Answering The Call:

The History Of The
Port Washington Volunteer Fire Department

Transcript Of Oral History Interview With

Tina Ellerby

Fire Medic Company No. 1

conducted in association with the
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Interview with Tina Ann Ellerby by Sally Olds
pk January 31, 2005

Q: Today is January 31st, 2005. This is an interview with Tina Ann Ellerby. My name is Sally Olds. The interview is taking place at the Port Washington Public Library. Can you please say your name.

Tina Ann Ellerby: Tina Ellerby.

Q: And which fire company are you affiliated with?

TAE: Fire Medic Company Number One.

Q: You grew up in Port Washington, didn't you?

TAE: Yes, I did.

Q: And what was it like growing up here?

TAE: I was born and raised here. And my family was here. My grandmother. And it was wonderful. It was a great place to grow up. Nothing but fond memories about it. I did not have any contact with the Fire Department. I didn't come from a family of people in the Fire Department. I basically got involved because my youngest brother was in high school and involved in a soccer accident, and was hospitalized in CCU. And he raved

about how wonderful the people on the ambulance were. And, I was nineteen years old, and I thought, gee, how could I--how could I get involved in that. And I went knocking on their door and said, "How do you become a member?" And saw someone I'd gone to school with, and he said, "Oh, it's easy." And it kind of went from there. So, that was the involvement with me. I'd never had that prior to that. Like a lot of the Fire Department members came from families that were always involved with the Fire Department, so ...

Q: What was the name of your friend who said, "It's easy"?

TAE: Glenn DeMeo. Glenn DeMeo was my--I was in elementary school with him, and, you know, I knocked on the door and I opened it, and I went, "Oh, my gosh! You're here?" And he said, "Yeah." I said, "What do you have to do? Do you have to know anything?" And he said, "No, we teach you everything you have to know." And it was the start of something great in my life. It was a wonderful time in my life.

Q: Did you have to wait to be admitted?

TAE: When I first went up, which was probably the spring of 1980, there was a three-month wait to become a member. And it involved showing up on Thursday nights for work nights and participating in cleaning the ambulances and restocking and meeting the people and cleaning headquarters. It was a big--everybody came. And we were required to attend those work nights prior, so that people could meet us and interact with us for a

three-month period before we were voted on for membership. So, yeah, that was really the requirement. You weren't allowed to do anything else, but you were required to come up and do that.

Q: Do you have any childhood memories of fires?

TAE: Well, see, that was my fear. I'm a chicken, when it comes to fire. So, when someone said, "Oh, the ambulance is run by the Fire Department," I got a little nervous, because I was about seven years old and there was a fire in our home. They smelled fire. They called the ambulance. And, as a little kid--I mean, they called the Fire Department. I looked out the window, and I saw what looked like ten million lights. And I was scared. I had two younger brothers. And my mom and dad. And the Fire Department came in, and they walked around the house, and everyone smelled smoke, but no one could find it. And they decided it wasn't safe for us to sleep there. So they sent my mother and me to my grandmother's house around the corner, and they sent my brothers next door to the neighbor. And my father slept in the house, in case anything happened. And I remember thinking that my father would die that night in a fire. So, fires have always scared me. The Fire Department--the idea of having to need one always scared me, and I was convinced that, at seven years old, that I would wake up the next morning and I wouldn't have a father. So, if it wasn't safe for us, I couldn't figure out why they would let him stay there (laughs). So, that was my only experience with the Fire Department, and it was fear. It was just plain old fear. So, walking into that firehouse, when it said Port

Washington Fire Department, Fire Medic Company, I went, "What am I doing?" So, yeah, that was my only experience with the Fire Department prior to becoming a member.

Q: Well, how did you get over that fear?

TAE: Probably because I loved my brother so much, and the fact that he--he talked so highly of how the people treated him. I've always been kind of caring, and I always was a hand-holder--probably a little mother. I think the oldest daughters always become little mothers really early, and want to care and nurture. And I thought it was important. I said, if, you know, if you can volunteer and become part of that, that would be great, as long as I don't have to fight a fire or (laughs) go into a burning building, I'll be okay. And so I asked them if that was a requirement, that you be fire-trained to have to go into a fire, and they said no. So that was--immediately let go of all the fears.

Q: What do you remember about the training?

TAE: Training for Fire Medics?

Q: Uh huh.

TAE: The training for Fire Medics. The initial training at Fire Medics was to become a driver.

They wanted everyone to be able to drive the ambulances, and you had to be qualified on both ambulances. We carried two at the time--854 and 858. You needed to go through a driver's training program that was radio communications, learning the signals, learning the codes, learning the right military time, if you weren't familiar with that; how to fill out a run sheet, which were forms that you had to fill out for every time the ambulance was dispatched. It had times and addresses, time out, timing arrived at the scene. It was important to do that. Familiarize yourself with the members, so that you could fill out a sheet as to who showed up at the scene, in order to earn credits towards your participation in the company. You had to know where everything was on the ambulance. You had to be able to restock everything. You had to learn where the stock supplies were kept, what to do when they weren't around on a day they weren't there. If you were checking the ambulance and something was missing, or it needed oxygen tanks or it needed supplies, where to get them or who to call and say, "I can't find the blah-blah, you know, I'm out." You know, "Now what do I do?" So there was a lot of familiarity that way. And then you had to get tested on the road. You had to be able to maneuver. A lot of people hadn't driven big vehicles, and you had to be able to use your side-view mirrors, because you don't have the luxury of a rear-view mirror that does anything for you in a large vehicle like an ambulance, and, which I didn't have a problem with. I had driven a motorhome and things that were bigger, so that didn't really scare me. There was a road course. You had to basically be able to back it up without help. You had to be able to negotiate the back corners of your ambulance. We used to go up to Salem School, which was closed at the time. And right in the front of the school, there's a

circle--traffic circle. And they made you park next to the traffic circle and then back up around the traffic circle, three hundred and sixty degrees without hitting the curb. Without--you know, using your side-view mirrors, which was really hard for a lot of people. But I was a pretty astute driver, so I didn't have any problems with it. But that was really the training. It was road-work; it was a test. It was--you had to drive with two or three different driver evaluators so that it wasn't going to be lopsided--one person saying you're great, another person saying that you weren't great. So, there was that kind of familiarity you had to have. And then you were passed as a driver. Once you took the test, you were passed as a driver, and then you could drive on any of the ambulances to any of the fire calls.

Q: And then, did you have to take emergency medical technician training?

TAE: Initially, no. What they wanted you and required you to do was get CPR-certified--cardiopulmonary resuscitation. There was a big move back then in the early '80s, they wanted to have the entire town trained. They wanted to see if they could follow, I think it was Washington State's example, or Seattle, where a ridiculously high amount of the percentage of the population actually was CPR-trained. And so they required us to get CPR certification, which was a nine-hour, I think, course, maybe was--I can't remember the number of hours--three nights or five nights up at wherever they had it, either at a firehouse or at the hospital, and get CPR-certified. So that, if you were the first responder, or if you were out in town and you watched someone collapse, that you would

know what to do. That was really the only requirement. And you didn't have to become a driver. If you wanted to just work in administration, you could. You didn't have to be associated with physically getting on the ambulance, which scared a lot of people and some people chose not to do that. But once you did want to be a certified, driver was your first certification, and CPR training. And then, after that, you could stay a driver forever, or you could continue to become an emergency medical technician, or an advanced emergency medical technician, which would be the next step above that, which is the highest rating that Nassau County recognized at the time. They didn't recognize paramedics. So you could choose to become eligible. You'd have to be in for six months, I think, was the minimum before you could even apply to those courses, which I did; I went to both.

Q: You did. So you became an emergency medical technician?

TAE: Well, I became emergency medical technician. I think I got voted in in the fall of 1980, and I believe it was '81 when I got accepted into the emergency medical technician program, which is--you know, this is all volunteer. You know, you're not paid. So (laughs), as I recall, the EMT was eighty hours, I think, roughly, so it was like two nights a week for three or four hours a night for what seemed like forever. And I had a wonderful woman named Kay Perro who was up at St. Francis Hospital, who was lucky enough to teach our EMT and AMT classes, and lucky enough to get in under her, and it was a wonderful thing. That was about eighty hours. Then, you have to take a state test.

You have to pass state tests. And at the time, Joe Teta was the Captain of Fire Medics when I first got in, and you had to become, after you had passed your state test, "Teta-rized" is what we called it (laughs). The Captain has to sign off on the fact that he'd been with you on a few calls and that you were proficient in the field. Even though the State said you were, you weren't allowed unless Port Washington gave its seal of approval. And in our case, that was the "Tetarization" process. So you had to prove yourself in the field, in the ambulance, on the road. Didn't matter if you were good on paper; you had to be good in the field, too. So, I got "Teta-rized" as an EMT, and I remained an EMT for, I think, about four years before I went into the AMT--put my papers in, although I wasn't terribly confident on wanting to do it. I did get my AMT certification, although I never did realize my "Tetarization" as an AMT. I didn't get on--at that point in my life, I had done less and less calls, and now, although I could help another AMT, I never got my "Tetarization" to ride alone as an AMT. And shortly thereafter--maybe a year or two after that--I had gone exempt as a member. And about a year and a half after that, I came back. I think I was the first Fire Medic member to come back. For about a year, I had moved out of town. And I felt like I wasn't part of it; it was hard. Moving out of town, it probably severed--was like ten years of a wonderful part of my life. So, it was very hard to do that, from out of town. I lived out in Northport, and I couldn't respond to ambulance calls and I couldn't take night duty as much, and, you know, it was a hard thing to be able to step away, and I had to step away from it after--I didn't last very long, maybe six months or a year. I don't even think I even completed the--you had to make monthly meetings. You had to make work nights. You had to make--and I started being

shy in points, and it was ripping my heart out, so I stepped away from it totally. And I never could bring myself to get involved. I've lived in Huntington for fifteen years, and they have a volunteer ambulance corps out there, but Fire Medics led the way. I mean, they were--there was just nobody better than them. And I never got involved in another community. It just--I couldn't do it. I don't know why I couldn't do it. I enjoyed it, and I should have stepped back up to the plate and gone back in, but I didn't.

Q: What do you think makes Fire Medics so good?

TAE: They were very new at the time when I had first joined, I think, in '79. It had stopped being what most of the Island had, which was a scoop-and-run theory. They would get an ambulance call. It was run by the firemen. They would take an ambulance to the house, throw somebody on a stretcher, do basic first aid, and get them to a hospital. The involvement of Fire Medics and them opening the door to other people that were not fire trained, in order to provide better care; people that were EMTs, AMTs that got certified that it wasn't falling on five people in the Fire Department. You know, because they have enough to do. They have a lot of fires they fight every year. They have to make their points for their companies, and here they were sleeping up there on little chairs that opened up into these little tiny cot beds. I don't know how they did it for as long as they did and provided such a needed service, a volunteer service, and just kind of drained everything out of them. They did a wonderful job, and they were just pushed to the limits. So, they created this, and it was just, the right people were in place at the right

time. You now, the Joe Teta's who, you know, you love them to death, and he was just organized like no one I've ever seen. So, it was important to have that--the mechanisms of that--in starting this, you know, baby, infant, "Who wants to join?" company, and "Who wants to get trained?" and okay, well, we can't get trained fast enough, and designing ambulances and trying to--it was in this growth spurt. There weren't a lot of women involved in the Fire Department anything when I was young. When I first got into that--into Fire Medics--I don't think they even had--I think Janet was the first female firefighter to apply at any of the other firehouses. So, this was the first female group of people, and we filled a great void. We were free a lot more. There were homemakers and students. We were free during the day. They were trying to fill this gap of people needing an ambulance, not being able to because everybody's working. So, it was a huge--it was so important, because it just--Port Washington was growing, expanding. The population was increasing. The need for emergency services--medical services--was increasing. And they were trying to fill it. So, it was this huge growth wave that came through, and I was right at the beginning of that. And, you know, to make mistakes and learn from them and how to, you know, big scenes and big triage events where people need to be evaluated, and, you know, just started learning the benefits of pre-planning and, you know, having mock demonstrations and mock casualties, and trying to--it was just--we just had all the right people at the right time to keep members excited and interested, and we were turning members away. You know, you've gone from--probably in a six-year period where, when I used to--they didn't give awards and stuff out when I was in. Otherwise, I would have gotten the "We-can't-get-rid-of-her" award.

Q: (Laughs)

TAE: (Laughs) Probably--I lived there. It was my second home. Everybody that was there supported each other through whatever emotional stuff was going on in your personal life, as well. So you saw the same faces all the time, and you saw them on work nights and you saw them on calls, and you saw them at monthly meetings. And then you went there after work, and you went there before work, and you went there on your lunch hour. And it became like the stepping stone for just personal stuff, too. You know, "What are you doing tonight?" "I don't know. Should we all go out?" "Let's try to get a movie." And it became this wonderful place when something horrible would happen that you would go there and you knew that you would find comfort. You would find people who understood what you were going through. And a lot of us were experiencing the same thing, like losses of people we knew, or tragic accidents, or things that just stunned us. And we would just come together. And there was always this connection there of you were going to get comforted, praised. You could help. It was just a great place. But you didn't get to find that too many times in life. And that was the one time I could say honestly you could--any time you went there would be your answer, or regardless of what you're looking for. So, I think that's what made it great. That was everything to a lot of people.

Q: Have you kept in touch with the people you worked with?

TAE: I've kept in touch--this is now twenty-five years later. I have kept in touch closely with, you know, four or five people that I was with there. And we very rarely see each other. We talk maybe, you know, once every few months. And when we get together, it's like we were never apart. Like any big group, or any large corporation, or any business, you talk about the, you know, the good old days. And you say "the good old days," because that's where your brain brings you to that certain group of people. And a lot of them come and go, and it's still that same core group of like thirty faces that had that familiarity for a ten year period. And when that starts changing and enough people leave, and it's never looked at the same by those core--you know, those hard-core, original people that were in there. Like, "No, things are changing." "No, it's, you know, it's not what it used to be." It always is what it used to be. It just--you know, your brain brings you where you're most comfortable, and we were most comfortable twenty-five years ago. I could never go back there now and walk in and feel the same thing. I've lost too many friends. I've--too many things have happened in my life where I think going back would be sad, because you wouldn't have the same connection that was such a great connection in my younger years.

Q: Besides Joe Teta, who were the other people who were instrumental in starting the company?

TAE: In my time, it was Pam Monfort, who's now Pam McDonough, Dennis Dermody, and

Daniel Swiacki. So, along with Joey Teta, those were kind of our, for the first few years, the people we fell back to all the time.

Q: And were you working at the time or in school?

TAE: Yeah, no, I was--I was at school part-time, but I always worked. I was working full-time at Port Photo Supplies under, not the new owners now, but from twenty-five years ago, and so I had a Monday through Friday, you know, nine to five job, and I was there every night after work. I would do my night tours. And I probably did, as sick as I am, you know, ten or twelve night duties a month, where I would cover--sleep up there. And, you know, you have an ambulance crew--try to have a twenty-four hour ambulance crew was the premise at Fire Medics. They wanted to have shifts of coverage. You know, two to five, five to nine, nine o'clock overnight till six a.m. Six to ten. Ten to two. Two to five. So, I tried to do that any time I could, and if there was ever an ambulance call outside my business, I have been known a few times to run out the door. (Laughs) "I'll be right back." And, you know, follow the ambulance one block down and take care of someone and come right back to work. So, yeah, I had a full-time job. Most people did. Most people were either full-time students or full-time working professionals. There were very few people--later, in my experience at Fire Medics, you saw people who were either retired in there often, or not working in there more often. And that kind of took the place of us, you know, that had no life at the time (laughs) and just, you know, had the--had the need to be there all the time. So, you saw it change.

Q: And your employer was okay with that? With your occasional ...

TAE: My employer was. You know, there was a case when he needed help, too. So he never ever said, you know, "You can't go." I never felt bad. I never got in my car and left to go to a call. But if there was a call, we all had little pagers we carried, and it would tell you where the call was. And if it was within a three-block distance of my store and I knew I could run, then he had no problem with me going. As long as the store wasn't left alone. So if I was the only one there, I don't think I ever put the key in the door; I'm fairly certain I didn't do that. But (laughs) I never left the store alone. But he was very understanding. As were many, many business owners in town, of letting their people go. It was great.

Q: As one of the first women, then, in the Department, how were you received?

TAE: Well, in Fire Medics, there were quite a few women members when I joined. So I didn't feel like I was the minority, never felt that way. There were, I think--I'll say the word "oldtimers," although now that I am an oldtimer, I don't know that I like that--but what were referred to as oldtimers in the Department who maybe didn't feel comfortable with women--maybe not one or two on an ambulance call, but I rode on an all-women crew. And so we heard a lot about, "What are you going to do if I fall down and I have a cardiac arrest? You know, I'm big, and I weight three hundred and fifty pounds, and how

are you going to move me?" So, there was a little bit, but never detrimental that anyone said, "Hey, I've had enough of this. I'm out." It was just rumblings. But that's the Fire Department. I'm sorry. It's four hundred people. It's, you know, Gossip Central, and you take four hundred people, you add a wife or a husband, and you're talking about eight hundred people. They're never going to agree on anything. So, I didn't really have a problem. I think maybe Janet may have had a harder time when she, you know, was putting her application in and all of a sudden it was like, "Oh, wait. A woman walked up." I-- it's just an older--it's an older stance. Here, women fight for equality, and that's a wonderful thing, and I think it's a wonderful thing to a point, they have valid points. These are the same men who would never probably stand up and think it was a good thing for women to go to war. They were raised differently. You know, men were the head of the household. They were there to provide for their wives and their families. And wives didn't work. I mean, we're coming off of my parents' generation. The wives didn't work; they stayed at home and raised the kids. And the father's, you know, job was to take care of the family and do the, you know, the scary stuff. Now, you're talking about fighting fires, and that's scary stuff. So, I think there were a few people--and there probably still are today--that don't believe that women belong there. You know, we're the ones that can propagate and, you know, make a culture and have babies, and they're not-- I don't know that they regard themselves as less important, but I think that, for the most part, men regard women as more important, because they think of their mothers and that they wouldn't want their mother doing it. So, no, I don't think it was ever detrimental. Nothing detrimental, but there's always a few in the crowd that are going to think it's a

bad idea.

Q: What can you tell me about the first time you went out on an ambulance call?

TAE: My first ambulance call was up in Salem, and--New Salem. And I drove with Beverly Reese, and there was another person there, but I can't remember who. And we walked into this house, and there was a woman sitting on a chair--an older woman; looked right at us and fell off the chair. And we ran over to catch her before she hit the floor, and she had a cardiac arrest. She laid down, and--we laid her down, and Beverly Reese said to me, "Go out and call for a Code 99," which meant that you had a full card--someone in full cardiac arrest, and you needed an AMT. AMTs are Advanced Emergency Medical Technicians--the only ones that can start IVs, defibrillate people, give them cardiac drugs. And we didn't have any at the scene. And I ran out and did that. Came back in, and she yelled, you know, "Start CPR." And I jumped down, and my training kicked in, and I never thought twice, and I--I compressed this woman's chest, and we got her scooped up, and we got her out to the ambulance, and we rode to the hospital, and they did their thing, and I kept doing compressions on this woman's chest. Someone else had taken over driving to the hospital. And we get there, and you give them away. You know, five minutes later, they're there. You're catching them, and you're handing them to the emergency room. And I stepped back, and I didn't stop crying for a day. She looked like my grandmother--who I had lost in 1979. And they kept saying, "You did everything you could." "You did the best thing you could." "You didn't do anything

wrong." And I felt like I'd lost my grandmother again. You know, felt like she died again. So it was hard. And they said, "You know, we don't always save people." We're there. We witnessed it. If she had any chance, she had the best chance with us there. We knew she was breathing, and her heart was beating when we got there. So, you know, it was almost like--we call them a witnessed cardiac arrest. If they're witnessed, which means treatment is given right away, they have the best chance of surviving. The woman had a bigger MI than she could recover from, and she did not. She passed away. But I'll never forget that. There are a few moments like that (laughs). You know, it was a time in my life where the highs were extraordinarily high and the lows were extraordinarily low. And we faced a lot of disasters together, hard calls together. People get emotional for different reasons. You can never tell what's going to set somebody off. What's going to upset someone. Never affected the job. It was always after the fact. You do it; you focus; you're done. You're in; you're out; you're done. And then, you're absolutely numb, and then the--your body starts shaking and you start thinking of everything else.

Q: And how did you deal with that, when there was trauma after?

TAE: You went to the firehouse. That's how you dealt with it. I don't think they were as well-educated on stress debriefing and things that they are now, and they learned. As I was a member, you know, that got better with time, where they would bring in crews to talk--when it was a catastrophic event, like the Avianca plane crash or loss of a Fire Medic.

You know, when we had Ingrid killed. They got very good at bringing professionals in to talk to people. But initially, no. Initially, that was something that no one else was upset over. You know, that didn't click with anybody else. It was just, I was new, and this woman was a clone of my grandmother. I had never met her; I had never seen her. I didn't know the family, had never been to the house before. It just clicked inside me. So you didn't really do anything about it, except you went to the one place where people understood, and that was the firehouse.

Q: What other emergencies do you remember?

TAE: Oh, how much tape do you have (laughs)? I would say ...

Q: Maybe some of the most notable.

TAE: Oh, let's see. What other emergencies. Okay, my first--well, the things I remember are not necessarily the most notable. The first call I took as an EMT. I was certified, I was "Teta-rized," I was ready to rule the town. And we got a call to the sand pits down on Roslyn West Shore Road. And when we got there--it came over as a head injury--and when we got there, I followed the policeman in, around, through the back, through there. Came across these big, huge metal buildings with a conveyor belt in between them, and they said, "Yeah, he fell. He hit his head. He's bleeding." Well, I go, "Well, where is he?" And they pointed up. He was up on the conveyor belt. So, like, "Okay, I'm going

to die." So, we climbed up this conveyor belt. There were only two of us--Charlie Newman and myself--climbed up this conveyor belt. Looked at the guy. Got his neck immobilized. Blah, blah, blah. "How are we going to get him down?" Well, this was a little bit pre-the new ambulance. We didn't have what they call Stokes baskets, which are baskets that you lay someone in, then you strap them into it, and then you can move them vertically, if you had to. We didn't have one of those. So, they came up with the brilliant idea to move the patient in the shovel of an earth mover, because it would go that high. We could stand eight people inside the shovel, and then they'd lower it down. I decided that I would rather watch. So, being (laughs) the tech in charge, I got down and directed from the ground and watched them put the gentleman in the shovel of this payloader and lower him down. And I kept saying, if that falls, I'm going to have eight patients, and I'm one person. And when it got to the ground, we found out, after the fact, that the man using the payloader was the victim's father. So that was just kind of funny. I went, "Never again. I'm always going to ask, `Are you related to the patient?'" because I figured that could a flip of the wrong switch without thinking. So it was kind of funny in my own brain. Other events? My most--the hardest call for me was the night that our Captain, Danny Swiacki, had a heart attack and died. I was on night duty with his wife. And his son called to tell us that, you know, "Dad had a heart attack." And we called Firecom [Fire Communications Center] to tell them to dispatch the ambulance. So, I went down there, with his wife in the front seat, my AMT in the back seat, and she's giving her the history of her husband to her. And she said, he's this, he's on this, he's on that, he's on this, he's on that. And I'm driving, and the tones still haven't--we haven't

been dispatched yet, and I am halfway down Port Washington Boulevard, because they lived right on Port Boulevard. And the girl in the back started just having an issue, and saying, "Why are you telling me all this?" because everybody was upset. And she said, "Because when I get to the house, I have to be there for my family. I'm not going to be there as a technician." And that was hard. Everybody that showed up was ...

Q: Wait, his wife was also a technician?

TAE: His wife was a Fire Medic also. And she was on night duty with me. So she was--we were up--it was night-time. It was after nine o'clock. And she's now driving down to the scene of her husband's heart attack. And that was probably just the worst. The absolute worst. Her daughter also--their daughter also was--Carol--was also a Fire Medic and AMT. And she was also at the house when her father had a heart attack. So, it was extremely difficult. I don't think I'll quite ever forget that. And a lot of landmark--landmark, and there were just unbelievable amounts of calls ... [like sticks] ... Anything with children. I mean, child--they always say the child calls are the hardest. You know, your heart races the minute the tones go over, and the minute you heard there's a child involved, it's even worse. Probably the worst call for me after Danny would have been a car accident that was on Roslyn West Shore Road, where our victim got trapped in the back seat and who had been alive, at some point was pinned by the car. The other people got out of the car. They actually gave a medal to some local townspeople who had stopped to try to help and they couldn't get him out before we got there, either. And the

car caught fire, and the person was lost. But I remember how cold it was standing on Roslyn West Shore Road and crying, just looking at this car. And the tears wouldn't even come out of my eyes. Like they froze in my eyes. And I don't know why I remember that, but I do. And there were a lot of calls that happened--things that happened, like you didn't go to, but you had knowledge of, or you helped a friend get through. My dad--I was on night duty (laughs) one night, and a call came over for a fire. A general alarm, a fire. For "three-five Amherst Road." And I was the driver, so I stand up and said, "Oh, three-five Amherst Road. I live right there." It's one of those left-right-left-right-left-right kind of places. And I said, "I'm at thirty-five. So, three-five would be ... my house!"

Q: And they said, "You're not driving" (laughs), and they put me in the back. And, of course, getting there. I have a mom who was handicapped at the time, and she smelled smoke and couldn't go down into the basement, because her--it's an electric ramp that took her down and she was afraid she'd get stuck if it lost power. So, smart thing to do. So, she called, and it ended up being nothing. It ended up being like the washing machine or something that had burned, and it filled the house with--basement with smoke. But the fear, the just gripping my chest fear, of "Oh, three-five. That would be ..." you know, "me." So that was bad. Then, probably my most--the hardest one for me, although it wasn't the call itself, was actually the aftermath, which was four days before--or five days before my wedding. My father suffered a heart attack on Christmas Eve in 1989, and they came to tell me. I was up at the place I was going to get married, and a

girlfriend of mine came in, and I said, "Hey, what are you doing here?" And she said, "Oh, we have to go to the hospital. We took your dad to the hospital." And everything ended up being fine. However, I talked to him, and I said, "What is the problem?" And he said, "Oh, all day, my neck--I had pain up my arm. I couldn't get comfortable. I had chest pain and shoulder pain. I took shower after shower." And he said, "Your mother finally said, `You're not Nick. You can't wait anymore. You need to call the ambulance.'" And I said, "Dad, why didn't you call?" And he said to me, "Well, I didn't want to be a bother." And that broke my heart. Because here's a man who is familiar with what I do. He knows what we do. And he felt like he was putting us out. Like he didn't want to--you know, he just didn't want to put anybody out. It's like, no, it's all right. And he kind of fluffed it off. And I said, my God! If he's doing that and he has exposure to Fire Medics and the Fire Department, what do people who have no exposure to the Fire Department or the ambulance think? They die at home, for no reason. And I ended up writing a letter to the *Port News*, because I thought it was important that people hear that. You know, if someone's father, who's in the Fire Department, can feel funny about calling, that the people that aren't exposed to it, shouldn't feel funny either. You know, weird things like that. I mean, there were just some gruesome, horrible things.

Q: How did your dad do?

TAE: He did fine. He did fine. He recovered from it. But, like I said, it wasn't the call that went bad. He said, "Boy, your guys were great," he said. "You know, they gave me an

IV, and the doctor said if they hadn't given me the drugs that they gave me that, you know, I'd be a lot worse off." I said, "That's true, Dad." You know, you did get that. Or, you know, you got better care. You got preemptive care twenty minutes earlier than you would have gotten it had you driven yourself to the hospital. But he suffered for hours without wanting to put anyone out. And my mom couldn't drive him; she's in a wheelchair. So, I mean, he had to call somebody, and he didn't call any of us (laughs). So, that was kind of brutal, a rude awakening.

Q: Now, but can you explain preemptive care.

TAE: Sure. Before someone--with Fire Medics--I can't answer for other ambulance companies. This is how it should be. But, I only know from experience what it is. If someone calls an ambulance, and the Fire Medics, and we get there, we are now going to be giving care to that person, rather than just scooping them and running them to the hospital with no--with anything but first aid, we now have the mechanics to give them advanced life support, if needed. It comes in crucial during things like anaphylactic shock, cardiac problems, congestive heart fail problems. Things that can lead to someone's demise very quickly. And, by us being there and being able to have EMTs and AMTs at the scene, we can now give care immediately instead of waiting that extra fifteen or twenty minutes, depending on where you are in Port Washington when something happens to you, to a closest hospital. Care there, and to stabilize them there before they even get to see a doctor. We had doctors on call, just like people will remember, probably Emergency,

when they would talk. The firefighters--the paramedics would talk to the doctors on the phone. We did the same thing. And we had the same thing. We had someone who we could transmit an EKG [electrocardiogram] to and say, "Look at this for me. This is what I have. The patient's presenting with this. I have an IV started," and they would give you orders, as well. So, we talked to doctors as well. It's kind of like being in the emergency a little bit early. So, you get them to the emergency room in this nice little, pre-packaged form, and hand them off and say, "Here. You've got this, this, this, and this." And be able to give the emergency room a full history, medical history, symptoms, what happened, when it started. So it gave them now a jump-start on, you know, not trying to figure out, "When did this start?" "How are you feeling?" You know, so it gives them a little bit of a help, too. You know, they talk about the "golden hour," and it's so important in a lot of situations.

Q: The "golden hour"? What is that?

TAE: Within an hour of injury or onset of symptoms, people who are going to have life-threatening problems, the sooner they get treatment, the better their chances of full recovery. So, we want--you want it to be the smallest amount of time. We wanted our response times to be the shortest possible, which meant having to staff twenty-four hours a day, seven days a week, when possible. Now, they're all volunteer. So, you know, try to do that on Christmas Day or Christmas Eve at, you know, two o'clock or eight o'clock at night. And, so that's what you were always fighting as a volunteer organization, but

you wanted to try to have that in-house staff. A driver, at least one driver, if not two--also called an observer. If you became a driver who couldn't drive because someone was already driving, you sat in the back and you were an observer. You handed stuff to the technicians as they needed it, or you went back and forth to the ambulance to get stuff. So, if you had a core group of three or four people there all the time, they could get in the ambulance, get to the scene as fast as possible without, you know, speeding excessively and causing hazards. But you would, you know, as soon as that call came in, within five minutes, you wanted to be there. And then care started immediately. So you're going to now factor in the time they call, the time you respond, and how long it takes to the hospital, plus your treatment time. So you want to keep that at less time as possible. So, "golden hour" is that first hour. You're impaled, you're hurt, you're injured, you're bleeding. You want it to be not a long, drawn-out event.

Q: Now, when somebody calls 9-1-1, does the call go simultaneously to the police ...

TAE: No.

Q: ... and the Fire Department?

TAE: The old days, when I first got in, we were--they called the police station. They did not have Firecom on-line then. That wasn't for a few years later--I think the early '80s, maybe the mid-'80s that they transferred from the police dispatching us--Port Washington

police. You used to call 883-0500 to report a fire or an ambulance call, also. And then, they switched to Firecom, which was 742-3300, which I believe they still use today, although I haven't lived in town for fifteen years. If you call 9-1-1, there is a time delay, although it's not much. Thirty seconds, a minute, two minutes. Depends on how long that takes, but it's not immediate. So they always want to try to call the numbers that are appropriate, obviously, wherever you are.

Q: Well, so, where does it go. When you call 9-1-1 ...

TAE: They'll route it to Firecom.

Q: ... who picks up?

TAE: The Police Department will pick up. The Police Department--Nassau County Police Department, because you're part of Nassau County, will call then, or transfer the call then to Firecom, which are the fire and ambulance dispatchers for this town. So, there is a delay, but it's not much.

Q: So, if somebody has a medical emergency, they should call ...

TAE: Whatever local--is the appropriate local number.

Q: Well, in Port Washington.

TAE: I believe it's still Firecom--742-3300. You know, you call the police, the police is--I assume they're 9-1-1 calls here. I don't know if they are routed to Port police. Now, if they call Nassau County, if they're routed to Port. You know, I'm not familiar enough with the mechanisms of that to know. But the Chiefs would know. I mean, they would be able to tell you that kind of information.

Q: Yeah, okay. Excuse me. I have to turn over the tape.

TAE: Sure ... [END OF SIDE A; BEGIN SIDE B] ...

Q: What was your best experience as a Fire Medic? The best day?

TAE: The best day. Best day, I would probably laugh and tell you that they used to have, down at Manorhaven Park, a demonstration that they did for the public on what the Fire Department was capable of doing. And they would put out cars, and they would put victims in these cars--pretend victims--and then extricate or remove those victims from these supposedly crashed, injured car/automobile accident. I was nominated to be one of the victims. So, probably my most fun day was the day I sat in the front of the car with all my friends and Fire Department cronies around me, now acting for the public, and they're going to rip off the roof of the car with a Hurst tool, which is the "jaws of life,"

which are very loud, and the sound of glass popping. And they broke the windshield. They covered me up. The same way you're taught to do in class. I found myself being the victim of all the things they taught us. Cover them, protect them, talk to them, keep them calm. The sounds were horrible. I mean, I heard the crunching of the support arms in the car when they used the "jaws of life," and it's right in your ear. And I--it put me in a whole new perspective for being attuned to what the patients were going through. I never left a car. I stayed right next to a patient. You would never leave them alone. It put me in a different--but it was fun and everybody laughed. And they went to extricate me. I said, "Please just lift me straight up so that I don't get scratched by all the glass that's on the seat underneath me," (laughs), and there were big laughs all around. But definitely a new perspective. So it was kind of the funniest day and probably one of the most learned days of my Fire Medic career, having been on the flip side of that. I think everybody should have to be a patient at least once. It makes you realize how hard the ambulance rides when you have a kidney problem or your back hurts. Riding backwards can make you sick to your stomach. You know, everybody--I think everybody should be a patient at least once. So, that was kind of neat. And most fun. There were too many. We just did everything together. You know, we had barbecues and installation, there were parties. And most fun. There weren't very many calls that were fun. I really don't remember having an actual call that was any fun. Aggravating, maybe, but not life-threatening. Yeah, there were--back in those days, and those were the old days in my book--you know, there were a few doctors who tended to he a little bit flippant when it came to their use of the ambulance. So we were used to transfer people from their

doctor's office to the hospital, and sometimes they needed it, and sometimes they had bags packed and they were ready to go and they were kind of using us as a transport service--a free transport service, which was a little aggravating. But a call that was really fun, there would never have been--if I was out and there was a call, it wasn't fun. So, fun would be all the personal stuff.

Q: Yeah, well, like what kind of fun in the firehouse? Were there any funny incidents that you remember?

TAE: All kinds of funny incidents. We had a--on work nights, which were Thursday nights--we used to have, at the end of work night, oftentimes, a school of some kind. They would give a class on--and it could be a number of different things. How to use a piece of equipment, or how to, you know, bandage somebody. And we did have the opportunity to use something called Kling. And Kling is the stretchy kind of, white--it's not really tape, but it holds splits on and keeps things from moving, and you can tie someone's hand down if they were combative, without hurting them-kind of thing. And we actually took a person and put them on a backboard and were using Kling to show (laughs) everybody how you would put their head and tie it down so they wouldn't move, and it turned into a Kling dummy. I mean, we just kept Kling-ing and Klinging and Klinging. And then Klinging. So we Klinged this per--just to--it was just before you knew it, we had a little bit of a mummy thing going on, and we left him hanging upside down, suspended in between two chairs. And just, we all kind of left giggling and

laughing for about five minutes, and because we couldn't breathe. But we went upstairs to regroup and laugh a little more and then came down and cut them down and ...

Q: Who was it?

TAE: ... absolutely hysterical. I can't remember. I can't remember who got picked on. I do remember, however, sleeping there one night. We had two bedrooms, and we had all-female crews, all-male crews, and male and female crews. You'd have the women sleep in one room, the men sleep in another room. And I remember going to bed one night and the door opened, and all I saw was the silhouette of a body. And the next thing you knew, it's laying on top of me. And dead weight. Not moving. And I'm yelling, "Get off of me!" And I turn on the light, and it was our CPR mannikin that you lay on the floor. And Glenn DeMeo, the guy that got me in, it's all his fault--had opened the door, just threw it in and closed the door and went back to bed. You know, it just was no big deal. And I started laughing. I just like--I couldn't figure out why nobody was yelling, giggling, laughing, kicking--nothing. And I--it just--silly moments.

Q: Did they know you were there?

TAE: Absolutely! They opened the door and threw it in. Knew I was right there. They were watching TV, whatever. And threw it in, closed the door, and had the--had no--and all you hear is giggles from the other room--giggly-giggling. So, it was silly. Just silly

stuff. We had a lot of parties. We had a lot of makeshift barbecues-- last minute. "What do you want to do?" "Let's go out and get stuff." And it would turn into ten, twenty, thirty people all of a sudden, having dinner, which was a great thing. And it was all the time. It wasn't just weekends. So, those kind of fond memories, all the time. You know, helping people wash their cars. You know, silly, mundane, "Let's go food shopping," you know, just silly, mundane things. And it was always fun. It was always good. And just-- I'm trying to think of something funny, but nothing funny is like coming to mind. Oh, no. I do have a funny one. My sister, at the time was four years old. I had joined Fire Medics. And I brought her up to the firehouse to see where I went and spent my time. And she said, "Oh, I hope there's a fire." And I said--trying to explain to a four-year-old, "Well, it's really not nice to hope there's a fire, because that means somebody's in danger, and that's not a good thing." And with that, the tones go off ... [MAKES TONE SOUNDS] ... Hmm. I'm here. Where's the fire. Now, where Fire Medics was, across from the Police Headquarters, there was very little of our district left south of there. Most of the district in Port Washington was north. You know, Baxter Estates, Port Washington, Beacon Hill. So, all of a sudden comes over a fire, and it's for--at St. Francis Hospital. So ... [and? un-?] ... fortunately, for a fire at St. Francis Hospital, everybody goes. So, we ran out front. The people that were on ambulance duty pulled the ambulance out, like with sirens. They go. The Chiefs' cars come flying by. The trucks come flying by. And my four-year-old sister thinks it's the best thing since sliced bread. And, of course, it was a--you know, it was a regular like recorded alarm, so it was nothing. They turn around; they come back. They honk and wave and swerve and, you

know, beep-beep as you sit out there, like we did to every--each other. And she thought it was a great show. I bring her up the second time, and she says, "I hope there's another fire." And I said, "It's really not nice to think that." I said, "The chance of that happening, honey, are slim to none." Sure enough. Beep-beep-beep, it's a fire, and it's St. Francis again. So there's the show. Lights go on. The thing goes uhmm phmm phmm phmm, and we had the same problem. Here I am telling this kid it's not nice to have fires. There's a fire both times she walks in the firehouse. She came back. She's enamored with the Fire Department now. Thinks it's the best thing she ever saw, and when she was eighteen she joined the Fire Medics.

Q: What is her name?

TAE: Cathleen. Cathleen Cuneo--C-U-N-E-O.

Q: Is she still a member?

TAE: She's not now. She was probably ten--I think she was eighteen or nineteen years old when she joined, maybe twenty. So, she did that for about six, seven years, and then her life took over and she backed away from that. But it's kind of funny, because it's what put it in her ear that--It was a show and it wasn't meant to be, you know.

Q: Well, what are the sleeping arrangements like? You said that there were two bedrooms.

How many people can sleep in each bedroom?

TAE: At the old firehouse--and this is not the new one--but the old firehouse was the building, it's now a Fire Department building across from Police Headquarters on Port Boulevard. When we were there, we were subterranean, in the basement. And it consisted of a kitchen area. It wasn't closed off. A kitchen area with a seating area, and a living room--big, long, cement--it was a basement. Big, long living room with a door access to outside. We built ourselves the interior walls and made a bedroom with two twin beds, another bedroom with two twin beds. So we had two separate bedrooms off of that living room area that could house two people per room. And that--that was on the heels of having the pull-out cots, which were not even twin size bed wide, which were chairs, which had been upstairs in a meeting room at the beginning of Fire Medics, which got moved to the basement, and the basement was just getting finished when I moved there. So they still had those stupid little cot-bed things that, I don't know why half of us didn't become back patients, before we had the bedrooms. So, otherwise, it was just a common area, and everybody just, you know, you'd crash where you crashed. Pretty much, we all slept in our uniforms, for the most part. You just slept in the clothes you were going to get up and go out in. There was no time, because time was of such the essence, the only thing you wanted to do was have to be able to tie your shoes. So, pretty much, you slept dressed to get out on a call.

Q: What were your uniforms like?

TAE: We had--we were allowed to wear jeans, because it was volunteer and you can only tell people so much. You weren't allowed to wear shorts. That was the one rule. Because sharp objects and falling, and that was just unacceptable. Other than that, it was pretty much--we had a duty shirt. You know, a cotton--actually, it was Polyester, which was probably why half of us didn't wear it half the time. Polyester, you know, short-sleeve or long-sleeve, depending on winter--duty shirt with a badge and our name tag. And that's basically what we wore. With whatever else you needed--long johns, turtle necks, you know, dress appropriately for weather. And then turnout gear really didn't--that was another thing I did, and I guess I did a lot more than I thought I did. When I first got in, they had turnout gear. Turnout gear are those fire coats that you see firemen wearing with the big stripes. They're reflective. They're safe when it's dark out. And I went to put one on. Now, I'm like five-two on a good day. I tell people five-three, but five-two is probably more honest. Five-two on a good day, and I went to put on the smallest coat they had, which was a size forty, by the way. I looked like a dwarf. The coat came past my knees, halfway to my shins, and I had to roll the sleeves up four times in order to get my hand out of the bottom of the sleeve. So, I said, you know, we've got to order some turnout coats that are little-er than this. I mean, their smallest coat was a size forty. So, of course, they all went, "Oh, yeah, hmm. That would make sense. We have women now. I guess we have to get some ..." So, we got some thirty-twos and thirty-fours and thirty-six and thirty-eight coats, but that was interesting, not having the helmets that didn't fit. You know, they just weren't made for women. We didn't have turnout boots

that fit. We didn't have rubber boots you could put your feet in, because the smallest size they had was a men's seven, which is, you know, not little enough. So, that was kind of a ... [crux their too] ... I have no idea what question you just asked me. My head just went flying out. But the turnout gear was an interesting thing. They got it all down, though. It happened pretty quick. Probably within the first year I was there.

Q: What are you proudest of?

TAE: What am I proudest of? Well, probably my most proud--my most proud memory. Probably, I met my best friend at Fire Medics in the early '80s. And I loved her to death. And my experience with Fire Medics, she had become Captain of Fire Medics in the '90s, and she was also diagnosed with cancer and died of a pheochromocytoma. And my experience, had I not been in Fire Medics, I never would have met her. And had I not met her, I never would have had to go probably through the hardest thing in my life, but also the most wonderful. I mean, she was a great friend. Lori Borelli. And I had to, basically, help her die. And, you know, she was thirty-four years old when she passed away, and that was probably the most special to me. I had everyone around me, when she did pass away, we put together, you know, her mass cards, her mass books, her things that were special. The support of people from the firehouse was really, really huge. But that--literally, it's Fire Medics I have to thank for it and how I got through it. And her, too. So, that was kind of a neat thing. A lot of people. I mean, I miss Bobby Dayton. I was particularly close to, when he was killed in the fire in Port. I was in his wedding

party. And that was probably one of my most proud days when you saw all the firemen lined up at his funeral. We walked up Main Street to Port Boulevard to the cemetery. And you saw a sea of firemen at attention, and you saw crossed ladders with a flag hanging on it. That someone could be recognized for their volunteer service like that was really special. It was hard to lose him. As it was all of them. There were so many that have been killed or died. And it's never easy. But that was probably one of my most proud moments was saying, "I'm part of this," you know.

Q: Were you at all involved on 9/11?

TAE: No, I was not a member during 9/11. So, I was not involved. I don't know what involvement they had in it. I was a member during the Avianca plane crash, although I didn't go to the scene. So I wasn't there for that night. I lived in Northport at the time, and--but I was there for the aftermath. They can only train you for so much. And they can train you to pick up body parts and to look for fingers when they're lost. And as sad as that sounds to people, and it's, "Oooh, how do you do that?" when you're trained to do it, you don't think of that. At the time, the person needs you. You know there's a person who needs help, and you do it.

Q: And so is that what you did in the aftermath?

TAE: The aftermath of Avianca was hard. They brought in a lot of counselors to talk to people,

because, you know, we're not trained in body recovery. We're not trained to witness mass casualty like that. I think that was extremely hard for the members, to see a mass casualty incident like that. Because we don't--we don't see it. You see one person. If you have a car accident, maybe you have three. I had a bus accident once; you had about fifteen kids, but no one was hurt. So, but we just don't see that type of devastation. I think that was a big learning experience for them, to go forward with mass casualty incidences. So, I don't know how they handled 9/11. I don't think anyone handled it well. But we lost a fellow firefighter that I was in Fire Medics with actually, was killed during that incident--Marty DeMeo.

Q: He was killed on 9/11?

TAE: Yeah. So, that I can't answer, too.

Q: Yeah.

TAE: I don't really know.

Q: What do you think you learned, or how did your service in Fire Medics affect the rest of your life?

TAE: Oh, good grief! I think it made me much more compassionate. I think it made me much

more thankful to my family for how I was raised. You go into circumstances, you're basically an invader. You go into people's homes that normally you wouldn't be invited into, and you see how people live, and you see how elder care is going and how people are treated. How people are forced to live in economic times when you have never seen that before. So, I think it made me extremely thankful that my parents did the great job that they did. Made me extremely thankful that they allow volunteers to be able to step up to the plate and really provide a service. It became a--it made me very aware--I always treated the family, too. I don't think everybody did. I saw a lot of crews that kind of you blurry in, you focus on the person that's injured or that needs help, and you blurry out. And you kind of like, "Well, the police will take care of the family." And I tend to--I think that I went--I remember myself going the extra mile always to calm the patient, reassure them, and to calm the family and reassure them the best that I could. In what little time…

Q: How did you do that?

TAE: Basically talking. If you're haven't guessed already, I can talk an ear off. But, I mean, I had mom who was terminally ill, so I had a lot of--a lot of the same fears that a lot of these people that are going to a hospital--somewhere they don't want to go. And ninety percent of the time--ninety-eight percent of the time, you're not dealing with someone in cardiac arrest or someone who's unconscious, who doesn't know. Ninety-eight percent of the time, you're dealing with people who are well aware of what's going on, or are in pain

of some kind, and are fearful. So, I try to just deal with fear, to assure them that they were going to somewhere that people were going to help them, to assure them that they had--the same questions they ask again and again, to just try to answer the questions the best they could. Hold their hand. Even these big, you know, macho men who "need nobody," you know, it's not just the kids and it's not just the women. You just reach out and you hold them; you'd be surprised who holds back. So, it just taught me to be compassionate. Probably one of the best lessons I got.

Q: I don't know whether you have children or not.

TAE: I don't. I have enough children--two stepchildren.

Q: Would you want them to go into volunteer fire service?

TAE: My older stepson was in the Westbury Fire Department. My husband was a Westbury fireman. Became Captain of his company, so he already had that exposure. And he was an EMT, as well. So, I guess I gravitate towards that, because that's how--he was a police officer, too. So, I kind of gravitated towards--he'd already done that. And one stepson had already done that. The youngest had no interest in it. It was not something I would ever push. My most--you talk about fearful moments, and now I'm going to bounce backwards for two seconds and just tell you that the only thing I remember totally being mortified of is they made us--they used to have--well, there used to be the Cocks

Estate or Cocks House down here on Shore Road that they did a fire school in. And they did a fire school where they set, you know, cans with smoke, and they filled the house with smoke. And they teach --it's like a teaching tool. They use it for the firemen. It doesn't get out of control. It's, you know, a controlled environment. And they allowed us--or should I say, they--I don't know if they "made" us, because I don't want to think I actually was stupid enough to volunteer for that--but one of the other ladies, Adelle Barbieri who, she and I went down there with boots that didn't fit, coats that didn't fit, helmets that didn't fit, and they let us walk up to the attic. And I took--the first two steps walking up, the smoke--they have bright red or--those bright orange gloves that you can't miss if you had to miss them, and I put it in front of my face, and I couldn't see it. So, then, I put it on the glass shield on the front--it's not really glass; you know, Plexiglass, whatever--shield in front of my helmet, and I still couldn't see it. And I was mortified. The next step up, the bottom of my ears started to burn. You get two steps up above that, and you feel the burn moving up your ear. Now, this was a controlled environment. It wasn't--I--I--flashes of my father dying in a fire came back, and I couldn't keep going. I turned around. I was six or seven steps up a flight of stairs. I turned around and came down three flights, saw shat looked like a blur of light, to a door and I jumped at it. And I landed on the landing with, I think it was Donald De Bari and Tommy Murray. Joey Fico--Chief Fico--and Tom Murray sitting at the landing with their arms crossed, just looking at all the people coming down. And there I am jumping through the door, landing, and they started giggling. And I just looked at them and I smiled, and I left the house. I had no desire to go back in there. That was the scariest moment I had. If they

made us become fire trained--if you had to have, other than classroom, because we did classroom tests, you know, classroom information--if they made us go to a fire school, I would never have been able to stay a member. I just--that was not what I signed up for. I had--as much as I could help someone whose arm wasn't attached, I have no desire to go into a fire. So, that was kind of my--that was ... [I thought] ... a good story. But, kind of funny. There's really good memories, all the way around.

Q: Yeah. So, the social aspect of being a part of the Department was a big plus for you?

TAE: And that it was. Sure. I was in my early twenties, and every--there--it wasn't a huge discrepancy in age. I mean, there were--some people were in their sixties. Some people were in their thirties. Most everybody that was getting in there were either a student or were early-- oh, eighteen to maybe twenty-eight. So, the majority of people were somewhere in that scheme. So, it ended up being a great social place. And it didn't involve, you know, much to popular dismay--you know, firemen aren't just known for drunk and rowdy--do they drink? Yes. Do they drink more than anyone else? I don't think so. We saw an awful lot of people in an awful lot of bars, and we would go into like the Library Restaurant at the time, and order dinners. There'd be thirty of us. You know, have dinner, have a drink, fill the--literally fill the bar. But it wasn't about getting drunk and stupid. It was just having a good time and hanging out. Having a place to go. It really wasn't ever a, you know, drunk-fest. I mean, my grandmother used to live near a firehouse, and my dad had said, "Oh, you're joining the Fire Department. You know,

they're just loud, rowdy, and they drink all the time," because it was the impression, you know, people get. Or assume. And no, it wasn't like that. It really wasn't. It was--we usually did go to the bar, because the bars, then, had food (laughs). You know, we didn't just go drinking to drink. It was we just went in groups, and it was big groups. It was all meet-up. And you could walk into a bar--I was a single woman at the time who would never go into a bar herself. A, I wasn't a big drinker, and B, I just wouldn't go to a bar myself. That may sound old-fashioned, but that's what it was. And any time--I knew that any night--Monday, Tuesday, Wednesday, Thursday--it didn't matter--I was going to walk into the Library Restaurant and there were going to be at least five people I knew. They would say, "Hey, how're you doing?" Kind of a protectiveness. You know, everyone watched out. "Is he giving you a hard time?" "Is she giving you a hard time?" "You having a problem?" And it was really kind of nice just to know that there was someone around who knew you and that would--you could talk to. So, that's really what it was, and it was a wonderful thing. If it didn't happen at the firehouse, it definitely happened out in public. You know, in any venue--whether you were attending a fair or whether you were sitting at a standby. We did standbys all the time for parades, or at the fireworks events, where you would just park and, you know, sit for the day, and stuff.

Q: What do you mean, a standby?

TAE: Standby? Standbys are--we used to have to sign up for them. They weren't delegated. You'd sign up and put your name on a list. And they'd have a standby, let's say, for the

fireworks down at Bar Beach where they have the fair all day and then the fireworks display at night. Anywhere where they had a large mass of people at the--I forget what they call them--Pride in Port? At the--they close off Main Street and have a large group of people. Anywhere they gathered groups, they didn't want to have to get an ambulance or a fire truck, necessarily, to that group or through that crowd. So they would put us on standby at the scene, so if something were to happen and someone were to need an ambulance or medical attention of some kind, we would already be there and not have to fight that going in. So that's what a standby was, and for anything. It could be a standby for Manhasset-Lakeville. You could go over and sit there while they were having an installation, or cover their ambulance calls, or, you know, or at a local event, you know, where you could be a standby. Or the Goodwill games. You could go and have an ambulance standing by with a--you know, they'd take an ambulance from each, you know, Fire Department or each local ambulance company and make sure that they had enough coverage for a few hundred thousand people. And they were all volunteer, and we'd say, "yes," "no," "maybe," and sign up for it.

Q: Looking back, is there anything you would have done differently?

TAE: Nope. No. Not with the Fire Department. Me, I might not have--yes. Actually, I shouldn't say that. I probably wouldn't have left. I probably would have tried to fight the system to say, you know, older members--because you had to meet minimums, you know, minimum amounts of hours, and you still wanted to be involved. When I was first

in, there were a hundred positions filled in that Fire Department. You only had a charter for a hundred people. You couldn't have a hundred and one. You had--someone had to leave for the next guy to get in. And there's always dead wood. There's always people who don't pull their weight, as in any organization. The same thirty people run it all the time. So, it was really a crunch time in the early '80s, because it was so much wanted, you couldn't fill the positions. By the time I left, went back, and left again, you know, you have eighty-something members. You can't get to a hundred. And I--I really should have stayed maybe and pushed for, you know, the older members--you know, lessen their point requirements. Because I think they actually did that after a while. But, you know, to make it not so hard. They still want to be involved. "I don't want to go, but I can't do what you're asking me to do. And, you know, how do I circumvent that. How can I earn credit in another way. I mean, I gave you sweat and tears for five years. Can you bend a little?" And I didn't. And I probably should've worked on that a little bit. But, no, I wouldn't change a thing. It was all great.

Q: What do you think the value of this project is?

TAE: I think it's great for the town. I think there's a lot of people that don't understand how the Fire Department runs. I don't think they have personal knowledge, unless they've been unfortunate enough to have a fire. I certainly know that if they're aware of the Fire Department just because, you know, they went to school at some point in their life, so they took a tour of some firehouse somewhere and sat on a fire truck. Other than that

exposure, if they've actually been lucky enough to have met us, even if it's in bad circumstances, they may be more appreciative. But I don't think they have any idea of the personal or emotional commitment that people give in this town to run that ambulance company and to jump on those trucks in the middle of the day when they're working, when the bosses don't let them go, and they're leaving without pay. When they're hurt on a fire scene and they're out of work, and they can't pay for their family. They don't get paid if they're not at work. I don't think they really understand. All they think--all they see it as, I think, is a tax liability. You know, it—"we pay our taxes. Yeah, they're there. They volunteer. But we pay for that." You know, no one receives anything financially that does that. Yes, it costs money for gas and repairs and insurance and supplies. And, yes, it does, it is a taxable event to the people here. But I think they get a superior--they'd be hard-pressed to find a better Fire Department and a better ambulance company on Long Island. I still bet there isn't anybody better than we are. That's just a personal opinion, but it's a little warped (laughs).

Q: Is there anything that we haven't touched on that you think is important to talk about?

TAE: No, I just--no, I think--I think we've touched on a lot. I mean, you really can't touch on how it touches lives. You really--there are no words to tell you how good something is or how supportive something is without being part of it. It's very hard. It's just--it's such a personal experience. It's such an emotional experience. I would bet that if you talk to any member or ex-member or exempt member, that they will have an emotional high

story and an emotional low story for you. And if they've got those two stories, then everything in between has to be there, too. You know, there's just--there's--it's just a wonderful thing. I think it's great for the town to be able to have access to it, to be able to understand it a little better. I'm a big advocate of--I always think you should go to schools and start preaching to the kids, because if the kids--you let the--sensitize the kids to everything, the parents eventually learn. So, I think it's a good thing. Sorry it took this long to do it, though. I'm glad they're doing it now.

Q: Thank you very much.

TAE: Thank you.