



Maryland EMS News

Vol. 23, No. 2 For All Emergency Medical Care Providers January 1997

From the Director's Office



The new year brings each of us a "clean slate" and a chance to make changes in our lives and work to spur improvement and progress.

This, of course, is also

true in EMS. I would like to share with you my experiences at three meetings in the past months that have focused on the "new and improved" in EMS training.

On December 5 and 6, the National Highway Traffic Safety Administration (NHTSA) held a conference to address future educational initiatives in EMS involving the process for curriculum development. The consensus was that (1) the EMS curricula should be updated regularly to ensure that they will not get outdated to any great extent; (2) the EMS curricula should be addressed in multiple steps, including the processes by which scope of practice and core learning objectives would be defined; and (3) new technology and methodologies should be discussed relative to the new curricula.

Some of you may have read about TPA and other new drugs that are offering hope to many stroke patients. These drugs must be administered by hospital staff within the first several hours of the onset of stroke symptoms, and the patient must continue to be treated aggressively. On December 12 and 13, the National Institutes of Health (NIH) sponsored a conference to build consensus on where we are with stroke care and where we want to go. The roles of EMS and emergency medicine were discussed at length.

In the past, most people, including those in medicine, have agreed that stroke has been largely untreatable. But last winter the NIH released a study that demonstrated the efficacy of TPA in improving outcome in acute ischemic strokes treated within three hours of the onset of symptoms. Now, for the first time, we can do something other than watch and hope.

Each year 400,000 patients suffer ischemic strokes and 100,000 have hemorrhagic strokes—many with devastating results to the patients and families. If we are to improve the outcome from strokes, we must adopt an integrated, multi-disciplinary approach to the problem. Public education programs in prevention and recognition need to be initiated. Hospitals need to gear up to treat patients in the three-hour window.

In Maryland, several hospitals are beginning to use TPA for appropriate patients. We are also looking at how EMS prehospital providers should treat stroke patients. More about this topic will appear in future issues of our newsletter.

Following its annual meeting, the National Association of State Emergency Medical Services Directors (NASEMSD) submitted the following four recommendations to NHTSA regarding the EMT-P and EMT-I curricula.

1. The description of the profession for the paramedic should be modified to strike the reference to the transport of patients to non-emergency facilities.
2. The paramedic curriculum should be refocused to address only information essential and relevant to the traditional role of the paramedic.
3. A separate document of educational objectives should be developed in addition to the curriculum.
4. There should be no further devel-

opment of the EMT-I curriculum until issues with the paramedic curriculum are resolved.

NHTSA, along with the Center for Emergency Medicine, which is piloting the EMT-P curriculum and plans to pilot the EMT-I curriculum, agreed on the first three of the four proposals stated above. Because postponing the pilot test of the EMT-I would add at least six months to the effort and additional costs, it was felt that the EMT-I pilot should not be postponed unless absolutely necessary.

◆ Robert R. Bass, MD, FACEP

R Adams Cowley Shock Trauma Center

The decision to reduce the bed capacity in the R Adams Cowley Shock Trauma Center was reached after several months of decline in the overall length of stay and the consequent reduction of inpatient census. After careful review, it was determined that the reduction of inpatient census was not merely a short-term anomaly, but a permanent downward trend. On October 19, the 20-bed step-down unit located in the older portion of University Hospital was closed and the patients on the unit were transferred to open beds in the main building of the Shock Trauma Center. The main building has 72 beds, which are now staffed to full capacity. This ensures that there are sufficient staff to continue to serve the citizens of Maryland without any interruption to the mission of serving as the primary adult resource center.



EMS SEMINAR '97

OCEAN CITY, MARYLAND

Conference Lectures: March 15-16, 1997

Time: Saturday (9AM-5PM), March 15 and Sunday (9AM-5PM), March 16

Location: Princess Royale, 91st Street

Continuing Education Credits:

12 Hours (for EMT-A's, EMT-B's, CRT's, and EMT-P's)

Fee: \$55 (Covers all lectures, continental breakfasts, and lunches)

24-Hour EMT Bridge Session: March 13-16, 1997

Time: Thursday (6-10 PM), March 13; Friday (6-10 PM), March 14;

Saturday (9 AM-5 PM), March 15; and Sunday (9 AM-5 PM), March 16.

Location: Princess Royale, 91st Street

Fee: \$125 (Covers 24-hour session, including continental breakfasts and lunches on March 15 and 16 and books)

Note: Anyone attending the EMT Bridge Session must have current EMT-A Certification and a current health care provider CPR card.



REGISTRATION FORM

Deadline: February 24, 1997 (Registration is limited)

NAME: _____

ADDRESS: _____

PHONE: _____ SS#: _____

AFFILIATION: _____

CERTIFICATION: EMT-A EMT-B CRT EMT-P

I will be attending:

Conference Lectures, March 15 & 16

EMT Bridge Session, March 13-16

A copy of your Maryland EMT-A card and CPR card must accompany your registration form.

I am enclosing:

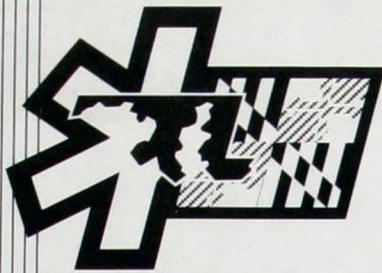
\$55 (Conference Lectures)

\$125 (EMT Bridge Session)

MAIL REGISTRATION TO:

Ocean City Paramedics, P.O. Box 1228, Ocean City, MD 21842

Attention: Debbie Patterson. For more information, call 410-723-6616.



MARYLAND'S STARS OF LIFE AWARDS

Each year the Maryland Institute for Emergency Medical Services Systems celebrates EMS Week by honoring men and women across Maryland who have contributed to the EMS system. As we continue with that tradition in 1997, we are using a term to describe all of our honorees, "Stars of Life." We feel this title is appropriate for these outstanding men and women because it combines our symbol, the Star of Life, with our shared vision, "the elimination of preventable death and disability from injury or sudden illness." Last year, award nominees were solicited mainly from jurisdictional officials. This year we are extending the nomination process to everyone who receives the *Maryland EMS News*. Awardees will be selected by the Regional Affairs Committee of SEMSAC. For further information, call 410-706-3994.

The categories of Maryland Star of Life and Maryland EMS Citizen relate to specific incidents occurring from March 1, 1996 to February 28, 1997. Multiple awards may be presented.

MARYLAND STAR OF LIFE AWARD

This award may be given to an individual, multiple individuals, or teams on the same incident for an outstanding rescue by EMS personnel.

MARYLAND EMS CITIZEN AWARD

This award is intended for citizen rescuers who have demonstrated quick thinking, fast action, and heroism.

One award for each of the three categories below will be selected by the Regional Affairs Committee of SEMSAC. Nominees not selected will be sent to the Regional Councils for possible recognition at that level.

EMS PROVIDER OF THE YEAR

For a provider who has made outstanding contributions to the continuous improvement of emergency medical services in Maryland (for example, in the areas of quality assurance; public or EMS education; prevention; delivery of EMS services; new technology).

OUTSTANDING EMS PROGRAM

For a program that offers an innovative approach to reducing death and disability. The program must be affiliated with an EMS system component, such as a hospital, educational facility, rescue squad, or EMS organization.

LIFETIME SERVICE AWARD

For an individual who has dedicated his/her life to the prevention of death and disability through outstanding contributions to the development and continuous improvement of the EMS System.



MARYLAND'S STARS OF LIFE AWARDS — 1997 NOMINATION FORM

Individual(s)/Organization(s) Nominated: _____

If there is more than one nominee, please duplicate this form or use a separate sheet for the other names and addresses and attach it to this form.

* **Address:** _____
(P.O. Box or Street)

(City) (State) (Zip)

* **Telephone Nos.** _____ (H) _____ (W)

Nominee's Level of Certification or Licensure (if applicable) _____

Professional Affiliation _____ **Telephone No.** _____

Award Category:

- Maryland Star of Life Award EMS Provider of the Year Lifetime Service
- Maryland EMS Citizen Award Outstanding EMS Program Award

This individual/group/program/facility is being nominated for outstanding recognition because:

Please attach additional documentation such as newspaper articles, video footage, and letters of commendation.

Name of person submitting this nomination:

(Print or Type)

(Signature)

(Address)

* **Telephone Nos.** _____ (H) _____ (W)

FAX Nos. _____ (H) _____ (W)

* Must be completed!!

NOMINATIONS MUST BE RECEIVED AT MIEMSS BY MARCH 17, 1997.
Mail to: Jim Brown, MIEMSS, 636 W. Lombard St., Baltimore, MD 21201-1528
or FAX to: Jim Brown, 410-706-3485.



EMS CARE '97

A BRIDGE TO EMERGENCY MEDICAL CARE
IN THE 21ST CENTURY

April 25-27, 1997

at the Greenbelt Marriott Hotel in Greenbelt, Maryland

Sponsored by

The Maryland Institute for Emergency Medical Services Systems and the Emergency Education Council of Region V, Inc.

Hosted by

The Prince Georges County Fire Department

The Program

As we approach the start of a new century, we can look back with pride on the progress modern EMS has made in the last 40 years. Emergency medical technician training, cardiopulmonary resuscitation, trauma center development, 9-1-1 emergency access, cardiac rescue technician and paramedic training, defibrillation, med-evac response, pre-arrival instructions, and injury prevention are the legacy we will carry forward and the foundation on which we will build the bridge to 21st century EMS. This year's program is designed to meet the new challenges we face as we prepare to enter the next century.

The "Futures Track" of our program will explore the challenges of providing emergency care in the 21st century. On Saturday and Sunday, April 26 and 27, new frontiers in medical science will be explored, as will the challenges represented by managed care and other fiscal and socioeconomic constraints. Ways to work better and smarter will be explored. The realities of providing emergency care in the late 20th century will be apparent as we explore ways for providers to protect themselves from violence and learn about models for injury and violence prevention. Three different preconference program offerings are also available. Note that while clinical topics will be aimed at the ALS provider, many of our topics are of interest to all who work in EMS, including EMTs and nurses.

Since one of the goals of Maryland's EMS community is certifying all current EMT-A's as EMT-B's by the year 2000, we will offer an Emergency Medical Technician Bridge Program as the second track of our program.

This EMT Bridge class will be held on Friday, April 25, Saturday, April 26, and Sunday, April 27. This program is very intense (8 AM to 5 PM on three consecutive days) and requires the participant to have a provider-level CPR card (AHA, ARC, or equivalent) that is current on the day the class starts, a valid Maryland EMT-A card, and reading assignments completed prior to the first class. The reading assignments will be sent with a confirmation letter to each participant. A written and skill proficiency evaluation will complete the program on Sunday afternoon. The Bridge class is open to all Maryland-certified EMT-A's on a space-available basis with preference given to those whose EMT-A certifications expire on or before December 31, 1998 and who have their registration forms in the Region V Office by March 21, 1997. No phone or fax registrations will be accepted.

Registration Information

Preregistration is required. We will accept registrations received in the Region V Office by April 18, 1997 or until the conference is filled--whichever comes first.

As stated above, preference for the EMT-B program will be given to those whose EMT-A certifications expire on or before December 1998 and who register for the conference by March 21, 1997. Confirmation letters will be sent. No walk-in registrations will be accepted. Refunds, excluding a \$20 processing fee, will be provided for cancellations received in **writing** prior to April 18. There will be a \$25 fee for bad checks. We can invoice Maryland governmental and EMS agencies and hospitals directly. Please contact registrar Angie Glidden for details.

Fees

The registration fee for the three-day EMT Bridge program covers all activities, including continental breakfasts, breaks, luncheons, and printed materials. The registration fee for this program is \$175.

The registration fee for the two-day EMS Futures Program covers all activities, including continental breakfasts, breaks, luncheons, and printed materials. The registration fee for this program is \$120. The registration fee for Friday's preconference includes all conference activities as well as continental breakfast, breaks, luncheon, and printed materials. The Pediatric Skills Instructor Program is available for \$25. The fee for all other Friday programs is \$60.

Continuing Education Credits

The EMT Bridge class provides all 24 hours of training required to become a Maryland EMT-Basic.

Specific prehospital credits for all other programs will be noted in your confirmation package.

Nursing contact hours have been approved by the Nursing Education Committee at MIEMSS which is accredited as a provider by the American Nurses Credentialing Center on Accreditation.

Hotel Accommodations

The special conference rate is \$75 a night, plus 10% tax for a double room (king or two double beds); add \$10 for each extra person in the room. These rates are guaranteed only if your reservations are received by April 3, 1997 and guaranteed by check or credit card number. Tax-exempt organizations must pay by check imprinted with the organization's name and send documentation of the organization's tax-exempt status.

(Continued on page 6)

(Continued from page 5)

Social Events

To facilitate the exchange of ideas, networking, and just plain fun, some special events are scheduled throughout the weekend. The highlight will be Saturday night's International Sampler from 6 to 9 PM. The Sampler provides an opportunity to taste a variety of cuisines, including Italian, Mexican, and Japanese, in an informal setting while you view the latest in EMS equipment and supplies displayed by vendors. A free dance, open to all, will follow. Details about the social events will be in your registration package.

Directions

From the Capital Beltway (I-495) take Exit 23 to Kenilworth Avenue. Follow through one light. Take the next left on Ivy Lane. The Marriott is the second building on the left.

Special Accommodations

If you require special accommodations to attend our workshops, please provide information about your requirements when you register. Note: we are unable to provide assistance with transportation.

We have made every effort to choose healthy food for our meals. If you require a special menu or have specific nutritional needs, please let us know.

Sponsors

We have been able to keep the costs of EMS Care '97 well below comparable programs because of the outstanding support of the hospitals, trauma centers, and physicians in Region V and the state.

Additional Information

For additional information please contact the Region V Office of MIEMSS at 301-474-1485.

Friday, April 25

Preconference Programs

9:00 AM - Noon

Skills for the 21st Century

Quality Improvement and Risk Management in EMS. A must for EMS providers and managers, career and volunteer, this half-day session will demonstrate how to apply quality management principles to real-world EMS.

1:30- 3:00 PM Management Track (Part 1)

Issues in Managed Care for the Prehospital Manager. John Ashworth, MHA, Executive Director, R Adams Cowley Shock Trauma Center.

Public/Private Partnerships in EMS: Doing More with Less.

Joann Bonkoski, RN, NREMT-P, Director of Ambulatory Services at Prince Georges Hospital Center.

3:30 - 5:00 PM Management Track (Part 2)

Public Information, Education, and Relations (PIER). Captain Chauncey Bowers, Prince Georges Fire Department, and James Brown, Director, Educational Support Services, MIEMSS. This "how-to" workshop will provide an overview of PIER and demonstrate its importance to all phases of EMS operations. The student will be able to promote the development of proactive EMS

PIER programs that will raise public awareness, understanding, and participation in the EMS System.

9:00 AM - 5:00 PM Pediatric Trauma Instructor Course

This course will prepare EMS instructors to conduct Pediatric Skill Stations (formerly Megacodes). We have invited vendors to demonstrate the use of state-of-the-art pediatric training equipment purchased through a Department of Transportation Highway Safety grant.

1:30-3:00 PM Clinical Track (Part 1)

Advances and Controversies in the Management of Respiratory Distress and Airway

Terry Jodrie, MD, Prince Georges County's Associate Medical Director, and Douglas Floccare, MD, Maryland State Aeromedical Director (MIEMSS), will discuss this critical area of EMS care.

3:30-5:00 PM Clinical Track (Part 2)

Controversies in the Management of Critical Patients.

Emergency management of stroke patients, 12 lead EKGs, traumatic shock and fluid resuscitation, and expanded practice parameters will all be explored by MIEMSS Executive Director Robert R. Bass, MD.

Saturday, April 26, 1997

9:00 - 9:30 AM

Opening Ceremonies

Chief A.D. Bell
Prince Georges County

9:30- 10:30 AM

Quality Emergency Care in the 21st Century: Meeting the Challenge

Robert R. Bass, MD, Executive Director of MIEMSS, will explore many of the factors that will impact how we provide care in the future. The impact of managed care, the role of specialty centers, the concept of the expanded scope of practice for the prehospital provider, and public access defibrillation will all be explored.

10:30- 10:45 AM Break

10:45- 12:00 Noon

Children are the Challenge: An Overview of Pediatric Emergency Care Issues for the 21st Century

A panel of the state's pediatric medical directors led by Joseph Wright, MD, MPH, Associate EMS Medical Director for Pediatrics at MIEMSS, will explore these cutting-edge issues.

12:15-1:15 PM Luncheon

1:45 - 3:15 PM

SESSION 1 (Select only one)

- A. **New Hope for Victims of Stroke?: A Point/Counterpoint on the Efficacy of New Treatment Modalities**
The experts will debate divergent medical views on this hot topic.
- B. **Injury Prevention: A Grass-Roots Approach**
Some of Maryland's most outstanding prevention programs were started by

EMS providers. Meet them and learn their organizational secrets, resources, and tips for success.

C. Pediatric Trauma Skills Station

A full afternoon of applying your pediatric assessment and management skills to a variety of scenarios. Note: This station lasts until 5:00 PM. Enrollment is limited.

Break

3:30- 5:00 PM

SESSION 2 (Select only one)

- D. **Airway, Breathing, Circulation, and a Weapons Search?!**
Including a weapons check in your survey could save a life--yours.
- E. **Volunteer Career Interface in EMS**
Chief Mary Beth Michos, Prince William County Department of Fire/Rescue Services, shows that it can be a partnership, not a contest.

EMS Care '97 Registration Form

NAME _____ SSN _____
STREET _____
CITY _____ STATE _____ ZIP CODE _____
TELEPHONE Day _____ Evening _____
AFFILIATION _____
CERTIFICATION/LICENSURE LEVEL (Circle) FR EMT-A EMT-B CRT EMT-P LPN RN NP PA MD

EMT Bridge Program

_____ Friday - Sunday, April 25-27, 1997

A copy of your Maryland EMT-A card and CPR card must accompany your registration form.

Friday Preconference

_____ 9 AM-5:00 PM Pediatric Trauma Instructor Course

OR

_____ 9-noon Skills for the 21st Century

_____ 1:30-3:00 PM

_____ 3:30-5:00 PM

_____ Clinical Track

_____ Clinical Track

_____ Management Track

_____ Management Track

Saturday April 26

Circle only one workshop per session.

Session 1 (1:45-3:15 PM)

A

B

C (This session lasts all afternoon.)

Session 2 (3:30-5:00 PM)

D

E

Sunday April 27

Session 3 (8:30-10:00AM)

F

G

H

Session 4 (10:30-NOON)

I

J

K

Session 5 (1:45-3:15 PM)

L

M

N (This session lasts all afternoon.)

Session 6 (3:30-5:00PM)

O

P

FEES (Circle applicable fees.)

EMT-B BRIDGE CLASS

\$175

PRECONFERENCE PROGRAM

60

PEDIATRIC TRAUMA INSTRUCTOR COURSE

25

SATURDAY/SUNDAY CONFERENCE

120

TOTAL DUE _____

MAKE CHECKS PAYABLE TO THE EMERGENCY EDUCATION COUNCIL OF REGION V, INC., AND SEND TO: Region V Office, MIEMSS, 5111 Berwyn Road, College Park, Maryland 20740.

Sunday, April 27, 1997

8:30 -10:00 AM

SESSION 3 (Select only one)

F. Infectious Diseases Update

With a new epidemic on the front page weekly, it is imperative that EMS providers keep up to date on the latest information on this hot topic.

G. Managing High Tech Kids

How can EMS providers cope with the children being managed at home and school with extensive technological support? Cynthia Wright-Johnson, MSN, will share her expertise.

H. Disaster Preparation for the 21st Century

State EMS Medical Director
Richard Alcorta, MD

10:30-Noon

SESSION 4 (Select only one)

I. The Metro Medical Strike Team

Chief C. Edward Bickam, Montgomery County Department of Fire/Rescue Services, will discuss this new response to chemical, biological, and other terrorist mass casualty situations.

J. Managing High Tech Kids

Repeat of workshop G above.

K. The EMS Role in Violence Prevention

EMS providers have played a key role in reducing drunk driving, promoting seatbelt, carseat, and helmet use, and reducing death and disability from auto crashes. The challenge of the 21st century is to use that same talent and energy to reduce death and disability from the violence that is the plague of our time. Trauma surgeon Carnell Cooper, MD, and a multidisciplinary team from the R Adams Cowley Shock Trauma Center share their expertise.

12:15 -1:15 PM Luncheon

1:45- 3:15 PM

SESSION 5 (Select only one)

L. Defensive Tactics for EMS Providers

How the EMS provider can reduce the threat of violence in emergency situations or protect himself/herself in the event of violence.

M. Marine Exposure

Why do jelly fish sting? Is wet sand the only treatment? What other dangers lurk in the deep? An expert from the National Aquarium in Baltimore will answer these and other murky questions about the earth's final frontier.

N. Pediatric Trauma Skills Station

A full afternoon of applying your pediatric assessment and management skills to a variety of scenarios.
Note: This station lasts until 5:00 PM. Enrollment is limited.

3:30 -5:00 PM

SESSION 6 (Select only one)

O. Defensive Tactics for EMS Providers

Repeat of Workshop L above.

P. Trauma Case Reviews

from the Shock Trauma Center



Governor Parris N. Glendening

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Emergency Medical Services Systems
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Executive Director, MIEMSS: Robert R. Bass, MD
Managing Editor: Beverly Sopp (410-706-3248)

Address Correction Requested
MIEMSS, Maryland EMS News

636 W. Lombard St., Baltimore, MD 21201-1528

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U.S. POSTAGE

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DATED MATERIAL

Mail this form and payment to the hotel, not to MIEMSS.

Hotel Registration Form • Marriott Greenbelt Hotel

6400 Ivy Lane, Greenbelt, MD 20770. Phone: 301-441-3700

The dates for the function are listed below. Any variation is subject to availability.

Reservation cards must be received by April 3, 1997.

Name of Group: EMS Care '97 Guest Phone: _____
 Last Name: _____ Date of Function: April 25-27, 1997
 Street: _____ First: _____ Corporation: _____
 Sharing with: _____ City: _____ State: _____ Zip: _____
 Last Name First Last Name First
 Arrival Date: _____ Departure Date: _____
 Month Day Year Month Day Year

TYPE OF ROOM

\$75 for Double Occupancy. Please circle: King or 2 Double Beds. Number of additional persons _____ (\$10 for each additional person).

Approximate Arrival Time: _____ or GTD By Amer. Exp. Carte Blanche Diners Visa/Master Card
Card Number _____ Exp. Date _____

PARLORS AND SUITES UPON REQUEST ARE SUBJECT TO AVAILABILITY - PLEASE CALL DIRECT

Signature: _____ Crib (Free) _____
Date: _____ Rollaway Bed in Room (Subject to Availability) \$10 Extra Per Night _____