

# MedSTAR Transport News

Your first call. Your only call.



Issue 8, Winter 2009

## Todd's Syndrome

Jack Hogan, RN, CCRN

MedSTAR 3 was dispatched to a hospital in Southern Maryland last spring for an 84 year old gentleman who was brought to the emergency room with complaints of new onset left sided paralysis with a GCS of 15. He was wearing a C collar from his visit to the emergency room 4 days prior, where he was seen for a complaint of falling at home. At that time he was diagnosed with a C1 ring fracture with slight separation, no compromise to the cord and no change in his neurological exam. He was sent home with the C collar and told to follow up with his neurologist. MedSTAR 3 flew the patient to MedSTAR secondary to his C1 fracture history and neurosurgical evaluation.

The patient had a history of osteoarthritis and myelodysplastic syndrome (family of diseases in which the bone marrow fails to produce an adequate number of healthy blood cells). He also had a history of lower extremity weakness caused by arthritis and clot atrophy. His history was significant for a fall that occurred 5 months prior to this hospitalization. Five months ago, this patient fell and developed a right sided subdural hematoma. He underwent a craniotomy to evacuate the hematoma at that time.

When the flight crew arrived the patient presented with a patent airway and a regular breathing pattern. He had no complaints of shortness of breath.

He had a normal capillary refill and palpable pulses in all extremities. His GCS was 15. The patient's speech was clear and had no facial droop. His pupils were brisk and reacted normally to light. He did have some left sided motor weakness. The patient's EKG showed sinus tachycardia with no ectopy. Heart sounds were normal for S1 and S2. Lungs were unremarkable with an O<sub>2</sub> sat of 97% on 2L NC. The patient's abdomen was soft and not tender. He was incontinent of both stool and urine.

The patient was a trauma response upon arrival to Washington Hospital Center's MedSTAR Trauma Unit. The staff was updated on the patient's history of falls, and the time line of injuries. Both EMS and the sending hospital were unsure of the etiology of the paralysis. It was to be evaluated as a CVA versus spinal cord injury.

In MedSTAR, the patient's CVA workup was negative. His CT scan of his C-Spine remained unchanged. His MRI showed a small left Hygroma (collection of cerebrospinal fluid, without blood). The patient's neurological status improved. He was discharged home from MedSTAR with left sided weakness, but able to move all extremities. He was diagnosed with Todd's Syndrome by the neurosurgical team and advised to follow up with his neurologist.

Todd's Syndrome is a condition named after Robert Bentley Todd, who first described the phenomenon



## New Employees

### Sarah Fagan, RN



Sarah comes to MedSTAR Transport from the Surgical ICU at Washington Hospital Center where she has worked since 2005. She graduated

from the University of South Carolina in May 2004 with a Bachelor of Science in Nursing then completed her new graduate RN program in the Surgical Trauma ICU at Palmetto Health Richland in Columbia, SC.

Sarah, originally from Columbia, SC, has been enjoying the adventures of living in the city. She is proud of her new job and loves serving the community around her.

### Lynette Estrem, NREMT-P



Lynette comes to MedSTAR Transport after nine years of working in an ALS ambulance system. She is originally from Minnesota and moved to the DC Metro area to

complete her Master's degree in Community Counseling. Lynette enjoys outdoor activities including biking, snowmobiling, downhill skiing, and running.

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### Case Study, continued from page 1

in 1854. Todd's paresis is a transient weakness of a hand, arm, or leg that occurs after partial seizure activity within the affected limb. The weakness may range in severity from mild to complete paralysis. There are two possible causes of Todd's paralysis. The first is when the motor cortex is exhausted leading to prolonged neuronal hyper polarization. The second is that there is transient inactivation of motor fibers caused by activation of NMDA receptors.

Todd's paralysis is a neurological condition characterized by a brief period of transient (temporary) paralysis following a seizure. The paralysis—which may be partial or complete—generally occurs on one side of the body. It is important to distinguish the condition from a stroke, which requires different treatment. The paralysis usually subsides completely within 48 hours. Todd's paralysis may also affect

speech or vision. The cause is not known. An individual who has experienced Todd's paralysis has also experienced a seizure. Examination of an individual who is experiencing or who has just experienced Todd's paralysis can help physicians identify the origin of the seizure. It is important to note, the prognosis of the patient is indicative of the effects of the seizure, not the occurrence of the paralysis. The only treatment for Todd's paralysis is symptomatic and supportive care because the paralysis is transient and disappears quickly. ■

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## MedStar Health Celebrates 10 Years of Caring

**MedStar Health**, the mid-Atlantic region's largest, not-for-profit healthcare system, is celebrating its 10th anniversary.

June 30, 1998 marked the 10 year milestone, when the boards of directors of Helix Health and Medlantic Healthcare Group voted to merge operations.

In 1999, the new entity was named MedStar Health. At the time, the system employed more than 21,000, included more than 4,500 affiliated physicians and handled nearly 900,000 outpatient visits annually.

MedStar Health now employs 25,000 associates, provides care for more than 1.5 million outpatient visits, 158,000 hospital admissions and 208,000 home health visits each year.



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All questions, comments and feedback are welcome and appreciated at:  
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### MedSTAR Transport Flight Paramedic: 25 Years in Flight

Laurel and Hardy, Bogie and Bacall, Batman and Robin. Now you can add Washington Hospital Center's MedSTAR Transport and flight paramedic Wade Smith to the list of legendary pairings. Smith was the MedSTAR Transport's first flight paramedic when the service began back in July 1983. This year they celebrate 25 years of service together.

The milestone puts Smith in a league of his own. He is the longest serving flight paramedic in MedSTAR Transport history. And by all accounts, it is rare for a flight paramedic to fly for 25 years, in part because of the mental and physical demands of the job. Flight paramedics work in tight spaces inside helicopters, and they care for the sickest and most seriously injured patients.

"I'm fortunate. I like to help people, and this job lets me do just that," said Wade Smith. In his 25 years with MedSTAR Transport, Smith has cared for thousands of people and flown thousands of miles in the skies over the Washington, DC region, but he says to describe his best flight would be unfair. "Every flight is a good flight. The flight nurse and I have to keep the patient in the best condition possible until we can get to the hospital. That is a big responsibility, and I am proud to be a part of it."

In 1983, MedSTAR Transport and Wade Smith both broke new ground. That year MedSTAR Transport became the first hospital-based air ambulance service to operate 24/7 in the Wash-



*From left to right: Heidi Sigmon, Maryann Pennestri, Kathy Gorruso, Anne Wojner and Wade Smith.*

ington area. At the same time, Smith lobbied for flight paramedics to be part of the MedSTAR Transport medevac team. "I felt a flight paramedic could help transition the care from the first responders on the scene to the flight nurse on the helicopter," Smith recalled. He made a convincing argument because a flight paramedic has always been a part of the MedSTAR Transport crew.

"Wade Smith is true pioneer," said Mark Smith, MD, chairman of MedSTAR Transport at the Hospital Center. "For 25 years, day in and day out, he has provided care for some of the most vulnerable patients we see. To provide that kind of uninterrupted care is a real testament to the mission of MedSTAR Transport."

As MedSTAR Transport and Wade Smith celebrate their 25th year we all continue to commit to provide exceptional care to every patient. ■

### Heart Surgery Program Awarded Three Stars for Quality: Rating Reserved for Top 10 Percent of U. S. Hospitals

Washington Hospital Center's cardiac surgery program has received a top three-star quality designation from the prestigious Society of Thoracic Surgeons (STS), a medical professional organization for cardiothoracic surgeons.

The STS recently developed a comprehensive quality rating system using the Society's National Adult Cardiac Surgery database. This allowed STS to compare cardiac surgery programs from across the country. Only an estimated 10 percent of hospitals received the three star rating, which denotes the highest category of quality.

"It is a tremendous achievement to be counted among this elite group of quality cardiac surgery programs," said Washington Hospital Center Senior Vice President and Chief Medical Officer Janis Orłowski, MD. "We know our cardiac surgery patients have some of the best outcomes in the country and the 'before and after' surgical care provided by our experienced cardiac nurses and technicians is one of the best in the region. We are pleased and honored to have our cardiac surgeons and staff recognized in this way."



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## MedSTAR Transport 25th Anniversary Timeline

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- 1983** MedSTAR Transport becomes the first hospital-based air medical service in the Washington Metro area offering 24/7 service.

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  - 1987** MedSTAR Transport begins to offer services to all hospitals in the region.

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  - 1989** MedSTAR Communications Center hires its first dispatcher and adds a computerized dispatch system.

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  - 1997** Ground Critical Care Transport capability is added to the program.

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  - 1998** MedSTAR Transport achieves certification by the Committee on Accreditation of Medical Transport Services (CAMTS).

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  - 2000** MedSTAR begins utilizing remote bases for the helicopters and staff.

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  - 2006** MedSTAR Transport moves its state-of-the-art communications center to Lanham, MD.

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  - 2008** MedSTAR maintains five EC-135 helicopters at three remote bases and the Washington Hospital Center, a maintenance facility in Fort Meade, MD, a communications center in Lanham, MD, and over 100 highly skilled and trained individuals.

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