

Maryland EMS News

For All Emergency Medical Care Providers

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February 2008

Governor Announces Allocation of Funds to Buy 3 New MSP Helicopters

At a news conference on February 1, Governor Martin O'Malley announced a multi-year effort to improve public safety and emergency response in the State of Maryland. Governor O'Malley was joined by Baltimore County Executive Jim Smith, Col. Terence B. Sheridan of the Maryland State Police (MSP), Maryland State Emergency Management personnel, and first responders to announce the allocation of \$33.6 million to buy three new MSP helicopters.

"Public safety is the most important priority of any government. Today, I am proud to announce the commitment to upgrade our aging State Police helicopter fleet," said Governor O'Malley. "Supporting our first responders in the work they do is an important part of fulfilling the

most fundamental responsibility that we have to our state—to safeguard the lives of our citizens and to ensure the safety of our neighborhoods and our communities."

"As a member of the Board for University of Maryland's Shock Trauma Center, I am keenly aware of the important role that the Med-Evac helicopters play in saving lives all across the state," said Baltimore County Executive Jim Smith. "The addition of three new helicopters to the state's fleet is another example of Governor O'Malley's commitment to public safety."

This is part of a multi-year effort to overhaul the State's fleet, following a study completed by SMART Business Advisory and Consulting, LLC. Released on May 29, 2007, the report was conducted to provide a

comprehensive analysis of the current missions of Maryland's law enforcement helicopter fleet, including the MSP Aviation Command and the Maryland Natural Resources Aviation Division. The MSP Aviation Command is a multi-mission unit, which includes law enforcement, homeland security, search and rescue, and medical evacuation. Since 1970, it has flown over 100,000 Med-Evac missions. Med-Evac missions make up 75 percent of MSP flights, while 20 percent makes up law enforcement and five percent makes up search and rescue. Currently, nine of the MSP helicopters are almost 18 years old, two are 13 years old, and one is 8 years old.

"For 38 years, State Police helicopters have provided a vital public safety service to our citizens and in support of all Maryland police departments and EMS providers," Colonel Terrence B. Sheridan said. "They are a welcome sight to people who need help and need it fast. I thank Governor O'Malley and the members of the Legislature for ensur-

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At a press conference at Martin State Airport, Governor Martin O'Malley announces the allocation of \$33.6 million to buy three new Med-Evac helicopters.

See Inside



**EMS Care 2008
Brochure**

Governor Announces Allocation of Funds to Buy 3 New MSP Helicopters

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ing these life-saving helicopters will keep flying as part of Maryland's world-renowned emergency medical services system."

"Maryland's Emergency Medical Services (EMS) system is a world renowned regionalized, integrated system of emergency care made up of many essential components," said Dr. Robert Bass, Executive Director of MIEMSS. "The Med-Evac operations of the Maryland State Police Aviation Division play a vital role in public safety through the delivery of critically injured patients to the right level of care in the fastest manner necessary to save the lives of those individuals. The Governor's commitment to this essential element of our EMS system will make the difference in saving countless lives."

The Department of Natural Resources' aviation division provides support for the enforcement of conservation, boating, and criminal laws, search and rescue, maritime homeland security, and the protection of Maryland's natural resources. Both of the Department's helicopters are over 30 years old.

"The critical and much-needed funding for new state-of-the-art helicopters for the Maryland State Police Aviation Division exemplifies the true vision of Governor O'Malley to continue providing the citizens of our state, and those who visit it with the best prehospital care and most expeditious transportation available," Chief Paul H. Sterling, Jr., President of the Maryland State Firemen's Association said.

"The Maryland State Police Aviation plays a critical role supporting the daily public safety operations of fire and EMS," said John Hohman, Chair of Metropolitan Fire Chiefs.



Col. Terence B. Sheridan of the Maryland State Police (MSP) reacts to a question during a press conference at Martin State Airport. Surrounding him are (l-r) Chief Paul H. Sterling, Jr. (President of the Maryland State Firemen's Association), Dr. Robert Bass (Executive Director of MIEMSS), Governor Martin O'Malley, Chief John Hohman (Chair of Metropolitan Fire Chiefs), and Baltimore County Executive Jim Smith.

"Each day MSP helicopters transport critically ill patients from the scene of a crash or other critical injury to a trauma center or specialty center. In addition, the state police aviation supports our Advance Tactical Rescue teams in performing technical high-angle and water rescues."

The "Helicopter Planning Group" (the Team) was created to analyze and plan for the fleet's replacement. The Team, which is chaired by the Maryland Department of Transportation (MDOT), has high level representation from the Governor's Office of Homeland Security (GOHS), MIEMSS/Emergency Medical Services Board, Maryland State Police (MSP) Aviation Command, Department of Natural Resources Police (DNRP) Aviation Division, and the Maryland Military Department (DMIL). Strategic advi-

sors and contractual support for the Team include representatives from the Governor's Office, GOHS, MDOT, Department of General Services (DGS), EMS Board, MIEMSS, DNRP, MSP, DMIL, and Department of Budget and Management (DBM). The Team also works closely with the EMS Board's Helicopter Replacement Committee. This committee has representation from other state and local emergency services organizations as well as healthcare organizations.

SMART Business Advisory and Consulting, LLC was chosen as the Task Order Agreement (TOA) Contractor through a competitive process to assist the Team with current mission analysis, cost/benefit analysis, and financing options for potential fleet replacement.

2008 Update Pages for Maryland Medical Protocols for EMS Providers

EMS providers will soon be receiving "green replacement pages" that address the 2008 protocol additions, deletions, and changes. The changes will go into effect July 1, 2008. The protocol changes printed on the "blue replacement pages" that providers received earlier in 2007 are already in effect.

Battalion Chief King Honored

The Veterans of Foreign Wars honored Battalion Chief Charles T. King, Jr., NREMT-P (Howard County Department of Fire & Rescue Services) with its National Gold Medal Award for Emergency Medical Technicians on January 16. An EMT's experience, training, accomplishments, and community service are considered when selecting an award winner. Battalion Chief King, an Army veteran, joined Howard County Department of Fire & Rescue Services in 1987 as a firefighter. His department has recognized his achievements with several of its own awards, including four Gift of Life awards (given for reviving a victim who has stopped breathing and has no heart-beat).



Battalion Chief Charles T. King, Jr., NREMT-P receives the National Gold Medal Award for Emergency Medical Technicians from the Veterans of Foreign Wars. He is shown here with James Youngblood (Chief of Staff, Maryland VFW), his daughter Rachel, wife Teresa (Master FF/EMT-P, Howard Co. DFRS), daughter Nicole, and James Adams (Chairman of Public Safety Committee, National VFW).

On February 15, State EMS Medical Director Richard Alcorta, MD, conducted a protocol rollout session that covered all the new material for instructors in each of the EMS operational programs. A DVD of the protocol rollout has been prepared for distribution to each jurisdiction to make the rollout of the new protocols easy and consistent.

Prior to July 1, all EMS providers (ALS and BLS) must complete a protocol rollout session that will cover all the new material. Remember, it is the responsibility of each provider to review the material to ensure he/she is familiar with the revisions. If you have any questions regarding the update, please contact the Office of the State EMS Medical Director at 410-706-0880.

New Primary Stroke Center Designated

Shady Grove Adventist Hospital is the newest Primary Stroke Center designated by MIEMSS, bringing the total number to 28. With the designation of Primary Stroke Centers in each of Maryland's five EMS regions, MIEMSS has directed jurisdictions to implement the neurological emergencies protocol. The protocol identifies patients with acute stroke and directs them, within specific parameters, to bypass non-designated centers in favor of Primary Stroke Centers for specialized treatment. Patients must arrive at the Primary Stroke Center within two hours of symptom onset and the

Important Information Regarding "The Maryland Protocols for EMS Providers"

There have been questions regarding the "blue" update pages, "green" update pages, and the entire "white" protocol book. It is important for all EMS providers to understand that:

1. *All existing providers* will need a green update to accompany their existing blue updated pages and white protocols and

2. *All new providers* will need a green, blue, and white pack to make up a current protocol document for July 1, 2008.

It is essential to realize that these protocol updates are required for all Maryland EMS providers.

Primary Stroke Center must be within 30 minutes travel to bypass.

A statewide Stroke Quality Improvement Council convened on November 15, 2007 to advise MIEMSS and the EMS Board on stroke quality issues and system improvement. The group established a password-protected website to facilitate collaboration among its members. A subcommittee is working on Interfacility Guidelines for the transport of stroke patients. The group is also reviewing statewide data to initiate performance improvements. Initial data indicate the number of patients statewide receiving IV rt-PA for acute ischemic stroke increased twenty-fold (from 8 to 172) between 2004 and 2007.

Disciplinary Actions

The following final disciplinary actions were taken by the EMS Board on the dates indicated:

B-2006-314 (EMT-B)–October 31, 2006. For providing EMS services on a lapsed certification, reprimand.

B-2006-312 (EMT-B)–November 20, 2006. For practicing as an EMT-B without a documented affiliation, reprimand.

B-2005-296 (Applicant)–January 16, 2007. For having a previous conviction for felony theft and having surrendered a prior EMT-B certification because of that conviction, application denied.

B-2006-329 (EMT-B)–March 29, 2007. For failing to disclose and having been convicted for second-degree assault resulting in supervised probation for 2 years and being ordered not to have any unsupervised time with any minor children under the age of 16 that were not family members and being ordered to continue on physician directed therapy, EMT-B certification revoked.

B-2007-335 (Applicant)–March 29, 2007. For failing to disclose convictions for dumping litter, trespassing on private property, theft, and malicious destruction of property, application denied.

B-2006-334 (Applicant)–March 29, 2007. For providing emergency medical services to patients on a lapsed CRT license and misrepresentation as a certified Maryland EMT-B, application denied.

B-2006-332 (EMT-P)–April 5, 2007. For testing positive for a controlled dangerous substance while on duty, EMT-P license suspended for 30 days, probation for 1 year thereafter, and required to continue recovery program and submit to random drug testing.

B-2006-311 (Applicant)–April 5, 2007. For having and failing to reveal previous convictions for assault with intent to murder, attempted murder, and assault, and intent to injure with a deadly weapon, application denied.

B-2006-310 (Applicant)–April 19, 2007. For having previous convictions for theft and for having and failing to reveal additional previous convictions for theft and arson, application denied.

R-2004-285 (CRT)–May 14, 2007. For testing positive for opiates and failing to complete a drug rehabilitation program, CRT license revoked.

R-2004-268 (EMT-B)–May 8, 2007. For conviction for theft of goods valued over \$500, EMT-B certification suspended until successful completion of court-ordered supervised probation.

B-2007-341 (EMT-B)–July 26, 2007. For accessing controlled pharmaceutical supply without authorization and attempting to initiate IV therapy, reprimand and requirement to write and submit to EMS Board a paper on operating within scope of practice plus concurrence with local jurisdiction suspension of privileges for 6 months, probation through June 2008, requirement of completion of

Maryland Medical Protocol Update, and preparing paper on operation outside of the scope of authorized EMS practice.

B-2007-344 (EMT-B)–September 27, 2007. For testing positive for marijuana and having successfully completed a drug rehabilitation program, probation for one year with random drug testing and monthly reports to MIEMSS Compliance Office on job performance from supervisor.

B-2007-350 (EMT-P)–September 27, 2007. For grabbing and threatening a patient with harm if she ever called the ambulance again, yelling profanities from the medic unit at the patient and at a pedestrian, threatening to run over a pedestrian for attempting to cross the street on a green light, and turning on the unit's lights and sirens and blowing the horn as the pedestrian walked across the intersection, reprimand, probation for one year and requirement to successfully complete an anger management program.

B-2006-349 (EMT-B)–September 27, 2007. For pleading guilty to selling tobacco to a minor, reprimand.

B-2007-348 (EMT-B)–December 11, 2007. For being convicted of sexual child abuse, EMT-B certification revoked.

B-2007-347 (EMT-B)–December 11, 2007. For conviction of possession of marijuana, EMT-B certification suspended until successful completion of a substance abuse treatment program followed by probation for one year with random drug testing and monthly performance reports to MIEMSS Compliance Office.

B-2007-346 (EMT-B)–December 11, 2007. For submitting a false sample for drug testing, EMT-B certification revoked.

B-2006-331 (EMT-B)–December 11, 2007. For stealing medication from a patient, EMT-B certification revoked.

B-2007-340 (EMT-P)–December 20, 2007. For failing to administer supplemental oxygen and IV fluids as required by protocol, failing to obtain a medical consultation and failing to properly report patient's history and condition to hospital staff, probation for the remainder of current licensing period with the requirement of frequent observations by the EMS Supervisor, submission of bi-monthly performance reports from the Supervisor to MIEMSS Compliance Office, and review by the MIEMSS Compliance Office, the Jurisdictional EMS Operational Program Medical Director, and the State EMS Medical Director at the time of license renewal.

B-2007-345 (EMT-B)–December 20, 2007. For testing positive for Methadone and Opiates and falsely claiming to have a prescription for the drugs, EMT-B certification revoked.

Mark Your 2008 Calendar

February 28-March 1

Miltenberger Emergency Services Seminar

Rocky Gap Conference Center
Flintstone, Maryland
Contact: MIEMSS Region I Office,
301-895-5934

March 3-4

ER ONE INSTITUTE 5th Annual Conference Emergency Preparedness: Today's Questions and Tomorrow's Answers

Grand Hyatt, 1000 H Street NW, Washington, D.C. 20001
Register: www.EROneConference.SiTELMS.org
Contact: Lisa Rizzolo @ 202-877-7453

March 6

Topics in Trauma Care Conference

Washington County Robinwood Conference Center
Contact: www.hagerstowncc.edu/coned/seminars

March 8

Roadway Incident Safety for Emergency Responders

Branchville VFD
4905 Branchville Road
College Park, MD 20740
Contact: MIEMSS Region V Office, 301-474-1485

March 8

Public Fire & Life Safety Conference

MFRI, College Park, MD
Contact: www.mfri.org

March 15

Roadway Incident Safety for Emergency Responders

Calhoon MEBA Engineering School
27050 St. Michaels Road
Easton, MD 21601
Contact: MIEMSS Region IV Office, 410-822-1799

March 16-22

Poison Prevention Week

Information: www.mdpoison.com

March 22

Roadway Incident Safety for Emergency Responders

Joppa-Magnolia Volunteer Fire Company
1403 Old Mountain Road South
Joppa, MD 21085
Contact: MIEMSS Region III Office, 410-706-3996

March 25-29

EMS Today Conference & Exposition

Baltimore Convention Center
Sponsored by JEMS Communications
Website: www.emstodayconference.com

April 25-27

EMS Care 2008

Doubletree Hotel in Annapolis, MD
Presented by the Emergency Education Council of
Region III & MIEMSS
Contact: MIEMSS Region III Office, 410-706-3996

May 3

Bystander Care Instructor Course

Easton Volunteer Fire Dept.
Contact: MIEMSS Region IV Office, 1-877-676-9617

May 10

Roadway Incident Safety for Emergency Responders

Allegany County Dept. of Public Safety & Homeland
Security
11400 PPG Road
Cumberland, MD 21502
Contact: MIEMSS Region I Office, 301- 895-5934

May 17

Roadway Incident Safety for Emergency Responders

Myersville Volunteer Fire Company
301 Main Street
Myersville, MD 21773
Contact: MIEMSS Region II Office, 301-791-2366

May 18-24

National EMS Week

Planning Guides are available online at
<http://www.acep.org/emsweek> or by contacting Denise
Fecher at dfechner@acep.org.

June 14-20

MSFA Convention

Ocean City, MD
Information: www.msfa.org

July 22-27

Firehouse Expo

Baltimore Convention Center
Information:
<http://www.publicsafetyevents.com/pub/fhe/index.po>

September 4-7

Pyramid 2008

Holiday Inn Select
Solomon's Island, MD
Contact: MIEMSS Region V Office,
301-474-1485

September 23

MidAtlantic Life Safety Conference

Johns Hopkins Applied Physics Lab, Laurel
Contact: Fire Marshal's Office,
1-800-525-3124

Roadway Incident Safety for Emergency Responders

MIEMSS recently modified a Maryland State Highway Safety Office grant to facilitate an 8-hour, hands-on-training workshop for safety and training officers, chief and line officers, EMS providers, firefighters, law enforcement personnel, and emergency vehicle operators. The program presents an overview of the safety hazards often found at roadway incidents, as well as "Best Practices" designed to help save lives and prevent injuries to emergency response personnel. The goals are to create awareness of important safety issues and to encourage the development of training and safe operating procedures to safeguard personnel operating at roadside crashes or other emergency incidents on or near roads and highways.

Jack Sullivan, CSP, CFPS, Director of Training for the Emergency

Responder Safety Institute, will teach each workshop. He retired as a lieutenant and safety officer with Lionville (PA) Fire-Rescue. He has more than 30 years of experience with fire and EMS in three different fire departments and is nationally recognized for his work on roadway incident safety for emergency responders.

"Roadway Incident Safety for Emergency Responders" will be held at no cost to participants. CEUs will be available. Each workshop is limited to 40 students. Please contact your MIEMSS Regional Office to register. Workshop hours are 8 am to 4 pm, and lunch will be provided.

Sponsored by MIEMSS and the State Highway Administration, the Roadway Incident Safety workshop will be presented in each of the MIEMSS five regions at the following locations.

Region I

May 10, from 8 am to 4 pm
Allegany County Dept. of Public Safety & Homeland Security
11400 PPG Road
Cumberland, MD 21502
Contact: Region I Office,
301- 895-5934

Region II

May 17, from 8 am to 4 pm
Myersville Volunteer Fire Company
301 Main Street
Myersville, MD 21773
Contact: Region II Office,
301-791-2366

Region III

March 22, from 8 am to 4 pm
Joppa-Magnolia Volunteer Fire Company
1403 Old Mountain Road South
Joppa, MD 21085
Contact: Region III Office,
410-706-3996

Region IV

March 15, from 8 am to 4 pm
Calhoon MEBA Engineering School
27050 St. Michaels Road
Easton, MD 21601
Contact: Region IV Office,
410-822-1799

Region V

March 8, from 8 am to 4 pm
Branchville VFD
4905 Branchville Road
College Park, MD 20740
Contact: Region V Office,
301-474-1485



EMS Week: May 18-24, 2008

The slogan for 2008 EMS Week is "EMS: Your Life Is Our Mission" and Wednesday, May 21, 2008 has been identified as EMS for Children Day. MIEMSS is planning for the annual Stars of Life program, which recognizes Maryland's outstanding responders, programs, and citizens and the Right Care When It Counts program for children, which recognizes children that have made a difference in the care of others. Please go to the MIEMSS web page, www.miemss.org, (Click "Maryland EMS" under "What's New") for nomination forms and awards criteria. All nominations must be received at MIEMSS by **April 4, 2008**.

EMS Care 2008

“Putting the Pieces in Place”

April 25-27
Annapolis, MD

**Sponsored by: The Emergency Education Council of Region III & the
Maryland Institute for Emergency Medical Services Systems**



EMS Care 2008

April 25-27

At the Annapolis Doubletree Hotel

Presented By

**The Emergency Education Council of Region III and
The Maryland Institute for Emergency Medical Services Systems**

The Program

The existence of collaborative partnerships has developed as an essential cornerstone of the provision of emergency medical care throughout the Nation. In an effort to sustain the full continuum of care, EMS services must work in conjunction with various other public service organizations and healthcare partners to include fire/rescue services, law enforcement, hospitals, health departments, and emergency management agencies. The designers of the EMS Care 2008 program have focused on these partnerships in the development of the theme "Putting the Pieces in Place." In addition to workshops on the EMS interface with these partners, numerous topics in emergency medical care will be presented to afford conference participants the opportunity to expand upon their emergency medical services system knowledge. Conference participants will also have ample opportunity to browse an array of vendors, as well as network with representatives from various local fire and EMS services, commercial ambulance services, and educational institutions.

Continuing Education

All workshops are approved by MIEMSS for continuing education for ALS and BLS providers. EMT-Bs can fulfill all of the 12 hours of didactic (4 Medical, 4 Trauma, and 4 Local) training required for recertification. A 12-hour skills class is also available during the pre-conference activities. Be careful to pick workshops that will provide enough hours of each category. Conference staff will be available on-site to assist conference attendees with their CEU requirements. For specific questions regarding continuing education requirements, please contact the MIEMSS Office of Licensure and Certification at 410-706-3666.

The Hotel

We are excited to announce that this year's conference will be held at The Annapolis Doubletree Hotel, located at 210 Holiday Court, Annapolis, Maryland. This newly renovated hotel offers complimentary wireless high-speed internet access, and an on-site fitness facility. Pet rooms are also available upon request. The hotel has graciously reserved a block of rooms for the conference at a rate of \$123 per night, single or double occupancy (add 13% room and sales tax). Overnight room reservations can be made with the hotel by calling (410) 224-3150. Reservations must be guaranteed by a credit card. Cancellations must be made 24 hours prior to arrival to avoid a one-time charge of room plus tax. Don't delay, as these rates are only available until April 11, 2008. For more information on the Annapolis Doubletree, visit their website at www.doubletreeannapolis.com.

For Fun!

EMS Care 2008 is ideally located just minutes from some of the greatest attractions that Annapolis, Maryland has to offer. The US Naval Academy, Maryland State Capitol, and the historic waterfront district are just three short miles away. The hotel is within easy reach of the Westfield Mall, Festival Plaza, Annapolis Harbour Center, and several of the area's finest golf courses. The hotel's shuttle services have been extended during the conference and will operate from 7 AM through 1 AM on both Friday and Saturday night. Additionally, the Ports of Call Restaurant and Lounge, conveniently located within the Annapolis Doubletree, will remain open until 2 AM each night.

Fees and Expenses

This year's two-day conference registration fee will be \$150. This fee includes all expenses for workshops, lectures, AV material, and printing costs. Also included is a continental breakfast, full lunch, and snacks on both Saturday and Sunday. As in years past, there are countless hours and immeasurable services that are provided free of charge by the conference planning committee members.

Registration for the conference and each workshop is limited and on a first-come first-served basis. **NO CHANGES TO YOUR SCHEDULE WILL BE CONSIDERED AFTER April 11, 2008.** No refunds will be granted unless a written cancellation is received prior to April 11, 2008. All cancellations are subject to a \$20 processing fee. Returned checks are subject to a \$25 processing fee.

Directions— A map and written driving directions will be mailed with your registration confirmation.

For More Information—Contact the MIEMSS Region III Office at 410-706-3996, or visit the Emergency Education Council Website at www.eecreg3.org.

Pre-Conference Activities & Fees

Thursday and Friday, April 24 & 25, 2008

EMT-Basic 12-Hour Skills Refresher - This course is a required part of recertification for all EMT-Bs. By coupling this course with careful selection of conference breakout sessions, EMT-Bs can meet all requirements necessary for recertification. This course is being coordinated by the Anne Arundel and Baltimore County Fire Rescue Academies, and will be conducted at the Anne Arundel County Training Center in Millersville. Additional information will be provided upon registration. **Class will begin Thursday evening at 6 PM and continue on Friday at 8 AM.** {Limit 25} {12hrs Cat S}

Friday, April 25, 2008

Shock Trauma Advanced Airway Course (8:00 AM—4:30 PM)

Has it been awhile since you've intubated a patient? Are you interested in sharpening your airway management skills? The Shock Trauma Advanced Airway Course provides didactic sessions in the morning, followed by a hands-on cadaver lab in the afternoon, covering topics such as anatomy and physiology review and assessment, rapid sequence intubation, and advanced airway management / surgical airways. This course is being offered **free of charge** to the first 16 ALS providers who register for the full EMS Care 2008 conference (Sat-Sun). Students will be required to complete select online learning modules and quizzes prior to attending this class, and must submit the certificate of completion for the online learning modules at least **2 weeks prior** to the scheduled class. This course will be held at the R Adams Cowley Shock Trauma Center. Additional information will be provided upon registration. **{ALS Only: 8 hrs Cat A}**.

Pediatric Resuscitation: Educators' Workshop (8:00 AM—5:00 PM)

This workshop will provide EMS educators with advanced teaching techniques specific to the concepts and skills of pediatric resuscitation in the field. Demonstration and practice with the use of simulation technology to evaluate the competency of providers will be highlighted. Topics include: airway management, vascular access, rhythm interpretation, medication administration, and pediatric megacodes. Workshop materials will be written by faculty from Johns Hopkins Children Center and each participant will receive a CD of the presentations and scenarios. **{Limit 32} {ALS Only: 8 hrs Cat A}**

EMS One: Survival Guide for the EMS Officer / Supervisor (9:00 AM—4:00 PM)

What every EMS officer needs to know. This course includes information on accessing the Facilities Resource Emergency Database (yes, that's FRED), what you need to know about field and hospital Chempacks, EMAIS reports, the MIEMSS FOST Team, EMTALA and other timely topics. **{Limit 30} {BLS 6 hrs Cat L, ALS 6 hrs Cat 2}**

QA Officer Update: Developing Your Investigation / Interview Strategy (8:00 AM—5:00 PM)

From planning the investigation to writing the report, interviews and investigations should be well thought-out and structured to achieve the desired objectives. This program identifies essential steps to avoid pitfalls in conducting Quality Assurance interviews and investigations. This interactive workshop includes lectures, role playing, and group activities that address the investigative process including: intake of complaints, investigative planning, demeanor, interview strategy, controlled environment, primary interview questions, and execution of an investigative plan. **Students wishing to attend this course must register by April 11, 2008 as pre-workshop reading will be required.** **{BLS 8 hrs Cat L, ALS 8 hrs Cat 2}**

Bystander Care Instructor (8:00 AM—4:00 PM)

The Bystander Care Course teaches those who arrive first on the scene of a vehicle crash what to do before EMS and rescue crews arrive. It is intended for professional drivers and others who spend a great deal of their time on the road. In rural areas with large first-due areas, a trained bystander may make the difference between life and death. Instructors are needed for this rapidly expanding program. This train-the-trainer course will prepare you to offer the Bystander Care Program in your community. The Bystander Care Program has been developed by the Maryland Institute for Emergency Medical Services Systems through a grant from the Maryland Highway Safety Office. **{Limit 15} {BLS 6 hrs Cat L, ALS 6 hrs Cat 2}**

Program Descriptions

Saturday, April 26, 2008

8:30 AM—9:00 AM: EMS State of the State

The latest developments and trends in Maryland EMS will be highlighted by MIEMSS Executive Director Dr. Robert R. Bass.

9:00 AM—10:15 AM: Keynote Address: A First Responder's Perspective on the I-35W Bridge Collapse

Chief Richard B. Gasaway

On August 1, 2007, a 1,400-ft. section of Interstate 35 in downtown Minneapolis collapsed during rush hour. The complexity of this incident played out like a chapter from the "Worst Nightmare Incident Management Scenario Playbook." It was reported there may be more than 100 vehicles submerged in the Mississippi River. There were dozens more vehicles teetering on the jagged edges of the collapsed bridge structure. There were victims trapped in vehicles, stranded on the bridge decking and in the water. Several vehicles were burning, including a tractor-trailer that was less than 20 ft. away from a school bus with 60 children on-board. The bridge structure continued to move under the force of the current of the Mississippi River as first responders attempted to rescue survivors from the river and bridge decking. Part of the bridge collapsed onto a train, breaching a container of an unknown hazardous material. As the incident progressed, a severe storm warning was issued for dangerous lightening, high winds, and hail. And there's more...

This program is a presentation of the first-hand perspective of Roseville (MN) Fire Chief Richard B. Gasaway whose department was among the first mutual-aid responders to the scene of this horrific tragedy. The Roseville response included Engine Co. 31, Heavy Rescue Co. 16, Medic 3, Boat 1, and 4 chief officers. Along with several other fire chiefs from Ramsey County departments, Chief Gasaway coordinated resources from mutual-aid departments in performing search and rescue operations on the north shore of the Mississippi River.

Chief Gasaway will share his perspective on responding to the most complex incident in his 29 years of service. The presentation will be accompanied by non-media photographs taken by first responders, visually depicting the complexities of this incident.

10:45 AM—12:00 PM Sessions

Acute Cardiac Intervention Centers: What You Need To Know

Richard Alcorta, MD, FACEP

Each year thousands of patients present to EMS providers with a chief complaint of chest pain. A subset of these patients will actually be experiencing a life-threatening process called an ST Elevation Myocardial Infarction (STEMI). The EMS Board in collaboration with the Maryland Health Care Commission (MHCC) is in the process of designating Acute Cardiac Intervention Centers (ACIC), which will be prepared to take an EMS-provider-identified STEMI patient directly to the cardiac catheterization laboratory for intervention. Dr. Alcorta will review the risk factors for MI, the signs and symptoms of Acute Coronary Syndrome (ACS) and myocardial infarction, the updated "chest pain/

ACS" and "STEMI" protocols, and the components of the EMS Board designated ACIC statewide system of care.

Emergency Management of the Burn Patient

Carrie Cox, RN, MSN

In this session, students will learn techniques in the management of serious burn injuries, including the evaluation of the severity and size of a burn injury; and the identification and establishment of treatment priorities. Additionally, airway management, the initiation of fluid resuscitation, and transport decisions for burn patients will also be reviewed. Special circumstances (chemical, electrical burns, etc) will also be discussed.

Pediatric Burns

Noel Morelli, PA

Fire prevention is working – fewer children are injured from fire, scalds, or explosions. But when a burn occurs – seconds count. Initial out of hospital care and transport decisions are critical. The Pediatric Burn Service at JHCC will present the changes in treatments, shortened hospital stays, and dramatic results.

Hybrid Cars, New Vehicle Technology: A Primer for EMS & Rescuers

Richard B. Prather III, DDS

Hybrid vehicles present a unique set of challenges for first responders. This program will identify those challenges and dispel common myths about the dangers of the vehicles to rescuers in a crash. Operation, design, and components of a typical hybrid vehicle will be identified, along with proper fire and emergency rescue procedures.

1:30 PM—2:30 PM Sessions

Throw Your Hands in the Air—It's a Deaf Person

Brenda Kelly-Frye, Director

This presentation will speak to the differences of people who have a hearing loss. A representative from Maryland Relay will talk about deaf culture, how to communicate with people who are deaf and / or have a hearing loss, as well as how to use MD Relay.

All Bleeding Stops....Eventually

Deb Stein, MD, FACS

Arguably the most crucial aspect of wound healing is the body's natural ability to stop bleeding on its own. Join us as Dr. Deb Stein of the R Adams Cowley Shock Trauma Center explores this process, known as Hemostasis, its phases, and its implications in prehospital care.

Neonatal Emergencies

Julian Orenstein, MD, FACEP

"I wasn't born yesterday.... well actually, I was born only days ago. Now I'm not feeling so well and my family is really scared!" Dr. Julian Orenstein from Shady Grove Adventist Hospital will present the important differences in assessment and treatment of the sick newborn.

"Where Do I Sign?" A Look at the Patient Initiated Refusal Pilot in Howard County, Maryland

Kevin Seaman, MD, FACEP

John Butler, MS, NREMT-P

EMS providers must ensure that patients who refuse treatment

and/or transport possess medical decision-making capacity and obtain an informed refusal. It is also imperative that accurate documentation is acquired when obtaining a patient refusal. In this presentation, we will review the Patient-Initiated Refusal process, and lessons learned from an 11-week Pilot period in Howard County, Maryland.

2:45 PM—3:45 PM Sessions

Transmissible Infections Relevant to Providers of Emergency Care

Wayne Campbell, MD

Discuss the challenging issue of Community-Acquired Methicillin Resistant Staphylococcus Aureus infection, including the history of MRSA, recent changes in its virulence, transmissibility, clinical manifestations, and modes of prevention. Additionally, Dr. Campbell will review the clinical manifestations and transmissibility of other commonly encountered infectious diseases to health care workers, as well as techniques for personal protection.

Issues in Hemorrhagic Control

Bruce Conrad, NREMT-P

This program will provide insightful information for the prehospital provider on current practices in emergency hemorrhagic control. Discussion will include wound management, as well as the use of pressure dressings, tourniquets, and clotting agents.

Hot, Hot, Hot: Assessing Pediatric Fever

Jessica Strohm Farber, MSN, RN, CCRN

Fevers in a child can be distressing, not only to parents but also to EMS providers. This presentation will discuss the parameters of normal vs. elevated temperature, as well as address the possible causes, signs and symptoms, treatments/interventions, and "red flags" when taking care of children with a fever.

Tactical EMS Interface: Working Together to Support Law Enforcement Operations

Sgt. Keith McMinn, NREMT-P

Deputy Jeremy Mothershed, NREMT-P

Learn the important role of Tactical EMS and its interface with traditional EMS/Fire-Rescue at the scene of a high-risk law enforcement mission. In addition, students will be taught the background information necessary to evaluate and properly treat patients subjected to less lethal weapons, including the Taser.

4:00 PM—5:00 PM Sessions:

EMAIS: Data Entry & Data Insight

Christopher Handley, MS, NREMT-P

Joe Davis

What is the best way to enter the myriad of different field scenarios into EMAIS? What is done with the data once a record is entered? Come hear discussions on the particulars of EMAIS and the data.

Goal-Directed Therapy: Resuscitation vs. 2 Liters

Tom Genuit, MD

Goal-directed therapy is the gold standard in the hospital and ICU setting. Monitoring techniques are used to determine perfusion status. Can this concept be implemented in the field using the appropriate monitoring devices?

Pediatric Strokes

Lori Jordan, MD, FAAP

Neurological assessment in children is challenging, whether at home, school, or in an ED. Early recognition of strokes in children requires careful assessment and rapid care. The Johns Hopkins Pediatric Stroke team will share their experience and identify the children who are at highest risk for strokes.

MSP Aviation Operations: Beyond the Basics

Jon Longest, BS, NREMT-P

This program will review the basic information needed to safely and efficiently interact with MSP Aviation, but will also provide more detailed information to seasoned providers. Common misconceptions about safety, training, and equipment will be discussed. Time will be allotted for an interactive question and answer session as well.

Sunday, April 27, 2008

9:00 AM—10:15 AM: Acute Management of Stroke: How to Save a Life

Jerold Fleishman, MD

This Board-Certified Neurologist and Director of Franklin Square's Stroke Program will discuss the various types and treatment of stroke in an easily understood and enjoyable forum with emphasis on prehospital care. In addition, he will clarify and highlight stroke signs and symptoms, the latest diagnostic advances, and specific case studies to validate the absolute importance of timely and knowledgeable stroke care.

10:45 AM—11:45AM Sessions

Capnography: The Use & Benefits of ETCO2 in EMS

Robert Murray, Jr., BS, NREMT-P

Participants will receive a thorough review of capnography, discussing both clinical situations and case scenarios where capnography has assisted in making treatment decisions. By the end of the session participants will value capnography's use as a diagnostic tool in a variety of both intubated and non-intubated patients. *(Most appropriate for ALS providers)*

The Biomechanics of Pedestrian Injury & the Incidence of Pedestrian Crashes in Maryland

Samir M. Fakhry, MD, FACS

Timothy Kerns, MS

Greg Stadter

This presentation will provide an overview of the number and location of pedestrian collisions in Maryland. Further details will be given on the biomechanics of the injuries received by pedestrians in these collisions through the use of modeling and crash reconstruction techniques.

Inhalants: Cheap, Easy, and...Deadly

Lisa Booze, Pharm D, CSPI

More kids than ever are getting high by sniffing ordinary household products such as hair spray, room freshener, and paint. By the time a student reaches the 8th grade, one in five will have used inhalants. Discover what products are commonly used, how they are used, and the acute and chronic toxic effects of inhalant abuse.

What Is ER Diversion, and Why Are We Doing It?

Don Lundy, BHS, NREMT-P

Diversion is certainly not a new idea – and in many places, it is a program that is way too old! While many systems continue to struggle with diversions, Charleston County, South Carolina has initiated a new and innovative approach to the issue of diversion that ensures that patients get taken care of and that diversion doesn't hurt the system. This approach guarantees that everyone in the system will begin working as a team, eliminates most diversion issues, and can work for you too.

1:15 PM—2:30 PM Sessions

Autism Recognition & Suggested Responses for EMS

LTC Scott Campbell

Why did that kid just run back into a burning building? Why does he scream when I touch him anywhere on his body? Why does she flap her arms and twirl in circles? How can I communicate with him when he does not talk? Why did he snap his head back and break my nose when I grabbed him from behind? Why did he have a seizure when I only checked for equal and reactive pupils? Learn how to survive and not further injure your next patient with an autism spectrum disorder!

There's No Vaccine for Stupid

Captain Ron Lewis, NREMT-P

Enjoy a humorous (to us in the medical field) yet serious look at the causes of spinal trauma developed by MSP Capt. Lewis. Interspaced with video and pictures of actual events – many laced with language that normally accompanies ignorant behavior – Capt. Lewis discusses mechanisms and their abilities to influence spinal column and cord insults along with the responsibilities pre-hospital and hospital personnel have when treating suspected column or cord injuries.

Pediatric Cases: The Unusual Things Children Get and Get Into

Children do amazing things and get into many environments. EMS calls involving children are sometimes stressful. Early recognition and rapid assessment are key to good outcomes. Maryland's pediatric specialty centers will highlight unusual pediatric emergencies through case studies.

New Traps & Trends in Documentation

Richard Fogelson, JD, NREMTI

PCRs are now being scrutinized as never before. Using recent EMS cases and disciplinary actions, this session will teach providers how to quickly and efficiently bullet-proof their documentation, avoid costly errors, and understand best practices for surviving after the fact inquiries.

2:45 PM—3:45 PM Sessions

Tools of the Trade: The Latest on Carbon Monoxide Detection

Captain Ken Hughes, BS, NREMT-P

This session will cover the pathophysiology and incidence of CO in the prehospital setting. The content will focus on sources of CO and mechanisms to detect CO intoxication in the field. Treatment algorithms will also be discussed in addition to the relationship between CO and HCN in the fire ground setting.

Trauma Jeopardy

William Seifarth, MS, NREMT-P

Chad Packard, BS, NREMT-P

Test your knowledge of Maryland's trauma protocols in a light-hearted competition for prestige and prizes. Special emphasis will be placed on the Trauma Decision Tree during this simulation of America's favorite game show.

Commotio Cordis – Sudden Death in the Young Athlete

Mary Alice Vanhoy, RN, MSN, NREMT-P

While the collapse of an athlete is not unusual, the death of a young athlete is. Commotio Cordis is a rare but potentially lethal phenomena which occurs after a blow to the chest. Through case studies, attendees will gain an understanding of Commotio Cordis and its treatment which may make the difference between life and death.

EMS & Emergency Management: Working Together During a Disaster

Lt. Mark Demski, NREMT-P

This session will illustrate how EMS and Emergency Management officials must work together to solve the many complex issues that present during a disaster. A case study will be used to examine how EMS and Emergency Management in one local jurisdiction coordinated during long-term evacuation and relocation of residents of an assisted living facility during a major fire.

4:00 PM—5:00 PM: Closing Keynote: Who Am I Working With—The Exposure of the Old & New EMS Work Ethic or “Why Can't We All Just Get Along?”

Don Lundy, BHS, NREMT-P

As a professional in EMS, no matter your age or length of service, you have had the opportunity to work with many different people. Some you enjoy working with and others – well, sometimes you wonder if they are from this planet. EMS is going through a change like we haven't seen since sometime in the 1970's.

Loyalty, hard work, and even simple basics such as honesty and kindness all seem to be traits which are being challenged in the “new” work place. Whether you are an executive, a line manager, or a street medic, it is important to understand the differences in work ethics and their origins, as well as what you and your agency can do to better understand and motivate employees – without driving everyone crazy! Join us as Mr. Lundy, a 33-year EMS veteran and Director of Charleston, South Carolina EMS, illustrates a historical view of the work ethic, and discusses shift schedules, benefits, and how employees view them.

Warning! You may see yourself and will certainly see some of your co-workers. An entertaining look at ourselves and our future

Saturday April 26th, 2008				
7:30AM	Registration			
0800-0830	Opening Ceremonies			
0830-0900	EMS State of the State - Dr. Robert R Bass, M.D. F.A.C.E.P.			
0900-1015	Keynote Address: A First Responder's Perspective on the I-35W Bridge Collapse - Chief Richard Gasaway {B/M}			
1015-1045	Vendor Break			
Time	A - Medical	B - Trauma	C - Pediatric	D - Partners
10:45 AM - 12:00 PM {Breakout #1}	Acute Cardiac Intervention Centers: What You Need To Know {A/M}	Emergency Management of the Burn Patient {B/T}	Pediatric Burns {B/T}	Hybrid Cars, New Vehicle Technology: A Primer for EMS & Rescuers {2/L}
1215-1315	Lunch			
1330 - 1430 {Breakout #2}	Throw Your Hands in the Air ~ It's a Deaf Person {B/M}	All Bleeding Stops...Eventually {A/T}	Neonatal Emergencies {A/M}	"Where Do I Sign?": A Look at the Patient-Initiated Refusal Pilot in Howard County {2/L}
1430-1445	Vendor Break			
1445-1545 {Breakout #3}	Transmissible Infections Relevant to Providers of Emergency Care {A/M}	Issues in Hemorrhagic Control {B/T}	Hot, Hot, Hot: Assessing Pediatric Fever {A/M}	Tactical EMS Interface: Working Together to Support Law Enforcement Operations {A/M}
1545-1600	Vendor Break			
1600-1700 {Breakout #4}	EMAIS: Data Entry & Data Insight {B/M}	Goal Directed Therapy: Resuscitation vs. 2 Liters {A/T}	Pediatric Strokes {A/M}	MSP Aviation Operations: Beyond the Basics {2/L}
1700 - 1800	Visit with Vendors			
Sunday April 27th, 2008				
	A - Medical	B - Trauma	C - Pediatric	D - Partners
900-1015	Acute Management Of Stroke: How To Save A Life {A/M}			
1015-1045	Vendor Break			
1045-1145 {Breakout #5}	Capnography - The Use & Benefits of ETCO2 in EMS {A}	The Biomechanics of Pedestrian Injury & the Incidence of Pedestrian Crashes in Maryland {B/T}	Inhalants: Cheap, Easy and ...Deadly {A/M}	What Is ER Diversion & Why Are We Doing It? {2/L}
1200 -1300	Lunch			
1315 - 1430 {Breakout #6}	Autism Recognition & Suggested Responses for EMS {B/M}	There's No Vaccine for Stupid {B/T}	Pediatric Cases: The Unusual Things Children Get & Get Into {B/M}	New Traps & Trends in Documentation {2/L}
1430-1445	Vendor Break			
1445-1545 {Breakout #7}	Tools of the Trade: The Latest on Carbon Monoxide Detection {A/M}	Trauma Jeopardy {B/T}	Commotio Cordis: Sudden Death in the Young Athlete {A/T}	EMS & Emergency Management: Working Together During a Disaster {2/L}
1600 - 1700	Who Am I Working With - The Exposure of the Old & New EMS Work Ethic or "Why Can't We All Just Get Along? {2/L}			
Continuing Education Credits - All categories are noted in the brackets {} ALS is first, then BLS. CRI-Is and NREMT-Ps are required to complete continuing education in specific topics. We suggest you review the Re-registration guidelines in the National Registry registration brochures for Intermediate '99 and Paramedic on their web site at www.nremt.org .				

EMS Care 2008 Registration

Please print name as you wish it to appear on your name badge:

FEES

First Name: _____

Saturday & Sunday Registration (\$150) _____

Last Name: _____

One-Day Registration (\$90) _____

Prov. ID: _____

QA Officer Update: Conducting an Investigation (\$50) _____

Primary Affiliation: _____

Bystander Care Workshop (\$50) _____

Address: _____

EMT-B Skills (\$35) _____

City: _____ State: _____ Zip: _____

Pediatric Instructor Skills (\$50) _____

Phone: _____ Fax: _____

EMS One: Survival Guide... (\$50) _____

Email Address: _____

EMS Care T-shirt (\$12) **Size** _____

(Conference T-Shirt Free For 2-Day Conference Registrations **Received** Before April 4, 2008)

Certification/Licensure (Circle One):

FR EMT-B CRT CRTI EMT-P EMD RN Other

Group Discount:

Groups of 5 or more 2-day conference registrations will receive a discount of \$10 per attendee. (-) _____

Please Select the Pre-Conference & Breakout Sessions That You Plan to Attend:

PRE-CONFERENCE WORKSHOPS:

_____ EMT-B Skills (Limit: 25)

_____ QA Officer Update: Investigation / Interview Strategy

_____ Pediatric Instructor Workshop (Limit 32)

_____ EMS One: Survival Guide for EMS Officers (Limit: 30)

_____ Bystander Care Instructor Course (Limit: 15)

_____ Shock Trauma Advanced Airway Course (**See Prerequisites in Course Description**)

TOTAL DUE:

Make checks payable to: Emergency Education Council of Region III

Mail To: MIEMSS Region III; 653 West Pratt Street; Baltimore, Maryland 21201 **or fax** credit card registrations to (410) 706-8530.

Pay by Credit Card!

VISA: _____ Master Card: _____ Discover: _____

Exp Date: _____

Card #: _____

Signature: _____

BREAK-OUT SESSIONS:

Saturday, April 26, 2008:

Breakout 1 A B C D

Breakout 2 A B C D

Breakout 3 A B C D

Breakout 4 A B C D

Sunday, April 27, 2008:

Breakout 5 A B C D

Breakout 6 A B C D

Breakout 7 A B C D

- **Submit one registration form for each attendee.**
- **Groups applying for discounts must submit all registration forms together.**
- **No refunds will be granted unless a written cancellation is received prior to April 11, 2008. All cancellations are subject to a \$20 processing fee. Returned checks are subject to a \$25 processing fee.**
- **Anyone requiring special accommodations or having special dietary requirements should contact the Region III Office of MIEMSS by March 21, 2008 at (410) 706-3996.**

MIEMSS, Maryland EMS News
653 W. Pratt St., Baltimore, MD 21201-1536



Governor Martin O'Malley
Lt. Governor Anthony Brown

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Maryland Institute for Emergency Medical Services Systems

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(unless noted otherwise for specific photos)