



2007

EMERGENCY!: Send a TV Show to Rescue Paramedic Services!

Paul Bergman
UCLA School of Law

Follow this and additional works at: <http://scholarworks.law.ubalt.edu/ubl>



Part of the [Health Law and Policy Commons](#)

Recommended Citation

Bergman, Paul (2007) "EMERGENCY!: Send a TV Show to Rescue Paramedic Services!," *University of Baltimore Law Review*: Vol. 36: Iss. 3, Article 5.

Available at: <http://scholarworks.law.ubalt.edu/ubl/vol36/iss3/5>

This Article is brought to you for free and open access by ScholarWorks@University of Baltimore School of Law. It has been accepted for inclusion in University of Baltimore Law Review by an authorized administrator of ScholarWorks@University of Baltimore School of Law. For more information, please contact snolan@ubalt.edu.

EMERGENCY!: SEND A TV SHOW TO RESCUE PARAMEDIC SERVICES!

Paul Bergman†

Prologue: A fire department crew rushes to the scene of a grisly accident. The crew finds an electrical worker high up in the air, draped over sizzling electrical wires and rendered unconscious by a sudden surge of electricity. As soon as the electricity can be shut off, the intrepid rescuers pull the worker off the wires. They immediately begin to give him oxygen, and rush him to the hospital. Standing by at the hospital is a nurse who shouts, “Cardiac arrest, electrocution!” An emergency room doctor, who is at the ready, uses a defibrillator and gives the still-unconscious worker an injection in a feverish effort to try to resuscitate him. Alas, despite everyone’s heroic efforts, it is too late. The worker is dead. “If only a paramedic with equipment had been on the scene,” remarks the nurse to the doctor, “this man would have survived.”¹

* * *

I. INTRODUCTION

Movies, television shows and other forms of popular culture have the potential to lead to formal legal changes. Impact studies² examine the extent to which this potential has been realized. This essay is an impact study whose purpose is to demonstrate the influence of a popular 1970s American television series called *Emergency!* on the development of paramedic services. The essay argues that the TV show stimulated popular demand for paramedic services and was largely responsible for the fact that in the short

† Professor of Law Emeritus, UCLA. I wish to thank the UCLA School of Law’s Dean’s Fund for financial support of my research. I particularly wish to thank Jean Cinader, the widow of the late Robert Cinader, who created the show *Emergency!* and was its Executive Producer, for helping me locate valuable materials. I am also very grateful for the research assistance provided by UCLA Law Librarians Linda O’Connor, Laura Cadra and Kevin Gerson as well as UCLA law student James Stein. Finally, I wish to thank Michael Freeman, University College London, and Clintons for sponsoring the July 2003 Law and Popular Culture Colloquium and to the participants for their many helpful comments on my presentation. An earlier version of this Article appeared in Vol. 7 of *Current Legal Issues*, “Law and Popular Culture” (M. Freeman ed., 2004).

1. *Emergency!: The Wedworth-Townsend Act* (NBC television broadcast Jan. 15, 1972) [hereinafter *The Wedworth-Townsend Act*].

2. See Peter Robson, *Law and Film Studies: Autonomy and Theory*, in 7 *LAW AND POPULAR CULTURE* 21, 41-42 (Michael Freeman ed., 2004).

span of a few years nearly every state in America amended its laws to allow such services to exist.

Impact studies such as this are consistent with Lawrence Friedman's argument that a useful social theory of law should attempt to address the mechanism by which social changes or technological inventions produce changes in legal rules and institutions.³ Friedman posited that popular legal culture, including the attitudes, norms and behavior of ordinary people, constitutes such a mechanism.⁴ He argued that, "These elements of legal culture act as an intervening variable between *social* innovation and legal change."⁵

Nevertheless, demonstrating a link between a work of popular legal culture and specific legal change is likely to be a difficult task. Social orders are vast and amorphous, and individuals' norms, beliefs, customs and desires are multi-faceted and often in conflict. Moreover, while works of popular culture can act as a catalyst of attitudinal change, the likely presence of other contributors makes it difficult to isolate popular culture's role in fostering legal change. However, the belief that popular culture can produce legal change is widespread. For example, a 1966 British televised play called *Cathy Come Home* dramatized the plight of homeless people.⁶ Many people credit the television show with leading to the creation of "Shelter," an English charity that advocated on behalf of the homeless. "Shelter" in turn pressured the government into enacting the Housing Act of 1977, which extended aid to homeless persons.⁷ Yet the difficulty of documenting the connection between works of popular culture and social change means that scholars generally have to be content with assertions that popular culture must in some inchoate way contribute to formal legal developments.⁸

This essay, by contrast, seeks to document the pivotal role of *Emergency!* in producing an array of legal changes that resulted in an explosion in the availability of paramedic services during the

3. See Lawrence M. Friedman, *Law, Lawyers, and Popular Culture*, 98 YALE L.J. 1579, 1583 (1989).

4. *Id.* at 1583-84.

5. *Id.* at 1584.

6. *Cathy Come Home* (BBC 1 television broadcast Nov. 16, 1966). The show was directed by Ken Loach and written by Jeremy Sandford.

7. See generally PETER ROBSON & MARK POUSTIE, HOMELESS PEOPLE AND THE LAW 66-73 (3d ed. 1996) (providing a description and analysis of the Housing Act and its amendments).

8. See, e.g., Melvin Gutterman, *Failure to Communicate: The Reel Prison Experience*, 55 SMU L. REV. 1515 (2002). In his essay on prison films, Gutterman states that "[p]opular films serve as a barometer, and can operate as a catalyst to stimulate us to demand political action." *Id.* at 1558. While Gutterman's assertion contemplates that legal changes may flow from prison films, the essay does not indicate that this has actually occurred.

time that the TV show aired new episodes. The argument in its strongest form is that laws authorizing paramedics to perform medical procedures that were formerly the exclusive domain of doctors may well not have been enacted but for the influence of *Emergency!*. A weaker form of the argument is that while paramedic services would have very likely, and eventually, become legalized, *Emergency!* is largely responsible for such laws spreading like wildfire throughout the United States during the first half of the 1970s.

II. EMERGENCY MEDICAL CARE PRIOR TO *EMERGENCY!*

The back story to the development of paramedic services begins in the 1960s, when research into the number of American lives that could be saved through improvements in emergency care began seeping into the public consciousness. One of the most prominent sources of information was a 1966 report prepared under the auspices of the National Academy of Sciences. The report revealed that in 1965 alone, accidental injuries had killed 107,000 Americans and caused permanent disabilities to another 400,000.⁹ The report also concluded that existing emergency equipment and personnel were generally incapable of providing quality emergency care.¹⁰

Around the same time, other studies demonstrated that lives were being unnecessarily lost to sudden illness. Most of these studies focused on victims of sudden heart attack. One prominent study estimated that if quicker emergency care were available, “from 5 to 20 percent of deaths resulting from heart disease—700,000 annually—could be prevented if the public were educated to recognize the symptoms of heart attack and if ambulance attendants were adequately trained to provide immediate emergency treatment.”¹¹ In sum, “a minimum of 67,000 deaths could be prevented annually if EMS [Emergency Medical Services] systems . . . were operational nationwide.”¹²

Thus, as the 1960s ended one might have predicted the upgrading of emergency medical services throughout the United States, provided that the federal and state governments were willing to put their money where these reports’ mouths were. However, the shape that the improvements in EMS would take was

9. COMM. ON TRAUMA & COMM. ON SHOCK, NAT’L ACAD. OF SCIS. & NAT’L RESEARCH COUNCIL, ACCIDENTAL DEATH AND DISABILITY: THE NEGLECTED DISEASE OF MODERN SOCIETY 5 (1966).

10. *Id.*

11. S. REP. NO. 93-397, at 24-25 (1973) (providing the committee amendments to the “Emergency Medical Services Systems Act of 1973”).

12. *Id.* at 25.

uncertain. One possible model that many in the United States initially looked to for guidance had been established by Dr. Pantridge and others in Belfast, Northern Ireland in 1967.¹³ The Belfast system relied on ambulances staffed with physicians, who could begin immediate treatment of patients needing coronary care on site rather than having to wait for patients to be transported to hospitals.¹⁴ Similar emergency programs began in a number of American communities.

However, the influence of the Belfast program in America was short-lived. Part of the reason was that the Belfast system was directed exclusively at coronary problems and didn't address other emergency medical situations.¹⁵ Thus, American emergency care experts tended to prefer "Mobile Intensive Care Units" that could provide emergency care for victims both of accidents and sudden illness.¹⁶ However, the move to Mobile Intensive Care Units revealed a second problem with the Belfast model for the United States: the country did not have nearly enough doctors to staff fleets of mobile care units.¹⁷ Thus, American communities quickly abandoned the Belfast model.

Perhaps because of the uncertainty concerning an appropriate model to follow, as the decade of the 1970s began, improvements in emergency care were proceeding slowly. A second National Academy of Sciences report in 1972 (the year that *Emergency!* went on the air) described how little progress had been made in the provision of emergency medical services. According to the report:

Emergency medical service is one of the weakest links in the delivery of health care in the nation Few at the site of accidental injury or sudden illness are trained in the fundamentals of [emergency treatment] The majority of ambulances in the United States are . . . inadequate in space and equipment and are manned by individuals with inadequate training to provide essential life support.¹⁸

13. See Joe Slotkin & Elliott Salenger, *National Paramedic Survey*, 1 PARAMEDICS INT'L 14, 17 (Summer 1976).

14. *Id.*

15. *Id.*

16. *Id.*

17. *Id.* See also Note, *Paramedics and the Medical Manpower Shortage: The Case for Statutory Legitimization*, 60 GEO. L.J. 157 (1971).

18. COMM. ON EMERGENCY MED. SERVS., NAT'L ACAD. OF SCIS., ROLES AND RESOURCES OF FEDERAL AGENCIES IN SUPPORT OF COMPREHENSIVE EMERGENCY MEDICAL SERVICES 3 (1972).

III. PARAMEDIC SERVICES PRIOR TO *EMERGENCY!*

The generally sorry state of emergency medical care in the United States at the end of the 1960s coincided with suggestions for including paramedics in expanded emergency services. In Congress, a number of experts suggested the use of physicians' assistants, or paramedics, who could be trained to perform emergency medical services.¹⁹ Unlike existing ambulance personnel, who could do little more than render basic first aid, the new emergency professionals would be able to undertake such tasks as administering drugs and intravenous fluids and performing cardiac defibrillation.

Such recommendations were given further impetus by the Sixth Bethesda (Maryland) Conference of the American College of Cardiology. The conference, which took place in 1969, was the first major medical conference to envision a role for paramedics.²⁰ The conference report suggested that “[m]edical manpower is limited, and many programs will depend heavily on the increased utilization of specially trained paramedical personnel.”²¹

However, the inclusion of paramedic services in upgraded emergency care systems was by no means a “done deal” at the beginning of the 1970s. The legalization of paramedic services required major changes in legal principles relating to both criminal and civil liability.²² For example, laws in all states made it a crime for non-physicians to practice medicine without a license.²³ These laws rendered paramedic services unfeasible due to the fact that many of the medical functions that paramedics could have performed constituted the practice of medicine.²⁴ Paramedics could be criminally prosecuted under these laws even if they had undergone training and could demonstrate expertise in carrying out their paramedic tasks.²⁵

19. See *Hearings on Health Care in America Before the Subcomm. on Executive Reorganization of the S. Comm. on Gov. Operations*, 90th Cong., 2d Session, Part 2 487, 923 (1968).

20. JAMES O. PAGE, *THE PARAMEDICS: AN ILLUSTRATED HISTORY OF PARAMEDICS IN THEIR FIRST DECADE IN THE U.S.A.* 20 (1979).

21. Eliot Carday et al., *Bethesda Conference Report: Early Care for the Acute Coronary Suspect*, 23 *AM. J. CARDIOLOGY* 608 (1969).

22. See *COMM. ON EMERGENCY MED. SERVS., NAT'L ACAD. OF SCIS., EMERGENCY MEDICAL SERVICES AT MIDPASSAGE* 38-40 (1978) [hereinafter *EMERGENCY MEDICAL SERVICES AT MIDPASSAGE*].

23. See Note, *supra* note 17, at 159-61.

24. *Id.* at 159-60.

25. *Id.* In addition, the article points out that the laws criminalizing paramedic activities also discouraged licensed physicians from employing paramedics because state licensing boards could revoke the licenses of doctors who aided an unlicensed person to practice medicine. *Id.* at 161.

Civil liability rules also posed significant challenges for the development of paramedic services. Paramedics could be ordered to pay damages for any harms that patients incurred due to paramedic negligence. A showing of negligence was not a significant hurdle for plaintiffs to overcome since, in most jurisdictions, performing illegal medical procedures constituted negligence *per se*.²⁶ Even apart from the negligence *per se* reasoning, paramedics were likely to be held to the same standard of care as physicians.²⁷

The Senate Report on the Emergency Medical Services Systems Act of 1973 summarized the legal challenges facing the development of paramedic services. The report stated that “[t]he reported bill directs the Secretary to conduct a study of the legal barriers to the effective delivery of medical care under emergency conditions The provision of emergency medical services is affected in some states by inflexible laws on licensure, malpractice and liability.”²⁸

Adding to the need for legal changes that would have to occur if paramedic services were to develop and expand was the opposition demonstrated by many physician and nurse groups to the paramedic concept. For example, two researchers writing in 1969 surveyed over 1,300 Wisconsin physicians.²⁹ The researchers asked the physicians whether they would be willing to permit paramedics to perform duties closely related to their medical specialties.³⁰ The majority of physicians responded in the negative.³¹

The physicians’ professional association, the American Medical Association (AMA), recommended delay, the favorite tactic of opponents who might not want to directly challenge a reform.³² The AMA’s position was that more experimentation was needed before legislation authorizing paramedic services was enacted.³³ Individual doctors, however, were not so restrained. For example, one Illinois doctor thought that “[t]his whole mobile medical thing is loaded with danger How would you like it if someone, after only a few weeks’ training, took over your husband’s job?”³⁴

26. *Id.* at 162-63. The negligence *per se* standard meant that a paramedic could be held liable for performing unauthorized medical procedures even in the absence of evidence that the paramedic was in any way careless. *Id.*

27. *Id.* at 163.

28. S. REP. NO. 93-397, at 45 (1973).

29. Robert D. Coye & Marc F. Hansen, *The “Doctor’s Assistant”: A Survey of Physicians’ Expectations*, 209 JAMA 529 (1969).

30. *Id.*

31. *Id.*

32. See Editorial, *Of Physician Assistants*, 212 JAMA 1057 (1970).

33. *Id.*

34. PAGE, *supra* note 20, at 69.

Another opined that authorizing paramedics would “be responsible for bringing socialized medicine to the Midwest.”³⁵

Nurses often opposed the legalization of paramedic services more stridently than doctors because paramedics presented a potential “turf” issue for many nurses and nursing groups.³⁶ Legalization of paramedics created a risk that duties previously regarded as part of the nursing profession would be shifted to paramedics, especially with respect to new medical technology.³⁷ Thus, a number of nursing associations initially went on record as opposing the legalization of paramedic services.³⁸

Even paramedic proponents themselves were divided, at least as to the desirable form of legalization. Some proponents favored a comprehensive licensing scheme. Other proponents, however, thought that such schemes were too restrictive, and wanted laws that allowed physicians to decide for themselves whether non-physicians were qualified to perform medical services without regard to licensing.³⁹

As a result of these challenges and despite the glimmerings of hope for including paramedics in improved emergency services, the reality was that actual paramedic services were virtually non-existent at the end of the 1960s. As of 1971, only twelve paramedic units were in existence in the entire United States.⁴⁰ However, in the absence of legislative authority, several of these units operated somewhat clandestinely.⁴¹

As luck would have it, however, two of these twelve paramedic units were based in Los Angeles, the show-biz capital of the world. California was the first state to enact a comprehensive law

35. *Id.*

36. Jan Schwettman was an Illinois woman whose husband’s sudden death caused by cardiac arrest moved her to actively press for paramedic services. While the Illinois legislature was considering legalizing paramedic services, Schwettman wrote to a doctor that she “[I]earned today that the nurses are furious and are planning lobbying action.” *Id.* at 66, 74.

37. *See Note, supra* note 17, at 180.

38. *Id.* at 179-80; *see also id.* at 179 nn.110-11.

39. *Id.* at 182-83.

40. Videotape: Making a Difference: The History of Modern EMS (JEMS Communications, Mosby Year-Book, Inc. 1997) [hereinafter Making a Difference] (on file with the National Library of Medicine). Another source indicated that twenty paramedic programs were in various stages of development in fourteen locations scattered throughout eleven states as of 1970. *See Joseph Kadish & James W. Long, The Training of Physician Assistants: Status and Issues*, 212 JAMA 1047, 1048 (1970).

41. *See* JAMES O. PAGE, NATIONAL STUDY OF PARAMEDIC LAW AND POLICY 1975-1976 (Table 1, at 8-11). For example, paramedic service began in the Florida cities of Miami and Jacksonville in 1967 but express legal authority was not enacted until 1973.

authorizing paramedic services,⁴² and the two Los Angeles paramedic units operated under the authority of that law, the Wedworth-Townsend Paramedic Act of 1970.⁴³ Reflecting the uncertain toehold of paramedic services, the Wedworth-Townsend Paramedic Act was merely an experimental pilot program. The law expired automatically two years after its enactment, and it authorized paramedic services only in counties “with a population of over 6,000,000” people,⁴⁴ meaning that the paramedic services that Wedworth-Townsend authorized were limited to Los Angeles County. Despite its rudimentary and hesitant approach, however, the Wedworth-Townsend Paramedic Act provided the impetus for *Emergency!*

IV. *EMERGENCY!* AND THE GROWTH OF PARAMEDIC SERVICES

Popular culture’s contribution to the development of paramedic services began shortly after the enactment of California’s Wedworth-Townsend Paramedic Act. In the words of Los Angeles County Fire Captain Jim Page, who was involved in the early paramedic training programs in Los Angeles, “May 11, 1971 was a day of great significance to the paramedic concept.”⁴⁵ On that date veteran television producer Robert Cinader, working with Jack Webb (of *Dragnet* fame) met with Captain Page and other Los Angeles County Fire Department officials to discuss the

42. *Id.* at 3. Page was a Battalion Chief with the Los Angeles Fire Department who worked closely with the creators of *Emergency!*. At the time he prepared the 1975-76 study, Page was the Executive Director of Lakes Area Emergency Services in Buffalo, NY. Page later became a California lawyer; he passed away in 2004.

43. The Wedworth-Townsend Paramedic Act specified the emergency medical procedures that paramedics were authorized to perform as well as the type of training that paramedics had to undergo in order to receive a license to perform those services. *See* CAL. HEALTH & SAFETY CODE §§ 1480-1485 (West 1970). Ronald Reagan, who was Governor of California at the time the Wedworth-Townsend Paramedic Act was enacted, initially intended to veto the bill. However, Governor Reagan’s father had passed away from a heart attack because the closest ambulance was unable to cross city lines. Informed that the new law would enable paramedics to cross jurisdictional boundaries, Reagan signed the bill into law. *See* Los Angeles County Paramedic Online Publication, “The History of the Paramedic Program: How It Really Happened,” available at <http://www.firefightersrealstories.com/lahist.html> (last visited April 24, 2007). Ironically, Assemblyman Townsend, one of the state legislators for whom the bill was named, suffered a heart attack at the state capitol in Sacramento in 1973 and died later in a hospital. At the time of his heart attack, the paramedic services which had been authorized by the law that carried his name were not yet available in Sacramento. *See* PAGE, *supra* note 20, at 4.

44. § 1480.

45. PAGE, *supra* note 20, at 51.

development of a new television series based on the exploits of fire department rescue personnel.⁴⁶

Cinader's initial concept focused on physical rescue situations.⁴⁷ Cinader asked Captain Page for help in developing rescue scenarios that could be depicted in a weekly series. Captain Page began collecting story ideas, but soon came to believe that the focus on physical rescue situations was too limiting and stated, "[t]here [are] only so many kinds of cave-ins, building collapses, and similar calamities that could be depicted without encountering potentially boring similarities."⁴⁸ As fate would have it, Captain Page was familiar with Los Angeles County's experimental paramedic operations.⁴⁹ Moreover, shortly after his initial meeting with Cinader, Captain Page was promoted to the office of Battalion Chief, and as a result had the County's two paramedic units under his command. Battalion Chief Page then suggested to Cinader that the focus of the show be changed from physical rescues to depicting paramedics in action.

Cinader's reaction to Page's paramedic proposal was initially cool, but he quickly became a believer. Cinader became a fixture in the fire stations that housed the paramedic units, and he accompanied the paramedics on numerous emergency calls.⁵⁰ In September 1971, Webb and Cinader signed a contract with the National Broadcasting Company (NBC) television network to produce a two-hour world premiere movie based on the work of the paramedics. The movie, titled *Emergency!*, was first shown in Los Angeles in December 1971 and aired nationally in January 1972.

In the pre-cable, pre-satellite era when most American television viewers had access to programming only on three national networks and perhaps one or two local stations, *Emergency!* became a very popular series that ran on Saturday nights on NBC. New one-hour episodes of *Emergency!* continued

46. *Id.*

47. *Id.*

48. *Id.*

49. The Los Angeles County paramedic experiment was conducted under the authority of the Wedworth-Townsend Paramedic Act of 1970. *Id.* at 19-20.

50. See PAGE, *supra* note 20, at 52. Cinader became so knowledgeable about paramedic operations that he was recognized in an article in one of the industry's leading magazines on the quality of Los Angeles's paramedic services. See Ron Simmons, *The Los Angeles County-Wide Paramedic System*, 3 PARAMEDIC INT'L 10 (1978). Ironically, Cinader's reactions to these experiences reflect both *Emergency!*'s influence in the development of paramedic programs as well as its negative effects on the Los Angeles County program. *Id.* at 37 ("The *Emergency!* TV show has given the Los Angeles program such world-wide recognition that the people involved with the L.A. paramedic program have become rather smug and arrogant about it, having convinced themselves that they have 'the best of all possible systems.'").

to air through 1977, totaling 129 one-hour episodes and 6 two-hour Movies of the Week.⁵¹ *Emergency!* was often ranked among the ten most-watched shows in the country, and its national audience averaged about 30 million viewers per episode.⁵²

The popularity of *Emergency!* coincided with the explosive expansion of paramedic services. As mentioned above, twelve paramedic units (some of dubious legality) were operating in a few states in 1971.⁵³ In 1974, President Ford signed the Emergency Medical Services Systems Act into law.⁵⁴ That law established funds for which local communities could apply for the purposes of establishing or improving their emergency medical services systems.⁵⁵ The Senate Report on the Act identified the requirements that communities were required to meet in order to receive funding.⁵⁶ Barely two years after *Emergency!* went on the air, paramedic services had moved from a scarce and sometimes illegal resource to a requirement for receiving federal funds:

The importance of adequate training of the paraprofessional, who, in most instances, is the first person at the scene of the emergency, cannot be overemphasized These individuals on the emergency scene . . . are capable of providing lifesaving care and utilizing complex equipment essential to save the patient from death and protect him from serious disability.⁵⁷

With the aid of federal funding, by the end of 1975 (during the first 3 years that *Emergency!* was on the air), forty-six of the fifty American states had enacted laws authorizing paramedic services.⁵⁸ By the end of the decade, about one-half of all Americans lived within ten minutes of a paramedic unit.⁵⁹

An analysis of *Emergency!*'s influence on the rapid expansion of paramedic services must begin with the acknowledgement of the familiar bromide that "correlation does not equal causation." That is, *Emergency!* may not have played an independent role in the development of paramedic services, but rather its popularity may have reflected the same interest in paramedic services that produced their spread throughout the country. However, ample

51. Sid Cassese, *Honoring Emergency Services in Long Beach*, NEWSWEEK, May 10, 2000, at A-30.

52. *Id.*

53. *See supra* note 40 and accompanying text.

54. 42 U.S.C. § 300d (1976).

55. S. REP. NO. 93-373 (1973).

56. *Id.*

57. *Id.* at 37.

58. *See PAGE, supra* note 20, at 139.

59. *See Making a Difference, supra* note 40.

evidence supports a conclusion that the TV show was a primary factor that fueled the legal changes that allowed paramedic services to develop and expand.

One of these factors is the two hour pilot episode of *Emergency!* that aired nationally in January 1972 and set the tone for the rest of the series. That pilot episode was in essence a two-hour plea for the legalization of paramedic services.⁶⁰ The show opens with firefighters rushing to the scene of a warehouse fire; the scene is similar to those now shown almost every evening on typical local news programs across the country. Later in the episode, a Battalion Chief tries to talk Fireman John Gage (Randolph Mantooth) into becoming part of a special training program to become a paramedic (the term is at this point so unfamiliar that Gage cannot pronounce it properly). Gage initially refuses, stating that he does not want to become an “ambulance attendant.”⁶¹ However, Gage is the firefighter who had unsuccessfully tried to save the life of the electrical worker whose death is described in the prologue above. Realizing that the worker would have survived had he been given medical treatment immediately, Gage decides to become trained as a paramedic. He is also partly influenced by Roy DeSoto (Kevin Tighe), a firefighter who has just completed the very first paramedic training course. Roy tells Gage how important paramedics can become, but also warns him that the medical procedures he will be taught might be useless because current law does not allow its use by non-physicians. Roy also tells Gage about a proposed law then pending in the California state legislature that if enacted would allow paramedics to give emergency aid. This law, Roy tells Gage, would be “the most important advance in emergency medicine in the last 50 years.”⁶²

Enactment of the new law is far from certain, however. Dr. Brackett (Robert Fuller) is the state’s most highly regarded specialist in emergency medicine. The bill’s chief sponsor, State Senator Wolski (Jack Kruschen) tells Dr. Brackett that his support is crucial if the proposal is to become law. Like many of his real-life counterparts, Dr. Brackett is initially quite strongly paramedic-phobic. His nurse Dixie McCall (Julie London) pleads with him to support the bill, but Dr. Brackett is adamant:

I won’t use this situation to justify sending amateurs
to practice medicine out on the street . . . I spent 12

60. *The Wedworth-Townsend Act*, *supra* note 1.

61. *Id.*

62. *Id.* The legislation alluded to in the show is undoubtedly the Wedworth-Townsend Paramedic Act of 1970, which authorized trained paramedics to give specified medical treatment. *See* CAL. HEALTH & SAFETY CODE §§ 1480-1485 (West 1970). The Act was clearly experimental, however, since it was valid for only two years, and only in Los Angeles County. *Id.*

years in school and residency and I am still learning my trade. They will save a dozen people . . . and just one will kill the thirteenth out of ignorance and you will see the biggest, most publicized malpractice suit you have ever seen and that will be the end of [the program].⁶³

In true melodramatic fashion, the turning point occurs when Gage, Roy and Nurse McCall arrive at the scene of a single-car rollover accident. Their rescue truck is fully loaded with paramedic equipment, but they have no legal authorization to use any of it. The occupants of the car have life-threatening injuries, and a bad situation becomes worse when Nurse McCall is critically hurt in the rescue process. Gage and Roy call in to Dr. Brackett and ask for his medical advice. Dr. Brackett instructs them to do nothing until medical help arrives. Gage and Roy heroically ignore his instructions: "To hell with orders."⁶⁴ They render illegal emergency treatment and save everyone's lives.⁶⁵

A few days later, Dr. Brackett has had a change of heart, so to speak. He appears before the state senate committee considering the paramedic bill and testifies passionately in support of passage:

You are all in danger. If an earthquake or a bomb should hit, all [an ambulance or fireman] can do is to carry you off to where a doctor is waiting . . . I'd like to see [everyone treated by a doctor], but [people] die by the hundreds every year . . . [because] of the lack of time. [This bill] will save lives.⁶⁶

Immediately following the committee hearing, Dr. Brackett is called to a construction site where a large tunnel has collapsed, trapping and injuring hundreds of workers. Gage and Roy are on the scene and come upon one worker who has suffered cardiac arrest and is near death. Their defibrillator is close at hand, but in the absence of legal authorization they are reluctant to use it. They radio Dr. Brackett, who tells them to go ahead, they need to save the man's life. They use the defibrillator and the worker survives. When Dr. Brackett arrives, he offers Roy and Gage "my highest congratulations."⁶⁷ The show concludes with a weary Gage and Roy reading the afternoon paper's headline: "Paramedic Bill Passes, Governor Signs [Bill]."⁶⁸

63. *The Wedworth-Townsend Act*, *supra* note 1.

64. *Id.*

65. *Id.*

66. *Id.*

67. *Id.*

68. *Id.*

As this summary suggests, what may be the most striking aspect of the pilot episode of *Emergency!* is the salience of legal issues. When Gage signs up for paramedic training, he is advised that existing laws forbid him from using the training he will be given, and that enactment of the pending paramedic legislation would be the “most important advance in emergency medicine in the last 50 years.”⁶⁹ Dr. Brackett opposes paramedics in part because an inevitable huge malpractice lawsuit will be the end of the program. A state legislator is one of the show’s key characters. Throughout the show he advises Gage, Roy and Dr. Brackett of the political difficulties that the paramedic authorization bill faces, and the show depicts the legislative process at work as Dr. Brackett testifies before a state senate committee. The show’s final image is of the newspaper headline trumpeting the bill’s passage and the law’s triumph. Thus, viewers of *Emergency!*’s pilot episode were certainly made aware not only of the benefits of paramedic services, but also of the scope and nature of the legal changes that had to occur if paramedic services were to exist.

The legal issues depicted in *Emergency!*’s pilot episode accurately reflected the legal reforms that made paramedic services a reality. Most importantly, the new laws that were adopted in one state after another between 1971-1975 insured that the performance of medical procedures by licensed paramedics did not constitute the crime of unauthorized practice of medicine.⁷⁰ Medical procedures that these new laws typically authorized paramedics to perform included cardiac defibrillation, intravenous therapy, the administration of drugs and the use of ventilation techniques.⁷¹

On the civil side, the development of paramedic services also depended on recognition that paramedics should not be judged under the same standards of care applicable to physicians. Thus, many new laws provided immunity from liability for paramedics who carried out their tasks in good faith in emergency circumstances provided that they were not grossly negligent.⁷²

Especially considering the significant challenges confronting proponents of paramedic services and the paucity of such services as of 1971, the fact that nearly every state in the country had authorized paramedic programs during the first three years that *Emergency!* was on the air is powerful circumstantial evidence that the show was a primary catalyst in their growth. *Emergency!*’s strong influence was most likely due to the fact that the show was

69. *Id.*

70. See EMERGENCY MEDICAL SERVICES AT MIDPASSAGE, *supra* note 22, at 40-41.

71. *Id.* at 41.

72. *Id.* at 43; see also JAMES E. GEORGE, LAW AND EMERGENCY CARE 60 (1980).

popular, aired weekly, and the pilot episode stressed the need for paramedics and the legal changes that would have to occur if paramedic services were to exist.

Further evidence of *Emergency!*'s influence is provided by fire department officials and others with first-hand knowledge of the development of paramedic services. Foremost among these experts is Chief James O. Page. Chief Page was the Los Angeles County Fire official who helped design the county's earliest paramedic services and worked with TV Producer Robert Cinader in creating the TV show. Thereafter, Chief Page set up North Carolina's state-wide emergency medical services program, and helped to draft the Model State Emergency Medical Services Statute.⁷³ In addition, Chief Page has written a book and prepared a videotape detailing the history of paramedic services and has studied paramedics as a fire department official and an attorney for more than 30 years.⁷⁴ Thus, Page is uniquely qualified to assess the role of the TV show in furthering the legalization of paramedic programs. Chief Page summarizes *Emergency!*'s role thusly:

While Congress and state legislatures were deliberating on how best to attack the problems of accidental death and disability, an unlikely form of public education was about to be introduced to America and the world on entertainment television When the world premiere of *Emergency!* first broadcast in December of 1971, there were twelve paramedic rescue or ambulance units in the entire country. Ten years later, more than half of all Americans were within ten minutes of a paramedic. That simply would not have happened without the impact of 'Emergency!'. All of a sudden, a whole generation of kids began to announce that they wanted to be paramedics when they grew up.⁷⁵

Of course, a legitimate question is whether the fact that Chief Page helped to create *Emergency!* may have led him to overestimate the show's influence. However, many others who had no involvement with the TV show echo Page's views. For example, the Editor/Publisher of one of the largest magazines for paramedic professionals wrote that "[t]his TV show resulted in

73. See PAGE, *supra* note 20, at 139.

74. For example, while serving as the Executive Director of the Lakes Area Regional Emergency Medical Program, Page prepared the "National Study of Paramedic Law and Policy" in 1975-1976. *Id.*

75. Making a Difference, *supra* note 40. Chief Page reiterated this opinion during a personal telephone conversation with the author. Telephone Interview with Jim Page, former Los Angeles County Fire Captain, in Carlsbad, California (Nov. 13, 2002).

wide-spread public acceptance of the paramedic program . . . throughout the world.”⁷⁶ An article discussing the emerging specialty of emergency medicine noted that “[t]he television series *Emergency!* helped create a national demand for such services.”⁷⁷

Similarly, a Dallas Fire Chief had this to say:

I think that this TV show has had a significant impact on Emergency Medical Services, and paramedics in general, across the country. No, I don't think that the fact that it is based on the Los Angeles County Fire Department paramedic system detracted in any way I think personally that the 'Emergency!' TV program probably has done more for paramedics throughout the country than any other one item.⁷⁸

Further support for *Emergency!*'s influence on paramedic programs comes from an Arizona fire department official: “It was not until after the popular series *Emergency!* in 1972, however, that most fire departments initiated [emergency medical services]. The show greatly influenced the public, which then demanded the service.”⁷⁹

Missouri fire department officials Brandes and Zaitz said much the same thing at festivities celebrating 20 years of paramedic services in that state. They had remained paramedics during the entire 20 years, and

insisted that a popular television drama of that era had played just as big a role [as pressure from the federal government]. The show, “*Emergency!*,” featured tales of professionally trained paramedics in Los Angeles. Brandes said, “The people here who watched it could see what other places had—and could compare it with what we had.”⁸⁰

Of course, in addition to the accounts of paramedic professionals, the legislative history of statutes legalizing paramedic services (including statements of legislators and testimony presented to legislators) would provide additional

76. Simmons, *supra* note 50, at 11.

77. Peter Bonventre et al., *It's an Emergency*, NEWSWEEK, Nov. 21, 1977, at 105.

78. *Dallas Paramedic System*, 2 PARAMEDICS INT'L 10, 37 (1977). According to Chief Roberts, the TV show's popularization of paramedic services was a mixed blessing: “I guess that the only negative thing that comes to mind as a result of the TV show, is the fact that, with a lot of people watching it, some of the ridiculous calls that the TV paramedics have to respond to are similar to some of the calls that we get called out on.” *Id.*

79. Gary Morris, *15 Years of Paramedic Engines*, FIRE CHIEF, May 1993, at 41.

80. Harry Levins, *'Old Guard' Six Paramedics Mark 20th Anniversary*, ST. LOUIS POST-DISPATCH, Jan. 9, 1995, at 1B.

evidence of *Emergency!*'s impact on the legislation that legitimized and expanded paramedic services. One such piece of evidence consists of a September 1972 letter from United States Senator Alan Cranston to Jack Webb, whose company produced the TV show. After describing legislation that he had introduced authorizing paramedic services, Cranston wrote as follows:

Jack, your 'Emergency!' series fired the public imagination and was the harbinger of a medical idea whose time, I believe, has come . . . 'Emergency!' has dramatized the potential of the paramedic. I hope the House of Representatives and the President will now follow the lead of 100 Senators—and Jack Webb! Thank you for the good work, Jack. And congratulations to you and all the people connected with 'Emergency!'⁸¹

Legislative history at the state level is notoriously difficult to locate, especially when statutes are as old as thirty years. Nevertheless, brief snippets from hearings held by the California State Assembly's Health Committee suggest that awareness of the TV show may have helped prompt the re-enactment in 1972 of the state's path-breaking Wedworth-Townsend Paramedic Act. During a hearing that took place in Los Angeles, Assemblyman Richard Hayden stated as follows:

I don't listen to television very much but I did see one broadcast on this emergency program which fascinated me a little bit, primarily because Larry Townsend told me about the program one day up in Sacramento. But what are the liability aspects when a para-medic goes beyond his instructions. It so happens that that particular program was based on that.⁸²

At another point during that same hearing, a paramedic explains medical procedures to the committee members and indicates that "[u]nderneath this unit is the defibrillator which is used quite a bit on the show '*Emergency!*'."⁸³

81. Letter from Alan Cranston, U.S. Senator, to Jack Webb, Television Producer, available at http://www.emergencyfans.com/general_info/show_info.htm (last visited April 27, 2007) (see "About the Production").

82. *Interim Hearing on Emergency Medical Services*, 1972 Leg., 1972 Reg. Sess. 23 (Cal. 1972). Assemblyman Hayden referred to an episode of *Emergency!* entitled "Decision." The episode first aired on September 16, 1972, and one of its plot lines depicted Roy treating an injured man without doctor supervision, causing the man's personal physician to attack the paramedic program. *Emergency!: Decision* (NBC television broadcast Sept. 16, 1972) [hereinafter *Decision*].

83. *Interim Hearing on Emergency Medical Services*, *supra* note 82, at 59.

As time has passed, *Emergency!* continues to be recognized as a primary influence on the development of paramedic programs.⁸⁴ For example, in the year 2000, the president of the American College of Emergency Physicians recognized “the significant role the TV series *Emergency!* played in raising public awareness of emergency care and promoting the early history and development of modern EMS.”⁸⁵ That same year, another story noted that “in the early 1970’s, the NBC television series *Emergency!* changed the face of emergency services around the world, inspiring thousands of people to become firefighters and emergency medical providers, and creating an enhanced awareness of the need for advanced on-site emergency care.”⁸⁶ Another indication of the program’s contribution to paramedic services is that in the year 2000, a fully restored “Engine 51,” the paramedic vehicle created for the TV show and featured in all of its episodes, became part of the Smithsonian American History Museum in Washington, D.C.⁸⁷

Of course, legalization of paramedic services across the country would have been useless without a cadre of qualified paramedics. In addition to influencing the development of paramedic services, *Emergency!* created in many viewers the desire to become paramedics. For example, one long-term paramedic stated that, “About the age of 16 or 17, I got my first exposure to *Emergency!* and Johnny and Roy popping by cars and saving lives and really at that moment I knew I was hooked.”⁸⁸

Looking backwards from the year 2000, Long Beach Deputy Fire Commissioner Scott Kamins tells much the same story:

I remember watching that show [*Emergency!*] when I was 10 years old, and it is definitely what pushed me into fire services There were hardly any emergency service units in local fire departments back then in the early 1970’s, and it was this show that made people want to have such teams in their community while at the same time making it an attractive career path.⁸⁹

84. As of the year 2000, *Emergency!* was “still running on the TV Land cable channel and draws a million viewers a day, five days a week.” Cassese, *supra* note 51, at A-30; see also Becky Beaupre, ‘Emergency!’ *Star Draws a Crowd of Faithful Fans*, CHI. SUN-TIMES, May 7, 2000, at 27 (“The show is credited with creating demand for on-site medical treatment.”).

85. Bob Batz, *Remembering ‘Emergency,’* DAYTON DAILY NEWS, May 12, 2000, at 3C.

86. ‘*Emergency!*’ *Fest to Kick Off National EMS Week and Celebrate Groundbreaking TV Show; May 15th Event Expected to Draw Thousands from Across North America*, PR Newswire Ass’n broadcast (May 2, 2000).

87. *Id.*

88. Making a Difference, *supra* note 40 (statement made by A.J. Heightman).

89. Cassese, *supra* note 51, at A-30.

Kamins' thoughts are echoed by Tim Stokes, the Commander of Chicago's Fire Department, who stated that *Emergency!* was filled with "excitement and adrenaline That all got me motivated. I think I failed health in high school, but I graduated at the top of my class in paramedic school."⁹⁰

Finally, a reporter who interviewed a number of firefighters who spent a busy fire season in 2002 responding to a string of wildland fires in California noted that "For some, the compulsion to fight fires started with TV's 'Emergency!'. They wanted to be Johnny Gage or Roy DeSoto, rushing on Rescue Squad 51 to Rampart General."⁹¹ One firefighter who was interviewed for the story stated that, "I was one of those kids who grew up watching 'Emergency!' I know that sounds trite, but I looked at that and said, 'That's the coolest thing ever.' I liked Johnny Gage, because he was always playing with people."⁹²

A cross-country promotional tour may have been the final event that cemented *Emergency!*'s influence on the rapid growth of paramedic services. After *Emergency!*'s initial season on the air, "there were still thousands of communities where the 'Emergency!' TV series was perceived as mere Hollywood fantasy—a medical version of 'Star Trek.'"⁹³ However, the next season of the show was to feature a new Engine 51 of the type that the Los Angeles Fire Department had just purchased. Instead of shipping the TV show's new Engine 51 across the country from New York to Universal Studios in Hollywood by rail or truck, a combination of actors from the show and actual paramedics drove it on a cross-country tour. Stop after stop resulted in large crowds who came to see the actors and the demonstrations of paramedic techniques. Coverage by newspapers and television stations furthered the tour's impact. Engine 51's arrival at Universal Studios in Hollywood "ended a most unusual chapter in the history of the paramedic concept The big red truck had served as the backdrop for an important message that was delivered to millions throughout the nation."⁹⁴

V. ACCOUNTING FOR *EMERGENCY!*'S INFLUENCE

This paper has argued that *Emergency!* was a primary catalyst for the explosive development of paramedic programs in the early

90. Beaupre, *supra* note 84, at 27.

91. Geoffrey Mohan, *A Season in Purgatory*, L.A. TIMES MAGAZINE, Dec. 15, 2002, at 20.

92. *Id.* at 21.

93. PAGE, *supra* note 20, at 135.

94. *Id.* at 137.

1970s. Obviously, for the show to have had this impact a number of other factors had to be present as well. For example:

- Medical technology had to have advanced to the stage that trained professionals could use mobile equipment to render treatment that had previously been within the exclusive domain of doctors.
- The federal government, as well as state and local governments, had to be willing provide the funding to train and hire paramedics and the equipment necessary for them to do the job.
- A pool of potential paramedics was available. In this instance, many of the first paramedics had served as medics in the Army during the Vietnam War.⁹⁵

Crucial as such factors may have been, paramedic programs may not have developed, at least as rapidly as they did, without the existence of *Emergency!*. The TV show “helped convince the public that they are entitled to the highest levels of emergency medical aid technologically available.”⁹⁶ This section of the paper speculates on the processes that might account for the TV show’s extraordinary influence.

In his essay suggesting that popular culture can lead to legal change, Lawrence Friedman remarked that a social theory of law ought to address the question of how social forces affect the legal system, and that popular legal culture was a mechanism capable of producing legal change.⁹⁷ But what elements are needed if that mechanism is to work? Why did *Emergency!* have such a demonstrable effect on the legal system while most other works of popular culture are valuable chiefly for reflecting popular attitudes towards law, lawyers and the legal system?

Friedman’s essay does not provide a schema that might suggest answers to these more specific types of questions. However, Malcolm Gladwell’s book, *The Tipping Point*,⁹⁸ does suggest possible answers. For Gladwell, tipping points are “mysterious

95. See Note, *supra* note 17, at 158 n.9 (1971) (“Most physician assistant programs are designed for trainees with medical backgrounds from among discharged medical corpsmen of the Armed Forces, registered nurses, and students in allied or other health professions.”).

96. Byron K. Toma, *The Decline of Emergency Medical Services Coordination in California: Why Cities Are at War With Counties Over Illusory Ambulance Monopolies*, 23 SW. U. L. REV. 285, 287 (1993).

97. See Friedman, *supra* note 3, at 1583-84.

98. MALCOLM GLADWELL, *THE TIPPING POINT—HOW LITTLE THINGS CAN MAKE A BIG DIFFERENCE* (Back Bay Books 2002) (2000).

changes that mark everyday life.”⁹⁹ These changes typically happen not gradually, but at one dramatic moment.¹⁰⁰ Gladwell identifies three possible agents of change: the Law of the Few, the Stickiness Factor and the Power of Context.¹⁰¹ Evaluating *Emergency!* according to these three factors helps to suggest specific elements that allowed the show to exercise such a powerful influence on the legal system.

The “Law of the Few” means that major social changes are typically produced by a small number of people whose sociability, energy and knowledge allow them to exert great influence on their peers.¹⁰² Gladwell refers to such people as “connectors,” because they regularly come into contact with many different kinds of people.¹⁰³ Most of us have to “rely on [connectors] to give us access to opportunities and worlds to which we don’t belong.”¹⁰⁴

Emergency!’s Gage and Roy appear to qualify as connectors as Gladwell uses the term. They came into electronic contact with about 30 million people a week, performed daring rescues and were trained paramedics, giving them a special kind of knowledge and ability that few people were even aware of in the early 1970s. Moreover they were firefighters, an occupation that has always enjoyed high prestige.¹⁰⁵ That so many paramedics attribute their career choice to watching Gage’s and Roy’s weekly exploits testifies to their success as “connectors.”¹⁰⁶

99. *Id.* at 7.

100. *Id.* at 9. What Gladwell means by “one dramatic moment” seems to be a definable and relatively short period of time rather than literally a single moment in time. For instance, one of his examples of a tipping point is that New York’s murder rate fell by two-thirds over a period of five years. *Id.* at 6-7. By this measure, the dramatic growth of paramedic services in the early-to-mid-1970s clearly qualifies as a “tipping point.”

101. *Id.* at 29.

102. *Id.* at 21.

103. *Id.* at 46.

104. *Id.* at 54.

105. For example, a 1978 resolution of the U.S. House of Representatives designated Oct. 7, 1979 as “Firefighters’ Memorial Sunday,” citing the “courageous firefighters [who] have protected the lives and dreams of their neighbors from the ravages of fire since the beginning of civilization” and noting that “numerous churches and many denominations have indicated a desire to participate in a designated memorial Sunday honoring these consecrated firefighters for their ultimate sacrifices.” Pub. L. No. 95-463, 92 Stat. 1276-77 (1978). Firefighters continue to enjoy high prestige. A Gallup Poll conducted at the end of 2001 (after the September 11, 2001 terrorist attacks on the World Trade Center in New York) indicated that Americans ranked firefighters first among all professionals for “honesty and ethics.” See The Gallup Poll, <http://www.galluppoll.com/content/?ci=5095&pg=1> (last visited April 27, 2007) (note that a subscription to Gallup is required to view the Gallup Poll information).

106. An unusual measure of Gage’s influence as a “connector” is that the name “Gage” became extremely popular in the early 1990s, bestowed on their babies by mothers who had watched *Emergency!* twenty years earlier. Fred Mogul,

The “Stickiness Factor” refers to messages that are so memorable that they spur those who hear it into action.¹⁰⁷ Interestingly for purposes of this essay, a television show, in this case the children’s program *Sesame Street*, is one of Gladwell’s primary examples of how to create a “sticky message.”¹⁰⁸ According to Gladwell, *Sesame Street* demonstrates that “[i]f you paid careful attention to the structure and format of your material, you could dramatically enhance stickiness.”¹⁰⁹

Of course, the factors that may have made *Emergency!* sticky enough to stimulate the explosive growth of paramedic services must be different from those that have allowed the lessons of *Sesame Street* to stick in the minds of pre-school children. However, one common factor is that both appear to have been *designed* to be sticky. *Emergency!*’s pilot episode, for example, plays almost as a primer on the need for paramedic services, the types of emergency aid that paramedics would be able to render when permitted to do so, and the need for legislative action to allow paramedic services to operate. These same messages found their way into later episodes of *Emergency!* and likely increased the “stickiness” of the series.¹¹⁰

Gladwell’s description of a social science experiment designed by Leventhal in the 1960s may also suggest why *Emergency!*’s message may have been sticky. In the experiment, college students were much more likely to get tetanus shots when the messages they were given about the dangers of tetanus included information on where and when tetanus shots were available on campus. By contrast, few students got tetanus shots in response to messages that focused only on the dangers of tetanus, even when they were presented in gory detail.¹¹¹ What made the messages sticky, according to Gladwell, was information that told the students “how

Professor Tracks Where Babies’ Names Come From, OMAHA WORLD HERALD, Mar. 24, 1997, at 1.

107. GLADWELL, *supra* note 98, at 92.

108. *Id.* at 106. *Sesame Street* is a long-running television show that aims at increasing the reading, mathematical and social skills of pre-school age children. Featuring a mix of live performers and puppets, the show focuses on such basic skills as letter sounds and counting. See CHRISTOPHER FINCH, JIM HENSON—THE WORKS: THE ART, THE MAGIC, THE IMAGINATION 53-55, 73 (1993).

109. GLADWELL, *supra* note 98, at 110.

110. For example, an episode called “Problem” (a.k.a. “Decision”) first aired on September 16, 1972, during the show’s second season. During this episode, Roy defends the role of paramedics to an angry doctor whose patient Roy has just saved from death. *Decision*, *supra* note 82. Also during the second season, an episode called “Trainee” first aired on November 11, 1972. In this episode, Roy stresses the importance of paramedic training to a new trainee who once served in Vietnam, after the trainee attempts a procedure that would have killed a victim if Roy had not intervened. *Emergency!: Trainee* (NBC television broadcast Nov. 11, 1972).

111. GLADWELL, *supra* note 98, at 96-98.

to fit the tetanus stuff into their lives;" the information changed "an abstract lesson in medical risk" into "a practical and personal piece of medical advice."¹¹² In much the same way, *Emergency!* combined abstract information about the need for paramedic services with practical illustrations of how to bring about the legal changes that could make the services possible. Perhaps the latter element was the key to *Emergency!*'s stickiness.

A final element tending to explain *Emergency!*'s stickiness emerges from Gladwell's discussion of a second children's television show called *Blue's Clues*. He considers *Blue's Clues* to be even stickier than *Sesame Street*, because *Blue's Clues* has a narrative structure that grows out of children's own experiences.¹¹³ *Emergency!* may have been sticky for much the same kind of reason. Nearly everyone who watched *Emergency!* had personal or vicarious experiences concerning coronary and traumatic emergencies, and the show's messages about the critical importance of immediate medical care were consistent with their own experiences.

The "Power of Context" is the third factor that Gladwell associates with the development of tipping points. The "Power of Context" refers to circumstances in the environment that produce social changes, and such changes can be brought about by "tinkering with the smallest details of the immediate environment."¹¹⁴ Moreover, big social changes are typically the result of "many small movements" moving in the same direction rather than one single movement.¹¹⁵

As with Gladwell's first two factors, the context in which *Emergency!* arose may help to explain its ability to stimulate the development of paramedic services. As depicted in the TV show, huge benefits would flow from making a small environmental change. That is, the technology that made emergency medical care rapid and mobile was already in existence. Moreover, non-physicians had already been trained to use the technology successfully, and training programs were already in place to provide cadres of additional technicians. The only missing piece was legislation authorizing paramedics to function, but such legislation had already been drafted and all that was needed was to get it passed and signed. The paramedic future apparently required only a small environmental change.

Finally, that change did not have to occur all at once on a national scale. The tipping point with respect to paramedic

112. *Id.* at 98.

113. *Id.* at 121.

114. *Id.* at 146.

115. *Id.* at 192.

services came about through legislative changes in individual states. For example, Hawaii, Illinois, Oklahoma, and Wisconsin formally authorized paramedic services in 1972. Alaska, Georgia, Idaho, Indiana, Minnesota, New Jersey, Oregon, Texas and Virginia followed suit in 1973, and so forth.¹¹⁶ Thus, just as Gladwell would have predicted, *Emergency!* stimulated the national development of paramedic services one state at a time.

VI. CONCLUSION

As Chief Jim Page acknowledges, “The precise impact of [*Emergency!*] . . . will never be known.”¹¹⁷ However, perhaps every reader of this paper knows of at least one relative or close friend who has needed and been promptly attended to by a paramedic. May this paper help such readers remember that a TV show may deserve much of the credit for the paramedic’s existence.

116. PAGE, *supra* note 20, at Table 1.

117. Making a Difference, *supra* note 40 (statement made by Jim Page, Los Angeles County Fire Captain).