

# Maryland EMS News

For All Emergency Medical Care Providers

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## 2010 Edition of EMS Protocols: What's New, Changed?

The 2010 edition of the *Maryland Medical Protocols for EMS Providers*, effective July 1, 2010, contains many revisions, as well as new protocols that have direct impact on all levels of EMS providers. Below is a sampling of protocols that have either been added or have undergone major revisions. For the

complete list, see the more detailed Protocol Update Summary spreadsheet that lists each individual protocol revision by page and line numbers and protocols title. This Update Summary is available in PDF format on the MIEMSS web page [www.MIEMSS.org](http://www.MIEMSS.org).

### 2010 Edition of EMS Protocols: How Do I Get Copies?

- » The **2010 Abridged Pocket Protocols** (3-1/2 by 5-1/2 inches) have the core protocol changes for quick reference and review. MIEMSS is providing **one free** copy to every **EMT-B, CRT-I, and EMT-P currently certified or licensed in Maryland**. The Pocket Protocols will be distributed by the jurisdictional EMS Operational Programs. EMS providers can obtain a copy from their PRIMARY (INITIAL) affiliation only. Each provider should have only ONE copy of the pocket protocols. Otherwise, copies can be purchased for \$1 from the MIEMSS Office of Licensure and Certification (1-800-762-7157).
- » The **2010 complete protocol manual *Maryland Medical Protocols for EMS Providers*** (328 pages plus 14-page Weapons of Mass Destruction supplement) with tabs and with the **Protocol Update Summary** (listing the page number and description of each specific update) is available in a shrink-wrapped package. (The 8-1/2 x 11 pages are double-sided and on 3-hole-punched paper.) MIEMSS is providing **one free copy to every hospital base station in Maryland and to every EMS unit of jurisdictional EMS operational programs**. Others can purchase copies for \$10 from the MIEMSS Office of Licensure and Certification (1-800-762-7157).
- » **Electronic Downloads for the EMS Provider Protocols Effective July 1, 2010 available at the MIEMSS website at [www.miemss.org](http://www.miemss.org):**
  - **2010 updated pages** (containing all revisions, additions, and/or deletions) to be inserted into the binder of the complete 2009 *Maryland Medical Protocols for EMS Providers*. An Excel spreadsheet is also included that lists the page number and description of each specific update (changes, additions, deletions).
  - **The 2010 complete protocol manual *Maryland Medical Protocols for EMS Providers*** (328 pages plus 14-page Weapons of Mass Destruction supplement) can be downloaded from the MIEMSS website and placed in a binder.
  - **The 2010 Amendments (Effective July 1, 2010)** contain modifications to the *2010 EMS Provider Protocols* made after the Complete Manual and Updated Pages were printed and distributed.

It is the responsibility of each EMS provider to ensure that he/she is familiar with all the revisions, additions, and deletions contained in the 2010 *Maryland Medical Protocols for EMS Providers*. Prior to July 1, 2010, all EMS providers (BLS and ALS) must have completed a protocol rollout sessions that will cover the new material.

### Sampling of New or Revised Medical Protocols for EMS Providers for 2010

- New "Hyperkalemia Renal Dialysis/Failure or Crush Syndrome" Protocol.
- New medication "Acetaminophen" for pain management.
- Removal of Benzocaine which is to be replaced by Lidocaine 4% jelly or intranasal atomization.
- Modification of EMS/DNR-A to allow CPAP and to remove nasal or oral intubation as a skill for an EMS/DNR-A patient in respiratory distress. This level of care will now be called NEW EMS/DNR-A (DNI) Comprehensive Care Before Arrest Without Intubation and there is a NEW EMS/DNR-A (DNI) form for patients who wish this option. Patients with the "Old" EMS/DNR-A form shall still receive oral/nasal intubation as part of their care if indicated.
- The addition of the Latex-Free Dual Lumen Tube (e.g., Easy Tube®) to Airway Management Procedures.

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# Recent Shortage of Emergency Syringes for Pre-loaded Medications

*Richard L. Alcorta, MD, FACEP, the State EMS Medical Director at MIEMSS, sent the following information in a letter dated June 10, 2010 to Maryland EMS providers and receiving hospital staff. The letter addresses the recent shortage of emergency syringes for pre-loaded medications.*

As other companies no longer produce emergency syringes of epinephrine 1:10,000, Hospira, the sole manufacturer, is trying to meet demand of the entire market. This has increased the length of back order for the drug(s) and led to scarcity. The company is working on alleviating the shortage.

In the meantime, EMS providers should continue to administer the medication as indicated in the protocols. If emergency syringes of epinephrine 1:10,000 are not available for restock, providers may use epinephrine 1:1,000 as a replacement. However, **epinephrine 1:1,000 must never be administered IV in an undiluted form.**

If a provider must administer epinephrine 1:1,000 (1 mg/mL) for cardiac arrest or anaphylaxis, it shall first be diluted to epinephrine 1:10,000 (0.1 mg/mL). To accomplish this, the provider must draw up 1 mL of epinephrine 1:1,000 and 9 mL of Lactated Ringer's (Nor-

mal Saline also allowed) solution in the same syringe. The medication is now diluted to 0.1 mg/mL and is ready for IV administration. While diluting the medication may increase the time it takes to dispense it, **the provider must dilute the medication** as this is the only safe way to administer it.

In addition to epinephrine, other medications supplied in emergency (pre-loaded) syringes may also experience shortages. This list is not all-inclusive but may include atropine, calcium chloride, naloxone, lidocaine 2%, sodium bicarbonate, and dextrose 50%. These medications may still be available in other containers (e.g. vials, ampoules). The protocols do not define the type of container the medication must be stored in, so vials and ampoules are acceptable substitutes for medications normally found in emergency syringes.

Please do not hesitate to contact the Office of the State EMS Medical Director at 410-706-0880 if you have any questions or concerns.

## Acetaminophen Protocol Adjustment

The 2010 *Maryland Medical Protocols for EMS Providers* had the addition of Acetaminophen in two formula liquid unit doses: 160 mg/5 mL and 325 mg/10.15 mL. It was noted that the liquid unit dose containers had similar appearance and 3-5 year-old patients could potentially be overdosed by giving them the higher unit dose by mistake. To remedy this problem, the formulary will be changed to allow the purchase of only the 160 mg/5 mL unit dose as of July 1, 2010, and the dosing of Acetaminophen to allow for dosing using multiples of the 160 mg/5 mL (320 mg or 640 mg). With this modification, the Acetaminophen dosing protocol for 2011 will be converted to allow only multiples of 160 mg/5 mL dosing.

**IMPORTANT NOTE:** If you are going to carry both the 160 mg/5 mL and the 325 mg/10.15 mL concentrations, please place them in separate compartments of the drug box.

*The portion of the protocol containing the new material (shown in bold italics in this newsletter) reads as follows:*

(3) Administer acetaminophen to patients ages 3 years and above judged to be in mild to moderate discomfort

(2-5 on FACES scale) by child or parent.

(a) Standard unit dosing of liquid preparation:

(1) Less than 3 years of age: Not indicated

(2) 3-5 years: Unit dose 160 mg/5 mL

(3) 6-9 years: Unit dose 325 mg/10.15 mL or **TWO unit doses of 160 mg/5 mL for a total of 320 mg/10 mL**

(4) 10 years & above: Administer TWO unit doses of 325 mg/10.15 mL for a total of 650 mg/20.3 mL or **FOUR unit doses of 160 mg/5 mL for a total of 640 mg/20 mL.**

(b) Obtain on-line medical direction for appropriate dosing for patients who are significantly underweight or overweight.

**NOTE: As of July 1, 2010, the only formulary to be purchased is the 160 mg/5mL**

The above modification to the 2010 Maryland medical protocols for EMS Providers (as well as future amendments to the 2010 protocols) can be found at the MIEMSS website [www.miemss.org](http://www.miemss.org) under the heading "2010 Maryland Medical Protocols—Amendments (Effective July 1, 2010)."

## EMS Calendar

**July 20-14, 2010**

**Firehouse Expo**

Baltimore Convention Center

Information:

<http://www.firehouseexpo.com/fhe/index.po>

**September 28, 2010**

**Mid-Atlantic Life Safety Conference**

Johns Hopkins Applied Physics Lab

Columbia, MD

**September 29, 2010**

**Providing Trauma Care**

Hagerstown Community College,

Merle S. Elliott Continuing Education

& Conference Center,

Career Programs Building

Information: Phone: 301-790-2800, ext. 236;

e-mail: [learn@hagerstowncc.edu](mailto:learn@hagerstowncc.edu)

**October 8-10, 2010**

**Pyramid EMS Conference 2010**

Solomon's Island

Information:

MIEMSS Region V Office 301-474-1485

or 1-877-498-5551

# MIEMSS Presents Statewide Awards during EMS Week

In a two-part ceremony at the Miller Senate Office Building on May 20, MIEMSS honored children from across the State and also presented its annual Stars of Life Awards to honor EMS personnel, citizens, and EMS programs. Photos of the winners receiving their awards, as well as summaries of why they received them, follow. Unfortunately, two children (Mairead Elise Carey and Allaurra Townes) and three adults (Cathy and Jimmy Nerantzis and William Fast) were unable to attend the ceremony to receive their awards, so their photos are not available.

Five children were recognized for their actions which ensured that people in Maryland received “the right care when it counts,” by assisting in providing a life-saving service to someone in their community. Each of the following received a “Right Care When It Counts” Award.



MIEMSS Executive Director Dr. Robert R. Bass holds the Maryland EMS Week Proclamation signed by Gov. Martin O'Malley that Sen. Barry Glassman (District 35, Harford County) presented to him.

**Mariah Johnson (Frederick Co.):** On July 2, 2009, Mariah, then 5 years old, dialed 9-1-1 when Joyce Paulsgrove, her childcare provider (“Nanny”), felt ill and then fainted. Mariah stayed on the phone with the dispatcher and allowed the EMS crew to come into the home to help her Nanny. She also stayed with her 1-year-old brother and tried to keep him calm and out of the way so the EMS providers could care for Nanny. According to Mariah, “they did lots of stuff to make her [Nanny] better.”

**Mairead Elise Carey (Frederick Co.):** On August 19, 2009, Mairead, then 13 years old, saw her little sister Emma floating in the pool and not responding. She pulled Emma from the pool and checked for breathing; there were no breaths and Emma’s lips were purple. Mairead started CPR which she had learned in Girl Scouts. Emma quickly started to cough up water . . . and then lunch. Mairead’s friend, Abby Yoder, went into the house to get Mairead’s mother. After one night in the hospital, Emma was discharged home and is fine, thanks to the quick thinking of Mairead.

**Kayla Robertson (Carroll Co.):** On October 15, 2009, Kayla, who is 5 years old, heard the smoke detector go off within her

home. She went to get her father and alert him. Kayla, her father, and her siblings were able to get out of the house; she then dialed 9-1-1 as she had learned during the previous week at a kindergarten school visit to the New Windsor Fire & Hose Company # 1.

**Allaurra Townes (Baltimore City):** On January 27, 2009, Allaurra, 6 years old, heard the smoke alarm and woke up her mother. Because of her quick response, they were both able to get out of the house before the first floor was engulfed in flames.

**Samantha Mason (Charles Co.):** On August 1, 2009, Samantha, 4 years old, found her mother unconscious on the floor and dialed 9-1-1. She told Dispatcher Jaime Ostrander that her mother “has diabetes and needs to get sugar.” She stayed on the phone for the entire time until the EMS providers arrived. Samantha was taught when and how to dial 9-1-1 by her mother because of her grandmother’s medically fragile condition—but on this day—she used those skills to help her mother. She was also careful to warn the EMS crew to watch out for her toys in the living room so they would not hurt themselves.

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Mariah Johnson holds her award, surrounded by (l-r) EMS Lt. Charity Rinker, Joyce Paulsgrove (Mariah’s “Nanny”) who is holding Mariah’s brother, Sen. Donald F. Munson (District 2, Washington County), Cyndy Wright-Johnson, MSN, RNC (EMS-C Program Director at MIEMSS), Del. David D. Rudolph (District 34B, Cecil County), and Sen. Barry Glassman (District 35, Harford County).



Kayla Robertson holds her award, surrounded by (l-r) her dad Tony Robertson, Sen. Donald F. Munson (District 2, Washington County), Cyndy Wright-Johnson, MSN, RNC (EMS-C Program Director at MIEMSS), Del. David D. Rudolph (District 34B, Cecil County), and Sen. Barry Glassman (District 35, Harford County)

## MIEMSS Presents Statewide Awards during EMS Week

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There were nine categories of EMS Star of Life awards, with two winners in the category "Leon W. Hayes Award for Excellence in Emergency Medical Services."

### Maryland Star of Life Award

#### Kelley Smith, NREMT-P (Charles Co.)

When the medic unit in which she was riding was hit by a drunk driver on the driver's side, Paramedic Kelley Smith went into action. Despite the darkness, the irrigation-ditch rocks, and her own injuries, Paramedic Smith was able to save the life of the seriously injured ambulance driver, CRT-I Anthony Cooper. He was not only the driver but her fiancé.

After being hit on Solomon's Island Road, the medic unit traveled sideways on the shoulder of the road for a distance before coming to a stop down a rock-filled irrigation ditch. Suffering from injuries herself and dazed, Paramedic Smith was able to locate the radio and call 9-1-1. She then managed to instruct a passer-by, who stopped to offer assistance, to get the medical bags out of the rear of the medic vehicle so she could begin to help CRT-I Cooper. He was unconscious and having severe difficulty breathing. Paramedic Smith sawed through his seatbelt with a pen-knife, placed him on 100 percent oxygen, and started an IV for fluid replacement. She had to work in complete darkness, except for the passer-by's car headlights. Paramedic Smith accomplished all of this before the first EMS

and fire equipment arrived.

CRT-I Cooper suffered serious chest, head, and internal injuries. Since the Medevac helicopter could not fly due to the fog, he was transported by ambulance to Calvert Memorial Hospital where he was stabilized and then transported to a trauma center. Paramedic Smith was also transported to Calvert Memorial Hospital and released later that day.

### Maryland EMS Citizen Award

- **Cathy Nerantzis (Montgomery Co.)**
- **Jimmy Nerantzis (Montgomery Co.)**
- **William Fast (Montgomery Co.)**

Shari Fast and Cathy Nerantzis were friends who frequently jogged together. Both

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Samantha Mason holds her award, surrounded by (l-r) her mother Sharon Mason, Sen. Donald F. Munson (District 2, Washington County), Dispatcher Jaime Ostrander, Cyndy Wright-Johnson, MSN, RNC (EMS-C Program Director at MIEMSS), Del. David D. Rudolph (District 34B, Cecil County), and Sen. Barry Glassman (District 35, Harford County).



(L-r) Del. David D. Rudolph (District 34B, Cecil County), Sen. Donald F. Munson (District 2, Washington County), Paramedic Kelley Smith (Maryland Star of Life Award), her fiancé CRT-I Anthony Cooper, and Sen. Barry Glassman (District 35, Harford County).



(L-r) Sen. Donald F. Munson (District 2, Washington County), Paramedic Shawnya Bray (EMS Provider of the Year Award), Del. David D. Rudolph (District 34B, Cecil County), and Sen. Barry Glassman (District 35, Harford County).



(L-r) Sen. Donald F. Munson (District 2, Washington County), Joe Besche (member of the EMS Department at Charlestown Retirement Community), Del. David D. Rudolph (District 34B, Cecil County), Mike Tiberio (EMS manager at Charlestown Retirement Community) holding the Maryland EMS-Geriatric Award, and Sen. Barry Glassman (District 35, Harford County).

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were healthy and trying to stay fit. But while stretching after a run last June, Shari, the mother of three, said that she did not feel well and suddenly collapsed. Cathy immediately called 9-1-1 on her cell phone, as well as her husband Jimmy and Shari's husband William. Cathy then quickly began CPR, and was assisted by Jimmy and William who arrived within minutes.

Crews from Montgomery County Fire Rescue Station 725 arrived on the scene and immediately identified ventricular fibrillation. Shari was defibrillated, required two minutes of CPR, and then had a pulse. She was transferred to Montgomery General Hospital, where she continued to do well in the Emergency Department. Since her heart was stable, therapeutic hypothermia was instituted for 48 hours to help protect neurologic function and prevent brain damage. Today she has no lasting complications from her heart attack.

But the ending to Shari's story would probably be very different if her friends and husband and not bought vital time by performing CPR until the Montgomery County Fire Rescue EMS providers arrived with a defibrillator. They helped save her life.

### EMS Provider of the Year Award

#### Shawnya Bray, EMT-P (Harford Co.)

Shawnya Bray, a housewife, mother, and volunteer paramedic at the Bel Air Volunteer Fire Company, exemplifies the spirit of volunteerism and pride in her work. According to the company's Assistant Chief of EMS, Beverly Britton, "it just seems that no job, task, or crisis is too big for her to handle," and she often takes on many jobs without being asked. "She takes pride in all that she does and accepts nothing less than perfection." She orders medications and makes sure the ambulances are stocked appropriately for calls. She is also the liaison with companies that repair ambulance equipment. In addition, she is on the Recreation Committee and on the Inspection Committee ensuring that Bel Air is on track to pass the voluntary state ambulance inspections done by MIEMSS and receive Seals of Excellence for their ambulances. Paramedic Bray exudes professionalism, always working to improve patient care and supporting her colleagues. According to Assistant Chief Britton, she "shows what it truly means to be a volunteer."

### Maryland EMS-Geriatric Award

#### Charlestown Retirement Community, EMS Department (Baltimore Co.)

The EMS Department at Charlestown Retirement Community in Catonsville takes a pro-active approach to providing care to campus residents, trying to reduce the severity of medical problems and trauma. For example, they train residents and staff at Charlestown in CPR and how to use an AED or automated external defibrillator, which can make the difference between life and death. To improve medical treatment during an emergency, the EMS team works to ensure that residents participate in the Vial of Life program, which ensures that a resident's entire medical history, DNR or "do not resuscitate" status, and emergency contacts are on one form in a vial in the resident's refrigerator, so an EMS provider knows where to find it. In addition, the EMS team regularly conducts evaluations of the residents' homes to see if they are at risk for falls. And, even more importantly, they hold clinics twice a month for residents to promote early recognition of medical issues.

The EMS team works directly with the on-campus medical center physicians. This ensures that the EMS team has good geriatric medical and trauma training for caring for the residents. The EMS team responded to more than 1600 calls for service in 2009.

### Maryland EMS for Children Award

#### Daniel Ochenschlager, MD, FAAP (Queen Anne's Co.)

Dr. Daniel Ochenschlager is a national leader in the areas of pediatric patient care, pediatric emergency medicine research, pediatric education for healthcare providers, and child advocacy. After retiring from the Emergency Medical Trauma Center at the Children's National Medical Center, he is now serving as the MIEMSS Region IV Associate Regional Medical Director for Pediatrics (including the upper and lower Eastern Shore), and Maryland EMS is benefiting from his more than 35 years of pediatric clinical and research experience. He is also a member and co-chairperson of the state Pediatric Emergency Medical Advisory Committee or PEMAC. In this role, he is involved in three main activities:

- developing statewide guidelines for hospital and prehospital care;

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(L-r) Sen. Donald F. Munson (District 2, Washington County), Dr. Daniel Ochenschlager (Maryland EMS-Children Award), Del. David D. Rudolph (District 34B, Cecil County), Dr. Robert R. Bass (MIEMSS Executive Director), and Sen. Barry Glassman (District 35, Harford County).

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- identifying educational needs for health-care professionals regarding pediatric emergencies, trauma, and critical care; and
- disseminating prevention programs focused on children and families.

Despite retirement, Dr. Ochsenschlager is still busy. A glance at his calendar usually indicates that he will be at meetings in Easton and Baltimore several times a month; he will also be teaching pediatric courses to EMS providers or lecturing at EMS conferences in the state, as well as reviewing statewide educational programs that reach every EMS provider. He has also taught in every county in Regions IV and V on weekends—that is, 14 counties. All the time, he is focusing on deter-

mining what the best care is for children and ensuring that it is available in every hospital and on every ambulance in Maryland.

### Emergency Medical Dispatcher of the Year Award

#### Asst. Chief Stephanie Reynolds Cecil County Dept. of Emergency Services

On the website of the Cecil County Department of Emergency Services, if you click on “Leadership” and then on “Stephanie Reynolds,” you will see a smiling woman in uniform with the following description:

“Stephanie currently holds the position of Assistant Chief—Communications. Assistant Chief Reynolds has just short of 20 years experience with Cecil County. She began as a dispatcher, advancing to Captain, managing

the quality assurance and quality improvement program. She coordinated the training for all personnel through the transition to a new radio system and three years ago advanced to Assistant Chief of the Emergency Communications Division.”

But that is only part of the story. In July 2008, Assistant Chief Reynolds was diagnosed with brain cancer and underwent surgery to remove the malignant tumor.

While undergoing radiation therapy and chemotherapy, she remained focused on her dispatchers and the Cecil County Emergency Services Dispatch Center, returning to work as soon as she could. Her intensity returned, and she constantly encouraged the dispatchers to continue to excel to become the best they could be at their jobs.

When additional surgery was needed in September 2009, she “connected” electronically to her “family” at the dispatch center. During her time in rehabilitation, she met with the dispatchers to make sure they were being taken care of. A few months ago, in February, her illness forced her to medically retire. But she is still close to those at her dispatch center. She receives regular visits from her staff who are providing care and support similar to what she gave them during her tenure as dispatcher. And she continues to encourage and advise them in their work.

While working at the Cecil County Department of Emergency Services, Assistant Chief Stephanie Reynolds was instrumental in providing care to tens of thousands who called and needed help in the moments of their emergencies. She also advanced her profession of Public Safety Dispatch through the training and example that she provided to her staff. For this, she was recognized with the Emergency Dispatcher of the Year award.

### Leon W. Hayes Award for Excellence in Emergency Medical Services

#### Austin G. Rinker, NREMT-P (Washington Co.)

Paramedic Austin G. Rinker was honored  
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Asst. Chief Stephanie Reynolds is surrounded by her colleagues from the Cecil County Dept. of Emergency Services and Sen. Donald F. Munson (District 2, Washington County), Del. David D. Rudolph (District 34B, Cecil County), and Sen. Barry Glassman (District 35, Harford County).



(L-r) Dave Hays (Assistant Chief, Community Rescue Service in Hagerstown), Linda Rinker (Paramedic Rinker's wife), Sen. Donald F. Munson (District 2, Washington County), Paramedic Austin G. Rinker (winner of the Leon W. Hayes Award for Excellence in EMS), Del. David D. Rudolph (District 34B, Cecil County), and Sen. Barry Glassman (District 35, Harford County).



Lt. Larry Trump, NREMT-P (winner of the Leon W. Hayes Award for Excellence in EMS) is surrounded by his wife and daughter, EMS colleagues, and Sen. Donald F. Munson (District 2, Washington County), Del. David D. Rudolph (District 34B, Cecil County), and Sen. Barry Glassman (District 35, Harford County).

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with the Leon W. Hayes Award for Excellence in EMS for his commitment to quality patient care both as a lifetime member of Community Rescue Service (CRS) and as coordinator of the Paramedic and Emergency Service Program at Hagerstown Community College.

Paramedic Rinker began his service at Community Rescue Service in 1968 as a junior member. In his early career, he was also an integral part in the development of the rescue cadet program at CRS. He was also a member of multiple teams that competed in the Emergency Care World Championships. Throughout Paramedic Rinker's years at CRS, he has served as a Rescue Sergeant, on the Board of Directors, and as mentor for many volunteers.

In 2004, Paramedic Rinker was named Coordinator of the Paramedic/Emergency Services Program at Hagerstown Community College, and student enrollment in the program has almost doubled during his tenure.

In addition, he has held numerous appointments related to EMS, including instructor at the Maryland Fire & Rescue Institute and regional faculty for the American Heart Association. He has also authored many publications on EMS topics.

### Leon W. Hayes Award for Excellence in Emergency Medical Services Lt. Larry Trump, NREMT-P (Baltimore Co.)

Lt. Larry Trump, who will be retiring from the Baltimore County Fire Department (BCFD) this year, has demonstrated more than 41 years of outstanding work in the BCFD, including 33 years as an ALS Provider and almost 30 years as a district EMS Supervisor. He has more than 43 letters of commendation in his personnel file. His dedication to EMS is also evident in his more than 40 years of service to the Owings Mills Volunteer Fire Company.

But it is more than years of service that make him worthy of the Leon W. Hayes Award for Excellence in EMS. He became a cardiac rescue technician, a certified Maryland ALS provider in 1977, when EMS was still in its infancy. EMS Director for BCFD, Kyrle Preis III said in nominating Lt. Trump for this award: "Working in EMS was not a coveted position, and it took personnel like Larry Trump to make an impact and a difference in the fire service."

According to EMS Director Preis, the "mark of a true pioneer, innovator, and leader is one who leaves behind not only a legacy of himself, but one of making the system better. Lt. Larry Trump has made our system better."

For this reason, Lt. Trump was recognized with the Leon W. Hayes Award for Excellence in EMS.

### Outstanding EMS Program Award Barbara Nueslein, RN (Bel Air, Harford Co.)

Barbara Nueslein, RN received the Outstanding EMS Program award for her initiative in creating six "emergency take-out locations" at Harford Glen Environmental Education Center, where she is the school nurse. The Environmental Education Center, staffed and operated by Harford County's Public School system to supplement classroom instruction, covers 360 acres and includes forests, marshes, and streams. Mrs. Nueslein researched accessible sites for ambulance transport along the trails of the Environmental Education Center and helped to develop a map with each accessible ambulance transport site marked by a red cross, the universal first-aid sign.

The Center offers hands-on field experiences for grades 1 through 12, including a 3-1/2 day residential outdoor environmental education program for fifth graders.

Harford Glen's "emergency take-out locations" are important for many reasons. For example, consider the West Ring Factory Road Hike, which was described as being 4 miles long and lasting 4 hours. There are 8 stream crossings. Instructional activities occur along the trail. The theme for one group taking this hike was "change," and that trip was taken during the winter months so students could easily

see the topography of the environment. Now, if an emergency were to occur on that trail or any of the other marked trails, students and teachers could be located quickly, thanks to Mrs. Nueslein.

In addition to the development of emergency take-out locations and map, Mrs. Nueslein also created an instruction sheet attached to the map to ensure that teachers are able to communicate locations through the

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(L-r) Mary Nasuta (Nurse Coordinator for Harford County Public Schools), Sen. Donald F. Munson (District 2, Washington County), Barbara Nueslein (winner of the Outstanding EMS Program Award and school nurse at Harford Glen Environmental Education Center), Del. David D. Rudolph (District 34B, Cecil County), and Sen. Barry Glassman (District 35, Harford County).



Ehrin Hughes, the YMCA of Talbot County, and the Talbot County Dept. of Emergency Services received the MIEMSS Director's Award for Excellence in EMS.

(L-r) Sen. Donald F. Munson (District 2, Washington County), members of the Talbot County Dept. of Emergency Services with Meg Stein holding their award, Ehrin C. Hughes (holding her award), and Robbie Gill, Chief Executive Officer of the YMCA of Talbot County (holding the YMCA's award). Clay Stamp (Director of the Talbot County Dept. of Emergency Services) is standing directly behind Ehrin Hughes. Del. David D. Rudolph (District 34B, Cecil County) is behind Robbie Gill, and Sen. Barry Glassman (District 35, Harford County) is to the right of Mr. Gill.

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map coordinates if they have to call 9-1-1. For example, a teacher needing emergency help might say: "I'm on the Orange Trail—H-11. The closest Emergency Take-out Location is HG3." Along the same lines, Mrs. Nueslein worked with EMS companies closest to the Center to get their input and talk about the maps and ensure that staff, teachers visiting the Center, and EMS providers would all be using the same terminology if 9-1-1 needed to be called.

Mrs. Nueslein recognized the need to have clear communication with EMS and to create a plan that safeguards Harford County Public School students should any medical emergency arise while they are visiting the Harford Glen Environmental Education Center. This is a collaborative and ongoing process.

### MIEMSS Director's Award for Excellence in EMS

- **Ehrin C. Hughes (Talbot Co.)**
- **YMCA of Talbot County (Robbie Gill, chief executive officer, accepted the award.)**

- **Talbot County Dept. of Emergency Services (Clay Stamp, director, and Brian LeCates and Meg Stein accepted the award)**

In August 2009, Ehrin C. Hughes, who is the Aquatic and Day Camp Director at the YMCA of Talbot County in Easton, heard someone yell: "Call 9-1-1." She immediately ran toward the Wellness Center, where a man, while working out, had collapsed in cardiac arrest. Two other certified staff had already placed him on a flat surface in an open area, when Ms. Hughes ran to his side to feel for a pulse. He was not breathing and had no pulse. Another staff member removed the man's shirt, while another brought in the AED or automated external defibrillator. Ms. Hughes applied the AED to his chest. The AED indicated to shock the patient. After pressing the button to shock the man, she detected a faint pulse. Because he still was not breathing, she gave 3 sets of rescue breathing and on the last breath, the man gasped.

When EMS arrived, the patient had a viable rhythm and pulse and was attempting to breathe. The man was taken to the Memorial

Hospital at Easton and later transferred to University of Maryland Medical Center where he received surgery to remove six blockages.

In the YMCA's newsletter, Ms. Hughes wrote: "This man, this Y member, lived because of all the training taken by the YMCA staff. That day, I may have been the one to perform rescue breathing and AED administration, but I would not have had all the necessary equipment and open area for the rescue to be successful without the quick action of others. That is why it is critical that everyone should be certified in CPR, AED, and First Aid, so that someday you can be prepared to help someone in need!"

The Talbot County Department of Emergency Services was also recognized at the awards ceremony because it was the first countywide public access AED program on the Eastern Shore and is now recognized as a national model for a rural access Public Access Defibrillator (PAD) program.

### 2010 Edition of EMS Protocols: What's New, Changed?

(Continued from page 1)

- In the Helicopter Utilization Protocol, the current medevac request criteria were consolidated with information on Optimal Landing Zone and Safety Guidance.

#### New Optional Supplemental Protocol

- Neuroprotective Induced Hypothermia (Therapeutic) After Cardiac Arrest Scene & Interfacility Transport.

#### Sampling of New or Modified Pilot or Research Protocols

- New On-Scene Protocol & Alternative Dispatch Protocol Declared Public Health Emergency for Pandemic Influenza.
- New Video Laryngoscopy/Glidescope Ranger for Orotracheal Intubation.
- New RAMPART Research Protocol Comparing IM Midazolam to IV Lorazepam for control of Status Epilepticus.
- Modification of the Vaccination & Testing Protocol in Response to the Governor's Executive Order, November 6, 2009 (which was in effect only as long as the Governor's Executive Order was active; therefore, the protocol modification is no longer in place).

If you have any questions regarding the additions or revisions contained in the update, please contact State EMS Medical Director, Richard Alcorta, MD, at 410-706-0880.

## Disciplinary Actions

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

**B-2009-435 (CRT)**—March 9, 2010. For continuing to function as a CRT on an expired license, provider was reprimanded.

**B-2009-397 (Applicant)**—March 9, 2010. For pleading guilty to theft valued at more than \$500, applicant was placed on probation through the first period of EMT-B certification.

**B-2009-454 (EMT-B)**—March 9, 2010. For being found guilty of possession of a controlled dangerous substance, provider's certification was suspended until successful completion of substance abuse program and thereafter provider was to be placed on probation for one year and subject to random drug testing at his own expense.

**B-2009-459 (EMT-P)**—March 9, 2010. For continuing to function as an EMT-P on an expired license, provider was reprimanded.

**B-2009-466 (EMT-B)**—June 8, 2010. For failing to disclose on application that he had pled guilty to driving/attempting to drive under the influence per se and had received probation before judgment, reprimand and probation for the duration of the current certification period.

**B-2009-469 (EMT-B)**—June 8, 2010. For pleading guilty to driving a vehicle while impaired by alcohol and receiving probation before judgment, on probation for 1 year with random drug testing at provider's own expense.

**B-2009-471 (EMT-B)**—June 8, 2010. For pleading guilty to solicitation and receiving probation before judgment, revocation.

**B-2009-483 (EMT-B)**—June 8, 2010. For administering an injection of intramuscular influenza vaccine to a Baltimore County Police Department employee which is beyond the provider's scope of practice, reprimand.

# Celebrating EMS Week

This year EMS Week, a national celebration held annually to honor approximately 750,000 EMS providers nationwide, was celebrated May 16-22. This year's theme was *"EMS. Anytime. Anywhere. We'll be there."* It emphasized the responsiveness and compassion of our EMS providers whose timely and attentive intervention saves countless lives. Governor Martin O'Malley issued a Proclamation declaring May 16-22 as EMS Week in Maryland, as well as a Proclamation declaring May 19, 2010 as EMS for Children Day.

Maryland joined the nation in recognizing its over 27,000 prehospital care providers, both career and volunteer. The life-saving care offered by these highly trained personnel, 24 hours a day, seven days a week is exemplary. "Working as an emergency medical services provider is different from any other career," said Dr. Robert R. Bass, Executive Director of MIEMSS. "You get tremendous satisfaction from helping others and knowing you have made a difference between life and death. Our Maryland EMS providers perform a vital service for their local community and the State of Maryland."

In addition to the statewide EMS awards presented by MIEMSS (see pages 3-8), Maryland EMS providers across the state sponsored numerous EMS events. Many hospitals throughout Maryland provided meals or snacks for prehospital providers, while many

ambulance companies sponsored open houses and prevention activities for the public. Below is a sampling that captures the spirit of EMS Week in Maryland.

- The Caroline County Department of Emergency Services (DES) held an open house May 18 to show the public their new EMS Denton station as well as life-saving tools of the trade. According to Assistant Director of EMS Kevin Gillespie, the new building is being leased by the county and funded from insurance money collected by DES for emergency calls. The new station has a two-bay ambulance garage and two bunk rooms and a kitchen for the crew. There is also room to expand. Prior to moving into the building, Caroline County DES paramedics were stationed in a building with no garage for their ambulance.
- The Peninsula Regional Medical Center (PRMC) sent a letter to the editor (written by Dr. Clark Willis and Cindy Lunsford) saluting EMS providers on the Delmarva Peninsula. Dr. Willis is medical director for PRMC's emergency/trauma center, and Ms. Lunsford is president and chief operating officer. In their letter, they state that EMS providers "perform under tremendous pressure in less-than-desirable condi-

tions and man times, with their own safety in jeopardy. They are true role models and heroes. . . . It's an honor to work with our EMS providers and to recognize them during National EMS Week for their commitment to care and their importance to our communities."

- The Talbot County Council honored local EMS providers during EMS Week. Those recognized included Emergency Services Director Clay Stamp, EMS Division Chief Brian LeCates, Talbot County 911 Division Chief Tim McNeal, Talbot County Paramedic Association President Will Howard, Shift Captain for Talbot County EMS Judy Micheliche, and president of the Talbot County Fire & Rescue Association John Hanes.
- Shore Health System ran a newspaper ad during EMS Week that read: "When every second counts, you're there. To our wonderful Emergency Personnel, thank you. You work passionately to aid those in need of critical medical care. With your expert training and quick thinking, you stabilize serious conditions, and save lives at all hours of the day and night. Thank you for all you do to care for those who need you most."
- The Johns Hopkins Bayview Medical Center invited EMS prehospital providers to an EMS breakfast on May 19. Jeffrey Trost, MD, Medical Director of the Cardiac Catheterization Lab and Interventional Cardiology, presented "Percutaneous Coronary Intervention (PCI): When EMS Needs EMS." The presentation featured a STEMI patient who is himself a paramedic.
- The Johns Hopkins Hospital had a cookout for prehospital providers, with hot dogs, soda, and side dishes, on May 21 outside its adult emergency department. In addition, each time an EMS provider brought a patient to the ED, he/she could fill out a raffle ticket to be eligible for a Visa Gift Card. The event was sponsored by the Adult ED, the Pediatric ED, Cardiology, and the Adult and Pediatric Trauma Services.

(Continued on page 10)



EMS personnel from Caroline County Department of Emergency Services (DES) pose with county officials in front of the new ambulance at the dedication of the new Crystal Avenue station. (L-R): Stacey Twigg, Brett VanZant, Kevin Knussman, Parker Shandrowsky, Tim Cannon, Judy Sullivan, Melissa Dixon, DES Director Bryan C. Ebling, Assistant Director of EMS Kevin Gillespie, Commission President John Cole, and Commissioner Jeff Ghrist. The ambulance will be staffed 24-hours each day by a paramedic and EMT. The unit was purchased using insurance reimbursements from patients transported by EMS.

# Joint Commission Warns of Rising Violence in Health Care Facilities

The Joint Commission recently released a sentinel event alert highlighting the growing number of violent crimes that have occurred in health care facilities since 2007 and suggesting steps facilities should take to prevent violent incidents.

The Joint Commission is an independent, not-for-profit organization. Joint Commission standards address an organization's level of performance in key functional areas, such as patient rights, patient treatment, medication safety, and infection control. The standards focus on setting expectations for an organization's actual performance and for assessing its ability to provide safe, high quality care. The Joint Commission develops its standards in consultation with health care experts, providers, measurement experts, purchasers, and consumers.

The commission had received 256 reports of "sentinel events"—which are violent crimes including incidents of assault, rape, and homicide—since 1995, although the actual number is likely higher because of under-reporting of events. In 2002, six events were reported, and the following year four events were reported. In 2007, 36 events were

reported, while 41 were reported in 2008 and 33 in 2009. Although the report did not provide a running count of sentinel events at facilities for 2010, there have been several well-publicized violent incidents, including shooting incidents at facilities in Connecticut, North Carolina, and Tennessee, across the past four months. The report also contains 13 recommendations for facilities to stem the rise in violent incidents. Among other suggestions, the report advises that hospital officials:

- Collaborate with security departments to review facility safety status;
- Impose added security measures for EDs, particularly for hospitals in areas with high crime rates or extensive gang violence;
- Ensure that human resources departments thoroughly screen job applicants;
- Establish policies to minimize the likelihood of violent incidents resulting from punishment or disciplinary action;
- Provide training for staff on how to respond to agitated family members;
- Encourage employees to report any threats of violence;
- Train supervisors to recognize suspicious behavior;
- Have appropriate counseling programs for victims of violent incidents; and
- Report all incidents to appropriate law enforcement.

The commission's report notes that leadership issues regarding policy and procedure development and implementation were cited in 62% of the reports of violence. Other common problems cited in reports of violence were human resources-related issues, communication failures regarding environment safety, and assessment issues, including a lack of psychiatric evaluation. Noting that health care facilities should be "places of healing, not harm," the president of the Joint Commission says that this sentinel event alert gives providers the strategies necessary to "keep everyone safer."

— *Based on an article by the American Trauma Society.*

## Celebrating EMS Week

*(Continued from page 9)*

- Northwest Hospital in Baltimore hosted an EMS breakfast for prehospital providers on May 11.
- EMT students at the Patterson High School in Baltimore supported the Maryland Juvenile Diabetes Research Foundation to raise money to help find a cure for Juvenile Diabetes. Their event "Hot Rod Ride for Juvenile Diabetes" recognized Shelby Selby a diabetic and a June graduate at Patterson who completed their EMT Program. According to the students' event flyer, the Hot Rod Ride for Juvenile Diabetes was "on behalf of National EMS Week in honor of our own Shelby Selby who along with many others like her refuses to give in to juvenile diabetes."

## Coming SPRING 2011!!

*The 2011  
Statewide  
EMS Education Conference  
at the BEACH  
to be held in Ocean City!*

**Tentatively scheduled for  
March 31 – April 3, 2011**

**Watch for details coming soon!!!**

## TraumaNet Holds Press Event for Ending Distracted Driving

Governor Martin O'Malley declared May as National Trauma Awareness Month in Maryland. Trauma Awareness Month focuses attention on the horrific tragedy related to trauma and provides tools and strategies to prevent trauma and all unintentional injuries in Maryland neighborhoods, businesses, and schools.

TraumaNet, composed of representatives from Maryland's trauma centers, took the opportunity to receive the Governor's Proclamation and also hold a media event to bring awareness to the National American Trauma Society Distracted Driver Campaign. All nine Maryland trauma centers were represented at the event held at MIEMSS, as Delegate James Malone, who was instrumental in having this year's distracted driver legislation passed, discussed the importance of the new law taking effect October 1, 2010.



*State Delegate James Malone (fifth from right) and State EMS Medical Director Richard Alcorta, MD (last person on the right) join representatives from the nine Maryland trauma centers for the media event publicizing Maryland Trauma Awareness Month and the National American Trauma Society Distracted Driver Campaign.*

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**Governor Martin O'Malley**  
**Lt. Governor Anthony Brown**

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