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Letters to the Editor

These letters, both edited for space reasons, refer to articles in the last issue. Dr. Krahling, a former member of the SSVMS Editorial Committee, now lives in Redding.

Ambulances Remembered, Fondly

Such memories you stirred by your article [*California's Ambulance Services During the 1960s*] In 1949 I bought a practice in Orland, on old 99w across from Chico. I had worked for a doctor in Grass Valley a few months just out of a general internship. The local ambulance was owned and operated by the Orland ambulance association which was a membership supported by small annual dues. Members got a good rate if they used the ambulance, and others paid a little more.

Clarence Nelson was a furniture store owner/operator who kept the ambulance at home in his garage, near his business. The ambulance was a "stretched" 1941 Chevy former panel truck, I think. Clarence was the driver and the only person. If help was needed, he called the local volunteer fire department. The chief was a baker, and the two trucks were in part of his building. The noon whistle was blown to call the volunteer, one blast if going north of town, and two if south. This was so the designated men could man a certain intersection with a little stop paddle.

Firemen were a great group of guys whom I soon learned to know. They had no training, but the year before I came to town, Aaron Stockton's son was struck by a baseball, rendered unconscious, and died. There was no respi-rator so Aaron bought an E and J for the department. So I used it myself and trained guys while using it.

At that time the local telephone operators were the communication. They seemed to know where I was all the time, and could reach me by phone or send the police. If I was gone for the weekend they would collect calls for me, and often I was busy until midnight or later.

I stayed in Orland until 1960 and little had changed except Mr. Pratt became the driver and his wife became an answering service. They had a new ambulance built, and staff remained unchanged. We had some RNs we could call on if needed.

Those were the days!!!!!!!!!!

- Buren Krahling, MD

Reflections on Pain

As an occupational medicine physician, I enjoyed your article [on *Abusing the Workers' Comp System*]. In most chronic pain management, to come in every month is excessive. Perhaps your patient might look

at it this way: Each visit is a chance to make sure it is actually his work injury that is the cause of the problem. The docs should be check-ing for medication side effects and referring him for new work when that is indicated. Patients often want to blame everything on a work injury...and docs who disagree risk a patient's anger, but may save his or her life.

My grandfather had a work related injury in his late 40s.. In attributing everything to his shoulder pain, he did not seek proper work up, so that his work injury indirectly led to his death.

It is sad that we are pressured to see patients more and more quickly and lose the chances to get to know our pa-tients. Even though I am a "work comp" doctor, I don't forget that my patients are people. In first doing no harm, I try to protect patients from needless disability, job loss and depression and encourage them to be active.

When I am pressured to send folks back inappropriately I have found adjusters can seek other doctors easier to bully. When patients try to bully me into putting them off work, they often leave but find their next doc says the same thing I have!

- Sarita Salzberg, MD, MPH