

Maryland EMS News

For All Emergency Medical Clinicians

Vol. 50 No. 3

March 2024

MIEMSS.org Reimagined...

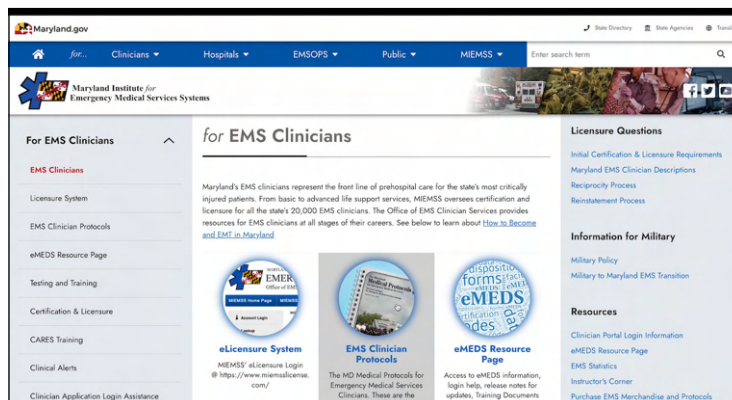
ON FEBRUARY 26, 2024, MIEMSS launched its reimagined website, www.MIEMSS.org. This new website is much more than a fresh skin – it is a redesign of the structure for how information is organized. The website aims to put important content at the fingertips of the site’s visitors – you – by categorizing the content by its intended audience rather than which department oversees the program or information.

This site opens on a homepage similar to that of its predecessor, featuring announcements and quick links for accessing certain high-demand content. However, the new incarnation includes a “slider” that features scrolling video, announcements, upcoming events, and other current information of general interest.

Digging in further, you will notice “for...” in the top left corner of the screen leading the navigation menu. This directs the website user to information categories that appear in the navigation bar across the top of the screen based on their intended audience: “Clinicians”, “Hospitals”, “EM-SOPS”, and “Public”. The last category, “MIEMSS”, features content for MIEMSS staff and contractors, as well as in-depth information about the agency, its departments, and the pro-

grams that they support.

More obvious changes will become apparent when you select one of these top-level links. For example, clicking on “Clinicians” will reveal a short description of what information can be found there “for clinicians”.



Beneath, you will see circular graphics; these serve as visually appealing quick links to popular content on the website (NOTE: They also mirror the second-level menu on the left of the screen).

Scrolling past the graphic quick links on each page, you will find other information and links relevant to the content area selected. On the right-hand pane of each page you will find quick links specific to the content area selected. Please note that if you are using a mobile device, the menu in the left-hand pane collapses into a drop-down menu, as the website rearranges itself into a mobile-friendly singular column. The circular graphics may be

used in their place for ease of scrolling and selecting the desired links.

In summary, each of the top-level links features a secondary menu, content area, and right-hand content panes with links relevant to the content of that particular page. (For example, the “Clinicians” right-hand pane includes “Licensure Questions” as a resource group, while the “Hospitals” right-hand pane features relevant links such as “EMS Protocols”, “Hospital Alerts”, “CHRS”, and “FRED”, etc.) The following information provides further details of each of the top-level menu categories and their respective content areas.

■ The **Clinicians** content area is designed for Maryland’s EMS clinicians and represents the front line of prehospital care for the state’s most critically injured patients. From basic to advanced life support services, MIEMSS oversees certification and licensure for all of the state’s 20,000 EMS clinicians. The Office of EMS Clinician Services provides resources for EMS clinicians at all stages of their careers and offers guidance for learning how to become an EMT in Maryland. This area includes quick access to the eLicensure System, eMEDS®, CARES Training, Clinical Alerts,

See *WEBSITE* page 18

CALENDAR

MARCH

- **7-9:** *Miltenberger Emergency Services Seminar.* Rocky Gap Casino Resort, Flintstone, MD.
- **23:** *Maryland Public Fire and Life Safety Educators Seminar.* MFRI, College Park, MD.
- **29:** *Deadline for Maryland Stars of Life and Right Care When It Counts Awards nominations.*

APRIL

- **5-6:** *Executive Fire Officer and Leadership Symposium.* National Emergency Training Center, Emmitsburg, MD.

MAY

- **2-3:** *American College of Surgeons Point Counterpoint Conference.* Baltimore Marriott Inner Harbor at Camden Yards, Baltimore, MD.
- **13:** *Maryland Highway Safety Summit.* Hilton Baltimore BWI Hotel, Linthicum Heights, MD.
- **19-25:** *National EMS Week.*
- **23:** *National Stop the Bleed Day.*

JUNE

- **2:** *Maryland Fire-Rescue Services Annual Memorial Service.* Annapolis, MD.
- **15-20:** *132nd Maryland State Firemen's Association Annual Convention & Conference.* Convention Center, Ocean City, MD.

SEPTEMBER

- **20:** *Topics in Trauma.* Tidal-Health Peninsula Regional, Salisbury, MD.

EMS News Digest

- **Local First Responders, Aviation Medics, Work with Shock Trauma Go Team to Save Man's Life** (*Cumberland Times-News*). An intense, logistically challenging car accident on U.S. Route 220 in Rawlings on February 5 took tremendous collaboration and communication among emergency dispatchers, volunteer fire personnel, state police, trauma and hospital experts and highly trained medical aviation crews. But it was the initial survey of the scene by local first responders who recognized the need to call for more help that got the ball rolling. Read more: https://www.times-news.com/news/local-first-responders-aviation-medics-work-with-shock-trauma-go-team/article_9108d570-c641-11ee-856c-d3ca4818e64d.html?fbclid=IwAR2051U-2R-S3zs5Ep14WQbwca0jXXZ-r5FDQJ2Sn6Sg2gPOLmj62UEv_dWA
- **Local Emergency Medical Partners Host 28th Year of Winterfest**

(*Talbot County Government*). Emergency medical professionals from around the state (and surrounding states) descended upon Easton, Maryland, February 2-4, 2024, for the 28th annual Winterfest EMS Conference. Read more: <https://talbotcountymd.gov/press-releases/local-emergency-medical-partners-host-28th-year-of-winterfest>

■ **RACSTC Advocates for Increased Support at Legislative Assembly** (*Fox 45 Baltimore*). More than 60 trauma doctors, nurses, clinicians, and supporters gathered recently at the Maryland Legislative Complex in Annapolis to raise awareness about the lifesaving mission and statewide impact of the world-renowned R Adams Cowley Shock Trauma Center (STC) at the University Maryland Medical Center in Baltimore. Read more: <https://foxbaltimore.com/news/local/marylands-shock-trauma-center-advocates-for-increased-support-at-legislative-assembly>. ■

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MARYLAND STATE POLICE AVIATION COMMAND

MSPAC Deploys GO-TEAM, Whole Blood to Western Maryland for Patient Heavily Entrapped Under Tractor Trailer



IN WHAT PROVED A BUSY NIGHT for Maryland State Police Aviation Command (MSPAC), Trooper 5 was requested to the scene of a car vs. tractor trailer with heavy entrapment on McMullen Highway in Rawlins, Allegany County, on February 5, 2024. Recognizing the severity of injuries and extensive entrapment, the R Adams Cowley Shock Trauma Center (RACSTC) GO-TEAM was deployed by Trooper 1 to the scene. Whole blood was administered on scene, with additional airway management before transporting the patient and GO-TEAM to RACSTC in Baltimore.

This was only one of three critically injured patients that Trooper 1 flew that night, which included a fall patient in Kent County and ended with another tractor trailer collision with entrapment on I-95 in Harford County early this morning.

MSPAC will continue to bring rapid, high quality care and specialized services across Maryland and our region, no matter where you live. ■

Left: On scene in Allegany County. [Photo: MSPAC]

Below left and right: On scene in Harford County. [Photos: MSPAC]



R ADAMS COWLEY SHOCK TRAUMA CENTER**Training and Simulation**

MIEMSS carries out specially designed scenarios at the R Adams Cowley Shock Trauma Center (RACSTC) Simulation Center for staff to complete annual ALS Refreshers and review high-risk, low-volume concerns in their patient populations. Designed by State EMS Medical Director Dr. Tim Chizmar, MD, FACEP, FAEMS, and RACSTC Training and Simulation Manager Benjamin Neustein, MAT, Paramedic, CHSOS, this past quarter's refresher consisted of a Structural Collapse Scenario with crush injury and COVID-19-positive patient suffering from an acute onset of a pulmonary embolism. ■

[Photo: RACSTC]



PLEASE CONSIDER PARTNERING with the R Adams Cowley Shock Trauma Center (RACSTC) in its mission to teach every person in Maryland the potentially lifesaving skills required to stop bleeding. RACSTC provides free Stop the Bleed classes to the public and values your assistance in teaching these skills. For further information, please contact:

Katie Meyers, EMT-B

Stop the Bleed Project Coordinator
Center for Injury Prevention & Policy
R Adams Cowley Shock Trauma Center
(410) 328-4042(O) | (410) 935-9221(c) | kmeyers@umm.edu

Upcoming STOP THE BLEED Classes**March**

- 3/5/24 (1700–1800) | Public Class | Annapolis, MD
- 3/25/24 (1300–1400) | Public Class | Shock Trauma T1S11

April

- 4/15/24 (1000–1100) | Public Class | Shock Trauma T1S11

For further information, please visit www.umm.edu/stopthebleed

Save the Date!

National Stop the Bleed Day – May 23, 2024



WINTERFEST EMS CONFERENCE

"PRACTICE MAKES PERFECT" INTERACTIVE PEDIATRIC TRAUMA WORKSHOP
~ FEBRUARY 2, 2024 | CHESAPEAKE COLLEGE | WYE MILLS, MD~



"THIS IS ALL KINDS of fun, and a safe place to deal with the kinds of situations that none of us want to have to deal with in real life – the challenging stuff that gives us all extra anxiety."

DR. JENNIFER ANDERS
ASSOCIATE STATE EMS MEDICAL DIRECTOR FOR PEDIATRICS



Scan the QR code to view video highlights of "Practice Makes Perfect"





WINTERFEST EMS CONFERENCE

EMT 12-HOUR SKILLS REFRESHER

~ FEBRUARY 2, 2024 | EASTON ELKS LODGE #1622 | EASTON, MD~



"ALL OF THE instructors are very knowledgeable. If we have questions, they take the time to explain it to us, give us everything we need, and move us along."

BERNARD WESOLOWSKI

BALTIMORE COUNTY 9-1-1
COMMUNICATIONS CENTER





WINTERFEST EMS CONFERENCE

WINTERFEST EMS CONFERENCE

~ FEBRUARY 3-4, 2024 | EASTON HIGH SCHOOL | EASTON, MD ~



▲ MIEMSS Executive Director Dr. Ted Delbridge credited Maryland's nearly 20,000 EMS clinicians for being "who makes the EMS system go."





WINTERFEST EMS CONFERENCE

WINTERFEST EMS CONFERENCE

~ FEBRUARY 3-4, 2024 | EASTON HIGH SCHOOL | EASTON, MD~



◀ State EMS Medical Director Dr. Tim Chizmar (left) and Associate State EMS Medical Director for Pediatrics Dr. Jen Anders discussed the continuing evolution of and science behind Maryland's Trauma Decision Tree.



▲ MIEMSS Director of Trauma & Specialty Care Programs Elizabeth Wooster reviews a host of "Unusual Pediatric & Adult Trauma Cases – Injuries Disproportionate to Mechanism."



▲ R Adams Cowley Shock Trauma Center (RACSTC) Endovascular Surgery Chief Dr. Rishi Kundi discussed how the RACSTC Go-Team brings the Shock Trauma to patients in the field.





WINTERFEST EMS CONFERENCE

WINTERFEST EMS CONFERENCE

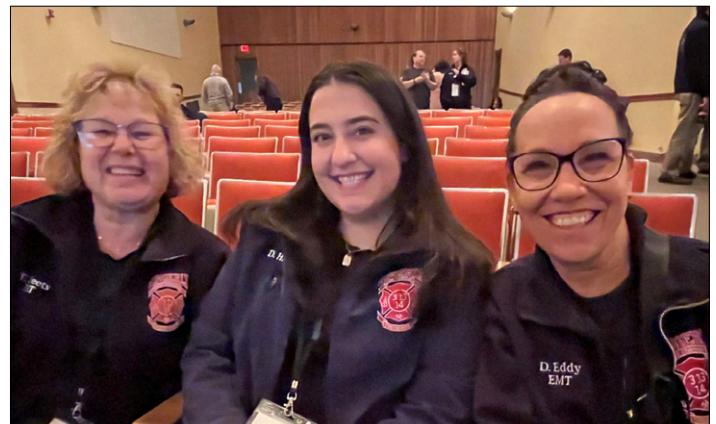
~ FEBRUARY 3-4, 2024 | EASTON HIGH SCHOOL | EASTON, MD ~



▲ UM Shore Regional Health SAFE Coordinator Shannon Temple, BSN, RN, CEN, FNE-A/P, helped EMS clinicians to recognize the many forms of human trafficking.



▲ UM Shore Regional Health Base Station Medical Director Dr. Kevin Pearl addressed the effects of alcohol and withdrawal in the prehospital care setting.





WINTERFEST EMS CONFERENCE

WINTERFEST EMS CONFERENCE

~ FEBRUARY 3-4, 2024 | EASTON HIGH SCHOOL | EASTON, MD ~

**Scan the
QR code
below to
watch more
video
highlights
from
Winterfest
EMS
2024**



▲ Janet Bahouth, D.Sc., Director of Crash CORE, offered a mechanical engineer's-eye view of crash scene assessment.



UM Upper Chesapeake Health Opens Aberdeen Medical Center and Bel Air Patient Bed Tower; Harford Memorial Hospital Closes

UNIVERSITY OF MARYLAND UPPER CHESAPEAKE HEALTH (UM UCH), a member organization of the University of Maryland Medical System (UMMS), today took the next steps in transforming health care delivery in Harford County. At 7 a.m., UM Upper Chesapeake Medical Center Aberdeen and the Patient Bed Tower at UM Upper Chesapeake Medical Center in Bel Air welcomed patients to their new state-of-the-art facilities.

At the same time, UM Harford Memorial Hospital in Havre de Grace ended providing care to patients after serving the community for 112 years. Patients were transferred to the Bel Air or Aberdeen campuses.

"Today is an important day in the history of health care in Harford County and northeastern Maryland," said Elizabeth Wise, FACHE, MSN, MBA, President and Chief Executive Officer UM UCH. "The opening of the Medical Center in Aberdeen and the Patient Bed Tower in Bel Air demonstrate University of Maryland Upper Chesapeake Health's commitment to the right care, at the right time, at the right location. While it's sad to close UM Harford Memorial Hospital to patient care, we know the new, state-of-the-art facilities in Aberdeen and Bel Air will ensure our community receives the most advanced health services."

Thirty-six patients were transferred by ambulance from UM Harford Memorial Hospital. Nineteen patients went to UM Upper Chesapeake Medical Center in Bel Air. Twelve patients in the UM Harford Memorial Hospital Behavioral Health Department were transferred to the Behavioral Health Pavilion in Aber-

deen. Five patients were transferred to the Emergency Department at Aberdeen. The patient transfers began at 7:28 AM and were completed at 1:40 PM. "Today marks a pivotal moment for the University of Maryland Upper Chesapeake Health and for our System, and reflects several years of strategic planning and conversations with community leaders, members of the faith-based community, first responders, thought leaders and elected officials," said Mohan Suntha, MD, MBA, President and CEO of UMMS. "This is a transformational effort at re-shaping the future of health care delivery in Harford County."

The 130,000-square foot UM Upper Chesapeake Medical Center Aberdeen, located just six miles from the Harford Memorial Hospital campus, provides a cutting-edge Emergency Department, observation care area and a helipad for transfers to the University of Maryland Medical Center for patients who need critical advanced

care. Features include a modern telehealth system in each patient room for better monitoring and specialty care consultation; select Emergency Department rooms designed to geriatric standards with padded floors, larger fonts on signs, warm colors, brighter lighting and located directly adjacent to the nurses' station; large conference rooms available for community use; LED lighting with automatic dimming controls; and a helipad for quick transfers.

Also on site are a Behavioral Health Pavilion providing both inpatient and outpatient care and a 93,000-square foot Health and Wellness Center offering a range of clinical services including primary care, endocrinology and diabetes care, cardiology, hematology and oncology, infusion services, wound care, orthopedics, physical therapy and rehabilitation. Imaging and lab services will

See UM UCH page 18



American College of Surgeons

Point Counterpoint Conference

Register NOW

May 2nd and 3rd

Baltimore Marriott, Inner Harbor at Camden Yards



<https://mdcot.com/point-counterpoint-uli-2024/>

<https://mdcot.com>





EMS FOR CHILDREN

Coming Soon: Revised Maryland Pediatric Reference Card

Coming Soon – Sneak Preview!

The image displays a preview of several key components of the revised Maryland Pediatric Reference Card. These include:

- Pain Rating Scale (FLACC):** A scale for infants and young children with a visual representation of a face showing different expressions of pain.
- Trauma Decision Tree:** A flowchart for assessing and managing pediatric trauma patients.
- Pediatric Glasgow Coma Scale:** A scale for assessing a child's level of consciousness.
- Maryland Pediatric Reference (Vital Signs):** A table of normal vital signs for various age groups and weights.
- Acetaminophen Dosing:** A table providing dosing information for children.
- Pediatric High Performance CPR (NPOCR):** A flowchart for pediatric resuscitation.
- Pediatric Assessment (Initial Impression):** A comprehensive checklist for initial pediatric assessment.

COMING SOON! The Maryland Pediatric Reference Card has been revised and is off to the printer! This updated pocket card includes the following NEW content:

- Pain Scale (FLACC) for Infants And Young Children
- Acetaminophen Dosing
- Pediatric Highlights from the GPC
- Revised Trauma Decision Tree
- Revised Pediatric HP CPR Algorithm
- Simplified Epinephrine Dosing
- and more!

This resource will be made available to the Pediatric EMS Champions for jurisdictional distribution. To learn more about the new 2024 Pediatric Reference Card or the Pediatric EMS Champions, please email pepp@miems.org.



EMS FOR CHILDREN

New Study Shows Alarming Rates of Children Traveling Unrestrained in Ride-Share Vehicles

A STUDY JUST PUBLISHED by the National Highway Traffic Safety Administration (NHTSA) shows that about half of children under age 12 riding in taxis and other ride-share vehicles were unrestrained. This is particularly alarming as the U.S. average for children riding unrestrained in any vehicle is much lower – around 10%.

It is well-known that car seat or booster seat use reduces the risk of death and injury in motor vehicle crashes. Kahane (2015) reported that car seats reduce the risk of fatal injury by 59 – 71%, with car seats for younger children especially protective. However, children continue to ride unbuckled in car seats, boosters, or seat belts. NHTSA data shows that in 2020, 181 children age 4 and younger died in crashes; of those for whom restraint use was known, 31% were unrestrained. Of the 207 fatalities in 4-7-year-old children, 43% were unrestrained.

This study also compared car seat use (8.1%) and seat belt use (41%) rates in ride-share vehicles by age group. Given the age distribution of the more than 4,000 children observed in almost 3,000 cars, this indicates a large number of children were improperly restrained (i.e., using a seat belt when they needed a car seat). The study found a significant correlation between adult seat belt use and child restraint use; when all adults were buckled, 89.3% of children were likewise restrained, while only 17.1% of the children were restrained when not all adults were buckled.

While this study did not ask parents why they did or didn't buckle up



their children in ride-share cars, the data provides some insight. For instance, in an effort to identify if carrying a bulky car seat was a barrier to its use in a ride-share vehicle, researchers compared the restraint use rates when parents provided and utilized their own car seat versus when the ride-share vehicle provided one. The study found no significant differences in restraint use between the groups.

The study found notable associations with destination. Children traveling to or from airports in ride-share vehicles were significantly more likely to be restrained (60%) than to or from other sites (43.2%), such as family recreation events.

The study's authors speculate that state child passenger safety laws may influence low car seat, booster, and seat belt use among children traveling in ride-shares. For instance, while Maryland exempts taxis from its law requiring car seat or booster seat use for any child under age 8, privately

owned ride-share vehicles are NOT exempt. This means that the ride-share driver would receive a ticket for children not properly restrained. However, informal communication with parents suggests that few know this distinction.

Regardless, riding in ANY vehicle while unrestrained greatly increases one's risk of injury or death, and all safety messaging needs to be very clear on this! The CPS & Occupant Protection Healthcare Projects at the Maryland Institute for Emergency Medical Services Systems offers free child passenger safety materials. To obtain these materials, or for more information, email cps@miemss.org.

Reference

■ DeLeonardis, D., Levi, S., Benedick, A., Eisenhower, E., Ferg, R., & Petraglia, E. (2024, January). Child Passenger Safety Perceptions and Practices in Ride-Sharing Vehicles. (Report # DOT HS 813 532). National Highway Traffic Safety Administration. ■

Maryland Poison Center Celebrates National Poison Prevention Week 2024

By Emily Paterson, MPH, CHES®

SINCE 1962, National Poison Prevention Week has been celebrated across the country by presidential decree during the third full week of March. This year, National Poison Prevention Week is observed March 17-23. The theme this year is “When the unexpected happens, we’re here for you 24/7.”

The Maryland Poison Center (MPC) is a 24-hour telephone service that offers free, fast, and confidential expert advice about poisonings and overdoses. It has provided poisoning treatment advice, education, and prevention services to individuals living across the state of Maryland since 1972, and is certified by the American Association of Poison Control Centers (AAPCC) as a regional Poison Center.

Each year, over 2 million human exposures are reported to the nation’s 55 Poison Centers. The MPC managed 30,000 of those human exposure cases in 2022. A majority of these cases could have been avoided. Although approximately one-third of the calls received by the MPC involve children younger than 6-years-old, teens, adults, and older adults are also at risk for poisoning.

Although Poison Center education and poison prevention efforts happen 365 days a year, National Poison Prevention Week is a time to raise awareness about the dangers of poisonings and highlight the steps everyone can take to prevent them.

Join the MPC in using this week to encourage the public to take steps to prevent poisonings and to be prepared if a poisoning occurs:

- Program the Poison Center phone

March 17-23, 2024

NATIONAL POISON PREVENTION WEEK

We're Here for You 24/7

Maryland Poison Center
UNIVERSITY OF MARYLAND SCHOOL OF PHARMACY

POISON HELP
1-800-222-1222

#NPPW24

number in your mobile phone. Your local Poison Center can be reached anywhere in the United States by dialing 1-800-222-1222.

- Store poisons up, away, and out of sight.
- Read and follow directions on the label before using medicines and household products.
- Keep all household products and medicines in their original labeled containers. Never put chemicals or cleaning products in empty food or drink containers.

Visit the MPC’s website at md-poison.com for more information regarding National Poison Prevention

Week, and find information on ordering educational materials and accessing downloadable information. Up-to-date information and poison prevention tips can also be found on the MPC’s social media accounts: Facebook (@MarylandPoisonCenter), X (@MDPoisonCtr), and Instagram (@MDPoisonCenter). ■

Emily Paterson, MPH, CHES®, is Public Education and Communications Manager for the Maryland Poison Center.

Manual on Uniform Traffic Control Devices for Streets and Highways, 11th Ed., Now Available

THE UNITED STATES DEPARTMENT OF TRANSPORTATION has released the 11th Edition of the Manual on Uniform Traffic Control Devices for Streets and Highways (MUTCD) dated December 2023. The MUTCD defines the standards used by road managers nationwide to install and maintain traffic control devices on all streets, highways, pedestrian and bicycle facilities, and site roadways open to public travel. It also sets standard for road worker safety, which includes public safety personnel operating on roadways. States have two years to adopt the MUTCD.

Two sections of the MUTCD directly affect public safety operations. Section 6O.05 *Use of Emergency-Vehicle Lighting*, which address the use of emergency vehicle for traffic blocking, has no changes in the 11th edition of the MUTCD. However, Section 6C.05 *High Visibility Safety Apparel* has changes that may affect policy and future safety vest purchasing.

For daytime and nighttime activity, all workers, including emergency responders, within the right-of-way who are within the traffic control (TTC) zone shall wear high-visibility safety apparel that meets the Performance Class 2 or 3 requirements of the ANSI/ISEA 107-2015 publication, entitled "American National Standard for High-Visibility Safety Apparel and Headwear, or equivalent revisions". (MUTCD Section 6C.05.01). There is an exemption (Section 6C.05.04) for "emergency and incident responders and police" for previously purchased safety equipment bought under the ANSI/ISEA 107-2006 version, which may continue to be used until they become unserviceable.

The 11th edition of the MUTCD makes it abundantly clear that that if you are working on a roadway or right-of-way you must wear a high-visibility safety vest that meets ANSI/ISEA 107-2006 or more current version of the standard unless you are in "direct exposure" to fire or hazardous material operations.

For law enforcement, the MUTCD clearly states in Section 6C.05.03, "When uniformed law enforcement personnel are used to direct traffic, to investigate crashes, or to handle lane closures, obstructed roadways, and disasters, high-visibility safety apparel as described in this Section shall be worn by the law enforcement personnel."

For fire, hazmat, EMS, and any other response personnel, the MUTCD

clearly states in Section 6C.05.05, "Except as provided in Paragraph 6 of this Section, firefighters or other emergency responders working within the right-of-way shall wear high-visibility safety apparel as described in this Section." Paragraph 6 states, "Firefighters or other emergency responders working within the right-of-way and engaged in emergency operations that directly expose to flame, fire, heat, and/or hazardous materials may wear retroreflective turnout gear that is specified and regulated by other organizations, such as the National Fire Protection Association."

The 11th Edition of the MUTCD can be found online at https://mutcd.fhwa.dot.gov/kno_11th_Edition.htm. ■

NFPA 1900 is Here

THE NATIONAL FIRE PROTECTION ASSOCIATION (NFPA) has released a new standard, NFPA 1900, *Standard for Aircraft Rescue and Firefighting Vehicles, Automotive Fire Apparatus, Wildland Fire Apparatus, and Automotive Ambulances*. This standard represents an effort by NFPA to reduce the number of standards by consolidating standards of similar subjects' matters into one overarching standard. The new NFPA 1900 standard replaces four (4) previously separate standards:

- NFPA 1901, Standard for Automotive Fire Apparatus
- NFPA 1906, Standard for Wildland Fire Apparatus
- NFPA 1917, Standard for Automotive Ambulances

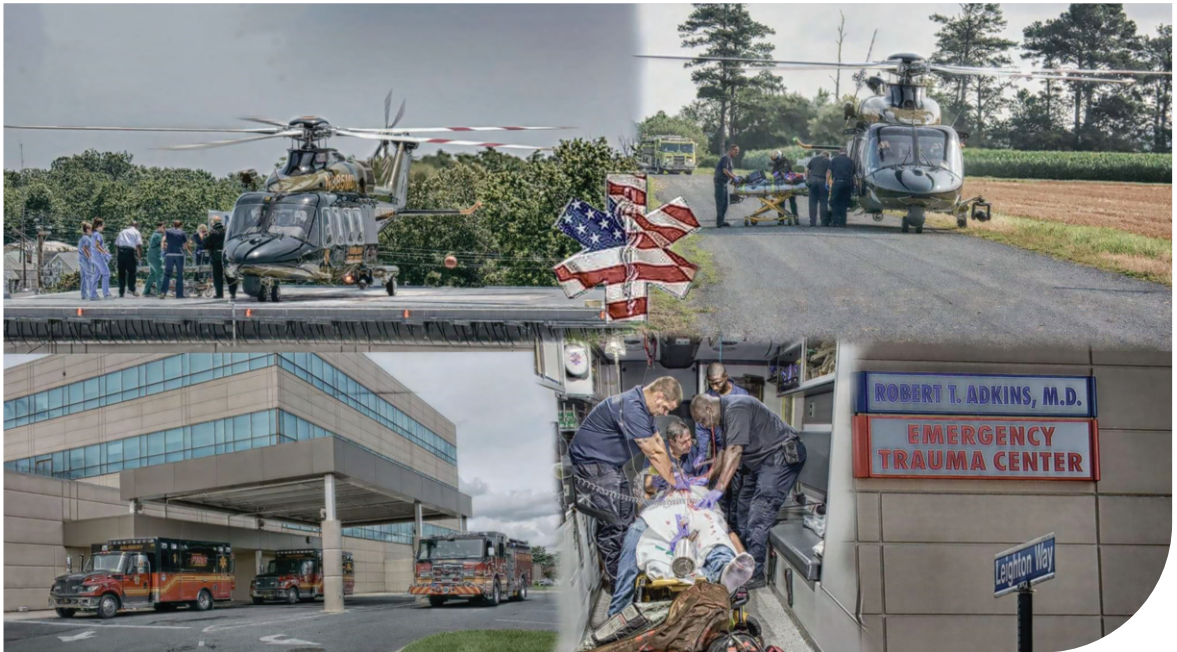
■ NFPA 414, Standard for Aircraft Rescue and Fire-Fighting Vehicles.

According to the NFPA's website, NFPA 1900 "defines the minimum requirements for the design, performance, acceptance criteria, and testing of new automotive fire apparatus and trailers, wildland apparatus, aircraft rescue and firefighting apparatus, and automotive and remounted ambulances."

Although NFPA Standards are not regulatory unless referenced in a jurisdiction's legislation or regulations, they are considered a consensus standard and will have an impact on the industry. NFPA 1900 is available at <https://www.nfpa.org/codes-and-standards/1/9/0/1900?l=32>, or search "NFPA 1900" online. ■



Topics in Trauma



2024 Trauma Conference

September 20, 2024
TidalHealth Peninsula Regional
Salisbury, Md.

More information coming soon



For more information:
Kathy at 410-543-7328
Shari at 410-912-6956
Cindy at 410-912-2844



MARYLAND-NATIONAL CAPITAL REGION EMERGENCY RESPONSE SYSTEM

Algerian Delegation Explores MDERS Operations in Collaborative Exchange

IN NOVEMBER 2023, the World Trade Center Institute (WTCI) presented the Maryland-National Capital Region Emergency Response System (MDERS) with a unique opportunity to meet with a delegation from Algeria. The Algerian delegation participated in the United States Department of State's flagship International Visitor Leadership Program (IVLP). The program theme for the visiting group was "Disaster Preparedness, Emergency Management, and Volunteerism".

Handpicked by the United States Embassy in Algeria, all participants in the program traveled to the U.S. with the aim of learning best practices in their respective fields. The Algerian delegation expressed a specific interest in exploring topics such as the Incident Command System (ICS), Emergency Medical Services (EMS), and various training and exercise programs.

The MDERS staff warmly welcomed the Algerian delegation upon their arrival at the Prince George's County Public Safety Firearms Range. Following the introductions, Acting Co-Director Lauren Collins and Senior Emergency Response Specialist Hannah Thomas presented the delegation with a comprehensive overview of MDERS capabilities. The presentation delved into MDERS' involvement in the Urban Area Security Initiative (UASI) grant process and highlighted MDERS' robust training and exercise programs. Representatives from the Prince George's County Police Department (PGPD), including Major Charles Magee, Commander of the Training and Education Division, and Sergeant



[Photo: MDERS]

Nicholas Fiore, Training and Education Division, shared valuable insights during their presentation on a full-scale active shooter and barricade exercise conducted in April 2022. Major Magee praised MDERS for their dedication and attention to detail during the eight-month process in which the full-scale exercise was planned and executed. Sergeant Fiore delivered a comprehensive overview of the exercise, highlighting the sequence of actions, skills utilized, and areas of improvement identified during response operations. Senior Project Manager William Abuelhawa provided additional perspective on law enforcement response operations to enhance the presentation based on his previous role as the Tactical Commander in the Special Operations Division of PGPD. Fully engaged in the presentations, the Algerian delegation asked many insightful questions.

After the presentations, Instruc-

tor Lou Williams led the delegation on a tour of the Prince George's County Public Safety Firearms Range. Mr. Williams showcased the live-fire ranges and thoroughly reviewed the capabilities that this state-of-the-art facility has to offer. The delegation then explored the equally impressive less-lethal aspects of the facility, including the Tactical Maze, designed for tactical room clearing exercises with movable walls for varied scenarios. The catwalk feature of the maze allowed instructors to provide immediate feedback to trainees.

Next, the hosts provided the Algerian delegation an overview of the outdoor training area, featuring realistic settings such as an apartment building, a townhouse, and simulated businesses, all furnished to enhance the training environment. The extensive camera system enabled observa-

See *MDERS* page 18

WEBSITE...

(Continued from page 1)

Critical Incident Stress Management Programs for clinicians, and other assistance.

■ The **Hospitals** content area provides resources and information for hospitals that seek to acquire and/or maintain designations such as Stroke, Perinatal and Neonatal, Trauma and Specialty Resource Centers, as well as quick links for the EMS Protocols, @Hospital Ambulance App, CHRS, Stroke Smart State Resources, and other hospital tools and resources.

■ The **EMSOPS** content area includes resources for Jurisdictional and Commercial EMS operational programs (EMSOPs), Voluntary Ambulance Inspection Program (VAIP), Regional Programs, and SYSCOM/EMRC (Systems Command and Emergency Medical Resource Center). This includes quick links to the EMS Protocols and eMEDS®, information about Whole Blood, State and National Preparedness, and Communications Engineering links and resources.

■ The **Public** content area provides public information that contributes to MIEMSS' overall vision of reducing preventable death and disability. It features essential information on how members of the public can learn to recognize an emergency and incorporate injury prevention methods into their daily lives. This includes preventative programs and measures, information and links to health related sources, EMS Publications and reports, EMS Clinician awards and recognition, and public information requests. In future, it also will feature an FAQ section.

■ The for and about **MIEMSS** content area is a resource for MIEMSS staff to update and document Administration, Operations, and Departmen-

tal information and programs. This section serves as a repository for information about the State EMS Board and EMS Committees; open meeting agendas and minutes; the Office of the Executive Director (along with ED reports, annual reports, and information about leadership); departments and programs; Office of the State EMS Medical Director notices and memos; and other MIEMSS information, such as the history of MIEMSS and the Interactive EMS History Timeline, personnel phone directories, organizational charts, employment opportunities, and continuing efforts.

We hope that you find the new MIEMSS.org more user-friendly, easy to navigate, and, above all, helpful in finding the information you need

more quickly. Please feel free to use this survey (<https://miemss.org/home/Public/Website-Feedback>, or scan the QR code below) to let us know if there are any specific ways we can improve the site to suit your specific needs (or just let us know what is working well). Thank you from all of us here at MIEMSS! ■



UM UCH...

(Continued from page 11)

be added later in the month.

In Bel Air, a three-story, 75,000-square foot patient bed tower at UM Upper Chesapeake Medical Center was constructed on the top of the existing Kaufman Cancer Center

at the hospital and includes 72 patient beds (42 observation and 30 inpatient). The 42 observation rooms are double-occupancy and include a private bathroom for each patient.

For more information about UM UCH, visit www.umms.org/uch. ■

MDERS...

(Continued from page 17)

tion of training evolutions from the control room.

At the conclusion of the Firearms Range tour, the Algerian delegation expressed their admiration for MDERS' capabilities and extensive training and

exercise programs. Their active participation throughout the visit fostered an exchange of ideas and perspectives beneficial to all parties. The Algerian delegation visit was a tremendous success, and MDERS eagerly anticipates future opportunities to engage in global counterparts. ■

Maryland Department of Transportation Motor Vehicle Administration's (MDOT MVA)

Maryland Highway Safety Office

The MDOT MVA Highway Safety Office (MHSO) is dedicated to saving lives and working with many partners across the State to reduce the number of crashes each year. In addition, the MHSO looks for ways to reduce crash severity and ways to treat crash victims easier and faster.

Maryland aims to reduce the number of crashes, and the resulting deaths and injuries, to zero by 2030.

Join Us for the 2024 Highway Safety Summit

Registration is now open for the 2024 Maryland Highway Safety Summit and we hope you will consider joining us!

This year's summit will be held at the Hilton Baltimore BWI Hotel on Monday, May 13, 2024.



The summit is an annual meeting of safety leaders and stakeholders in Maryland who are working together to reach the goal of eliminating traffic fatalities and serious injuries on Maryland roads by 2030. This event highlights Maryland's collaborative approach to bringing federal, state, and local partners together.

Headlining this year's summit is a keynote address from Eric Bailey, author of *The Cure for Stupidity: Using Brain Science to Explain Irrational Behavior*. Additional information for the summit, including a draft agenda and registration information can be found at www.zerodeathsmd.gov/summit.

Do Your Part to Help Us End Distracted Driving

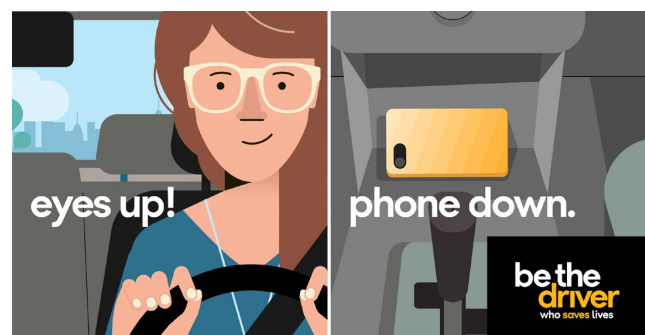
Maryland drivers get a bad rap as some of the worst drivers in the Northeast, but most Marylanders would argue that this simply isn't true.

While we might not be the worst, our crash totals indicate that there is a lot of room for improvement. Maryland has averaged more than 109,000 crashes per year over the past five years. Distracted driving was at least one of the contributing factors for nearly *half* of those crashes each year on average.

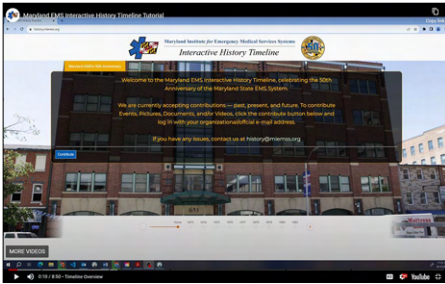
Distracted driving crashes are one of, if not the most, preventable type of crash. Ensure that your focus as a driver remains on the road ahead and not on your phone, your passengers or any other potential distractions inside or outside the vehicle. By doing so, you can help us reach our goal of eliminating traffic deaths and serious injuries on our roads.

Read more about how you can help eliminate distracted driving-related crashes on our roads at www.zerodeathsmd.gov/distracted.

Even if you aren't a driver, you can still help end distracted driving. If you see someone driving distracted, let them know that it makes you feel unsafe. They might think twice about their actions in the future. Together we can make our roads safer for all road users.



Be a Part of Maryland EMS History



Scan the QR code below or go to history.miemss.org to learn how you can contribute to the Maryland EMS Interactive History Timeline:



Maryland EMS News

MIEMSS

653 W. Pratt St.

Baltimore, MD 21201-1536



Governor Wes Moore

Lt. Governor Aruna Miller

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Institute for Emergency Medical

Services Systems

653 W. Pratt St.

Baltimore, MD 21201-1536

www.miemss.org

Chairman, EMS Board:

Clay B. Stamp, NRP

Executive Director, MIEMSS:

Theodore R. Delbridge, MD, MPH

Managing Editor:

Patrick Tandy (ptandy@miemss.org)

Design & Layout:

Patrick Tandy

Photography:

MIEMSS Media Services

(unless noted otherwise)

Prevention

THE NATIONAL HIGHWAY TRAFFIC SAFETY ADMINISTRATION (NHTSA) has prepared materials for use by law enforcement and public safety personnel for the following upcoming public safety and prevention campaigns:


■ **Vehicle Safety Recalls Week (March 4-10, 2024).** If your car has a recall, get it fixed – it could save a life. Also, check your car for recalls at least twice a year and sign up to receive alerts about new recalls. Download materials here: <https://www.trafficsafetymarketing.gov/get-materials/vehicle-safety/recalls-safety-campaign>

■ **Saint Patrick's Day Impaired Driving Prevention Campaign (March 17, 2024).** This day of celebration is one of the biggest drinking occasions of the year and, unfortunately, means more drunk drivers on the roads. If you plan to drink, make sure you refrain from driving and make a plan to get home safely. Download materials here: <https://www.trafficsafetymarketing.gov/safety-topics/drunk-driving/>

buzzed-driving-drunk-driving/saint-patricks-day

■ **National Distracted Driving Awareness Month (April 2024).** The “Don’t Drive Distracted. Eyes Forward.” social norming campaign focuses on distracted driving prevention by encouraging drivers to focus on the road and not distractions. Download materials here: <https://www.trafficsafetymarketing.gov/safety-topics/distracted-driving/dont-drive-distracted-eyes-forward#4986>

■ **420 (April 20, 2024).** Marijuana users may observe April 20 - aka “420”, a number associated with marijuana use - with increased marijuana use. The “420” campaign reminds drivers that it is both dangerous and illegal to drive while impaired. Download materials here: <https://www.trafficsafetymarketing.gov/safety-topics/drug-impaired-driving/if-you-feel-different-you-drive-different/420>. ■



R ADAMS COWLEY SHOCK TRAUMA CENTER

EMS BROADCAST

Virtual Presentation

Wednesday, March 27, 2024

1800-2000 hrs

When Coordination Counts

Pre-hospital clinician and In-hospital care team will discuss the case of an adolescent out-of-hospital cardiac arrest with known pre-existing conditions and the challenges overcome to ensure transport to definitive care.

Kevin Brenner
EMS Captain
Queen Anne's County
Department of Emergency Services

Stefhan Dassoulas
Senior Clinical Nurse I
Critical Care Resuscitation Unit
R Adams Cowley Shock Trauma Center

** Pre-Registration **required** by March 25th **

<https://app.smartsheet.com/b/form/c4bfa31874fc4430b3a3ae2a35100e15>

