

DISPATCHES

A Publication of The LifeFlight Foundation

GENERAL MAINE HEALTHCARE
SOUTHERN MAINE HEALTHCARE

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Public Investment in Critical Care

Powered by the People of Maine

25TH ANNIVERSARY ISSUE
OCTOBER 2023

Cover Photo: LifeFlight crew members, 2001

THEN AND NOW

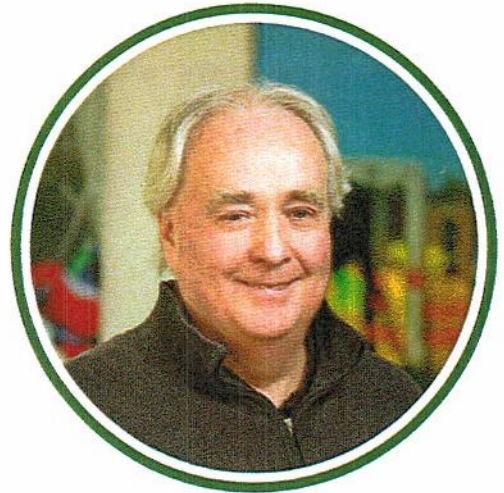
1998-2023

by Tom Judge

We started LifeFlight with a vision, a set of design principles, and a simple sheet of instructions.

We knew that critically ill and injured patients were experiencing poor outcomes and otherwise avoidable deaths merely due to time. Our vision was to build a system able to change the geography of time and give critically ill patients a better chance of an optimum health outcome — “unexpected survivors” despite the odds.

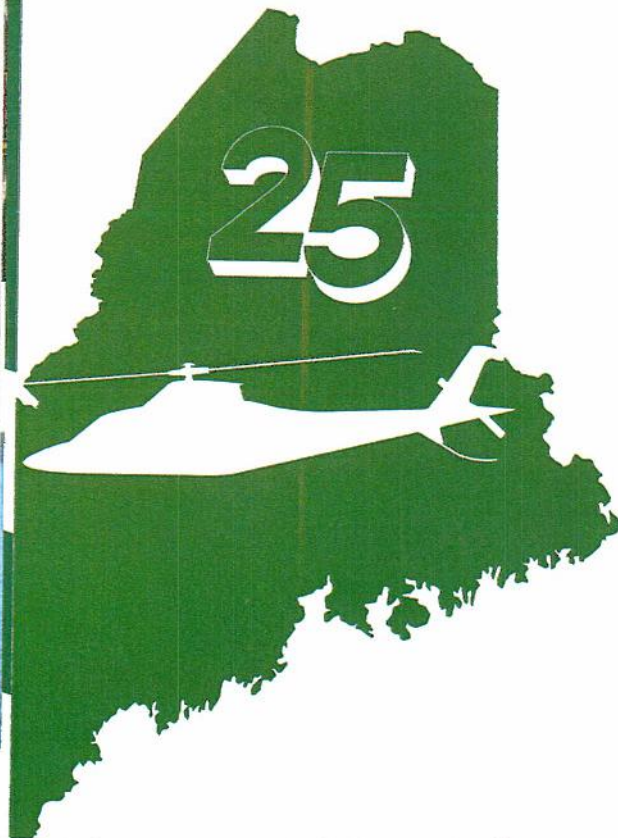
We designed LifeFlight to be “of Maine” using Maxwell Quality/Dimension pillars: do we measurably improve access; do we measurably improve equity by caring for all ecumenically and non-competitively; do we measurably improve our quality and effectiveness; do we operate at the best economic efficiency, producing the best results and the lowest costs; do we deliver care appropriate to



need based on evidence and research; and do we respond to changes in the healthcare environment. We added a seventh: to operate the safest, most reliable, and most trustworthy system possible.

The instructions were short and to the point on a white sheet of paper: **never compromise safety, build a world-class system, and operate economically.** With initial funding from Eastern Maine Healthcare Systems (now Northern Light Health) and Central Maine Healthcare, we built a world-class air medical system to support Maine’s emergency medical services (EMS) and hospitals.

The vision and the design were courageous, the instructions were clear, but the reality was we were starting from scratch with core, but not full, funding. We were a new, small, private nonprofit with a huge and statewide public mission. While we could develop the clinical and aviation teams, lease helicopters, and start building communications, Maine did not have helipads, rural weather reporting, refueling stations, communications, facilities to support aviation, or EMS and hospital providers experienced with a medical helicopter system.




We announced the creation of LifeFlight in early April 1998, and a few short months later in September, we flew our first patient from the woods above Deblois. From the outset we were able to engage Maine's leading physicians from hospitals across the state — emergency, trauma, pediatric, cardiac, intensive care specialists; and neonatologists — to oversee LifeFlight's clinical teams. We were able to recruit a gifted group of Maine's nurses and paramedics to create the first two flight teams, and we engaged a high-quality aviation firm specializing in operating medical helicopters for nonprofit healthcare organizations.

As you can see from a few of our highlights in these pages, each day since has been a journey, piece by piece building a world-class system. We have achieved continuous national accreditation and won numerous national awards for safety, community service, our accountable culture, and innovation. In 2003, we created The LifeFlight Foundation to assure stakeholder interest for everyone in Maine.

In 2008, after only ten years, our peers across the US and Canada recognized and honored us as the top program in North America. We have collaborated with programs around the world, added new therapies and more complex medicine, built a first-in-the-nation aviation infrastructure, added an airplane for long distance transports, added new bases and specialized ground transport, and started a national demonstration project with the Federal Aviation Administration (FAA) on "next gen"

precision instrument routing. In 2019, we began the process to create our own FAA approved Air Carrier Certificate, and with support from our Foundation replaced our helicopter fleet with state of the art aircraft, completing both in 2022.

Each day we innovate, guided by our vision for 2030 and beyond. **We will continue to meet the needs of the increasingly challenged rural healthcare landscape.** Together with our colleagues across the country and the world, we are researching new diagnostic technologies delivered to the point of need, new communications technologies that link teams and vehicles to specialist physicians providing remote decision support to EMS and community hospital emergency departments, new and greener flight and ground technologies, and new ways to deliver care within the Maxwell pillars.

While the faces at LifeFlight will change over time, our constant touchstone is our vision, our design principles, and our commitment to always perform at our best for our patients. There are moments of wonder in saving someone's life, helping to welcome a newborn into the world, and holding someone's hand on the worst day of their life — the most powerful therapy in medicine. And equally there are incredibly challenging moments when only our belief in the gift of service gets us through. To be there for our patients, that is why we are here — LifeFlight of, for, belonging to Maine. 

Tom Judge is the founding executive director of LifeFlight of Maine.

“LifeFlight’s core values derive directly from the celebrated Maine culture of resourcefulness and humanity – to deliver health care to the farthest reaches of our state with soul, safety, speed, and cutting-edge technology and medical practice. In so doing, LifeFlight has amplified and leveraged the talent of every health care provider across the bucolic beauty of this place we call ‘home.’”



Norm Dinerman, MD
Founder and Medical Director

A Second Chance on Life

STORIES FROM LIFEFLIGHT PATIENTS

by Jesse Ellison

Over the past 25 years, LifeFlight has cared for more than 37,000 patients. Working together with our EMS and hospital emergency and intensive care providers, we work to change time and geography, to reset the clock for a patient suddenly in need with their life at stake. Here are three vignettes out of thousands of LifeFlight stories through the years.

It's been sixteen years since Lauren Lamberson was in the accident that almost killed her. She was five years old, strapped into the back seat of a Cessna float plane on a glorious August morning in Western Maine. Her mother, Beth Andrews, sat next to her, with Lauren's three-year-old brother Kyle on her lap. Their dad, Kevin, sat shotgun; a family friend flew the plane.

They were landing on Kezar Lake, but as they hit the surface, the plane, which mistakenly had its wheels down, bounced and then flipped, somersaulting over. In seconds, they were under water and sinking fast, the bright morning light suddenly growing darker and darker and murkier and murkier as they plunged to the bottom of the pond.

Kevin couldn't find the handle to his door but managed to kick out the windshield and escape to the surface. To this day, Beth says she isn't sure how she did it — images of the plane that she saw later showed her door pinned closed by a piece of wreckage — but she managed to escape with Kyle in her arms. Lauren was still strapped into the back. So was the pilot — he didn't survive.

People had seen the accident from the shore and rushed out to help. One diver donned goggles and swam down to where Lauren was but was unable to undo her seat belt.

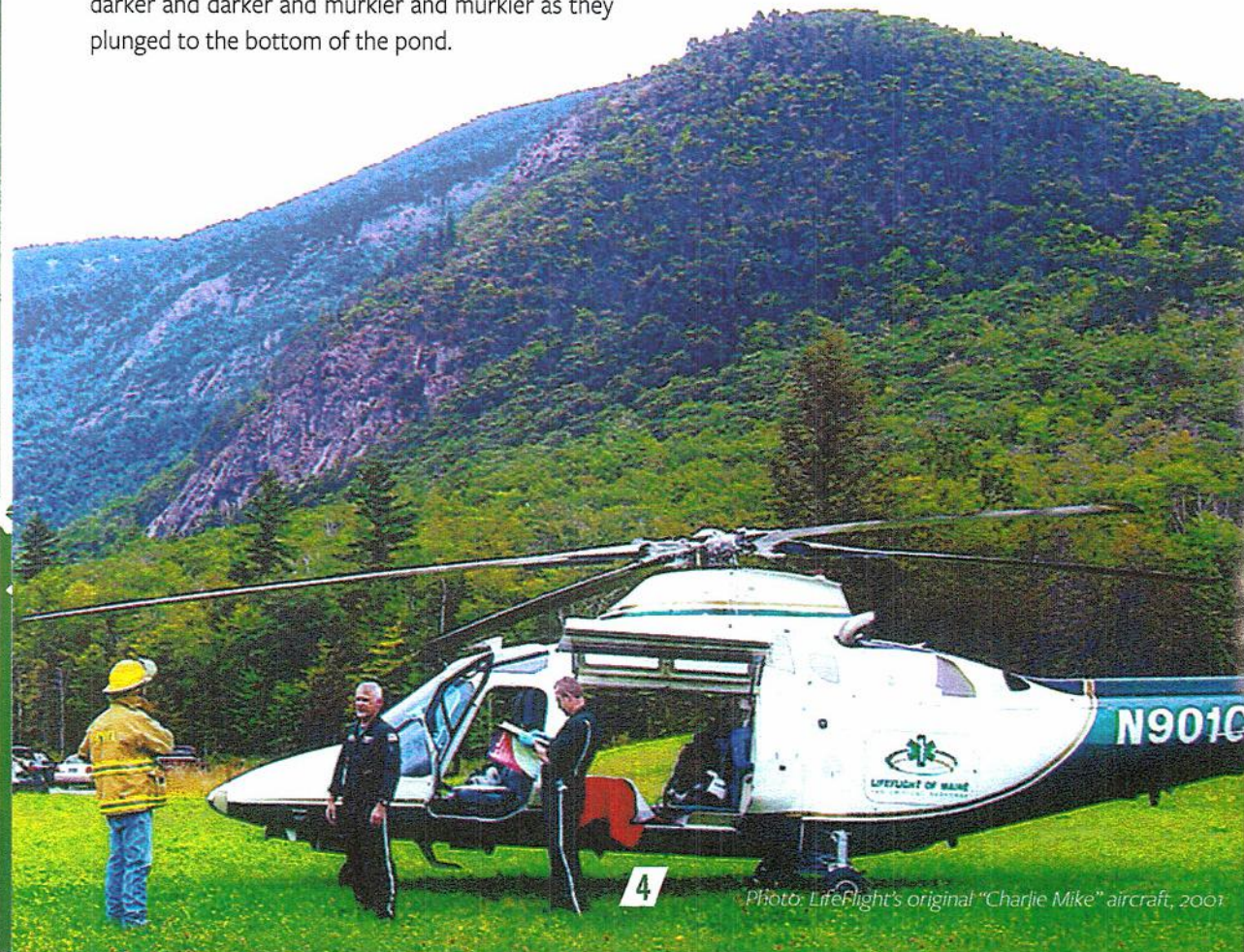


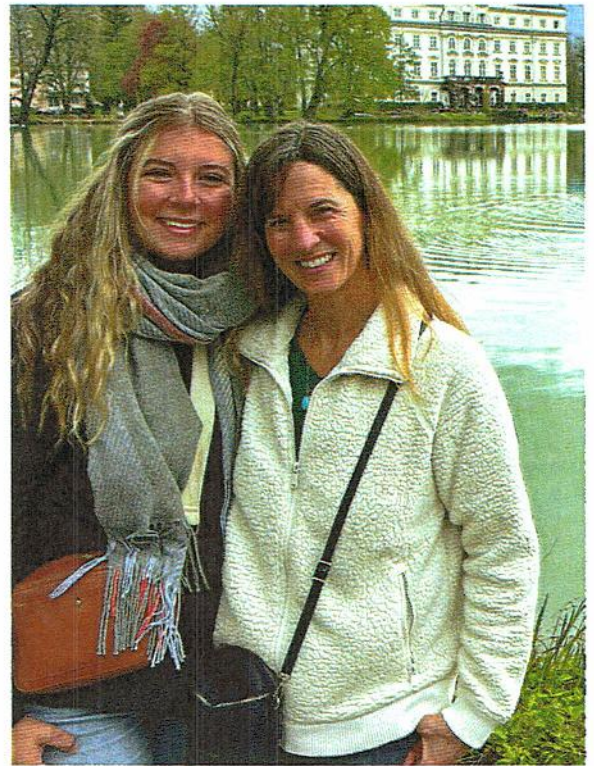
Photo: LifeFlight's original "Charlie Mike" aircraft, 2001

In a moment that seems like it must have been fueled by some feat of maternal super strength, Beth took the diver's goggles, swam down to the plane, got Lauren out of her seatbelt, and brought her to the surface of the pond. She'd been underwater for at least five minutes. She wasn't breathing, she had no pulse, and she was turning blue.

"As fate would have it," Beth recounted recently, "there was a doctor who runs an ER in Boulder, Colorado, asleep in the camp closest to where it happened." He was woken up and brought out to where Lauren's little body was lying on the bow of a boat. "He will tell you that he almost didn't do it because she'd been in the water for so long," Beth remembers. But he did, and he succeeded in breathing breath back into her lungs, reviving her. Within minutes, LifeFlight arrived, intubated Lauren, breathing for her in the short flight to Maine Med, where she immediately was admitted to the pediatric ICU and was sedated and placed on a ventilator. Within hours she awoke neurologically intact and went home the very next day.

Beth says that at one point a medical professional told her that since Lauren was so young, she'd still had a womb-like ability to breathe a little bit under water, but she's not sure whether the theory is backed by science. What she is sure of is what a lot of survivors will say that they know: that that day, the difference between life and death was in a series of tiny lucky breaks. If any one thing had gone differently — if Beth hadn't been such a strong swimmer, if there hadn't been a doctor in a house that was so nearby, if that doctor had hesitated even a minute longer to perform CPR, if Lauren hadn't gotten to a hospital with the speed that she did, if the weather had turned and prevented LifeFlight from flying — in any of these scenarios, the outcome could have been horrific. That day, August 4, 2007, changed everything for that family. To think how easily it might have been so much worse, well, it makes one shudder.

"I would not be here talking to you if it was not for every link in the chain coming together," says Jake Stoddard. On October 21, 2001, he was thirteen years old and helping his father clear land on a property the family had recently bought just outside of Greenville, in Lily Bay Township. They were up in a tree with a chainsaw when "the chainsaw decided it wanted

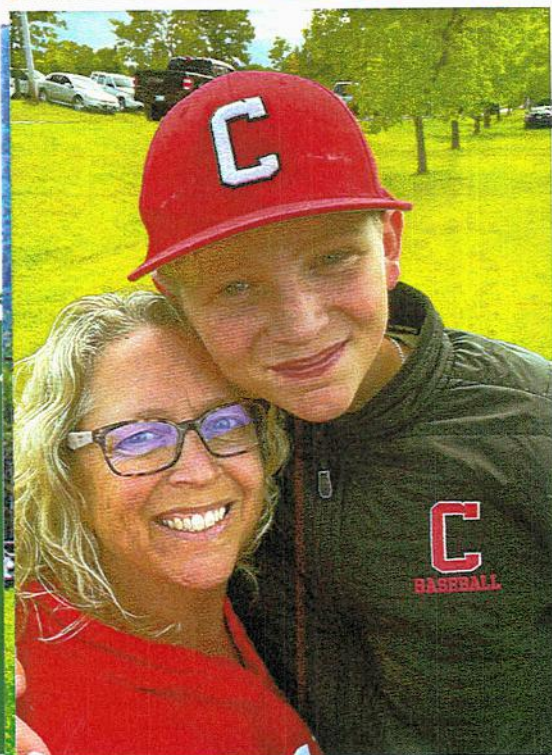
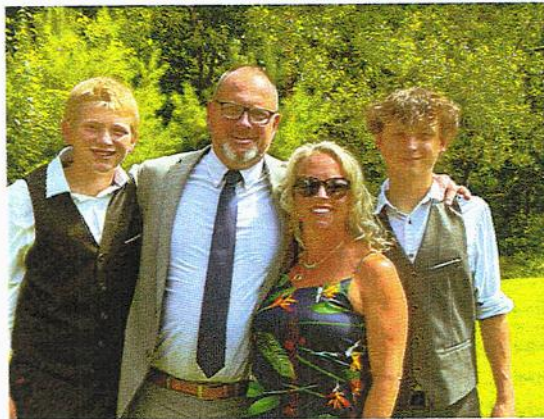
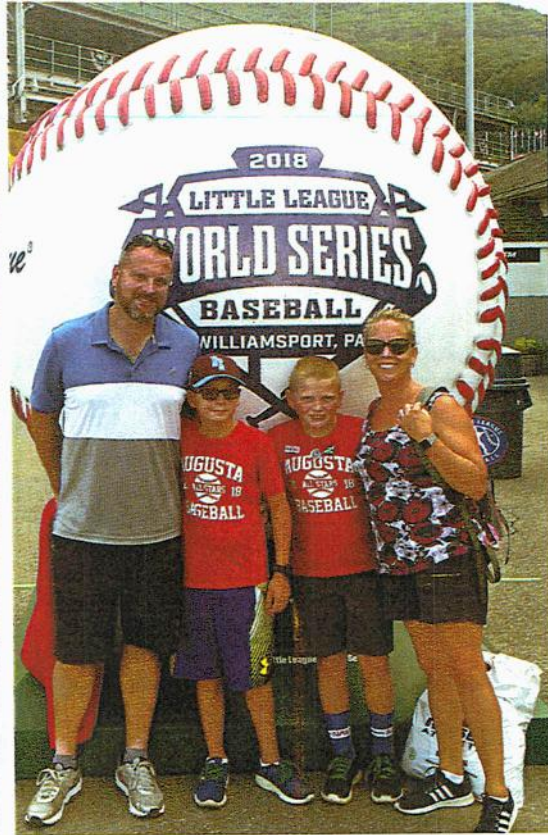


Lauren Lamberson visited Salzburg, Austria, in 2023 with her mother, Beth Andrews, a former LifeFlight Foundation board member.

to jump out of the tree," he recalls ruefully. "My left thigh was in its path." The chainsaw, which was running, sliced through his femoral artery, which runs the whole length of the body. "Yep," Jake says, "I hit the big one."

This was 22 years ago, before cell phones were ubiquitous. The family had one, but in the chaos immediately following the accident, it had been flung out of reach. Jake's first stroke of luck was that an RV happened to drive by. His mom flagged it down. They had towels and a phone and called 911 while his mom pressed the towels to his leg, trying — and largely failing — to stop the blood loss.

Jake says one of his most vivid memories from the incident was looking up at the first responding police officer, who'd (luckily) been just up the road when the call came in, and asking groggily if he would be able to go to school the next day. "No," the officer told him. Jake's last memory of the day is being loaded into a LifeFlight helicopter. At the time, the organization was just three years old. He was taken to Bangor, where a vascular surgeon was waiting for him, and his parents did the two-hour trip in their car, arriving when Jake was already in surgery.



When they walked into the hospital, his father was “literally covered in blood, head to toe.” Jake spent two full weeks in the hospital, and he still has no feeling in his left foot. But, he’s alive.

“There were so many parts to the process that had to come together to make it all work,” Jake, who’s now married, living in Hallowell, and working for the Maine State Police, says. **“From the cop, to the paramedic, to the helicopters being able to fly that day, and with their resources and the fact that they had blood on board. That’s what saved my life.** If any link in that chain was broken, it would have been a different outcome. Every piece of the puzzle that came together is the reason why I’m here today.”

This is what Melanie Lajoie thinks about, too, when she reflects on the car accident she was in thirteen years ago. “Truly, in my situation it was minutes,” she says. “Minutes matter.” Melanie, a speech pathologist, was on her way to work, talking on the phone with her father, when an oncoming car veered over the center line and crashed into her minivan. The van was destroyed, and the impact had broken both of Melanie’s femurs, a tibia, ribs, pelvis, tailbone and shoulder blade. She had massive internal injuries, and was hemorrhaging.

The previous weekend, Melanie, her husband Greg, and their two little boys, then one and three, had visited her father in Schoodic, and while they were there, her dad had realized that he didn’t have Greg’s phone number and had saved it in his phone. On the other end of the line that morning, he heard the entire accident, and he immediately called Greg. Knowing that his wife was traveling from Windsor to Palermo, Greg got in his car and drove the route in a panic. He arrived just as Melanie was being cut out of her vehicle with the jaws of life. Paramedics, rescue personnel, and police officers were everywhere. LifeFlight was there, too. When they got her out of the van, they put her in a helicopter for the fifteen-minute trip to Central Maine Medical Center in Lewiston. She was losing so much blood so quickly that she needed two full units just to make the trip.

“Greg kept saying, ‘you have to fight for us,’” she says. “All those little things: my dad putting the number in, Greg making it to the crash site, LifeFlight getting there.... It was like the stars were aligned.”

Top: Lajoie family road trip to Williamsport, Pennsylvania, for the Little League World Series, August 2018.

Center: Melanie Lajoie with her husband, Greg, and her sons, Josh and Luke, at a family wedding in August 2023.

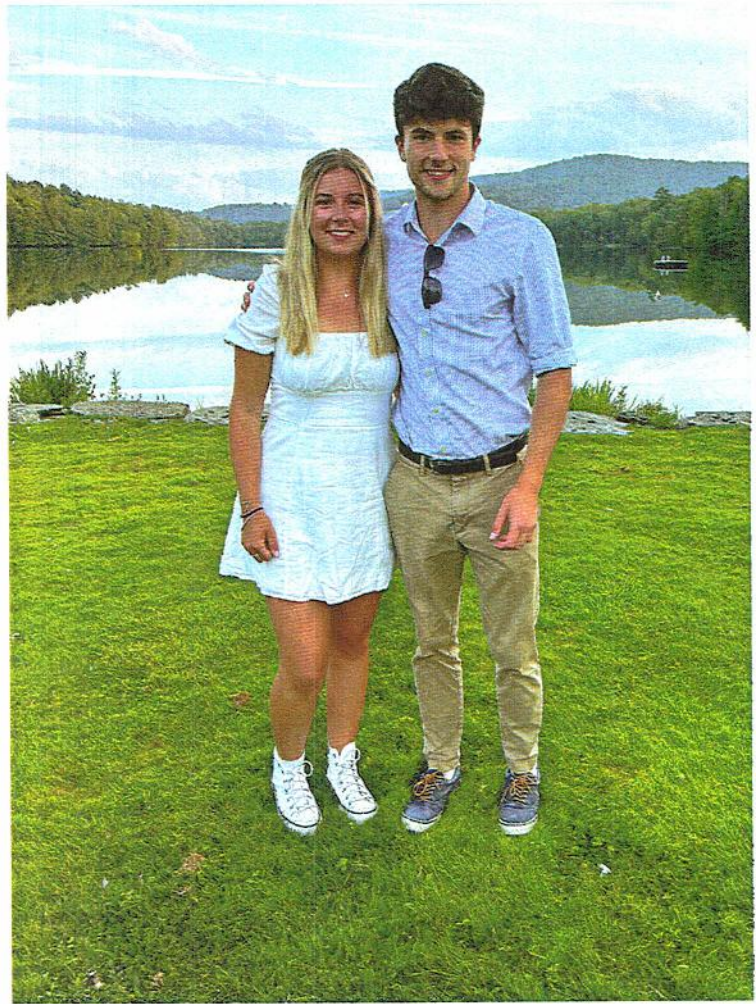
Bottom: Melanie Lajoie with her son Josh after a baseball game in June 2023.

It's a remarkable thing to say about an accident that put her in a coma for eleven days and led to 25 hours of surgeries and weeks of rehab. But that is the gift of deep gratitude. This year, her youngest son will be a freshman in high school, which she mentioned as she choked back tears. **"It's been thirteen years, but millions of memories,"** she says, her voice breaking. "That there are these people who choose this profession, this line of work, and are able to think that quickly and respond to traumatic events and be really level-headed, it just amazes me. They're going to work for the day, but they're changing your life, the whole outcome of your life. They're giving you a second shot, changing your story. Without them, my story is very different."

Melanie says that in the years after her accident, when she would hear a helicopter, her heart would sink, thinking about the fact that someone else might be where she was that day, or even worse. "I had to transform it from a sinking feeling to a thankful feeling," she says. "Somebody today might be alive. I close my eyes and think, I'm so thankful."


Lauren, meanwhile, is now 21 years old and a senior at Clemson University in South Carolina. She doesn't remember the plane crash itself, but her family does, and all of them say they're changed by it. For her sixth birthday, instead of gifts, it was her idea to ask instead for donations to LifeFlight, a tradition she continued all the way through high school, raising thousands of dollars along the way. By middle school, motivated by the accident, she says, she'd become a swimmer, and she swam competitively until going off to college. When we spoke at the end of August, just after the anniversary of her accident, she had recently returned from a semester studying abroad in Southern Spain, during which she also traveled to Greece, Austria, and by boat to Morocco.

"Lauren and her brother have definitely turned the accident into strength," her mother, Beth, says now. Kyle, she says, "uses the story to remind himself that he's resilient and he's a survivor. Just to remind



Lauren Lamberson with her brother Kyle in 2023.

himself that life can get pretty rough, but there's a way to get through it."

Lauren has spent the last several summers working at a summer camp for underprivileged boys in upstate New York. This year, because it was her last year as a counselor, she followed the tradition of giving a speech during an outdoor chapel one night. She chose to talk about the accident. "The big lesson I want you all to take away from this is to live each day to the fullest," she told the kids, as they sat silent and agape hearing for the first time what had happened to her. "You never know when it could end. I promise you I remember this each day, especially while we are here at camp, because our days here don't last forever. Take these last few days to make memories with your friends. I hope if you take one thing away from my speech, you remember my message to live each day to the fullest." 

Jesse Ellison is a freelance journalist and contributing editor at Down East Magazine based in midcoast Maine.

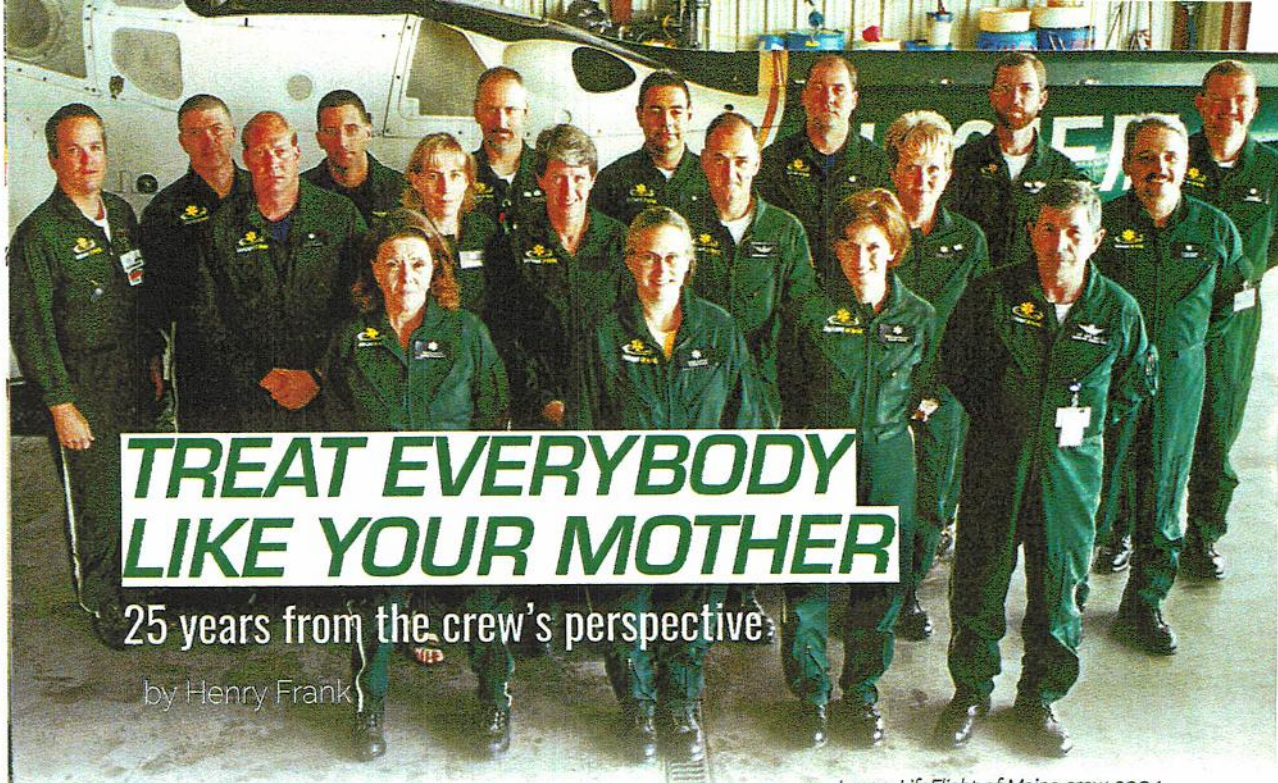


Image: LifeFlight of Maine crew, 2004

The expression “building the plane while flying it” does not quite work, because it was a helicopter.

In 1998, Maine was the last state in the country to implement an air medical system. “We literally had nothing,” Sandy Benton said only somewhat facetiously of LifeFlight’s early days. Sandy worked as a flight nurse and manager of LifeFlight 1 in Bangor for 18 years. “We were writing protocols and guidelines on paper, and then we would find someone somewhere who could type them up.” Sandy was there from the beginning — before the beginning, in fact. She began working with Tom Judge, one of LifeFlight’s founders and long-time executive director, to develop a ground critical care team in 1996, two years before LifeFlight began operations in September 1998.

“We went into this adventure with blind faith in Tom,” said Lori Metayer, who worked as a flight nurse and manager of LifeFlight 2 in Lewiston for 24 years. This small team of experienced nurses, paramedics, and pilots were embarking on something new. It was not only new to them and new to Maine, but with an innovative spirit and a penchant for excellence, the nonprofit air medical service they were building was unlike any other program in the country.

It took time to build, and the team proceeded purposefully, thoughtfully, and ambitiously. “In

the early days, we had two calls in a week,” said Lori. “The average crew would have about 1,000 hours of briefing time and clinical duties in the hospital, with only about 40 hours of flight time, and half of those flight hours were with a patient,” said Dave Burr, who recently retired as Director of Operations for LifeFlight Aviation Services and worked as a rotor wing pilot for LifeFlight since 2000. “In a six-day period, we would maybe fly two or three times.” Today, LifeFlight transports a patient on average every 3.5 hours.

The medical crew had not spent much time in a helicopter, and pilots like Dave, who flew helicopters in the US Navy and then the agriculture industry, had not spent much time flying with a critically ill or injured patient in the back. “The beginning was as challenging as it was novel, because you had three very Type A disciplines in a tight space,” Dave said. “We learned really quickly.”

LifeFlight helicopters have always flown with a crew of one pilot, one nurse, and one paramedic. (The helicopters have advanced avionics and can be operated by a single pilot. LifeFlight’s fixed wing airplane is flown by a pilot and a first officer.) The LifeFlight nurses are required to have intensive care unit (ICU) experience, which is essential training for the ICU-level care provided by LifeFlight during transport.

“When the LifeFlight crew came into that ER, the people stepped aside. LifeFlight has brought advanced medical care to areas that would have never been able to afford it.”

– Miles Theeman, former president of Affiliated Healthcare Systems and LifeFlight of Maine Steering Committee member

The paramedics, also with critical care training, have experience in the back of ambulances. While different disciplines, nurses and paramedics on LifeFlight’s crews work together in unison using the same protocols and standing orders. The pairing is vitally important to LifeFlight’s patients, but in 1998 everyone had to get used to this novel arrangement.

“We had to show the state, and particularly Maine EMS, that we were worth it, and that we were making a difference in the lives of patients,” said Sandy. “Our goal was to become the people in green, not ‘nurse’ or ‘paramedic.’”


The pilots had to adapt their mindset as well, and it did not take them long. “When you think about how capable and smart the nurses and medics are, it would be a mistake not to utilize that,” said Dave. “As aviators and pilots, we would ask the medical crew to help us think things through to ensure the safest possible outcome. We’re all in this together. We all had to learn to manage our risks. We quickly learned to ask everyone on the team: ‘What are you going to do to contribute to the safety of the operation today?’”

In 2017, the Federal Aviation Administration (FAA) instituted training and aviation safety requirements for helicopter air medical crews. “All the training requirements that the FAA specified within that rule, LifeFlight of Maine had been doing formally since at least 2003, and informally before that,” said Dave.

Lori, Sandy, Tom, Dave, and the rest of the team in the early days built what is now an internationally

renowned nonprofit air medical service, transporting more than 37,000 patients over the past 25 years. They also built a culture of excellence within the organization. “We built the protocols for this program off the national standards for excellence,” said Lori. “That’s what Tom and Sandy used as a guide for the development of the program. We became certified [by the Commission on Accreditation of Medical Transport Systems (CAMTS)] within 5 years, and that was unheard of.”

“Tom had three rules: treat everybody like your mother, be all you can be, and feel free to think,” said Sandy. “There are so many areas in Maine that have limited resources, even more so than when we started. LifeFlight brings those resources to people. We worked every day to improve ourselves and our teammates that we were with. We’re here for the citizens of Maine.”

The culture of excellence at LifeFlight is palpable in every single crew member. It is their dedication to their colleagues and to their patients that sets them apart. “I still love LifeFlight,” said Lori. “My kids grew up with it. Sandy’s kids grew up with it. But it’s a young person’s job. Twenty-four years of it was all my body could take.” Lori retired from LifeFlight of Maine in 2022. When asked about what she thinks the future holds, Lori said: “Nothing is off the table for the future of LifeFlight. The key is to get to the people who need us in any way that we can.” 

Henry Frank is the communications director for LifeFlight of Maine.





LIFEFLIGHT OF MAINE

Celebrating 25 Years



1997

Before LifeFlight of Maine was founded, there were only two helipads in the state, one in Rockport and another in Sanford. There were no statewide communications systems and no helicopter maintenance facilities. Maine had no air ambulance service.

September 29, 1998

Operations officially begin in Bangor on September 21, 1998. Eight days later, the phone finally rings with the first transport request. Today, LifeFlight transports a patient on average every 3.5 hours.



October 2008

LifeFlight is awarded "Program of the Year" by the Association of Air Medical Services, a significant recognition of LifeFlight's accomplishments by its peers in North America.

April 2003

The LifeFlight Foundation is created to raise critically needed funds and public support.

April 6, 1998

Governor Angus King announces the formation of LifeFlight of Maine. He remarked: "Maine just got smaller."



December 2004

LifeFlight upgrades its fleet with two AW109 E helicopters, "Echo Mike" and "Charlie Mike."

September 2003

LifeFlight receives full accreditation from the Commission on Accreditation of Medical Transport Systems (CAMTS), a major milestone that few services accomplish within five years.

July 2001

LifeFlight safely transports its 1,000th patient.



May 2015

LifeFlight launches its fixed wing airplane program, allowing it to safely transport patients over greater distances more quickly and in more adverse weather conditions.



March 2022

LifeFlight Aviation Services receives its Part-135 Air Carrier Certificate from the FAA.



March 2017

LifeFlight opens its third helicopter base in Sanford.

December 2022

LifeFlight takes delivery of its third AW109 SP helicopter, completing the upgrade of its fleet to some of the fastest and most advanced civilian helicopters available.



September 2009

LifeFlight safely transports its 10,000th patient.



March 2016

LifeFlight safely transports its 20,000th patient.

September 2020

LifeFlight transports its 30,000th patient.

March 2020

LifeFlight transports the first of more 2,500 patients with suspected or confirmed cases of COVID-19.

September 2023

LifeFlight celebrates 25 years of safely caring for and transporting the people of Maine. It has transported 37,000 patients.



...2030

LifeFlight of Maine continues to be recognized as a premier provider of critical care transport medicine both across the United States and internationally. At its heart, LifeFlight is "of Maine." Its crew live, work, and raise families here. Its patients are neighbors, family, and friends, and it has never forgotten that the people of Maine put their trust in LifeFlight. In return, LifeFlight continues to work tirelessly to be worthy of that trust.

Tom Judge is the founding executive director of LifeFlight of Maine. In October 2023, he stepped back from this role to serve LifeFlight and the people of Maine in other ways.

VISION, INNOVATION, AND LEADERSHIP

by Jesse Ellison

Long before LifeFlight even existed, Tom Judge was a fiddle player in a folk band called Different Shoes. His bandmates included a weaver, a hay farmer cum anthropology professor, and a woman named Pixie who ran a day care center on her farm. With records on Rounder, they toured the country playing folk clubs, coffee houses, and festivals, often with iconic maritime musician Gordon Bok.

Recently, Judge, who still plays the fiddle, was thinking about the role of music, and thinking specifically about a song they'd recorded called "Tree of Life," whose chorus is a refrain that ties stitches to lives. It's about the ties that bind us together in community. For Judge, a long time EMT and paramedic, there is also a "slender thread" we're

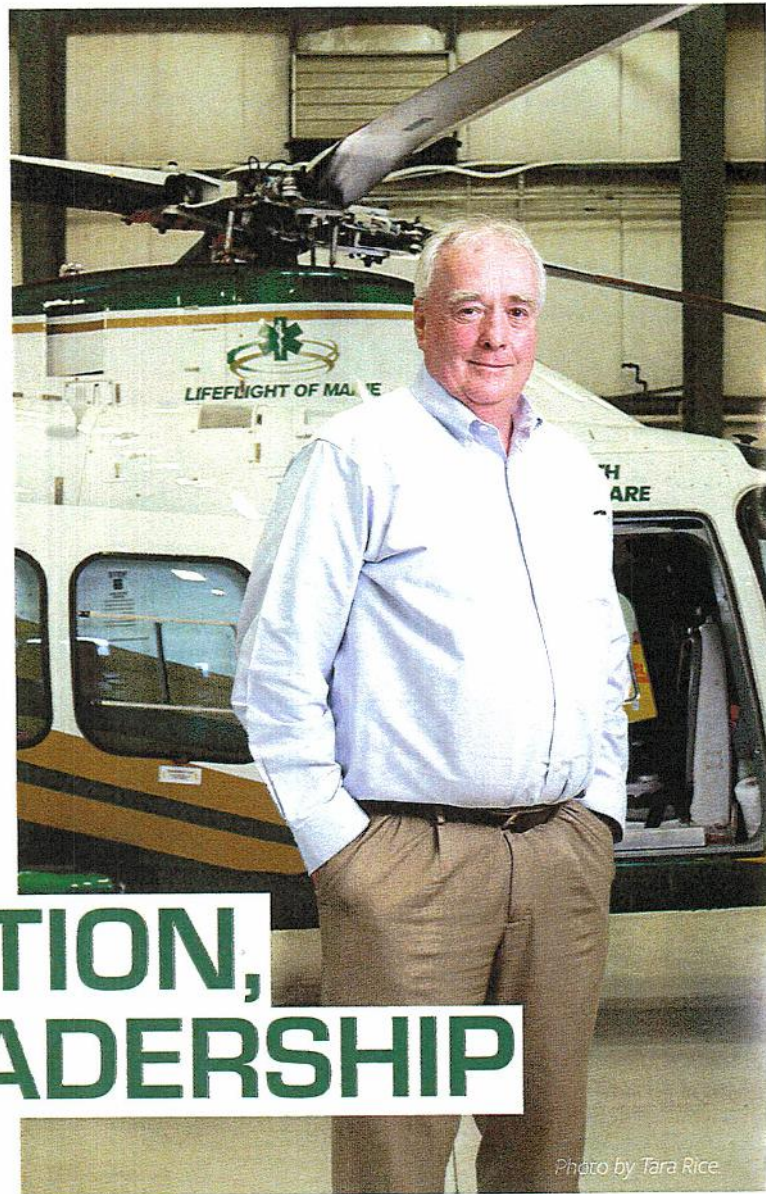


Photo by Tara Rice

all holding onto that connects us as human beings. In an unexpected moment the thread can break. Mending the tear and restitching that thread is the heart of emergency medicine, and LifeFlight is one thread in the tapestry of healthcare in Maine. Judge was thinking about all of this because, as he steps back from twenty-five years of being executive director of Maine's air ambulance service, he was reflecting, in his characteristically both pragmatic and philosophical way, on a career that's included fields as disparate as folk music, progressive early childhood education, writing, carpentry, and emergency medicine. In a way they're all the same thing, he insists — they're all about finding ways to grab ahold of that thread and build and strengthen community.

Inside the News

Weather

Partly sunny
More clouds north with scattered snow showers. Highs 40s-50s. Mostly clear tonight. Lows 20s-30s. See B2

Sports

Allagash Waterway plan to spark debate
The management plan for the Allagash Wilderness Waterway will be the topic of free public hearings. See C6

Style

Ambulance by air to fly statewide



Image: front page of the Bangor Daily News, April 7, 1998

Health care firms unveil \$2 million helicopter service

By A. Jay Higgins
Of the NEWS Staff

AUGUSTA — Two of Maine's largest health care systems embarked Monday on an ambitious plan to provide helicopter ambulance and interhospital transport service throughout the state. Speaking with reporters at the State House, representatives of Eastern Maine Healthcare in Bangor

His was, as you've likely gathered, a fairly non-linear path. In the 1970's Judge was working with adjudicated youth in New Hampshire as part of college. After an experience in which a student of his got stabbed in the face during a camping trip in the mountains and he only knew the barest of emergency first aid, he'd said to himself, "never again will I put myself in that situation," and decided to become a paramedic. After finishing school Judge moved to Maine and started working with Head Start and volunteering for the ambulance and fire department in St. George. Having put himself through college as a carpenter, eventually he started a design build construction company, Harbor Builders, which is still around and thriving in the midcoast area. But then in the 1990s, having already done a stint teaching in the National Ambulance Training Center in Dublin, Ireland, a friend and mentor told him "the world cannot afford for you to build any more houses" and suggested he apply to a public policy fellowship program that would bring him to the UK to work in a research center in Sheffield, the Scottish National Ambulance Service, and the Kings Fund, working on the interface between emergency and primary care in rural areas. "That was when I had to quit all my other jobs," he jokes.

The experience, he says, "opened his world" to examining the "urban/rural paradox" when it comes to emergency health services, and the fact that the economics of the endeavor are upside-down, with the most rural places often in need of the most sophisticated care. When he returned from the Atlantic Fellowship, he was asked to helm a project that would bring air ambulance service to Maine, one that would have to follow in the shadow of a short-lived emergency air program that had ended in tragedy. At the time he took the position, one of the local papers ran an editorial about the new program that argued, "haven't we already lost enough lives?"

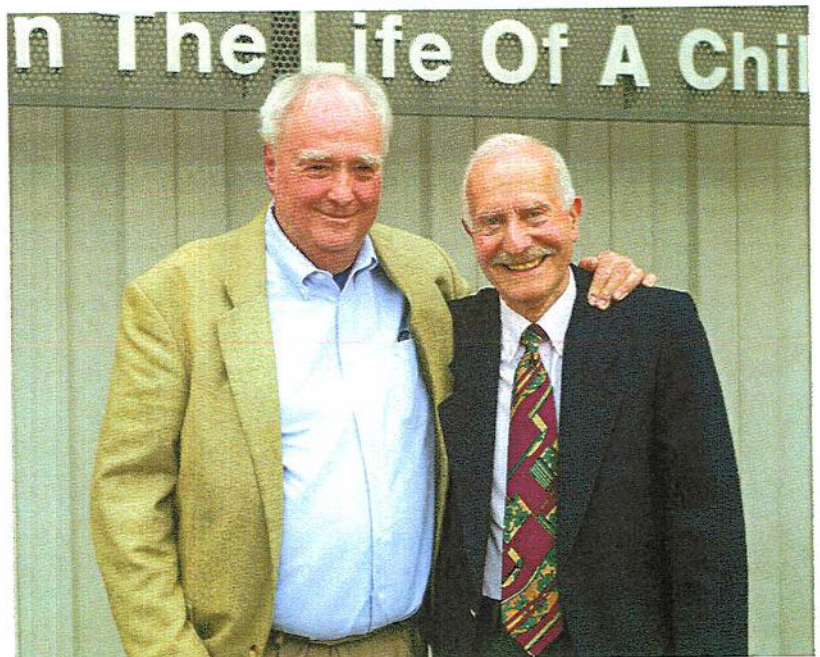


Image: Tom Judge (left) and Norm Dinerman, MD, (right) received the Maine EMS Governor's Award in 2023.


“I used to tell him we can’t save everybody, and Tom’s words would be ‘Why not?’ If there was someone that we might have saved with better resources and better training, then we ought to do that. We needed to go the extra mile.”

- Miles Theeman, former president of Affiliated Healthcare Systems and LifeFlight of Maine Steering Committee member

Since then, of course, Judge, along with Norm Dinerman, MD, founder and medical director of LifeFlight, and some 400 others have built an organization that is consistently ranked among the best in its class, not just nationally but internationally. In a reflective moment recently at the Waterfront Restaurant in Camden, he teared up occasionally talking about LifeFlight’s core culture. “It’s about perseverance, trust, and the gift of service, not heroics,” he says. “Do we do heroic things? Yes, every day, because in the emergency care system we show up when someone needs us.” Meeting people on what is often the worst day of their life, during vulnerable moments in which they’re asked to put their lives into the hands of total strangers requires not just technical excellence but something that’s harder to teach. “As Norm has always said, ‘If my face is the last face you see, if my hand is the last hand you hold, may we be worthy of trust.’”

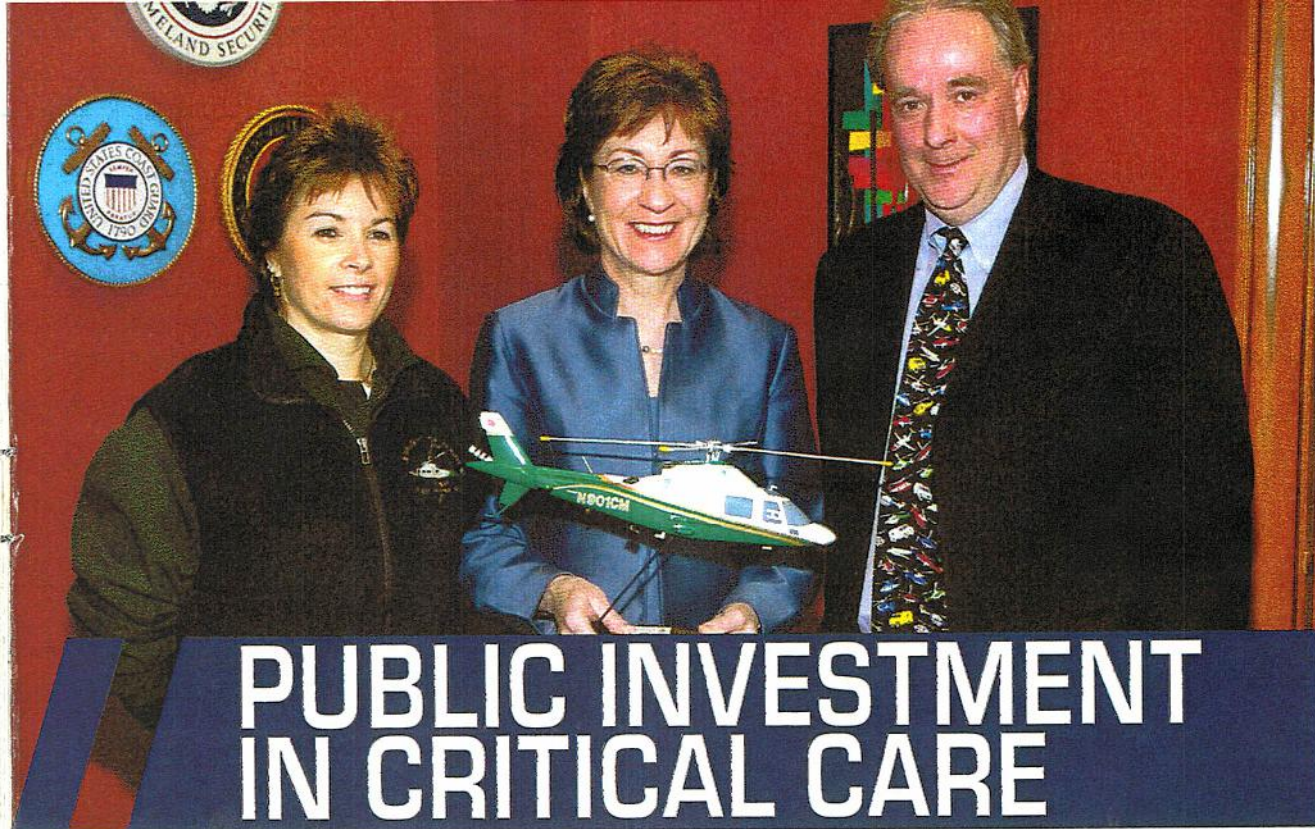
Judge often describes the job that he’s had for a quarter century as taking “a handful of risk and putting it in your pocket. You own that risk until you pass it on at the end of your shift.” The idea of

putting that weight aside was, in a way, hard to let go of, but he doesn’t plan on stepping back completely. He will have more time for music though (he still plays the fiddle regularly), and for travel with his wife Susan, an artist he calls “St. Francis of Assisi-like” in her ability to connect with wild birds and animals. And he’s looking forward to having more time to write and help rebuild LifeFlight’s research group. He hasn’t had much time for either in recent years. Back in 2014 LifeFlight published a paper on airway management that won 2nd prize at an international meeting in Rome which the following year was credited as establishing a new standard of care. During COVID, that paper was cited more than a dozen times in medical journals.

“The universe is not as random as it first appears,” Judge says. “We’re all holding onto the thread. If it’s working in the back of an ambulance, if it’s playing music on a stage, if it is framing a home — it’s all just trying to find the threads that bind us and build community. 

Jesse Ellison is a freelance journalist and contributing editor at Down East Magazine based in midcoast Maine.





PUBLIC INVESTMENT IN CRITICAL CARE

Significant public investment in medical and aviation infrastructure across Maine has made LifeFlight safer and more reliable.

by Henry Frank

A veteran LifeFlight of Maine pilot describes a helicopter as “a machine that’s got 10,000 parts in formation desperately trying to depart from each other.” When all those parts are rotating together, that machine crosses the Maine skies at 175 miles per hour with three crew on board delivering lifesaving, ICU-level care in its cramped fuselage.

As a nonprofit organization, LifeFlight of Maine functions similarly. Its impact is greater than the sum of its parts, but each of those parts is vitally important. The dispatcher sits at a desk in the communications center and answers a phone call in the middle of the night from an ER doctor or a firefighter on scene. The pilot reviews weather data from AWOS stations (automated weather observing system) along the flightpath to assure the safety of flight and files a flight plan. The nurse and paramedic grab their equipment, medications, and units of blood as they all do a quick risk assessment and take off to meet the patient at the point of need.

Before the aircraft even lifts off the ground, a team of highly-skilled aircraft maintenance technicians has ensured the machine is safe to fly. Once

airborne, the pilot relies on radio repeater sites on mountaintops to stay in communication. And of course, the aircraft needs to land safely, so it follows Federal Aviation Administration (FAA) certified approach procedures to a designated helipad or emergency landing zone on one of Maine’s islands.

None of this existed in Maine when LifeFlight was founded in 1998. It had to be built from scratch, and funds needed to be raised. To this nonprofit and the state’s only air ambulance service, the people of Maine are as integral as the engines that make the helicopter rotors whirl — without them, none of this would be possible.

The investment in LifeFlight over the years by the people of Maine is monumental. The LifeFlight Foundation has raised more than \$41 million to date. Millions of dollars in individual donations have allowed LifeFlight to purchase state of the art aircraft and medical technology — including isolettes for transporting infants, heart monitors, infusion pumps, ventilators, ultrasounds, and specialty resuscitation equipment.

Image: Tom Judge, founding executive director of LifeFlight, and flight nurse Lori Metayer with Sen. Susan Collins in 2003.

Of the funds raised by the Foundation, public funding supports aviation infrastructure. In addition to private philanthropy, the people of Maine have contributed more than \$6 million in public dollars through the state legislature. Three bonds were passed that included funding for LifeFlight — the first in 2003, the second in 2009, and the third in 2012. There were two helipads in Maine in 1998. Today, 32 Maine hospitals have helipads. The bonds supported their construction, along with other improvements in Maine's aviation infrastructure, including the installation of 18 AWOS stations, fuel trucks, and communication towers. The funds were also used to purchase patient simulators, which help train LifeFlight and other EMS crews. In addition to the legislature initiated bonds, the US Department of Agriculture (USDA) and the Maine Emergency Management Agency (MEMA) have both made grants to support LifeFlight infrastructure.

Bonds represent public investments in public goods. "The public has made a huge investment in infrastructure to make sure that LifeFlight can serve patients," said Tom Judge, founder and executive director of LifeFlight of Maine. "This makes our service safer and more reliable for patients." It also has made air travel in Maine safer in general, as any aviator can utilize this infrastructure. **The National Weather Service, farmers, and the fishing community also rely on these weather systems LifeFlight has placed around the state.**

In addition to statewide bonds, 265 municipalities in Maine together have contributed more than \$800,000 to LifeFlight through the Foundation's Community Giving Program. In 25 years, LifeFlight has transported a resident of every single community in Maine. From the islands to the mountains and everywhere in between, Maine communities understand the vital role LifeFlight plays, and they continue to invest year after year. Their support helps ensure that the aircraft are as advanced, safe, and fast as possible, and that the medical equipment on board is the best available. LifeFlight truly is "of Maine" in every sense.

Millions of federal dollars have also poured into Maine with LifeFlight's help and at the behest of Maine communities. Anyone landing a plane at Stephen A. Bean Municipal Airport in Rangeley has the benefit of all 4,301 feet of runway. The airport's website states: "In 2018, the Town of Rangeley was awarded an \$11.5 million grant to expand the runway for emergency medical services. The award was through the Federal Aviation Administration's Airport Improvement Program. The 3,201-foot runway was too short to accommodate LifeFlight of Maine's King Air B200 plane." With its expertise and close ties to the FAA, LifeFlight was an instrumental partner to Rangeley in acquiring this grant. Similar projects have been undertaken by the towns of Jackman and Eastport also with funding from those communities, the Maine Department of Transportation, and the FAA.



Image: The original "Charlie Mike" landing at Central Maine Medical Center for the very first time, 1999

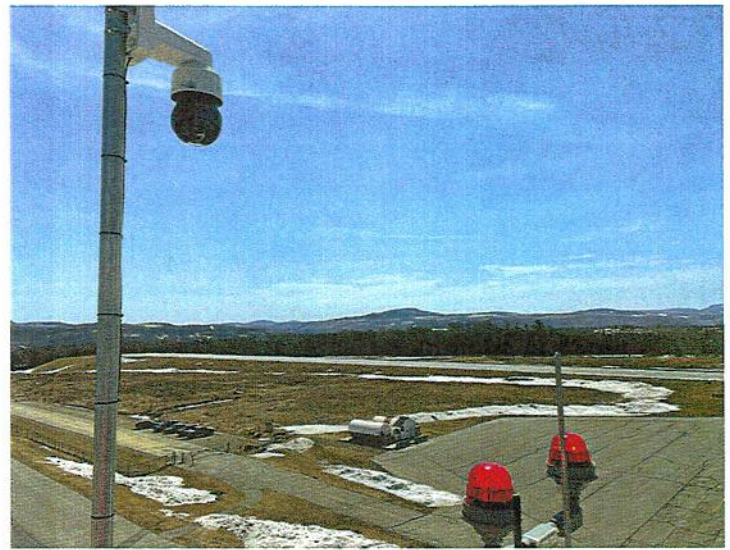
An investment in aviation infrastructure in Maine is an investment in healthcare.

Maine is the most rural state in the country, according to the US Census Bureau, with weather and geography that is as varied as just about anywhere. When a call comes in, the LifeFlight pilot is given only the location and weight of the patient. This is to ensure that the decision to accept the call is entirely based on safety. Can the aircraft safely fly to pick up the patient, can it safely deliver the patient to the receiving hospital, and can it safely return to base? If all three of these questions cannot be answered affirmatively, then LifeFlight is unable to transport the patient.

Every call LifeFlight receives is an emergency. If pilots are uncertain about weather conditions, they will err on the side of caution and remain on the ground. But if their weather data is up-to-the-minute, and if they can see a live feed of the helipad they are flying to, the guesswork recedes.

With funding from MEMA, LifeFlight is installing weather cameras on 35 runways and helipads across Maine. These cameras let the pilots see the current weather conditions and, along with data from AWOS stations, give them a better picture, allowing them to accept calls they would otherwise decline for safety if the weather is unknown. As a result, LifeFlight is able to get more patients to the care they need and make more second chances possible.


LifeFlight's expert aviation team is also working with the FAA to develop precision IFR routes (instrument flight rules) across Maine and SIAPs (special instrument approach procedures), which typically cost tens of thousands of dollars each year to maintain. The FAA, with LifeFlight's assistance, maintains these at no cost to LifeFlight or to the State of Maine. When flying highly advanced aircraft like LifeFlight's AW109 SP helicopters — which LifeFlight was able to acquire through generous private philanthropic support — these IFR routes



A LifeFlight weather camera was installed overlooking the runway at Stephen A. Bean Municipal Airport in Rangeley in March 2023.

and SIAPs allow the aircraft to fly safely through clouds and in more weather conditions. With the ocean to the east and mountains to the west and north, such conditions are simply a fact of life in Maine.

Twenty-five years ago, LifeFlight made a promise to the people of Maine that it would be there for them, when and where needed. The people of Maine continue to invest generously in helping LifeFlight keep that promise. Not-for-profit air medical service works when all the parts are working together, and the people of Maine are the most essential of those parts.

Thanks to generous public investment over the years, LifeFlight is one of the leading air medical providers nationwide and is revered by its peers globally. It is pioneering advances in emergency medicine and aviation infrastructure that one day will benefit every American. The people of Maine understand the importance of ensuring that everyone has access to the healthcare they need, whether they live on main street or down a logging road. As other states work to follow this example, Mainers can proudly say, "we did it first." 

Henry Frank is the communications director for LifeFlight of Maine.

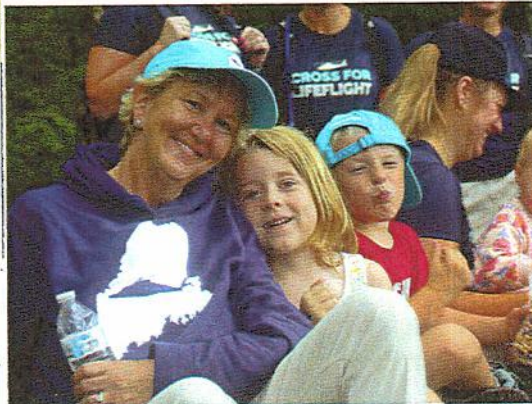
"We got tremendous support for building helipads in rural areas and on the islands. I think the public understood that without this helicopter service they were in trouble. They got it, and they understood that this was important for their communities."

- Peter Chalke, former CEO of Central Maine Healthcare

Powered by the People of Maine



View from a LifeFlight aircraft; photo by flight nurse
Melissa Dufault.



Kate O'Halloran, executive director of The LifeFlight
Foundation, with Sawyer Jacobs and Addie Jacobs.



Rotor wing pilot Kurk Donovan with a young
LifeFlight supporter.



LifeFlight Foundation board member KC Ford.

More than 16,000 donors have contributed over \$41M to LifeFlight to purchase and maintain its fleet of flying ICUs.

by Kate O'Halloran

By any measure, six-year-old Sawyer Jacobs of Mount Vernon is an incredibly special young man. While most six years olds were spending their summer in Maine swimming and eating s'mores, Sawyer, along with his twin sister, Addie, was busy hiking and paddling to raise both awareness and money for LifeFlight of Maine. The Jacobs family raised \$2,124 and joined 18 other LifeFlight patients and family members, who joined forces as part of the inaugural Grateful Patient & Family Team in this summer's Cross for LifeFlight.

That team was led both in spirit and in fundraising by former LifeFlight patient and current Foundation board member KC Ford and her husband, Matt Russ. Matt's father, Joel Russ, turned out to be the most competitive of the bunch, running 125 miles and raising \$8,535. KC lovingly joked that Joel must have been checking the Cross for LifeFlight website every hour on the hour, because she got a text from him within minutes when her fundraising surpassed his. Joel's personal note on his fundraising page reads: "My participation in the Cross for LifeFlight is an outward way for my wife, Carolyn, and me to demonstrate our gratitude to LifeFlight for saving KC's life." As of mid-September, the Grateful Patient & Family Team raised more than \$50,000 and crossed 1,325 miles.


We often say that although the reason and situation of every LifeFlight transport is different, there is one thing that every patient has in common: when they woke up that morning, they did not imagine that their life would soon depend on three total strangers in green flight suits.

Ensuring access to critical care across Maine is what unites the more than 16,000 donors who have supported LifeFlight since the Foundation was created in 2003. Together, the people of Maine have contributed a staggering \$41 million to support LifeFlight. Those gifts come from every county and community in the state, and each one represents something incredibly important. At its inception, LifeFlight made a promise to Maine to be there when needed. Each contribution LifeFlight receives represents the other side of that commitment — acknowledgement from the people of Maine that they understand and appreciate the vitally important and unique role that LifeFlight plays as a connector in the state's increasingly fragile healthcare system.

LifeFlight was designed as a system to serve the people of Maine in the safest, most affordable, most reliable, and most professional way possible, and the Foundation was an integral part of the plan.

The path to long term sustainability for LifeFlight of Maine required operations to be self-sustaining based on reimbursement from transport — LifeFlight is an in-network provider with most major insurers in Maine — but continually maintaining the aircraft, enhancing the fleet, upgrading medical equipment, building necessary aviation infrastructure, and providing education to partners on the ground required significant capital expenditures. The Foundation was created to raise that capital and was intentionally designed so that **donor dollars go directly toward those critical investments**. Like LifeFlight of Maine, the Foundation has operated leanly for the past two decades, with strict attention paid to minimizing costs while raising the necessary funds.

Those funds come from all across Maine. The fact that LifeFlight is truly “of Maine” is perhaps most strikingly evidenced by the Foundation’s Community Giving Program. A request for support is made every fall to each municipality in the state. The request includes a suggested donation based on population: a \$1.00 per capita rate for towns that have up to 1,000 residents; a \$0.50 per capita rate for those with up to 2,000 residents; and a \$0.25 per capita rate for all others, with asks typically capped at \$2,000. Some communities give generously more than they are asked. Since 2006, 266 communities have contributed a total of \$840,000.

We are reminded daily of both the critical role LifeFlight plays in Maine communities and the extraordinary generosity LifeFlight receives. Many gifts arrive with a handwritten note from a patient, or a family member, or a friend who shares a little bit about their connection to LifeFlight. The stories are often deeply personal, the gratitude or loss intensely raw. Each gift serves as a tangible sign that after 25 years, LifeFlight has truly become an indelible part of what makes Maine so special. 

*Thank you, Maine!
We truly could not do this work
without you.*

THE LIFEFLIGHT FOUNDATION

Dispatches is a publication of The LifeFlight Foundation, which provides fundraising and public relations support to LifeFlight of Maine, the state’s only air ambulance service.

The LifeFlight Foundation is a nonprofit, tax-exempt organization under Section 501 (c)(3) of the Internal Revenue Service Tax Code. It is governed by an elected board of trustees who represent medical, business, legal, and educational fields throughout the state. The Foundation also supports the development and funding of Maine’s major air medical needs, such as trauma training statewide; construction of hospital helipads; and installation of weather reporting, navigational, and communications systems.

The Foundation’s office is located in Augusta, Maine. You can reach us at 207-230-7092 or by email at info@lifeflightmaine.org.

Donations are tax-deductible.

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LIFEFLIGHT OF MAINE

LifeFlight of Maine is a nonprofit, statewide critical care medical transport service jointly owned by Northern Light Health and Central Maine Healthcare Corporation. LifeFlight’s airplane and five helicopters are based in Bangor, Lewiston, and Sanford. The aircraft are operated by LifeFlight Aviation Services and dispatched by MedComm. Along with dedicated ground ambulances, these vehicles cover the entire state and offshore islands. LifeFlight complements and supports the work of local EMS and hospital personnel in caring for the critically ill or injured. Each base is staffed by a highly qualified team of pilots, mechanics, nurses, and paramedics. More than 37,000 patients have been safely transported since LifeFlight’s founding in 1998. LifeFlight was fully re-accredited by the Commission on Accreditation of Medical Transport Systems in 2022.

As a nonprofit,
LifeFlight of Maine relies on your support.
Help us make more second chances possible.
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