

Maryland EMS Responds to Recovery Efforts after Superstorm Sandy

Providers Jump into Action to Aid Victims

Superstorm Sandy hit the East Coast hard on October 29 and 30, 2012, resulting in flooding, destruction, severe snowstorms, loss of homes, and dozens of deaths from North Carolina to Canada, preceded by those in the Caribbean. The damage left in its wake was so severe that responders and utility technicians from all over the country made their way to the hardest hit areas to assist in recovery efforts. Maryland EMS providers are among those that organized and deployed to help. To date, hard-hit areas to which Maryland providers have responded include Western Maryland, New Jersey, and New York. Below is a timeline of EMS deployments and recovery efforts.

October 29, 2012. MIEMSS organized an ambulance strike team to support search and rescue operations in Crisfield, Maryland, as heavy flooding impacted local residents with medical needs. Seven ambulances from Wicomico, Worcester, Dorchester, and Somerset Counties were made available for transport. Commercial ambulance units were on standby in Salisbury to assist as needed. Ten residents with specific medical needs were safely transported to local hospitals.

October 31, 2012. MIEMSS received a request from the State of New Jersey for ambulance strike teams (five ambulances and a supervisor) to assist in recovering from Hurricane Sandy. Two ambulance strike teams, along with an overall Task Force coordinator, were staffed, equipped, and supplied through a coordinated effort by MIEMSS, Baltimore City Fire Department, Washington County Department of Emergency Services, Talbot County Emergency Services, and LifeStar Response, a commercial ambulance company. The ambulance strike teams left Cecil County at 6:00 AM on November 1, 2012, and arrived at the staging area at the Atlantic County Training Center located in Egg Harbor Township, New Jersey, at 9:00 AM. They were assigned to various emergency response tasks such as patient evacuations, repatriations, and assisting with 9-1-1 emergency responses.

November 1-2, 2012. As the water surges were hitting Maryland's Eastern Shore, several inches of snow closed down parts of Western Maryland prompting a request for assistance from Garrett County Emergency Management. The response group, coordinated by MIEMSS, was inserted into Task Forces consisting of local and State law enforcement and emergency responder personnel. Charles County Emergency Services, Washington County Department of Emergency Services, Harford County Emergency Services, and commercial ambulance companies LifeStar Response, Butler Medical Transport, and Transcare Maryland, supplied EMS providers and

ambulances. A group of 39 EMS providers, with a fleet of 16 ambulances and one supervisor vehicle, responded to the recovery efforts. The group staged in Oakland, Maryland. They were assigned to various emergency response tasks such as assisting search and rescue missions, patient evacuations, wellness checks on citizens, and assisting with 9-1-1 emergency responses. The response to Garrett County was coordinated jointly by MIEMSS and the Maryland Emergency Management Agency (MEMA) along with other state and local agencies.

November 3, 2012. About 50 Maryland healthcare professionals were deployed to Brooklyn, New York, to assist survivors of Sandy in New York and New Jersey. The healthcare professionals, including doctors, nurses, paramedics, and logistics professionals, are members of the Maryland Disaster Medical Assistance Team (DMAT). The responders worked in Federal Medical Shelter Operations and Special Need Centers in Manhattan, built and staffed Federal Medical Stations, supported Emergency Departments in hospitals that were able to open, staffed a mobile hospital in the Rockaways section of New York City, and set up a mobile hospital in New Jersey to help support special need and sub-acute patients. They are one of 18 DMAT teams from around the country that helped to provide medical care for survivors of Sandy in New Jersey and New York.

November 5, 2012. A team of 12 emergency management professionals from the Baltimore region traveled to New Jersey to help coordinate EMS response in that state. Two six-person Incident Management Teams (IMTs) were formed to assist with resource management (providing tracking and accountability of personnel, assets, and requests for aid). The Baltimore Regional IMT included staff from MIEMSS, Baltimore City, and Anne Arundel and Howard Counties. The IMT worked with New Jersey Multi-Agency Coordination Center (MACC) personnel to assist with the coordination of EMS resources from many different areas, communicate with EMS field units, and plan for future needs and operations.

November 7, 2012. At 3:30 AM, an additional ambulance strike team (six medic units, one supervisor, and one representative from MIEMSS) made up of staff and vehicles from Baltimore City Fire Department, Charles County Emergency Services, Queen Anne's County Emergency Services, and commercial ambulance companies Transcare Maryland and Lifestar Response, left to assist in New Jersey.

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Providers Jump into Action to Aid Victims

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An EMS team conducts a water rescue in Crisfield, Maryland, as heavy flooding impacted residents with specific medical needs. Used with permission.



A Humvee attempts to travel through flooded streets in Crisfield, Maryland. EMS was on hand to assist the town's residents when the flood occurred just days before Halloween. Used with permission.



The Victor 6 Team, one of the ambulance strike teams from Maryland, gathers in front of an EMS vehicle used for recovery efforts in New Jersey. Photo by Bill Adams.



Ambulances responding to recovery efforts were staged at the Meadowlands Racetrack in East Rutherford, New Jersey. Photo by Bill Adams.

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An emergency response group consisting of commercial and jurisdictional EMS providers was deployed to Garrett County, Maryland, to help deal with the massive snowfall on November 1 and 2. Used with permission.



Maryland EMS joins members of the New Jersey Task Force at the New Jersey Multi-Agency Coordination Center (MACC) on November 5, 2012, to assist with the coordination of EMS resources. Photo by Bob Krane.



This home on Mantoloking Island in New Jersey was destroyed by the superstorm. To make matters worse, snow fell in the region. Photo by Randy Linthicum.



A view of the Atlantic Ocean from Mantoloking Island in New Jersey. Debris from the storm is scattered over the beach. Photo by Randy Linthicum.

New Maryland State Police Helicopter Unveiled

Ten New Helicopters Expected to Improve EMS Rescue Operations

On October 5, 2012, Governor Martin O'Malley joined Colonel Marcus Brown of the Maryland State Police, officials from AgustaWestland, representatives from the state's emergency medical services community, and other officials to unveil the first new Maryland State Police medevac helicopter, an important step forward in replacing Maryland's aging medevac helicopter fleet.

"The most sacred responsibility that any government holds is to protect the lives of its citizens. It's a statewide effort that involves partnership at every level, which is why we're fortunate in Maryland to have such talented and dedicated first responders," said Governor O'Malley. "That's why we chose to invest \$121.7 million for 10 new state-of-the-art Medevac helicopters that will replace our current fleet. Together, with the men and women of Maryland's law enforcement, we've driven down violent crime, homicides and property crimes to 30-year lows. And through our actions together, we can create a better, safer tomorrow."

Maryland's contract with AgustaWestland is for ten helicopters; the other nine helicopters are in production and will arrive soon. Officials with the Maryland Department of Transportation coordinated the procurement process. The new helicopters contain the latest in avionics and safety equipment, including terrain awareness warning systems, night vision compatibility, cockpit voice

and video recorders, radar altimeters, and advanced instrument flight rating capabilities, all of which are recommended by the Federal Aviation Administration. They provide more space in the patient and cargo areas, enabling flight paramedics to have better access to patients and to carry rescue equipment on board at all times.

"This new helicopter, and the others that will follow, represent an incredible improvement to public safety capabilities in Maryland," Colonel Marcus Brown said. "They will provide a safer aircraft for our crews, with more room and equipment for our flight paramedics to care for the injured. I thank Governor O'Malley who, with the support of the General Assembly, fulfilled his promise to the State Police, our public safety partners, and to the people of Maryland. These new aircraft will be put to good use and will, along with our EMS partners, continue the amazing lifesaving response and care Maryland is known for."

The new aircraft will replace Maryland's aging fleet of 11 helicopters, 10 of which are now more than 20 years old. Increasing age and flight hours result in increasing mandated inspections and maintenance.

The new aircraft have satellite tracking and downlink video capabilities, as well as interoperable communication. The twin engines on the helicopters are more powerful than those on the existing aircraft, which is

critical during a hoist rescue operation. The new aircraft will enable the crew to fly the aircraft away if an engine fails during a hoist operation. Currently, the aircraft can stay aloft if an engine fails, but the hoist rescue must be terminated before the aircraft can leave the scene. According to AgustaWestland, the new helicopter is the fastest in its class, has the largest cabin space of any helicopter in the same weight class, and is the only helicopter in its class that meets or exceeds all the latest civil certification safety requirements.

The new helicopters arriving in Maryland will not be placed into immediate service. State Police helicopter pilots and flight paramedics will be undergoing extensive training on the new aircraft. In addition to pilots learning the new aircraft requirements, the flight paramedics must also become familiar with the new medical equipment and configurations in the aircraft. State Police Aviation Command officials anticipate the new aircraft will be deployed in actual missions in early 2013.

Maryland's medevac program began in March 1970 by way of a cooperative effort between the Maryland State Police and Dr. R Adams Cowley. Since then, more than 138,000 patients have been flown to lifesaving care at one of Maryland's network of trauma and specialty-care hospitals.



Governor Martin O'Malley speaks at the unveiling of the new Maryland State Police helicopters on October 5, 2012. The first of 10 new helicopters, seen in the background, will be deployed in 2013.



Governor Martin O'Malley, left, is joined by Mr. William Bernard, Director of Flight Operations and Lt. Walter Kerr, Commander of Helicopter Operations, Maryland State Police Aviation Command, in front of the newest Maryland State Police helicopter.

Region III Updated to Narrowband Operations on November 14

Having Narrowband-Capable Radio Equipment is Essential

MIEMSS began migrating to narrowband operations on April 4, 2012. The transition for Region III, the last to be converted, occurred on November 14, 2012, at 0800. Within Region III, operators relying solely on the MIEMSS UHF system (Call and Med Channels) should now have UHF radio equipment capable of operating in narrowband mode. The transition to narrowband operations for Maryland counties took place as follows:

- April 4, 2012: Somerset, Worcester, and Wicomico
- June 7, 2012: Dorchester, Talbot, Queen Anne's, Caroline, and Kent
- September 6 and 7, 2012: Garrett, Allegany, and Washington
- October 3, 2012: Frederick, Montgomery, Prince George's, Charles, Calvert, and St. Mary's
- November 14, 2012: Anne Arundel, Baltimore, Carroll, Cecil, Harford, Howard, and Baltimore City

Instructions for Region III providers consulting or patching to the EMRC are as follows:

UHF Radio (aka MED or EMRC Radio)

1. Set your UHF Med radio to Call 1 Tone C (Channel 129).
2. Listen for traffic. If there is no traffic, contact the Region III EMRC by depressing the microphone button and saying "Your Jurisdiction Medic XX (or ambulance) to Region III EMRC."
3. Release the microphone button and wait for their reply.
4. Once they reply, request the needed hospital(s) or resource(s).
5. Region III EMRC will instruct you to go to Med 2 Tone C (Channel 122), Med 3 Tone C (Channel 123), Med 4 Tone C (Channel 124), or Med 8 Tone C (Channel 128).
6. When you switch to the appropriate Med Channel, **it is extremely important that you announce yourself on the Med Channel** by saying something like "Your Jurisdiction Medic XX is standing by."

Note: This step is important because it allows the Communication System to select the communications tower closest to you. EMRC personnel are unable to control which tower is selected—this function is fully automated.

7. When you hear the hospital or resource come online, you can begin your consult.
8. Once you have completed your consult, switch back to Call 1 Tone C (Channel 129).

Moulage Boot Camp Readies Attendees for "Real-Life" Emergency Drills

On Monday, October 15, 2012, representatives from local jurisdictions and medical facilities gathered at the Region III Alternate Care Site and Training Center in Baltimore for Basic Moulage Boot Camp. Attendees

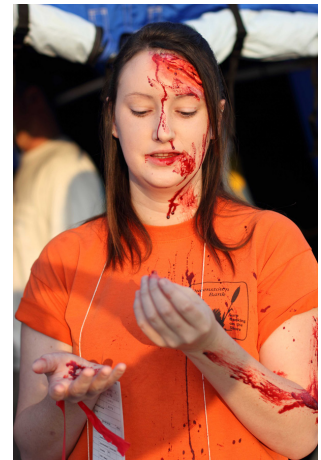
were trained in the application of rubber mask grease (RMG) makeup and three-dimensional materials, such as latex and gelatin, to simulate high-fidelity injuries that might be suffered in a mass casualty event. The appli-

cation of hyper-realistic simulated injuries lends itself to a heightened experience for emergency drill participants, say instructors Suzanne Patterson and Robert "Sarge" Shotto, LPN, resulting in better-equipped and more knowledgeable responders in real-life situations.

Participants in the "Boot Camp" learned some basic techniques such as creating contusions, cyanosis, burns, lacerations, and even open fractures. A little over a week after the boot camp, on October 24, some boot camp attendees were able to apply these techniques to "victims" for an emergency drill



Mary Alice Vanhoy, RN, MSN, CEN, CPEN, NREMT-P, Manager at the Queen Anne's Emergency Center in Queenstown, Maryland, receives information about incoming patients at the hospital's drill.



A volunteer checks out her life-like moulage at the Queen Anne's Emergency Center drill on October 24, 2012.

in Easton, Maryland. In this simulation, patients were evacuated from an ice rink with a collapsed roof, triaged, and those with severe injuries or illnesses were transported to Queen Anne's Emergency Center.

Teams from Baltimore County Conduct School Bus Mass Casualty Incident Drill

On Sunday, October 22, providers from Pikesville, Lutherville, Cockeysville, and Arcadia fire companies teamed up for a mass-casualty incident and rescue response training involving an occupied and overturned Baltimore County school bus. The simulation was held at the school system's Wight Avenue facility in Cockeysville.

Responders were faced with a motor vehicle crash involving a bus on its side with multiple "patients," role-played by Junior Firefighters from Arcadia. Mock injuries in children trapped in the bus ranged from minor cuts and bruises to critical, and even one DOA. Crews worked to stabilize the school bus and assess the situation, requesting additional suppression and EMS resources. The training also focused on simulated triage using triage tags, the logistics of transporting patients to area hospitals, and dispatch communications. In total, eight patients were triaged: two Priority 1 (critically injured victims), four Priority 2 (serious), one Priority 3 (minor), and one Priority 4 (deceased).



Junior Firefighters from Arcadia were moulaged for life-like injuries and triaged during a mass casualty incident drill in Baltimore County. Firefighters determine the severity of the injuries and what treatment would be necessary had this been a real incident. Photo by Michael Schwartzberg/PVFC (firepix1075.zenfolio.com)

EMT and EMR Renewal Cards

Beginning November 15, 2012, MIEMSS Office of Licensure and Certification began printing renewal cards for EMT and EMR providers eligible for January 1, 2013, recertification. These cards will be printed on new stock allowing for self-lamination of the provider card. Use the following directions, which will also be included with your recertification letter, to self-laminate your provider card.

1. Peel card from liner slowly
2. Place card face down in window
3. Punch card through back of sheet

Please contact the MIEMSS Office of Licensure and Certification at 410-706-3666 with any questions.



Firefighters quickly move "victims" away from the overturned school bus and get them ready for transport. Photo by Michael Schwartzberg/PVFC (firepix1075.zenfolio.com)



Winterfest EMS 2013

January 24 – 27, 2013

Harrison's Chesapeake House - Tilghman Island, Maryland
Join Us for a Fun and Relaxing Weekend of Quality Education

Preconferences

EMT-B 12-Hour Skills Refresher

Date: January 24 at 5 PM & January 25 at 8 AM

Location: Tilghman Island Volunteer Fire Dept. **Fee:** \$60 (Registration is required.)

For EMT-Bs; complete all your recertification needs with us at WINTERFEST EMS 2013. A 12-hour skills class is available as a pre-session followed by 12 hours of continuing education which, with careful choosing, can meet the 12-hour requirement. **Space is limited. Register early!**

When the Stork Dials 911—Managing OB and Newborn Emergencies

Date: January 25 at 8 AM

Location: Tilghman Island Volunteer Fire Dept. **Fee:** \$30 (Registration is required.)

Childbirth is supposed to be a joyous occasion, but for some emergency care providers it is anything but. This workshop is designed for all levels of providers who do not routinely participate in the delivery of newborns. Come learn how to “catch the baby,” take care of the mother, and help the baby transition to its new environment. Be prepared for a fast-paced day of lecture and hands-on.

Winterfest EMS 2013

Saturday – January 26, 2013

0730–0800 **Registration**

0800–0815 **Welcome**

0815–0930 **What's Happening at MIEMSS,
A Detailed Overview (1.5 M)**

Robert R. Bass, MD

Executive Director, MIEMSS

Dr. Bass will provide an update on the key initiatives within the state to include an overview of

- Trauma and Specialty Centers, Stroke, STEMI
- Update on the Medevac Program
- Syscom/EMRC
- eMeds & Patient Reports
- Ambulance Safety Task Force Report

0930–1000 **BREAK WITH VENDORS**

1000–1130 **Finding Humor in the Crazy World of EMS:
Welcome to the Dark Side (1.5 M)**

Steve Berry, BA, NREMT-P

While working in the field of EMS, we are often exposed to tragic events. For many, gallows humor offers a momentary respite from these events. Join Steve as he encourages us to enhance our sense of healthy humor while touching your heart with hope and understanding.

1130–1245 **LUNCH WITH VENDORS – CHESAPEAKE HOUSE**

BREAKOUT SESSIONS

1300–1430 **A. CISM: What and When? (1.5 M)**

Julie Kugler-Bentley, RN, LCSW-C, CEAP

Natalie Bowers, LGSW

Region II CISM Team

This educational session will provide an overview of CISM symptoms and appropriate interventions as well as information about how and when to contact your local team for assistance.

B. Evolution of Trauma Resuscitation (1.5 T)

Tom Chiccone, MD FACEP

Evidence-based medicine continues to drive change in the care of trauma patients. This breakout will survey a decade of such changes, as well as peer into the crystal ball about upcoming trends.

C. Beautiful Water, Deadly Water (1.5 M)

Mary Alice Vanhoy, RN, CEN, CPEN, NREMT-P

Queen Anne's Emergency Center

Whether East Coast, West Coast or the Gulf of Mexico, these beautiful waters can bring hours of enjoyment while placing some at significant risk for life-threatening emergencies. Some risk are obvious like collisions and submersion, but others are less obvious but equally dangerous. Aquatic life, bacterial infection and CO exposure are more covert leading to challenges in clinical management.

(Continued on next page)



Winterfest EMS 2013

Saturday – January 26, 2013

(Continued from previous page)

D. The Hole Story: The Implications of Body Piercing (1.5 T)

Steve Berry

Body piercing has become a common phenomenon in all areas of the country. Why do people do it and what are the health risks? We'll review some of the ways they may interfere with standard treatment for those working in emergency health care.

1300–1630

E. Maximizing Outcomes in Acute Stroke (1.5 M)

Christina Ball, RN, BSN, CNRN

Applying evolving evidence-based guidelines and treatment options into practice.

F. Pediatric Puzzlers (1.5 M)

EMS-C Faculty

Come put the puzzle pieces together to solve the mystery of these pediatric medical cases. This session will highlight tips and tricks used to perform pediatric assessment to help navigate the various protocols, treatment, and transport decisions providers must make.

1430–1500

1500–1630

1630

G. Mechanism of Injury in the Maryland Trauma Patient (1.5 T)

Kristen Ray RN, MSN

Heidi Halterman, RN, CCRN, NREMT-P

Case Reviews approach to a patient's trip through the MD Trauma System.

H. Life Begins and Ends at the Cellular Level (1.5 M)

Charlie Brown, NREMT-P

A commentary on how everything you do affects the microscopic world inside you. This session will take a look at how various components affect the body, from infections, to how drugs such as albuterol work at a cellular level.

I. Emergency Scene Tactical Survival, Being Proactive As Well As Reactive (3.0 T)

Tom Harmon

Division Chief, BWI International Airport

In this session we will look at training and evolutions proven to save lives during responses, on the scene, and in our normal lives. Several concepts will be examined, including two-in, two-out, rapid intervention, and managing the Mayday. Participants are asked to bring tactical ideas or policies, worksheets, and SOGs/SOPs to share during open discussion sections.

BREAK WITH VENDORS

REPEAT BREAKOUTS

CONFERENCE ENDS FOR THE DAY

Join Us Back at Harrison's for Dinner Service Starting at 6:00

Sunday – January 27, 2013

0830–0845 Sign In

0845–0900 Opening GYM

0900–1015 Your New MSP AW-139 Helicopters (1.5 T)

Sergeant Nathan H. Wheelock, Chief Flight Paramedic, Maryland State Police - Aviation Command, Medical Operations Section

This session will cover the protocols for the proper use of utilizing the services of the MSP Aviation Command and the mechanical and medical capabilities of the newly acquired AugustaWestland (AW) 139 helicopters.

1015–1030 **BREAK**

1030–1145 The Horse Became a Zebra (1.5 T)

Tracy A. Timmons, MD

Trauma Attending Physician

R Adams Cowley Shock Trauma Center

Assistant Professor of Surgery

University of Maryland School of Medicine

Is that a Zebra or just another horse? While most trauma care is straight forward, things are not always what they seem. A look at the unusual outcomes of trauma care.

1145–1245 **LUNCH – CHESAPEAKE HOUSE**



1300–1415 When Children Fall Off the Trauma Decision Tree (1.5 T)

Jennifer Fritzeen, MSN

Director of Trauma and Burn Services at Children's National Medical Center

Injured children sometimes present with unique injuries that do not easily fit into the Alpha, Bravo, Charlie or Delta categories of the Maryland/CDC Trauma Decision Tree. Children explore their environments as part of growing up. They climb furniture to reach off-limit items, jump off refrigerators to see if they can fly, get caught under garage doors while pretending to be Indiana Jones, and do many other daring and dangerous things.

1415–1430 **BREAK**

1430–1545 Case Studies in Confusion: Cutting Through the Chief Complaint (1.5 M)

Dr. Ben Lawner

Department of Emergency Medicine

University of Maryland Medical Center

Deputy EMS Medical Director,

Baltimore City Fire Department

"Your chief complaint is what???" A look at what the patient says to you and what is really wrong with them.

1545

DRIVE CAREFULLY – THANKS FOR COMING – SEE YOU NEXT YEAR



Winterfest EMS 2013

Location:

Winterfest EMS will be held on Tilghman Island with headquarters at Harrison's Chesapeake House.

Payment and Cancellation Policy:

Pre-registration is required. Payment of all fees must be included with pre-registration. There is a \$25 fee for bad checks. We will be accepting registration until January 11, 2013, or until the conference is filled—whichever comes first. There will be a late registration fee of \$25 added to all registrations that are received after January 11, including call-ins. Walk-in registrations will not be allowed. All students must be paid in full prior to Winterfest. All credit card transactions and company billings must be approved by the Winterfest staff prior to January 11, 2013. Any student with an outstanding balance from any previous Winterfest will not be allowed to participate until their account is paid in full. All requests for cancellations must be made in writing to:

Winterfest EMS
c/o Talbot Co. EMS
29041 Corkran Rd.
Easton, MD 21601

Refunds, excluding a \$10 processing fee, will be mailed for cancellations received before January 12, 2013. Cancellation after January 12, 2013 will result in forfeiture of your entire registration fee. Speakers and topics are subject to change

Accommodations:

WINTERFEST EMS WILL NOT BE TAKING ANY RESERVATIONS.

All reservations must be made by the student. Please contact any hotel directly to reserve and pay for your room. You must request the **Winterfest** rate as noted below. Suggested local lodging is as follows:

Harrison's Chesapeake House, (410) 886-2121, \$85 per night double occupancy, \$95 per night single occupancy

Tilghman Island Inn, (410) 886-2141, \$125 per night

Lowe's Wharf, (410) 745-6684, \$79 Thursday night, \$99 Friday night, \$99 Saturday night

****Breakfast as Harrison's is included for those who are staying at the above listed hotels****

Breakfast will be served starting at 6:30 Saturday and 7:00 Sunday; gratuity is not included.

Weather Cancellation:

The Conference Planning Committee will make a decision about cancellation of Winterfest EMS due to severe weather by 12 noon on January 23. Call Talbot County EMS at (410) 820-8311 for details. Written requests for refunds will be accepted within 30 days of cancellation.

Information:

For additional information or registration confirmations, call the TCEMS at (410) 820-8311 or email us at winterfest.ems@hotmail.com or contact us through Facebook. The Winterfest EMS Committee is committed to ensuring that individuals with disabilities are able to fully participate in the conference. If you require additional assistance, please call the Winterfest EMS Committee.

Directions:

Traveling from the Bay Bridge and points West:

Take Route 50 East to Easton. Turn right onto the Easton Bypass (Route 322). Turn right at the 4th light (St. Michaels Road, Route 33). Follow road for about 23 miles to Tilghman Island. Once you cross the bridge, Tilghman Island Volunteer Fire Department will be on the left; Tilghman Island Elementary School will be on the right; Harrison's Chesapeake House will be on the left on Chesapeake House Drive just past the school.

Traveling from Ocean City and points East:

Take Route 50 West to Easton. Turn left onto the Easton Bypass (Route 322). Turn left at the 3rd light (St. Michaels Road, Route 33). Follow road for about 23 miles to Tilghman Island. Once you cross the bridge, Tilghman Island Volunteer Fire Department will be on the left; Tilghman Island Elementary School will be on the right; Harrison's Chesapeake House will be on the left on Chesapeake House Drive just past the school.



Winterfest EMS 2013

Winterfest EMS 2013 Registration

Name: _____ Nickname: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Other Phone: _____

Provider #: _____ Email: _____

Primary Affiliation: _____

Certification/Licensure (Circle): FR EMD EMT-B CRT EMT-P LPN RN NP PA MD

PRECONFERENCES

(Select Only One):

_____ EMT-B Skills Refresher, \$60

_____ OB/Newborn Emergencies, \$30

CONFERENCE FEES:

_____ Saturday, \$85.00 (choose breakout(s) below)

_____ Sunday, \$85.00 (general session only)

_____ Both Days, \$150.00 (choose breakout(s) below)

SATURDAY BREAKOUT SESSIONS (choose one for each session OR double breakout)

First Session – A B C D E F G H

Second Session – A B C D E F G H

Double Breakout – I

Dinner at Harrison's Chesapeake House, Tilghman Island, MD

Rates are per person and DO NOT include gratuity.

___ Friday Night Dinner Only, \$35

___ Saturday Night Dinner Only, \$35

___ Friday and Saturday, \$65 (rate only available for 2-night package)

Total Amount Due \$ _____ = Preconference Fees + Conference Fees + Meal Cost (as applicable)

Make checks payable to **Winterfest EMS**. Reservations are due by **January 11, 2013**. Meal fees must be included with registration. Send check, along with this form, to Winterfest EMS, c/o Talbot Co. EMS, 29041 Corkran Rd, Easton, MD 21601. Call or email us with any questions or confirmation requests (410) 820-8311 or winterfest.ems@hotmail.com.

****Provider Number is Required to Receive Continuing Education Credits****



MIEMSS Office of Licensure and Certification Presents the
2013 EMS Education Symposium

“Supporting Student Success”

A Daylong PDI and Informational Conference for
EMS Education Program Administrators and Instructors



Keynote Speaker:

Kenneth Threet

EMT Training Coordinator
Montana Board of Medical Examiners

“Inter-Rater Reliability: What is it and how can I use it”

In EMS education and testing we rely on technical experts to provide us feedback on student performance, but do we really know what we are receiving and if it can be considered reliable. Understanding the principles of “Inter-Rater Reliability” and using it, we can be assured the feedback we obtain is reliable and can be used to determine student growth and success in the material we are attempting to provide them.

Plus:

Christine Haber, MPH, NREMT-P

And

MIEMSS Annual EMS Education Program Update

Thursday, January 3, 2013

8:00 AM–3:00 PM

MFRI Headquarters

4500 Paint Branch Parkway, College Park, MD 20742

Registration limited to first 100 people and must be received before December 30, 2012.

To register? Go to the MFRI Seminars web page and register electronically
<http://www.mfri.org/cgi-bin/seminars.cgi>

Questions? Contact Peter Fiackos in MIEMSS Offices of Licensure and Certification
1-800-762-7157 or pfiackos@miemss.org



*Special Thanks to MFRI for their continuing support of the annual
EMS Education Symposiums*



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



Governor Martin O'Malley
Lt. Governor Anthony Brown

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