presentations. Assistance is provided by a Savage Police Officer along with an Everyone Goes Home® program state advocate. Training tools from the EveryoneGoesHome.com and ResponderSafety.com websites are part of the educational training.

The educational program is presented as part of the school district's regular driver education curriculum. Uniformed presenters lead the class discussions and use the training tools to illustrate the importance of maintaining constant situational awareness while driving. Visual displays of equipment used to alert and identify emergency responders are used to provide close impact impression on the student drivers. Two impressive PSAs from the ResponderSafety.com website are presented at the end of the class, hopefully, to provide lasting impact of the program and the message being delivered. To keep the young drivers attention and peer influence, the PSA with NASCAR Driver Denny Hamlin is used to necessitate the need to "Slow Down and Move Over" when emergency responders are working on the roadways.

Educational Impact on Situation Awareness

With all the efforts being made to educate firefighters and all emergency responders who work or respond to roadway incidents, added value is being accomplished by using emergency responders own resources to build awareness. With firefighters presenting the hazards of being struck by an inattentive or impaired motorist while working an incident on the roadway, it relays special impact on the necessity to maintain situational awareness at all times on the roadways.

By having firefighters deliver the message of "Help Us Protect You" and " Move Over, Slow Down" to the driving public is a platform the fire service can use to help educate the driving motorist of the hazards emergency responders face every day on our nations roadways, starting with the youngest drivers and spreading the message up the adult ladder.

Advocate Outreach Program Update

By Michael Petroff
Advocate Outreach Program (AOP) Coordinator

The Advocate Outreach Program continues into 2011. An average of five departments per week have been contacted, with an average of ten firefighters attending each session.

An observation made indicates that states that did not have firefighters that attended either the Everyone Goes Home® Firefighter Life Safety Summit or the Fire Department Safety Officers Conference have not participated in the AOP.

Efforts will continue to reach states that have not participated in the program. Firefighters that were previously unaware of the Everyone Goes Home® program have become interested. Firefighters who were normally silent during training sessions have had the courage to speak about their concern for safety.

This program is not a competitor to Courage to Be Safe® Training, it is not a punitive program designed to shame departments into enforcing safety rules. The Advocate Outreach Program is an effort to be sure that all firefighters have access to safety resources.

Individuals conducting the AOP interviews report that a significant number of firefighters know very little about Everyone Goes Home® efforts and resources. This fact should motivate advocates to reach these firefighters. The AOP is another tool in the Everyone Goes Home® toolbox. Safety advocates should not have any reservations about participating in the program.

For additional information contact AOP coordinator [Michael Petroff](#).

Initiative 13 - Consensus Protocol on Firefighter Behavioral Health - Keeping Your Head in the Game!

The way in which firefighters are cared for in the fire service is on the precipice of great change. We all know that complications rising from this profession-plus all the stress of normal life for firefighters and their families-can create situations where we all need help from time to time. Ensuring that care is available whenever needed, and that the care delivered represents the best practices under current evidence informed standards, is the objective of Firefighter Life Safety Initiative 13.

The strategic plan for this initiative has employed a consensus process much like that used in developing standards in both medicine and firefighting. It began by bringing together carefully selected researchers whose research programs deal with areas important to occupational behavioral health needs of the fire service. Those experts worked with a similar number of representatives from key organizations and standards bodies including the International Association of Fire Fighters, the International Association of Fire Chiefs, the National Volunteer Fire Council, the National Fire Protection Association, the National Association of Emergency Medical Services Physicians, and the North American Fire Training Directors and the Federation of Fire Chaplains to develop practical ways to deliver state of the art assistance to fire and EMS providers. A second group of experts, representing comprehensive behavioral health assistance programs for firefighters and their families, was followed by a third meeting on the role of peer support programs in promoting health, wellness and safety using behavioral health resources. These groups came together and brought their best from university, medical and military settings-as well as those representing excellent fire service programs. We learned a great deal from our military contributors who, we find, face many of the same behavioral health challenges.

As we roll out the new model for Initiative 13, you can look for presentations on the model & its components at your local and state level, or you can read the series of articles currently being printed on the Fire-Rescue Magazine website. These are being presented serially at: www.firefighternation.com/profile/FireRescueMagazine.

If you would like some direct information, please contact Dr. JoEllen Kelly of the Everyone Goes Home® Program at jkelly@everyonegoeshome.com.

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Western Region Moving forward with Everyone Goes Home® milestones

By Ron Dennis and Brooks Martin

Year 6 of the Everyone Goes Home® program has started off with a lot of energy and enthusiasm from a number of Everyone Goes Home® advocates committed to the mission and goals of accomplishing the 16 Firefighter Life Safety Initiatives. There are dedicated advocates in every Western State with the exception of South Dakota and New Mexico. Contacts are being made in both of those states to recruit advocates and representatives for the Advocate Outreach Program. Although there have been a number of activities going on in many of the western states, here are just a few highlights that are representative of the great work that is going on and the commitment being demonstrated by many of our advocates:

Colorado

Jay Ruoff and Kevin Milan continue to promote the L.A.C.K. program to Chief Officers throughout the state and they have been providing valuable feedback on their experiences to Bob Colameta who is in the final stages of launching the newly revised and re-formatted curriculum.

Minnesota

Crawford Weistling has been very busy in Minnesota as a member of a committee that has finished work on a "White paper," "Firefighter and Occupant Safety in Lightweight Construction" for the Minnesota Governor's Council on Fire Prevention and Control. Crawford has also been named as State Advocate to Minnesota State Fire Chiefs Committee to develop a state wide Minnesota Fire Chiefs Honor Guard Ceremonial and LODD Protocol. Minnesota advocates have been busy in December teaching and presenting a variety of Everyone Goes Home® programs throughout the state.

North Dakota

Advocates in North Dakota continue to deliver numerous Courage to Be Safe® programs and once again the the North Dakota Firefighter Association has been awarded \$39,000 for the Everyone Goes Home® Program. This is the 4th year that they have received this grant.

Texas

Through the efforts of Danny Kistner, Rob Franklin, Willie Mora, Chris Connealy, Paul Mandanado and others, Texas has made a major accomplishment this year. In October, 2010, the Texas Fire Commission voted unanimously to require all career firefighters to receive Courage to Be Safe® training. Incumbent firefighters have 5 years to complete this requirement and new firefighters must get the training within 1 year. It is expected that it will become part of recruit training to meet this requirement. In a state the size of Texas, this is a huge success story.

Kansas

Kansas has been able to embed Courage to Be Safe® in both their firefighter certification and their officer certification requirements and they join the growing list of states across the nation in promoting the 16 Firefighter Life Safety Initiatives through incorporation in the standard curriculum.

Arizona and California

Advocates in Arizona continue to deliver Courage to Be Safe® courses and participate in the AOP program. Arizona has formed 4 Regional Safety officer groups and are working on a 5th region. All of the Safety initiatives Everyone Goes Home® programs and also the National Fallen Firefighters Foundation's Arizona LAST team work under the umbrella and within the Strategic Plan of the Arizona Fire Chiefs Association and the AFCA Safety health and Survival Section. AZLAST has produced an outstanding educational video that is distributed at meetings and conferences to keep the Arizona Fire Service informed about the services and support provided by the team (The link to this video can be found on the AFCA Website www.azchiefs.org under AZLAST)

The Western Region has also constructed a Facebook page and is in the process of taking the lead on several other year six activities including the revision of the Advocate Handbook, advocate reporting templates, and distribution and sharing of training materials just to name a few. For more information on these and other activities, please contact [Ron Dennis](#) or [Brooks Martin](#).

Everyone Goes Home® Program Introduces Metro Advocates Section

By Henry Costo, Metro Advocate Coordinator

Since the creation of the position, the Metro Advocate Coordinator (MAC) has been employing a variety of traditional and non-traditional approaches in order to facilitate the implementation and integration of the 16 Firefighter Life Safety Initiatives within metropolitan fire departments across the nation. The ultimate goal of these efforts is to reduce the number of line-of-duty deaths occurring in these larger departments.

The traditional approach has included ongoing efforts to establish and nurture collaborative relationships with a growing number of geographically diverse metropolitan departments. Typically the MAC's efforts to achieve the vision of establishing at least one embedded Everyone Goes Home® advocate within each metro department has begun through initial contact with the respective departmental safety officers, thus, leveraging their inherent interest in the preservation of firefighter safety. By leveraging existing relationships within organizations such as FDSOA, IAFC, etc., numerous department contacts have been established with virtually universal positive response in cities as diverse as Washington, Atlanta, Chicago, Philadelphia, Miami, Los Angeles (County), Austin, San Diego, etc. The expectation is that the establishment of these embedded advocates will function to encourage the adoption and implementation of a blend of the various standard Everyone Goes Home® programs and training, such as Courage to Be Safe®, L.A.C.K., National Seatbelt Pledge, etc.

In addition to this traditional approach, the MAC has been pursuing a number of non-traditional initiatives to elevate the Everyone Goes Home® profile among the metropolitan departments and to encourage broader general metro involvement and interaction with Everyone Goes Home® through involvement and participation in a variety of specific projects.

- Working with the National Institute of Occupational Health and Safety (NIOSH) and the National Cancer Institute (NCI), the MAC enabled Philadelphia Fire Department (PFD) participation in their joint research study of cancer incidences among metropolitan firefighters and possible correlation to the performance of their fire fighting duties. In addition to the research effort in Philadelphia, work has already begun, or been completed, in the San Francisco and Chicago departments, and it is anticipated that Washington, D.C. will also become part of this comprehensive research study in the near future. By studying the vital status, work history, exposure assessment, etc. of firefighters employed in the participating departments from 1950 through the present, the study will provide the best evaluation to date of overall patterns of various forms of the disease among firefighters. The MAC will then employ the results of this study to initiate and organize a collaborative effort among a broad array of metropolitan departments in order to identify and implement appropriate remedial efforts to prevent the occurrence of duty-related cancers among firefighters in the future.
- Working with Drexel University the MAC, as a member of the project's advisory board, enabled PFD participation in a federally funded long-term project to establish and maintain a national Firefighter Non-fatal Injury Surveillance System (F-NISS). The project will standardize information from surveillance systems and unify these into a core data set describing firefighter injuries accurately and consistently at the national, regional and local levels. The work fulfills a significant need as firefighters and researchers lack a comprehensive surveillance system documenting injuries and risk factors essential to informing policy and practice. Such a comprehensive database will provide an invaluable tool for identifying and implementing appropriate interventions and remedies for the prevention of line-of-duty injuries and deaths in ALL departments.

- As a member of the project's advisory board, the metro advocate will be consulting with the expanding cadre of embedded metro advocates in order to ensure that the project's final product meets the needs of the fire service vis-à-vis facilitating the reduction line-of-duty injuries. The advisory board is composed of prominent fire service leaders, as well as national experts in injury and occupational health surveillance. The advisory board is charged with guiding the research team in reviewing existing data systems and comparing the data produced by these systems to the data ideally needed. The advisory board's leadership will ensure that the needs of the fire service community and its researchers drive the F-NISS design. Advisory board meetings will be held annually throughout the three-year grant. Information: http://www.publichealth.drexel.edu/Home/Home/692/vobId_3054/
- The MAC is presently working with Drexel University School of Public Health faculty and staff to obtain federal funding in order to study the impact and efficacy of virtual reality driver training simulation in the PFD. Documentation of the effectiveness of these tools will then facilitate MAC advocacy efforts to sustain, if not increase, federal funding for the purchase of these invaluable tools throughout metropolitan departments nationally.
- The MAC authored an article published in the November 2010 issue of Fire Chief magazine advocating the importance and value of the inclusion of driving simulation within all driver training programs, particularly within metropolitan departments.
- Working collaboratively with a variety of fire-service and industry partners, the MAC is presently involved in a number of technology related research projects aiming to improve the operational performance of modern PPE elements. These collaborating partners include IAFC, DuPont, and even the BBC. The MAC plans to disseminate the expected positive outcomes of these research efforts through the established network of embedded metro advocates.

In summary, as described above, the Metro Advocate Coordinator has been employing a blend of traditional and non-traditional approaches to achieving the ultimate goal of reducing the occurrence line-of-duty deaths and injuries in the fire service of today and the future, with an obvious focus upon the nation's metropolitan departments.