Vol. 29, No. 2 For All Emergency Medical Care Providers

December 2002

When Prehospital EMS Providers Work in a Hospital

This article is designed to clarify the hospital use of EMS certifications and licensures when individuals who happen to be EMS providers are hired by hospitals.

MIEMSS has established training and testing criteria for Maryland state certification or licensure for the following levels: First Responder (FR). Emergency Medical Technician-Basic (EMT-B), Cardiac Rescue Technician (CRT), Emergency Medical Technician-Paramedic (EMT-P), and Emergency Medical Dispatcher (EMD). These certifications and licensures are for the delivery of prehospital care. These different levels of certification and licensure do not transfer into the hospital setting but can provide the hospital administration with an understanding of the EMS provider's academic and clinical level of training, similar to an Advanced

Cardiac Life Support (ACLS) card.

Hospital administrators who hire individuals who have an EMS certification or license cannot have EMS personnel operating within their hospital under that certification or license. To minimize the perception that these individuals are functioning within the hospital setting as EMS providers, we suggest that hospitals not use the job titles of a(n) FR. EMT-B. CRT, EMT-P, or EMD and that these individuals not be allowed to wear their EMS insignia while working in their hospital positions. The hospital needs to define the anticipated scope of care and delegated authority from nurses and/or physicians for these individuals and use appropriate job titles.

◆ Richard L. Alcorta, MD, ACEP State EMS Medical Director



BWI Airport Disaster Drill participants carry a "patient" to a waiting ambulance.

BWI Airport Disaster Drill

EPLEX—a disaster drill at Baltimore/Washington International (BWI) Airport—began October 19. According to the scenario, a Boeing 737 has just taken off. Maneuvering to its designated heading, it experiences an uncontained engine failure. causing the aircraft to loose control. The 737, in an attempt to recover. veers to the left in a downward fashion making contact with the area north of Cargo "G" complex. Upon impact with the ground, the 737 bounces up, clears the security fence while continuing to travel in a southwest direction. Upon the second contact with the ground, the fuselage breaks into two sections, coming to rest in the grassy area west of the mid-field and south of the runway. Passengers are scattered throughout the area with varying degrees of traumatic injuries. The wing from the 737 separates from the fuselage, skids across Mathison Way, and impacts with the ground in the area of the fire-training pit. Initial reports from the area indicate that a vehicle traveling on Mathison Way was struck by debris and overturned, coming to rest in a drainage ditch. The vehicle was carrying 55-gallon drums of hazardous materials onboard. The materials are comprised of calcium cyanide and sulfuric acid. The two chemicals, if mixed, would create a vapor or gas release of cyanide. However, the drums containing the cyanide and acid in the vehicle ruptured but never mixed. Hazardous material crews contained the products in the car, and suppression crews extinguished the fires

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EMS Education

On October 15, 2001, COMAR Title 30, Subtitle 04 Emergency Medical Services Education Programs and Courses went into effect. These regulations result from two years of consensus building by constituents across the state, including the Maryland Fire and Rescue Institute, the Maryland State Firemen's Association, volunteer and career operational and educational programs, academies, and colleges. The regulations promote a consistent, high-quality EMS education standard throughout the state and enable programs, upon approval, to deliver education efficiently.

The new regulations allow for the EMS Board to approve education programs involved with advanced life support (ALS), basic life support (BLS), emergency medical dispatch (EMD), and continuing education. The approval process, paralleling concepts of the EMS Education Agenda for the Future, requires a self-study process by the education program, an application, and a site visit by a team of educators and a medical director. Criteria for approval include demonstrating active involvement of a medical director, providing education program administration and coordination through a program coordinator, having qualified faculty, and providing various administrative duties associated with an education program. In addition, programs must deliver curricula approved by the EMS Board and must have adequate physical facilities to deliver the courses. To facilitate gaining approval status, MIEMSS created an approval packet that leads existing and future education programs through the process, step-by-step.

Education programs meeting all the criteria outlined in the regulations will receive approval for 5 years and must submit annual updates to MIEMSS of program changes, progress, accomplishments, and outcomes. Existing education programs have 3 years to initiate the approval process; new programs must complete the process at least 6 months prior to the first course session.

Charles County ALS Education Program (CCALSEP) was the first in Maryland to go through the approval process. In May, the site visit team reviewed the program and reported its



Chief John Frazier (EMS Board) and Dr. Robert Bass (MIEMSS Executive Director) present Elaine Wedding with a certificate granting Charles County ALS Education Program 5-year approval as an ALS Education Program.

findings to the EMS Board. In June, CCALSEP received a 5-year approval as an ALS Education Program from the EMS Board. To date, six other ALS programs are at various stages of the education program approval process. Five are scheduled to be presented at the EMS Board in January 2003.

For questions regarding the education approval process, contact your local MIEMSS Regional Office or the Office of Education, Licensure, and Certification (1-800-762-7157 or 410-706-3666).

Disciplinary Actions

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

B-2001-138—(CRT)—September 11, 2001. Revocation of license for unlawful sexual contact with a patient under his care and conviction of second-degree assault.

B-2002-180—(EMT-B)—June 11, 2002. Acceptance of voluntary surrender of certification for pleading guilty to interstate travel to engage in a sexual act with a minor, and failure to inform MIEMSS of past criminal conviction upon renewal.

B-2002-170—(EMT-B)—August 13, 2002. Revocation of certification for consuming alcoholic beverages while on duty.

B-2002-178—(EMT-B)—August 13, 2002. Revocation of certification for pleading guilty to second degree assault.

B-2002-175—(EMT-B)—August 13, 2002. Revocation of certification for failure to appropriately assess patient's essential need for supplemental oxygen, failure to administer supplemental oxygen, failure to accept assistance and advice to administer supplemental oxygen to patient from another certified EMT-B, and willfully filing a false Maryland Ambulance Information System (MAIS) patient care report and supplemental narrative report related to patient care rendered by another EMT-B.

B-2002-174—(EMT-B)—August 13, 2002. Revocation of certification for failure to appropriately assess patient's essential need for supplemental oxygen, failure to administer supplemental oxygen, failure to accept assistance and advice to administer supplemental oxygen to patient from another certified EMT-B, and failure to provide appropriate essential ventilatory assistance to patient prior to rendezvous with ALS unit.

B-2002-173—(EMT-P)—August 13, 2002. Suspension of license until successful completion of remedi-(Continued on page 5)



WINTERFEST EMS 2003

JANUARY 23 - 26, 2003



JOIN US FOR A FUN AND RELAXING WEEKEND OF QUALITY EDUCATION

PRECONFERENCE COURSES

PEPP (Pediatric Education for Prehospital Professionals) RENEWAL

January 24, 2003 (8:00 AM - 5:00 PM) DATE:

LOCATION: TBA

\$50 (with book); \$25 (without book). Registration is required. FFF.

This will be the first PEPP renewal course scheduled in Maryland. Seven continuing education credits will be offered.

EMT-B 12-Hour Skills Refresher

January 23 (6:00 PM- 11:00 PM) & January 24 (8:00 AM- 4:00 PM) DATE:

LOCATION: Tilghman Island Volunteer Fire Department

\$35 Registration is required. FEE:

For EMT-Bs, complete all your recertification needs with us at WINTERFEST EMS 2003. A 12-hour skills class is available as a pre-conference followed by 12 hours of continuing education, which, with careful choosing, can meet your recertification requirement.

Winterfest ems 2003 schedule



SATURDAY

7:30 AM Registration 7:45 AM Welcome

8:00 AM TRAUMATIC BRAIN INJURY

The initial treatment of head injuries affects not only the survival of the patient, but also his/her long-term quality of life. Learn what you can do to help provide the best opportunity for recovery.

Tom Scalea, MD, R Adams Cowley Shock Trauma Center

BLS: 2 hrs/T ALS: 2 hrs/B

BREAK WITH VENDORS 9:30 AM

10:00 AM CHALLENGES ON THE WATER

We are surrounded by water. Learn how to apply your knowledge to caring for and rescuing people on the water. Michael "FX" O'Connell, NREMT-P, Anne Arundel County Fire Department

BLS: 2 hr/T ALS: 2 hr /B LUNCH WITH VENDORS

11:30 AM

SATURDAY BREAKOUTS

1:00 - 5:00 PM WATER RESCUE TECHNIQUES

This group will travel to MEBA for the afternoon for hands-on experience in water rescue. This session will be limited to the first 20 registrants. Barry Van Vecken, MEBA BLS: 4 hr/T ALS: 4 hr/B

PEDIATRIC TRIAGE AND MCI

Realistic pediatric scenarios will help you hone your triage skills using both START and JumpSTART. This session will be limited to the first 30 registrants. Mary Alice Vanhoy, RN, NREMT-P, Shore Health System, Terry Satchell, RN, NREMT-P, Shore Health System; EMS-C, MIEMSS BLS: 4 hr/T ALS: 4 hr/B

1:00 - 2:50 PM A-WHAT IS IT LIKE TO GROW OLD?

Hands-on experience of the changes in sensory and physical capabilities that frequently occur with advancing age and how they impact our ability to provide optimum care.

Marie Warner-Crosson, Region V, MIEMSS Jeanie Brower, RN, Barbara Bilconish, RN, Shore Health System BLS: 2 hr/M ALS: 2 hr/A

B—NEW TECHNOLOGIES IN DIABETES MANAGEMENT

Diabetes management is changing on a daily basis with new technologies, including new pumps and meters. This session will provide new information in management and hands-on experience with the new technology. Bill Seifarth, NREMT-P, MIEMSS BLS: 2 hr/M ALS: 2 hr/A

C-RESPIRATORY ASSESSMENT: IT IS MORE THAN BREATHING IN AND OUT

This session focuses on respiratory assessment for BLS and ALS providers, including differential between COPD, CHF, and pulmonary edema. Greg Oliver, MD, Pulmonologist, Shore Health System BLS: 2 hr/M ALS: 2 hr/A

D-EFFECTIVE AIRWAY MANAGEMENT It all starts with "A" for "airway." This session will focus on the need for effective airway management for all providers.

Richard Dutton, MD, Assistant Professor, Anesthesiology, R Adams Cowley Shock Trauma Center & UMMS BLS: 2 hr/M ALS: 2 hr/A

2:50 - 3:10 PM **BREAK WITH VENDORS**

3:10 - 5:00 PM REPEAT OF BREAKOUT SESSIONS A-D

SUNDAY

DISASTER: WHO CAN HELP? - FEMA 9:00 AM

FEMA is there to help in disasters, but what can we expect them to do in natural or man-made disasters? Ben Strong, NREMT-P, Federal Emergency Management Agency BLS: 2 hrs/L ALS: 2 hrs/2

10:30 AM BREAK

10:45 AM LIVING WITH HEPATITIS C

We are all at risk for exposure to infectious disease. In this session, we will learn firsthand what it is like to live with and survive Hepatitis C.

Bill Stinchcum, Anne Arundel County Fire Department BLS: 1.5 hr/M ALS: 1.5 hr/A

12:00 PM LUNCH

1:15 - 3:00 PM CRIME SCENE SAFETY AND PRESERVATION FOR EMS PROVIDERS

Do you know how to be safe at the scene? Do you walk through evidence? Do you destroy a crime scene? Learn what to do and what not to do. Actual cases will be reviewed that have been affected by EMS. Please be advised that some of the slides may be graphic. Jeff and John Evans, Delaware State Police BLS: 2 hr/M ALS: 2 hr/B

> **DRIVE CAREFULLY** SEE YOU NEXT YEAR



WINTERFEST EMS 2003



Location: WINTERFEST EMS will be held on Tilghman Island with headquarters at Harrison's Chesapeake House. A detailed map and directions will be sent with your confirmation letter.

Payment and Cancellation Policy: Preregistration is required. We will be accepting registration until January 15, 2003 or until the conference is filled – whichever comes first. Confirmation letters will be sent. All requests for cancellations must be made in writing to WINTERFEST EMS, c/o Talbot County EMS, 29041 Corkran Rd. Easton, MD 21601.

Refunds, excluding a \$10 processing fee, will be mailed for cancellations received before January 15, 2003. Cancellation after January 15, 2003 will result in forfeiture of your entire registration fee. (Note: There is a \$25 fee for bad checks.) Speakers and topics are subject to change.

Weather Cancellation: The Planning Committee will make a decision about cancellation of WINTERFEST EMS due to severe weather by 12 noon on January 22. Call Talbot County EMS – WINTERFEST EMS Line at (410) 822-2030 for details. Written requests for refunds will be accepted within 30 days of cancellation.

Information: For additional information, call the TCEMS - WINTERFEST EMS Line at (410) 822-2030.

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 contact the WINTERFEST EMS Committee.

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tion. Reservations due by January 15, 2003. Send your check, along with this form, to WINTERFEST EMS, c/o

Talbot County Government

Emergency Education Council of Region 5 Home Page

The Maryland Institute for Emergency Medical Services

Talbot Co EMS, 29041 Corkran Rd., Easton, MD 21601.

Download Applications: http://www.talbgov.org/

http://www.eecreg5.org

http://www.miemss.org

BWI Airport Disaster Drill

(Continued from page 1)

Once the scene was secure, EMS and rescue personnel began to triage and treat nearly 180 moulaged volunteers. More than 200 "passengers" were on board the aircraft. Thirty died immediately, several remained in the fuselage and had to be extricated, and over 100 others were scattered around the airfield. Although area hospitals were alerted to the incident, mock patients were then transported to the cargo building that served as the "hospitals." FRED (Facility Resource Emergency Database) was activated for that notification, and a few hospitals provided bed availability through the system.

This scenario was planned to be part of a region-wide exercise lasting all weekend with three other sites. Those scenarios for the other three drills were postponed until spring/summer 2003 due to security concerns surrounding the serial sniper in the area. The other scenarios would have been closer to residential areas and may have caused undue concern in those communities. The BWI exercise proceeded due to its distance from residential areas, the ability to restrict access to the exercise area, and the need of the airport to comply with Federal Aviation Administration exercise requirements.

Planning exercises, such as that at BWI Airport, allow cooperating businesses, hospitals, fire, police, and emergency officials, as well as airport personnel, to practice their

roles in response to an airport emergency. The BWI Fire & Rescue Department, Airport Operations, other Maryland Aviation Administration divisions, and emergency response agencies from Baltimore City, Anne Arundel, Howard, Baltimore, Queen Anne's, Harford, and Carroll counties worked in close coordination with the Maryland Department of Transportation, simulating their duties as called for in the Airport's Emergency Plan.









Disciplinary Actions

al training for runsheet documentation and methods for obtaining online medical direction by December 31, 2002 or be subject to further action for performing rapid sequence intubation (RSI) on an 18-year-old combative male inappropriately and for indications not covered by Maryland Protocols and directing another EMT-P at the scene to administer a medication beyond his scope of practice and failure to disclose this directive on the MAIS runsheet.

B-2002-177—(EMT-B)—August 13, 2002. Probation until completion of criminal probation for pleading guilty to conducting an illegal gambling business from 1995 to 1997.

B-2002-176—(EMT-P)—August 13, 2002. Probation for two years with random drug testing for admitting to having been a heroin addict and having used heroin in June 1999 and March 2001.

March of Dimes Honors Cheryl Bowen with Distinguished Health Professional Award

The Maryland Chapter of the March of Dimes Birth Defects Foundation honored Cheryl Bowen, of MIEMSS, with this year's Distinguished Maryland Health Professional Award, on November 25, at its Star Chefs of Baltimore Gourmet Fete at the Hyatt Hotel.

This prestigious award, in memory of Dr. Jonas Edward Salk, was created to honor medical professionals who dedicate their professional lives to improving the health of babies. According to Ira H. Gewolb, MD, chair of the Distinguished Health Professional Committee, Ms. Bowen has "exemplified excellence, dedication, innovation, integrity, and compassion in perinatal, maternal, and infant health care." She is recognized throughout Maryland as one of the pioneers for neonatal nursing in the state.

Ms. Bowen is the first nurse to receive the award. Previous award recipients include: Drs. Philip Goldstein, Ben Carson, Victor McKusick, Ronald Gutberlet, Beryl Rosenstein, Lillian Blackman, and David Nagy.

Following her first nursing position at the Johns Hopkins Hospital on the infant and toddler inpatient unit, Ms. Bowen joined the staff of the University of Maryland newborn intensive care unit where she worked for 7 years. During that time, she conducted training programs for nurses and other health care professionals from hospitals that referred patients to the University of Maryland Hospital. In addition, she developed training programs for the Maryland State Police Med-Evac program as well as for other paramedic training programs throughout Maryland.

In 1979, she started her tenure at MIEMSS as Nurse Coordinator for Neonatal Programs. During this time, she consulted with faculty from Johns

Hopkins Hospital and the University of Maryland Hospital to develop the Maryland Regional Neonatal Transport Program. She was primarily responsible for introducing the expanded role of the neonatal transport nurse in Maryland. She also developed and conducted numerous outreach education programs for nurses and other health care providers throughout Maryland. Most recently in her position at MIEMSS. she, in collaboration with representatives from the Maryland Department of Health and Mental Hygiene, has formalized the process for the recognition and designation of hospitals with regional perinatal and neonatal referral centers in Maryland. This was in addition to her fulltime responsibilities as director of the State Office of Commercial Ambulance Licensing and Regulation.

In addition to her RN license, Ms. Bowen holds a Master's Degree in Health Care Administration and a Master of Science Degree that she earned while completing the neonatal nurse practitioner program at the University of Maryland School of



Cheryl Bowen is the recipient of this year's "Distinguished Maryland Health Professional Award."

Nursing. Ms. Bowen has served as President of the Maryland Perinatal Association, and was Secretary/ Treasurer of the Southern Perinatal Association. She has been an ex-officio member of the Maryland Chapter of the Academy of Pediatrics Fetus and Newborn Committee and has served 10 years on the March of Dimes Professional Advisory Committee and on committees of the Maryland Nurses' Association. In addition, she has served on several State perinatal advisory committees and has participated in voluntary site visits of every hospital in Maryland with nursery services.

HIPAA Training Materials Available

The federal Health Insurance Portability and Accountability Act (HIPAA) Privacy Regulations concerning privacy of health care information require compliance by April 14, 2003.

If you provide health care (including EMS care) and an entity (or even an individual) bills for your services, both you and the billing party are covered by the HIPAA Privacy Regulations. The billing party is a covered entity, and you are a member of the covered entity's work force (even if you are a volunteer).

One of the requirements of the HIPAA Privacy Regulations is that the work force must be trained in HIPAA policies and procedures by April 14, 2003.

MIEMSS has prepared an instructional video, together with printed materials, to assist you if you need to do training or if you need to find out more about the HIPAA Privacy Regulations. The materials are available through Monty Magee, Assistant Attorney General, MIEMSS, 653 West Pratt Street, Baltimore, Maryland 21201. If you have questions or would like a copy of the materials, call Mr. Magee at 410-706-8531 or send an e-mail to fmagee@miemss.org.

Tri-County Disaster Drill

It is Saturday, October 12, 2002, a cloudy morning, approximately 10 AM, in Lexington Park in St. Mary's County, home to the Patuxent Naval Air Test Center.

As a plane with 200 passengers that is taking off from Baltimore/Washington International Airport climbs to 33,000 feet, terrorists run from their seats toward the cockpit door, overpower the pilots, and take over the controls of the plane to redirect it to Southern Maryland.

Their plan is to crash the plane into the largest building at the Patuxent Naval Air Test Center. However, they lose control of the plane. It quickly descends and hits the ground, approximately 200 feet north of the Booz-Allen and Honeywell buildings in the Willow Run Industrial Park, not far from Patuxent Naval Air Test Center. The plane's wings break off, each striking a different building. The fuselage of the plane comes to rest at the end of the main road into

the complex and catches fire. The wing that strikes the Honeywell Building causes equipment inside to collapse. Inside there are several employees and 35 high-school students on a field trip to tour the facility and learn about engineering careers. Some employees and students are killed; many are trapped under equipment.

The force of impact of the other

wing on the Booz-Allen Building causes various hazardous materials inside to tumble and disperse. One chemical becomes a vapor upon release. The gas envelops the entire building. Inside many employees are working overtime to meet a deadline for a government proposal. They become sick and disoriented, and are unable to escape. The area is in chaos. Cars are burning around the perimeter of the building. Bodies of the plane's passengers are propelled throughout the industrial park as the fuselage strikes the ground. Cars are crushed and victims trapped.

This complex scenario offered those participating in the drill an opportunity to deal with firefighting, a haz-mat situation, a partial building collapse, a crime scene (terrorism), mass casualties, mass fatalities, and

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Searching for those trapped under "heavy equipment" (simulated by wooden pallets).



Fighting an aircraft fire.



Decontaminating a haz-mat "victim."



Governor Parris N. Glendening

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653 W. Pratt St., Baltimore, MD 21201-1536

DATED MATERIAL

Tri-County Drill

(Continued from page 7)

the extrication of victims from cars, a plane, and heavy equipment. Among the participants were fire, EMS, and haz-mat units from Southern Maryland, as well as Maryland State Police and Navy helicopter crews. The Port Tobacco Players and "graduates" of the moulage workshops held around the state worked to create realistic-looking injuries for the many volunteers who played the roles of patients. Evaluators from Southern Maryland, various Maryland counties, MIEMSS, and other state agencies observed the drill and offered a critique.



Preparing a "patient" for transport by a Navy helicopter.



Discussing operational details of the drill.



Extricating a "patient" from a car.