

## HORRY COUNTY EMS

The Horry County Ambulance Service was destined to be called Rescue. It did not matter how many awards HCEMS won, how many times employees of HCEMS corrected anyone and everyone, how professional HCEMS was, or how big the writing was on the side of the ambulance that said Horry County Emergency Medical Services. To most of the general public, we were just “the rescue squad”.

The history of Horry County EMS goes something like this. Medic 30 (formerly Medic 1) was one of the first three career ambulances in the county. It was also the first to break contact with the hospital in which it was stationed. The crews of these ambulances worked eight-hour shifts. For a short while, ambulance crews worked double duty; they worked not only as personnel staffing the ambulances, but also as orderlies for the former Ocean View Hospital located between 76<sup>th</sup> and 79<sup>th</sup> avenues on the ocean side of Business 17. This arrangement quickly changed and the crews worked only out of the emergency room and waited there for the ambulance calls. Around December 1974, the crews were moved from the hospital into one of the Myrtle Beach Fire Department buildings and then to an old vacant school off 10<sup>th</sup> Avenue North. They then moved to their present location off 21<sup>st</sup> Avenue North.

Medic 29 (formerly Medic 2) was one of the first three career ambulances as well and the second one to break contact with the hospital. The crews of these ambulances worked eight-hour shifts, too. They moved from the hospital around January 1975 to 101 Beatty Street which is where the new county courthouse now stands. They moved to their present location in 1995.

Medic 35 (formerly Medic 3) worked out of the Loris Hospital from around September 1970 until June 1, 1976. The Orderly Staff of the hospital operated the first ambulances and only ambulances that were assigned to Loris Community Hospital.

The first ambulances arrived in October 1970 and each of the three hospitals in the county was given two ambulances. There were no requirements for medical training at that time.

The crew assigned to ambulance duty would be “toned” to a call by someone paging on the intercom. “Unit 1”, as it was called, would get their directions from Desk One (where the calls came into the hospital) and respond to the call. The only dispatcher at that time was in Conway and that person was a County Police dispatcher. There were no Fire or EMS personnel to dispatch. The call volume at that time was around 30 emergency calls a month, 30 out-of-county transfers a month (emergent and non-emergent), and around 20-30 in-county routine transfers (taking patients home from the hospital, taking them to doctor appointments and back home, and to hospitals for x-rays or tests).

In the beginning, the cost of an ambulance trip for a patient was \$17.50 each way inside the county. There were also set fees for out-of-county transfers; around \$350.00 for a transfer to Charleston. Then there was a huge jump in prices for in-county trips (one way) when the name changed from Horry County Ambulance Service to Horry County Emergency Medical Service - \$65.00 each way. Today, transport to the Emergency Room with BLS care is only \$200.00 and ALS \$350.00 plus \$3.50 a mile plus equipment and supplies used.

The first training received was CPR classes that were taught around 1972 by the American Heart Association and by the American Red Cross shortly after that. In 1973, the first EMT classes were taught at Horry-Georgetown Technical College and the written exam was given in the cafeteria of Loris Community Hospital. The training was not required, but individuals who wanted to could take the classes. Doctors from Myrtle Beach and Conway taught the classes. Sometimes students would get to class and stay about an hour before someone would come to the class and tell the students that class was cancelled due to the doctor being involved in an operation or delivering a baby, etc. In 1975, the second paramedic class in South Carolina was taught in Charleston. Three young men – Tony Hendricks from Conway, Danny Brown from Myrtle Beach and John Wayne Tyler from Loris were chosen to attend and all passed.

In June 1976, the Loris ambulance crews were moved out of the hospitals. The crews continued to work eight-hour shifts and were based out of the Loris Police Department because the EMS building was not complete. A jail cell was used as a base of operations for about a year. The Jaws-of-life and gas for the jaws were kept in the same cell. If a call was received that involved a motor vehicle accident, the crew loaded the Jaws-of-life in the patient compartment prior to leaving.

For approximately six months of their stay at the police department, the ambulance crews were asked to operate as police dispatchers from 6 p.m. to 6 a.m. if there were no ambulance calls. When the crew got a call, they called the police officer on patrol to come answer the phones and the radio. If the officer was busy when he was called to the station, there would be no one in the police station until the officer arrived or the ambulance crew finished their call and returned.

In the spring of 1977, Medic 3 moved from the Loris Police Department to a new facility – the Loris EMS Station opened in its present location.

When ALS services began, each station had its own protocols and medical control. When ALS was first implemented, the walkie-talkies were ineffective. The crew of Medic 3 hoped for three men for a cardiac arrest call. Two would do compressions and ventilations and the third would run from ambulance to patient to give medications and receive orders. None of the three stations could give any medication unless a doctor in the ER gave an order over the radio for the medication to be given.

Loris had the first medics that could give medications with standing orders. Doctor Eston E. Williams, Jr. entrusted the medics under his supervision to use protocols. This

provided faster and more efficient care and transport of the patient. The results led doctors at the other hospitals to place trust in their medics and soon followed with standing orders. We have the system we have today from these humble beginnings. How many lives have been saved because a young doctor entrusted even younger men to embark on a profession of saving lives, alleviating pain and suffering, and proving that there was a need for emergency medical technicians and paramedics? How many lives have been touched and helped? How many lives have been saved because they had the confidence to do their job and because Dr. Williams had the confidence in them?