

Blog Interview - Dale Johnson

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New feature. Blog interview. Let's begin...

Q: What is your full name?

A: Dale Johnson.

Q: No middle name?

A: Dale is my middle name. My first name, I think, was a sick joke played on me by my parents.

Q: What is your occupation?

A: Paramedic/FTO, Apex EMS. Just as important are other jobs I have: son, husband, and father. The pay is *much* better for the last three.

Q: FTO means...

A: Field Training Officer.

Q: Side jobs?

A: Way too many. Part time paramedic at Six Forks EMS and Clayton EMS; part time instructor at Wake Tech and Durham Tech. By the way, my little plug here: we should pay paramedics a livable wage, in the community that they serve, and one that does not require multiple jobs.

If we have paramedics (and EMTs) who have to work even one extra job, then we are not paying them enough. Period. What I do is at a level comparable to what my daughter does as a registered nurse, and she makes a lot more than I do. *And* she just started.

It's a shame. But that is a tirade for another day and another blog. Probably will show up on [9-ECHO-1](#).

**Q: What do you do when you're not working all those jobs?**

A: Schedule days to work all those jobs. If I do get days off, then my wife and I like the beach. Any beach. Back in May, we wanted a couple of days at a sunny beach, and the closest we found was Daytona. So we went. Caught the shuttle launch, too. We also like Ocracoke. Howard's Raw Bar and Pub is the bomb!

I like salt water fishing, particularly surf fishing. It's not that I catch much, it doesn't matter. It's probably one of the most relaxing things I have found to do. And besides, a bad day of fishing at the beach is better than a good day in Raleigh anytime. The past few years, though, every waking moment not connected to a paycheck seems to have been tied up with the online program at Western Carolina University. I have about three, maybe four, semesters left.

Q: Hobbies?

A: I used to collect Code 3 Collectibles, but I have not added to my collection in five or six years. I have a bunch of old EMS stuff that my wife threatens to throw away every chance she gets. I keep threatening to bring home an old Cadillac ambulance, one day. I like to cook, but I

never get much chance to do it any more. We're always too busy at work and I am never home.

Q: Where do you live?

A: Holly Springs.

Q: Where are you from?

A: Raleigh.

Q: Have an accent?

A: No, the rest of the world does.

Q: Tell me about growing up in Raleigh.

A: One thing for sure, we did not have anything near the stuff to do that we have now. As a teenager, there was *nothing* to do. As a young adult, there was not much more. The Longbranch was the best thing going for a long time. The Village Underground, in Cameron Village, was also a fun place to go, at times.

Back then, there wasn't much variety in restaurants, either. For anything after 9 or 10 p.m., it was The Ham 'n' Egger on what was then called Old Wake Forest Road. Or your choice of three Your House restaurants. They were on Glenwood, Jones, and South Wilmington streets. The one on Capital Boulevard did not open until in the mid- to late eighties. There was also the Community Grill just outside Knightdale on US.64. They had a really good BBQ sandwich.

Actually, the biggest thing I remember to do in Raleigh back then was go to Benson or go to the beach.

Q: And how long was that trip, back then?

A: You could get to Atlantic Beach in about two hours or a little more, and Carolina Beach in about two and a half hours. US.70 was two-lane between Kinston and New Bern, and US-70A around Smithfield was two-lane from between Clayton and Smithfield around to Princeton. The ride to Carolina Beach was down US.421 which was and still is two-lane. There was no I-40. And the ride to the Outer Banks? Wow... it was *long*.

Q: What else do you remember, asks this transplant who arrived in 1983?

A: Going back a little farther, I remember the Soap Box Derby races on Poole Road, the opening of both North Hills (which my Dad helped build) and Crabtree Valley malls, the amusement park at Gresham's Lake, and US.1 being two-lane to the county line in either direction.

There were three drive-in theaters in Raleigh. They were the Forest on North Boulevard just north of Buffalo Road (now Old Buffalo Road), the Tower on New Bern Avenue at Trawick Road, and the Center on US.70 east where the Golden Corral and Ragazzi's are now. Geez, this is starting to sound like the "You know you're from Raleigh" group on Facebook.

And the radio station choices bite these days. For years, there was WKIX at 850 AM (top 40). The best ever was when WQDR went on the air as an album rock station. When they went country, WRDU stepped in, but since they turned into country, well, nothing else measures up. WRVA is close, but not quite there.

Q: Who makes the best barbecue pork and chicken around here, by the way?

A: Me, and I can prove it. Heck, you've ate at one of my pig pickings. Besides, the army gave me an Army Commendation Medal for a pig pickin' at Fort Meade that I put on. But, if you are talking about restaurants, then Parker's of Wilson is the best. Locally, The Pit is pretty good, but it ain't Parker's. There are several others around that are okay.

Q: But I digress. You started on the "fire side." When and where?

A: I started volunteering with Durham Highway for a short time, but when I moved to Cary in 1979, I joined Yrac. I also volunteered with the Cary Area Rescue Squad. Incidentally, I was the last person who was allowed to be a member of both Yrac and CARS at the same time. There were issues back then with some of the folks, what with different rules and all, so they stopped it.

My first job as a firefighter was at Raleigh-Durham Airport. No "international" back then. I started in June 1978 at a whopping annual salary of \$8,735. My first turnout coat was too big, the pants were too short, and the boots were size 9 for my size 11 feet. The gloves were aluminized asbestos, and the helmet was a yellow Bullard "hard-boiled" and without earflaps. I still have the helmet.

Q: What was the airport like back then?

A: Wow. RDU was a very different place. The last flight came in each night around 2345, so the airport just sort of died around 0030. There was nothing on TV after about 0130. They all went off the air, all three stations. And we did not have a VCR. At first, we did not even have a

fridge or anything. We all chipped in and bought a microwave in 1979, and I furnished a color TV to replace our little black-and-white one, also that year.

We worked 12-hour shifts then, two on and two off, from 0700-1900 and 1900-0700. Every few cycles you rotated back and forth between day and night. At first, we did not have a full-time crew in the fire station, and then we moved a small crew in the station. The rest of the time we worked as linemen on the ramps. When the siren went off, we went to the fire station. But it was only staffed from 0700-2400. We did not staff the station 24/7 until after the airport authority sold the fueling operation in 1979. And until we started 24-hour shifts, we only had three people on duty at night. But we had four trucks. It was a sort of running joke for a while.

Q: When did 24-hour shifts start?

A: They started around 1980. And that reminds me about sleeping. When we worked 12-hour shifts, we were not supposed to sleep at night. There were no beds or sofas, but we did get creative finding locations, like the cabs of the trucks. The front cab of the Walter CB3000 could be made pretty comfortable.

Q: What about fire and rescue in general, during these years?

A: The whole fire and rescue thing was a lot more informal in those days. We just tried to do what we hoped and thought was the right thing. It was a lot different. There were no Firefighter, Driver Operator, and Rescue Technician certifications. All of the training classes I took consisted of about 5% classroom, if that much, and 95% hands-on. You learned about firefighting from the folks who had been doing it. Sometimes we did things just because we did not know any better.

Q: What was airport training like, by the way?

A: We had a fire pit, which was a large dirt pool, if you will, with water in it, and a pair of school buses placed in it. We would place wood pallets, old tires, various flammable liquids, along with contaminated jet fuel, in and around the buses and light it off. We came up with some hot fires back then. Of course, we were not concerned with the EPA and other stuff like that, either.

Q: But back to certifications...

A: I watched firefighter training change during the 1980s, when the certifications came along. I had taken the Department of Community College's (DOCC) Fire Instructor exam and was teaching for them. When the firefighter certifications came along, the first ones were Firefighter I, II, and III, along with Fire Instructor I, II, III, and IV. Those of us who were teaching for DOCC were grandfathered in as FF IIIs and FI IIIs. There were a series of meetings that were held to discuss the new firefighter certifications and to explain how they were only voluntary and all. Some of those meetings were pretty intense.

Training has changed. It seems that there is much more classroom time and less and less hands-on. It was nothing for us to go out and tear up a car, or burn it, for that matter, and we were always getting older houses and sheds to burn for training. Most of the classes I went to in those days were hands on, and involved little, if any, actual sitting in the classroom. I never see the departments out drilling like that anymore.

Q: Tell me about the trucks and the tools.

A: I remember that up until the first Mack CFs arrived, every engine in Raleigh and Cary, and every aerial ladder in Raleigh, were all "topless." Cary's first covered engine was the American LaFrance 1000 series pumper they got in the early 1970s. I think, but I am not sure, that the first "custom" trucks used by the county departments were the Macks that Six Forks and New Hope had. When I started there were a few of the old military surplus trucks left, but they were few and far between.

I remember when the first Hurst tools came to the area, and when the fire departments in the county did not want anything to do with EMS or rescue. Everyone except RDU and Cary had black turnout gear; RDU and Cary had yellow.

SCBA were kept in hard cases on the truck and you were a "(w)ussy" for wanting to use one. Me and my brethren spent a lot of time with long lines of black snot hanging out of our noses. I have to wonder what that may have done to our life expectancies.

We all wore great big, red Minitor I pagers and thought we were cool for doing it. Most of our portable radios were three-channel Standards or four-channel Motorolas. I still have a couple of the old "brick" Motorolas that would work if I could get batteries for them. I also have two working Minitors, but both are on 155.280 MHz.

A while back there were polite discussions on your blog and on the Watch Desk about county numbering systems. Back then, everything was "unit 1," "unit 4," etc. And the funny thing was, we knew what each unit was. Yrac Unit 4 was a brush truck. Durham Highway Unit 2 was a tanker. Knightdale Unit 5 was the town pumper. And so on.

Raleigh and Cary (I think) had their own hose threads, while the rest of the county had National Standard with lots of adapters. Things have really changed. I could go on for days about it.

Q: Tell me about volunteering with Yrac, which is Cary spelled backwards for our younger readers.

A: Of all the places I ever worked in the fire service, Yrac was *the* place. I learned more about firefighting during the years there than anywhere else. I had the opportunity to learn from some of the best: Jim and Sam Matthews, Howard Finch, Craig Zglinksj, Mickey Denning, and a few others.

Over the years I have had the chance to play as the IC on several incidents, and I really learned all about that from Mickey Denning. I watched him at many incidents and he had it down to an art, before we even called it fireground command. He was always out there, in front, the man in charge.

At Yrac we drilled every Thursday night. Whether it was flowing water, catching hydrants, or climbing ladders, we did *something* every Thursday. A lot of times, groups of us would get together and go do stuff on the weekends. It was a lot different then. I really miss it.

Q: You also tried your hand at "chiefin'," didn't you?

A: Yep. I learned a lot about people during those years. And remember when your mother said "Well, if so-and-so was going to jump off of a cliff, would you do it, too?" Well, she knew what she was talking about. It was a good experience, though, and there was some cool stuff about it as well. I hope that one day I get to do it again.

Q: When did you last climb aboard an engine?

A: On August 2, 1993, at 0540 hours. It was on Anne Arundel County/Orchard Beach Volunteer Fire Company Engine 112. The truck was a 1985 E-One/Pemfab that was rebuilt from an older Ward LaFrance. We responded to an outbuilding fire that was well-involved when we got there.

There were three of us on the engine, the two county guys-- John Mallonee and Larry Harris-- and myself as the only volunteer. We had it out before the second engine got there. John and Larry were also two of the best, and what I did not learn at Yrac, I learned from them.

Q: What did you learn about yourself during your firefighting years?

A: That you can do things that you did not think possible by pushing yourself, that there is a special bond between people whose lives depend on each other, and some of the best cooking in the world goes on in a fire station.



Q: How did you become interested in EMS?

A: Like a lot of other people in my age group, from "Emergency!" Every Saturday night at 20:00 hours, I was parked in front of a TV for an hour.

Q: What was your first EMS job?

A: Gray Ambulance Service, Raleigh, 1976. We ran out of the old Gray Funeral Home on South Wilmington Street, in what is now Haywood Funeral Home.

Q: Tell some stories.

A: There are lots of them. You have to keep a check on my [9-ECHO-1 blog](#) for those.

Q: How, why, and when did you become a paramedic?

A: I was planning on going to nursing school and thought it would be good experience. I started my first medic class when I was at Fort Ord. I finished, but then Uncle Sam sent me elsewhere.

I wound up in Maryland at Fort George G. Meade. Since I had no continuing education, I had to take it over, which was okay since the Army was paying for it. They moved me again, so I was able to test for Maryland Cardiac Rescue Technician before I left. Think of it as a paramedic

without the narcotics.

When I returned to North Carolina, they granted me an EMT-Advanced Intermediate certification. Again, think "paramedic light." And since no one was offering the EMT-AI to EMT-P bridge, I got to take the paramedic course again. Woohoo!

There is a good story behind that class, as well. But to tell it, well, my mother said if you cannot say something good about someone, don't say anything. But I have been a ratified, bonafide, certified, and, some would say, certifiable paramedic ever since.

Q: What is a bridge, by the way?

A: It's a shorter version of a course to tie you over from one level to the next. The most common example today is the bridge from Medical Responder to EMT. Another popular one is a bridge program from EMT-P to RN, like the one offered by Winston-Salem State University.

Q: If Mr. and Mrs. Six Pack are reading, what should they know about "calling for an ambulance?"

A: Don't. No really, if you need us, call us. It's your emergency. If you think you need us, call us. It's what we do, some paramedics' opinions to the contrary. Call us, and we'll get it worked out. And don't wait and lay around and hurt, or have trouble breathing for hours.

When your chest starts hurting, call us. When your breath starts getting short, call us. You aren't bothering us, again, contrary to some paramedics' opinions. But don't think that just because you are arriving by ambulance that you will get seen quicker at the emergency room. If it ain't life threatening, you may wind up in the waiting room.

Q: Let's talk about your blog. How long have you been reading, commenting, and doing your own blogging?

A: I have been reading yours since about day two, and have been known to comment on occasion. At first it was anonymously, but I figured that if I had something to say, well, might as well take credit for it. Sometimes people don't agree. That's okay, since sometimes I don't agree with them. But, if you want to know what's on my mind, just ask.

As to my blogs, I started my first one on February 17, 2009. I just started the second one on August 29. I have really started reading some others since February. There are a lot of really good ones out there, both from an informational and entertainment aspect. Of course, there is also a lot of crap out there.

The good thing is it gives me a sort of creative outlet. I have opinions and I don't mind sharing them at all.

Q: List some of your favorites...

A: They are [A Day in the Life of an Ambulance Driver](#); [Paramedicine 101](#); [Prehospital 12 Lead ECG](#); [Too Old To Work, Too Young To Retire](#); [The EMT Spot](#); [Pink Warm and Dry](#); [Rogue Medic](#). There are also several fire service ones I look at, as well as a few political and social sites that I also check out. People would be really surprised at my views on some of that stuff.

Q: Where have you worked as a 'medic?

A: Lot of different places. In North Carolina, they include Johnston County, Hoke County, Harnett County, Chatham County, and, of course, Wake County. I have also worked in Anne Arundel County, MD, and Monterey County, CA.

Q: How many calls do you think you've racked up?

A: Oh, a couple of dozen, at least.

Q: How have the calls, duties, and training for 'medics changed over the years?A: When I started out, people did not call an ambulance until they were just about dead. And even then they would drive themselves or their family members to the hospital, sometimes because they "wanted us to be ready for a 'real' emergency." We got calls for chest pain and they presented pale, cool, diaphoretic, with the look of doom on their face. Or they couldn't breathe. Or their mental status was definitely altered. And if it was for an injured person, there was blood, broken bones, or both. The call volumes have increased tremendously over the years. Now we are also getting called out for the "less than life threatening" stuff. Things like rashes, sore throats, stomach aches, and headaches. It is hard to do at times, but we have to remember that it's their emergency. And, right now, that's how our system is set up.

No matter how you feel about it, EMS and first responders are the entry way to healthcare for a lot of people. It matters not the reason. Your politics and social views don't matter, either. It's just the way it is. And a lot of older folks are in that boat as well. Maybe they don't have a doctor. Maybe they don't have money. Maybe they don't have insurance. Maybe they just don't have a car.

Q: Take me behind the scenes. Administration. Training.

A: There are a lot more administrative responsibilities than when I first started. There is a bigger emphasis on billing, billing form signatures, getting "face sheets" from the hospital, and getting HIPAA forms signed. The call report has gotten a lot more in depth and more complicated.

It's changed from handwritten to computer-based. One of the agencies that I work with doesn't keep *any* paper copies. It is all on computer.

Training? I have lots of opinions on that one. It's changed a lot over the years, and, in my opinion, not always for the better. We spend a lot of time looking at statistics. We beat ourselves up for not meeting one time standard or another, but do we work on ways to do the job better, to save steps here and there, so we are meeting those standards? We don't always. And if you keep doing things the same way, then why are you surprised with same result?

We spend a lot of time teaching various topics, but not enough time sometimes, from what I have seen, teaching people on how to put that stuff to use. Sometimes we have students riding ambulances with people that really don't care about teaching. And then there are some topics that we don't spend enough time on. Personally, I would like to see more spent on pediatrics and geriatrics.

Q: What else would you like to see in the classroom?

A: Less filler. We have to fulfill a requirement for *hours*, but there are many times that the actual *content* doesn't seem useful. More experienced instructors. Before you get up in front of a class for EMS or fire people, the students need a sense that the instructor has "been there, done that." And you don't get the experience to teach or precept someone in a class in only a couple of years, I don't care where you are working.

In many cases, we rely on textbooks that are already out of date when we get them. We need to speed up the process of getting information to the folks that need it "just in time." And without having to order out-of-date materials. Maybe something like the NFPA Standards subscription service, only online.

Back when I was working at the community college, I had ideas about delivering content over the Internet. And that content would include slides, video, audio, and a secure means of taking a test. We have that now and actually had it back then but no one would listen. But we don't use it like we should. But even with this capability and a willingness to use it, we still have to have some of the good old fashioned hands-on kind of training. We have tremendous resources available that we're not using. Like YouTube and Facebook. I can get information to EMS people here quicker using Facebook than "regular" email. Or, for example, do a search on YouTube for "EZ IO," "CPAP," or "LIFEPAK 12." Tons of listings. Now, a lot of them are not any good, but think about the potential. And maybe not those venues specifically, but think about daily safety messages over Facebook. How many emergency people would we reach everyday?

EMS training has changed. But it needs to change more. It's like we are trying to educate the 21st century using 20th century means. This has to change.

Yes, training has changed a lot over the years. Some for the better, some for the worse. We used to place a high emphasis on "doing stuff" rather than "discussing stuff." There needs to be a balance of both, but I think we are getting too far away from the "doing." What I have seen in a lot of EMT, EMT-I, and EMT-P programs is an emphasis for "passing the test." And there are a lot of important areas that we cover only in passing. My favorite is ICS. Does anyone really think that online ICS classes actually enable you to perform in the real world when the pressure is on? We don't seem to stress operational things as much as some of the clinical aspects. Don't get me wrong, it's all important. But, if you cannot manage a scene, it may not matter that you can read a 12-lead ECG at 50 yards.

Q: What else is different from then and now?

A: Another thing that is changing, and it is about time, is that EMS is trying to do things based on "science" instead of "what seems like it would work." Over the years we have done things that were actually harmful to the patient. A big topic now is airway management and whether or not to intubate a patient. When I was starting out, we were told to secure the airway no matter what. And which meant we spent a lot of time trying to intubate someone when we should have been doing other things. The recognition of that is why we have one of the highest cardiac arrest save rates here in the Wake County system. There are a lot of other things that we are doing different even five years ago. And in five more years, I bet that some of the things we are doing now, that we take for gospel, will fall by the wayside.

Q: Such as?

A: Things like the "golden hour," that we have paid homage to for so long. No scientific evidence to support it. Even the Army, who supposedly established the idea, is looking at changing the way they do things. From what I read these days, in the peer-reviewed article category, it seems that it was a big marketing ploy that worked.

And what about epinephrine and atropine for cardiac arrests? No scientific studies have ever verified their effectiveness for long-term survival. We'll probably keep doing it for a while, since it would be kind of unethical to do a proper study by withholding these drugs to certain patients. Maybe they will do something like that in Europe. Then there's hyperventilation of patients who are not breathing or in cardiac arrest. Hyperventilation raises intracranial pressure, which is not good. A lot of times, it's fatal.

We used to routinely interrupt chest compressions to "get 'em to the truck," or to place an endotracheal tube. There has been a study that proved that an interruption as short as 20 seconds is fatal. Kind of like shooting them in the head with a 0.45. It makes you think about what we've been doing over the years and about what we were taught. There is even good research out there suggesting arrest patients shouldn't be transported, since the likelihood of survival, if not resuscitated on the scene, is practically nil.

We've started applying science to what we do, and that produced a lot of the local changes we saw in 2005 and 2006, which led to Wake County being one of the best places to drop "dead" from a cardiac event. In the world. We send a lot of people home who wouldn't have gone home five to ten years ago. So take *that* Seattle.

Q: What changes have been less favorable to you?A: I really miss the camaraderie we used to have in EMS. We are so busy now that we never get to meet with neighboring crews for a soda or hamburger. We used to think of ourselves as a brotherhood, of sorts, like the fire service. But with each new EMS management theory that comes along, it seems we are isolating our crews more and more from each other. And that's a shame. Today, it seems like we are competing against each other, and at times almost like we are pitted against one another. I don't like that.

And like every other field, we are becoming much more technology dependent, which I guess is a good thing. It enables us to do things we could not do, or do well, before. But at the same time, it is amazing what happens when the technological advances fail, and they do, and people forget how to function. Like I don't need a pulse oximeter to tell if you're breathing or not. But a lot of other people would rather look at a pulse ox than at their patient. And I can still read an old-fashioned map, so that if the satellite navigation goes on the fritz, and it does, I can still get you where we need to be. But it is amazing how some people start to spin-up when the technology doesn't work.

Q: What's the craziest, scariest, etc. call that you've answered?

A: The scariest was delivering the first baby, by myself, in the back of an ambulance. The craziest involved an aerosol can of hairspray. We'll leave it at that. Most memorable was taking a gentleman from Duke University Medical Center in Durham to his home in Hartford, CT. He was a veteran of World War II and a member of the 82nd Airborne Division. We had a great chat on the way.

Q: Any memorable calls or situations that happened while you were off-duty?

A: A couple, here and there. Stay tuned to [9-ECHO-1](#) for those stories, too.



Q: Tell me some of what you've learned about yourself, in the course of your paramedic career?

A: About myself? I am a lot more tolerant now than I would have ever imagined; a lot more patient and all. Things that used to really "push my buttons" just don't anymore. But there are some other things that really do push those buttons these days. Things like being disrespectful of the elderly, and using terms like "sweetie," "honey," and "darling." We haven't earned that right in most cases. Another is paramedics being disrespectful of our firefighters. Or driving like an idiot. Being stupid also pushes those buttons, as well.

I am a lot more curious about stuff, as well. I like to learn the why of things as much as the what. Too many times, though, people have thought that by asking questions-- and some rather pointed ones, at times-- that I was "stuck in my ways," so to speak. I just like to know the why behind changes and decisions. "Because I said so" never has worked for me. Just ask my mother how that worked out.

Q: And what words of wisdom would you offer up-and-coming 'medics?

A: Take the job seriously, but not yourself. Have fun. If you are not having fun, do something else. It's okay to be a gear head. Those that say

they are not, are just jealous 'cause you have all of the cool stuff. Work smart, because you do not get extra points for doing things the hard way. Trust your gut feeling. Slow down. Buckle up. Be safe. It's not your fault that people die.

Oh yeah, get an education. Don't settle for a certificate or an Associate Degree. Go ahead for the Bachelor's, even if you don't have any management aspirations. It's amazing what it does for your knowledge base. It also peaks your curiosity about 'stuff'. Yep, get an education. You can do it all online. Maybe even on a Crackberry before you know it.

And another thing. Those learning objectives that you find in such places as the National Registry and the NC OEMS standards? Those are *minimum* standards. The floor. The bottom. You should be aiming higher. You may be taking care of me or my family members one day. I have high standards.

Q: Do you have a Bubbaberry, to quote my favorite e-mail signature?

A: No. I did not get a Nextel until about six years ago. Now everyone has the Crackberry, or Bubbaberry. I don't know, maybe because I don't have one, but I fail to see the fascination people have with walking around with their nose stuck in that little screen, typing/texting away. And those little Bluetooth remotes... when you get out of your car, take it off. Unless you have regular invitations to brief the UN Security Council meetings on some crisis or another in the world, you ain't that important.

I guess I miss the "good old days." No cell phones. No pagers. No Nextels. No BlackBerries. When we left home, we were out. I remember carrying a quarter around to make a call if I needed to. I think that maybe we are just "too connected" now.

Q: Back to vehicle memories. What are some of the sweetest rescue and EMS rides you've ridden in?

A: The absolute sweetest EMS ride was a 1972 Cadillac with a Superior conversion. It had a 472 cubic-inch V-8 engine and would cruise at 125 mph, which it did one day while traveling from Richmond back to Durham. It had a raised roof that allowed 54-inches of headroom. It was really just a good car. It was equipped with Superior's "CPR Package," which provided a "squad bench" instead of the regular flip-down attendant seat, and "special" cabinetry for "emergency work." There were also twin Federal 184 beacon lights, a Federal PA20A with twin CP25 speakers, and a Federal #28 siren. Typical of "company" vehicles back then, there was no AM/FM radio. We did have a pretty cool-looking Aerotron mobile radio with tubes in it. Of course, it didn't work.

The equipment included a black AMBU bag with an AMBU foot operated suction unit, along with one of the original Laerdal portable suction units. I keep threatening my wife that I am going to buy one. Actually, if I had somewhere to park it, I would already have one. If they would let me, I would just paint and letter it and use it now. I would much rather have one of those than the current Fords and such. Of course, to carry all of the stuff we carry now, I would have to have a trailer behind it. But then, maybe we don't *need* a lot of that stuff.

Q: And for fire apparatus?

A: The best fire truck I ever drove or operated was the 1962 Chevrolet/American LaFrance that ran as Yrac Unit 1. It was dependable, ran good-- more so than any other I have driven, from Macks to Pierces to Seagraves to Fords and plenty more-- and would pump for hours. It was a fire truck, pure and simple, without all of the frills.

A close second would be a 1972 open-cab (topless) Seagrave pumper from Maryland. 8V92 Detroit diesel, five-speed manual transmission, 1,000 GPM pump, 500 gallon tank, Federal Q2B, and most important, three Mars 888's on the front. The motor generated a low roar that was awesome. And we could set off car alarms as we passed them in the neighborhoods.

I also really enjoyed the 1973 Walter CB3000 out at RDU. Twin diesels, twin pumps, twin transmissions, and no mufflers. And you were by yourself in that *huge* cab. Throwing 3000 gallons of water a couple of hundred feet in about two minutes was sort of, well, exhilarating. Driving down the taxiways to the run-up areas and cutting loose with both pumps... wow... all that was missing was "The Ride of the Valkyries." Or maybe "Start Me Up" by the Rolling Stones.

Q: Got pictures? They could make a good book. You probably know at least one historian who could help you.

A: I used to have hundreds of photos, but a storage building, matches, and an intoxicated relative, along with a long response time by the local fire department, took care of those.

Q: Any questions for me?

A: Do you really pay money for those shirts?

Q: My very bright Hawaiian shirts? Yes, I do.

A: I guess people will pay money for just about anything, huh?

Q: Thanks for playing. Say good night, Dale.

A: Good night, Dale. And one more thing.

Q: What's that?

A: Y'all be safe out there. Sit down, buckle up, slow down, and be smart.

Dale Johnson interviewed by Mike Legeros, September 2009.

Big Dale Johnson for President!

TTaylor - 10/02/09 - 23:01

Mike, love the concept...look forward to who is next!

NM - 10/03/09 - 06:41

good read... and great concept!

CFP 7021 - 10/03/09 - 08:57

I concur, good read.

Kermit - 10/03/09 - 09:57

DJ is my hero!!! ...and looking quite savvy in the Apex attire!

A.C. Rich - 10/03/09 - 10:25

DJ is a class act all the way. And wise beyond his years. We are very lucky to have him in Public Safety in Central NC. Great interview.

Marshall Sherard KE4ZNR ([Email](#)) ([Web Site](#)) - 10/03/09 - 10:47

OK, let the newbie show his ignorance. Why spell Cary backwards in the first place?

Paul - 10/03/09 - 10:57

To the best of my knowledge YRAC was Cary Rural FD when it first formed and was founded to protect the YRAC Rural Fire Protection District. This was the unincorporated areas surrounding Cary. A year after the Cary Rural FD was formed there was a bit of contention about there being 2 Cary FD's. Therefore they changed the name to YRAC, which I also understand to be the name of the Cary High School Yearbook. Up until the day the trucks of YRAC were relettered to Western Wake they read YRAC FD, Cary, N.C.

CFP 7021 - 10/03/09 - 12:54

AC- that was actually Six Forks attire. Pictures were taken before I actually started Apex.

Marshall- Thanks for the kind words, man. I'll have the check in the mail!

Paul- There used to be a rule that no two fire districts could be named the same. Since there was a 'Cary' fire district, inside the city limits, then the one outside the city limits had to have a different name, hence 'Yrac'. Other examples are-

Apex/ Hipex

Benson/Banner

Clayton/ Claytex

Fuquay-Varina/ Furina

Wake Forest/ Wakette

And it was not limited to municipal/rural combinations. There are several 'New Hopes', so ours is 'Wake New Hope'. The same applied to Fairview (Ten-Ten) and Cleveland (MacLemore).

DJ ([Email](#)) ([Web Site](#)) - 10/03/09 - 13:02

Oh yeah, that is a SF patch. Sight is the second thing to go...

A.C. Rich - 10/03/09 - 23:56