

Vol. 48 No.5

For All Emergency Medical Clinicians

# MDH Launches 988, the New National Suicide & Crisis Lifeline

### THE MARYLAND DEPARTMENT OF

**HEALTH** (MDH) has announced the launch of 988, the new National Suicide & Crisis Lifeline, in Maryland Contacting 988 provides a direct connection to support for anyone experiencing mental health or substance use crisis, having thoughts of suicide, or being worried about someone who may need crisis support.

"988 is an easy-to-remember number and an incredibly fast way to get anyone who experiences a behavioral health crisis the help they need right away," said MDH Secretary Dennis R. Schrader. "In addi-



tion, in Maryland, we are integrating 988 into our existing and expanding crisis system support network."

Suicide was a leading cause of

death for people ages 10 to 34 years in 2020, according to the Substance Abuse and Mental Health Services Administration (SAMHSA). Moreover, from April 2020 to 2021, over 100,000 individuals died from drug overdoses in the U.S.

When someone in Maryland calls 988, the call is routed based on the caller's area code, not their location. If your cell phone has an out-of-state area code, your call will be routed to the state in which the area code originates. For those calls routed to Maryland, the call is an-

See 988 page 22

# **Monkeypox Cases in Maryland Climb as World Health Organization Declares Global Health Emergency**

As of JULY 28, 2022, Maryland had 111 confirmed cases of monkeypox infections, according to the Centers for Disease Control (CDC). Since the Maryland Department of Health (MDH) announced Maryland's first confirmed case on June 16, the virus has spread to all but four states – Alaska, Montana, Wyoming, and Vermont – for a national total of nearly 5,000 cases. Meanwhile, the World Health Organization has declared a global health emergency for the second time in as many years, as the number of confirmed cases worldwide has grown to more than 21,000 cases in 78 countries.

Human monkeypox is in the same family of viruses as smallpox but generally causes a milder infection. It can be spread between people through direct contact with skin lesions, body fluids or contaminated materials such as clothing or linens. It can also be spread through large respiratory droplets, which generally cannot travel more than a few feet, and prolonged face-to-face contact is required. The World Health Organization is in the process of establishing a new name for the virus.

Presenting symptoms typically include fever, chills, new swelling of lymph nodes, and a distinctive rash that often starts on the face and spreads to other parts of the body; however, onset of rash lesions else-

See Monkeypox page 16

# **MIEMSS Presents Annual Maryland EMS Awards**

**MIEMSS IS PLEASED TO** announce the recipients of the 2022 EMS awards. This year's awards recognize actions occurring between January 1, 2021, and December 31, 2021. Nominated by peers or a member of the public, this year's honorees were selected by a statewide committee of career, volunteer, and commercial EMS clinicians.

MIEMSS Executive Director Dr. Ted Delbridge traversed the state to present the awards – Star of Life, for adults, and Right Care When It Counts, for children and youth. During the presentations of the Right Care When It Counts and EMS for Children awards, he was joined by Associate State EMS Medical Director for Pediatrics Dr. Jennifer Anders and Maryland EMS for Children Program DirecMIEMSS is delighted to be able to present these awards in recognition of those who have gone above and beyond in the call to duty to serve their fellow Marylanders.

**DR. TED DELBRIDGE** MIEMSS Executive Director



tor Cynthia Wright Johnson. State EMS Board Chair Clay B. Stamp also participated in several presentations. MIEMSS congratulates this year's award recipients and salutes all of Maryland's outstanding EMS clinicians for their hard work and dedication to serving Maryland's residents and visitors in their moments of greatest need.

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### The Maryland Star of Life Award

■ FREDERICK COUNTY FIRE & RESCUE: CHIEF BENJAMIN NALBORCZYK; BATTALION CHIEF LENNE STOL-BERG; LT. KEVIN TREVEY; TECH. JOSEPH MEISTER; FF TIMOTHY PANNEBAKER; FF ANDREW KELLER; FF ZACHARY MAIN; FF/M BARTHOLOMEW MARTIN; LT./M MICHAEL STEELE



▲ From left: FF Zachary Main; FF Andrew Keller; Lt. Kevin Trevey; Lt. Michael Steele; Tech. Joseph Meister; and Battalion Chief Lenne Stolberg. Not pictured: Chief Benjamin Nalborczyk; FF Timothy Pannebaker; and FF/M Bartholomew Martin.

THE MARYLAND STAR OF LIFE Award is given to an individual, multiple individuals, or teams on the same incident for an outstanding rescue under extreme circumstances by EMS personnel. This year's honorees include the following personnel from Frederick County Fire & Rescue: Chief Benjamin Nalborczyk; Battalion Chief Lenne Stolberg; Lt. Kevin Trevey, Tech. Joseph Meister, and FF Timothy Pannebaker (Engine 251); FF Andrew Keller and FF Zachary Main (Am-

# bulance 259); FF/M Bartholomew Martin (Medic 23); and Lt./M Michael Steele (EMS 902).

On December 1, 2001, Frederick County Fire & Rescue units were dispatched to Fingerboard Road in Ijamsville for a report of a subject with their arm trapped in a corn picker. Ambulance 259, carrying FF Keller and FF Main, arrived on scene to find the male patient on picker's exterior ledge, bent over the side, with his left arm partially amputated, and his forearm trapped between two rollers inside the machine.

Lt. Trevey, joined by Tech. Meister and FF Pannebaker, soon arrived on scene with Engine 251, and established command, while FF Keller disengaged the picker's PTO shaft to prevent further injury to the patient and ensure a safe working area for the crews. FF Main supported the partially suspended patient, gave him oxygen, and obtained his initial

See Star of Life page 23

#### The Maryland EMS Clinician of the Year Award

LT. NATHAN WHEELOCK



▲ From left: MIEMSS Executive Director Dr. Ted Delbridge; F/Sgt. David Svites, Lead Aircrew Instructor, MSP Aviation; Sgt. Jenna Turner, Chief Flight Paramedic, MSP Aviation; Lt. Nathan Wheelock, OIC Aircrew Training Section, MSP Aviation Command; Dr. Douglas Floccare, State Aeromedical Director; Asst. Chief Scott Wheatley, Queen Anne's County EMS; and Major Michael Tagliaferri, Commander, MSP Aviation.

**THE EMS CLINICIAN OF THE YEAR Award** recognizes a clinician who has made outstanding contributions in the past year 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, and new technology). This year, we honor Lt. Nathan Wheelock of the Maryland State Police Aviation Command.

Formerly a Massachusetts paramedic, Lt. Wheelock first joined the MSP ranks in 1998, when he was assigned to the Prince Frederick barrack. The following year, he moved to Aviation Command. While going through the process of becoming a flight paramedic, Lt. Wheelock took time to volunteer for Calvert County ALS, providing many hours of care, compassion, and life-saving efforts to the people of Calvert County.

Over the next three years, Lt. Wheelock was assigned to Trooper 2 and Trooper 7, and, in 2001, was promoted to Trooper First Class. In 2003, he was appointed to SYS-COM Duty Officer, assuming the great responsibility of assuring the most appropriate resources are sent in response to aviation requests. Lt. Wheelock earned his senior wings and served the state team as a tactical medic, before being appointed as Chief Flight Paramedic in 2010.

Education is important to Lt. Wheelock. In conjunction with his MSP service, he has taught many advanced airway management classes with the R Adams Cowley Shock Trauma Center in Baltimore. In so doing, he has directly influenced the last 15-20 years of new MSP aviation candidates, as well as Maryland prehospital clinicians throughout the state, through the highest level of training possible.

Lt. Wheelock has continued to rise in rank, and is currently assigned as Lieutenant/Commander of

See EMS CLINICIAN page 23

#### The Maryland EMD Clinician of the Year Award

PUBLIC SAFETY EMERGENCY COMMUNICATIONS SPECIALIST 3 (PSECS3) DARRELL FOREMAN



▲ From left: MCPD ECC Deputy Director Robert Williams; MCPD Asst. Chief Darren Francke; PSECS Supervisor Gloria Jackson; PSECS3 Darrell Foreman; Montgomery County Chief of Police Marcus G. Jones; MCPD ECC Deputy Director Tamara Maldonado; and Montgomery County Fire and Rescue Service Fire Chief Scott E. Goldstein.

THE EMD CLINICIAN OF THE YEAR AWARD is given for extraordinary efforts in assisting the public through dispatch in this vital portion of the Chain of Survival. This year, we present the EMD Clinician of the Year Award to PSECS3 Darrell Foreman.

PSECS3 Foreman goes above and beyond the call in his role in the Montgomery County 9-1-1 Emergency Communications Center, providing life-saving measures when handling medical calls. Possessing a solid foundation of the protocol guidelines, his calm demeanor and professionalism when dealing with emotional or stressed callers only bolsters his ability to effectively process the call. He has received recognition for numerous ROSC calls, and his effective actions and instructions have been instrumental in saving lives on more than one occasion. His call-taking Quality Assurance evaluations routinely reflect high compliance, with Mr. Foreman receiving recognition for maintaining outstanding QA evaluations in each of the 12 months in 2021.

In addition to his duties as a calltaker, Mr. Foreman also volunteers his time on the agency's Dispatch Review Committee, which meets quarterly to discuss a myriad of operational topics pertaining to EMD, as well as the Fire and Police disciplines. His input on the committee as the frontline EMD who answers and processes calls on a daily basis has been invaluable. Both knowledgeable and articulate, Mr. Foreman is invested in improving the communications center's processes and standard of care. He is not shy about participating in committee discussions, weighing in with all levels of management, regularly contributing EMD topics to meeting agendas, helping to develop internal policies, and submitting proposals for change with the International Academies of Emergency Dispatch.

PSECS3 Foreman also contributes to the center's greater good by serving as a communications training officer, working diligently to cultivate up-and-coming call-takers and dispatchers through training them in the clinical aspects of processing calls as well as in deliver-

See EMD CLINICIAN page 23

### Maryland EMS News

#### **2022 MARYLAND EMS AWARDS**

# The Maryland EMS Citizen Award

Commander Kristen Haslam, RN



▲ From left: Commander Kristen Haslam, RN, US Public Health Service, and MIEMSS Executive Director Dr. Ted Delbridge.

**THE MARYLAND EMS CITIZEN AWARD** is bestowed upon citizen rescuers who have demonstrated quick thinking, fast action, and heroism. This year's recipient is **Commander Kristen Haslam, RN**, of the US Public Health Service.

Commander Haslam was at her Woodsboro home in the late afternoon of December 21, 2021, when her husband, who was in their backyard, urgently called her. He drew her attention to a loud crash nearby. Upon investigating, Commander Haslam discovered a single vehicle that had run off the road and into a nearby field. Inside the vehicle, she found the unresponsive driver and his wife. Kristen immediately dialed 9-1-1 and, summoning all of the experience and expertise of her 18 years in the nursing field, set about initiating patient care until responding EMS units arrived.

While neighbors tended to the patient's distraught spouse, Kristen removed the man from the vehicle and began CPR. The patient was still without a pulse when The Outstanding EMS Program Award

CAROLINE COUNTY DES



▲ From left: Lt. Andy Fulton, Caroline County Department of Emergency Services, and MIEMSS Executive Director Dr. Ted Delbridge.

**THE OUTSTANDING EMS PROGRAM AWARD** recognizes 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. This year, we honor the **Caroline County Department of Emergency Services** for its new EMS Alternative Destination Program.

The Alternative Destination Program (ADP) is designed to reduce the workload of the area's emergency departments and decrease extended out-of-service times for EMS by screening and redirecting low-acuity primary care complaints (BLS Priority 3 patients) to appropriate participating healthcare partners.

After 11 months of cultivating private-public partnerships, which include Choptank Community Health System, Inc., and the University of Maryland Urgent Care at Denton, the Caroline County ADP went live May 3, 2021, creating a viable alternative destination program for Caroline

See EMS CITIZEN page 23

### Maryland EMS News

### **2022 MARYLAND EMS AWARDS**

The Leon W. Hayes Award for Lifetime Excellence in EMS Emergency Services Specialist (ESS) Bruce W. Conrad

THE LEON W. HAYES Award for Lifetime Ex-**CELLENCE IN EMS** is given to an individual who has devoted a lifetime of dedication to excellence in patient care, compassion and respect for each patient, and commitment to continuous improvement of the Maryland EMS system through his/her professional and personal life. This year, we honor Emergency Services Specialist (ESS) Bruce W. Conrad.

ESS Conrad's career as a first responder began in 1975, when he joined the Lutherville Volunteer Fire Company (of which he continues to be a member) as a firefighter. In 1979, Mr. Conrad became an EMT;



▲ From left: MIEMSS Executive Director Dr. Ted Delbridge and ESS Bruce W. Conrad.

two years later, he was certified as a CRT. He became a firefighter with the Baltimore County Fire Department (BCFD) in 1979, and, two years later, a paramedic. Mr. Conrad eventually rose to the rank of Captain before retiring from BCFD in 2006. Along the way, he became a Paramedic Instructor, EMT Ambulance Instructor, EMT-B Instructor, ACLS Instructor, BCLS Instructor, Captain of EMS for Baltimore County, and a member of the Maryland Instructor Certification Review Board.

Upon his retirement from BCFD, Mr. Conrad began a career with the United State Secret Service as an Emergency Services Specialist. To this day, he remains committed to training Uniform Division Police Officers and

on and commanding the fire-ground on a structure fire in Baltimore County when he experienced chest pains. He steadfastly continued command functions until he collapsed into sudden cardiac arrest, moments after calling for a resuscitation crew, and thereby

Special Agents for prehospital emergency medical services here in Maryland and around the world.

Throughout his 46plus year career, Mr. Conrad has maintained the utmost respect, compassion and commitment to being his patients' advocate, treating them to the best of his abilities - himself included. Shortly before his retirement from BCFD, Mr. Conrad was operating

helping to improve his own outcome. This life-altering event became a cornerstone of his unique approach to patient care, teaching, and mentoring. Time and again, Mr. Conrad has demonstrated his determination to become a better clinician, caregiver, instructor, and mentor to his patients, crew, coworkers, fellow clinicians, and EMS throughout the world. He has traveled to many nations to train and build their EMS capabilities, regardless of resources and circumstances, and on numerous occasions has shared experiences from various settings upon his return to positively influence protocols, resource distribution, and overall systems efficacy. ■

# **ONLINE NOMINATIONS FOR 2023 ANNUAL STARS OF LIFE AWARDS NOW OPEN**

Nomination forms for the 2023 Annual Stars of Life awards are open online. Actions taking place between January 1, 2022, and December 31, 2022, are eligible. The deadline is Friday, March 31, 2023. For more information, see page 14, or visit https://miemss.org/home/ems-providers.

The Maryland EMS-Geriatric Award

■ PILLEY DOE, RN, AND JENNIFER FORESTER, LCSW-C



▲ From left: MFF/P Arye Singer, MIH Paramedic; Jennifer Forester, LCSW-C, MIH/APS Social Worker; Avital Graves, MBA, MHA, NRP, MIH Manager; Pilley Doe, RN, BSN, MIH/APS Community Health Nurse; Denise Bruskin-Gambrell, LCSW-C, APS Supervisor; Mario Wawrzusin, APS Administrator; and Michael Djan, MIH Data Analyst.

**THE MARYLAND EMS-GERIATRIC AWARD** is given to an individual or program that has demonstrated ongoing dedication and commitment to improving the EMS care of the elderly in Maryland. This year, we honor **Pilley Doe, RN, BSN**, and **Jennifer Forester, LCSW-C**, of the Montgomery County Fire and Rescue Service Mobile Integrated Health (MIH) program.

The Montgomery County Fire and Rescue Service MIH program is unique among its peers in that its social worker and nurse are also credentialed Adult Protective Services investigators, embedded within Fire/Rescue, possibly the only program of this kind in the entire nation. Coming from a background in clinical research and cancer care, Pilley Doe, RN, joined the MIH team in late 2019, wanting to be able to work with patients who needed support and clinical guidance in the field. In her role with MCFRS Mobile Integrated Health, Ms. Doe has used her experience and knowledge to not only help patients navigate their options for successful avoidance of hospital and EMS usage, but has also worked to educate patients, their families, and the county's EMS clinicians on interventions and best practices. A dedicated advocate, she visits patients in their homes, stays by their bedside in the hospital when family cannot be there, and coordinates resources on the patient's behalf. During the COVID-19 pandemic, Ms. Doe was also instrumental in helping MCFRS to manage patients who refused transport to the hospital secondary to low-acuity symptoms of suspected COVID-19 infections.

Although Jennifer Forester, LCSW-C, joined the MIH program in the very early days of the COVID-19 pandemic, she jumped in with both feet, helping to hone a streamlined process for managing the high volume of incoming referrals from the field. Her experience in crisis work and knowledge of APS resources have been instrumental in helping older, more vulnerable clients to work through their challenges.

### The Maryland EMS for Children Award

### Dr. Bruce Klein

### THE MARYLAND EMS FOR AWARD

is This award is given to an adult or program that has demonstrated ongoing dedication and commitment to improving the care for children and for promoting Family Centered Care in a Maryland EMS program or hospital. This year, we honor **Dr. Bruce Klein**.

Dr. Klein has dedicated his medical career to improving the care of seriously ill and injured children of all ages and passionately advocating for family-centered care both in the State of Maryland and beyond. Dr. Klein spent 36 of his 43 years in pediatric practice serving children and families in the Baltimore-Washington region, the last 29 of which he also dedicated to pediatric transport. To date, he has mentored more than 100 students and physicians, co-authored over 100 peer-reviewed publications, review articles, editorials, and book chapters, and given more than 250 invited local, regional, and national talks focusing on pediatric emergency care and transport medicine.

Dr. Klein has provided a unique service to Maryland children and their families through his role in leading two large pediatric transport teams that serve our state at two major pediatric specialty centers. His outstanding contributions are evidenced by his current and past work in the Pediatric Transport Service and the Division of Pediatric Emergency Medicine at the Johns Hopkins Children's Cen-



▲ From left: MIEMSS Executive Director Dr. Ted Delbridge; Dr. Bruce Klein; and Dr. Jennifer Anders, Associate State EMS Medical Director of Pediatrics.

ter, as well as the Transport Medicine service and the Division of Emergency Medicine at the Children's National Medical Center. Dr. Klein has worked on programs with the Maryland Chapter of the American Academy of Pediatrics (AAP) including the Gun Violence as a Public Health Epidemic Task Force and has held multiple leadership roles in national professional societies and steering committees focused on improving pediatric emergency care nationwide.

Standing as testament to Dr. Klein's lifelong advocacy for pediatric care is his involvement in several

national committees, including the Pediatric Education for Prehospital Professionals (PEPP) and co-edited several editions of the AAP's Pediatric Education for Prehospital Professionals course. Dr. Klein worked with Maryland EMSC on the state PEPP Steering Committee and served as faculty for the Advance Pediatric Life Support course for physicians for many years. He has also taught pediatric emergency care in most Maryland front-line community hospitals bringing feedback from the pediatric transport team to the referring hospitals.

### **ONLINE NOMINATIONS FOR 2023 ANNUAL RIGHT CARE WHEN IT COUNTS AWARDS NOW OPEN**

Nomination forms for the 2023 Right Care When It Counts awards are open online. Actions taking place between January 1, 2022, and December 31, 2022, are eligible. The deadline is Friday, March 31, 2023. For more information, see page 15, or visit https://miemss.org/home/ems-providers.

# 2022 Right Care When It Counts Awards

**FOR 19 YEARS**, the Maryland EMS for Children Program has recognized children and youth from across Maryland who have learned about prevention and how to act when they see someone in need of help. This year, six young heroes received Right Care When It Counts awards for bravely taking action to help someone in need.

### Caleigh Wilson, Olivia Fahlbush, and Amelia Grant

**EIGHTEEN-YEAR-OLD Caleigh Wilson**, a lifeguard at Life Time Fitness, was at her lifeguard stand monitoring swimmers in the facility's lap pool when, shortly after 3:00 p.m., she observed a swimmer in distress. The man was swimming erratically as he moved from the shallow end to the deep end, veering into the lap lane. He briefly submerged then resurfaced, and swam to the side of the pool, where he held onto the wall for support.

Caleigh went to investigate, and he explained that he "felt like I was drowning." Suddenly, the swimmer lost consciousness while still in the water. Immediately recognizing that the man was unresponsive, Caleigh grabbed his arm, preventing him from submerging. She quickly called other lifeguards for assistance.

Life Time Fitness Manager Megan Davis assisted Caleigh while two of her fellow lifeguards, 18-year-old Olivia Fahlbush and 14-year-old Amelia Grant, brought the backboard. Working together, the team successfully removed the patient from the pool. Conducting a primary assessment, the quickly determined that the man was not breathing, nor did he have a pulse. They initiated a call to 9-1-1 and immediately began chest compressions and administered ventilations via bag valve mask. Working together, they applied the AED pads, and the patient was shocked three times prior to the arrival of EMS. They continued chest



▲ From left: Cynthia Wright-Johnson, Director, Maryland EMS for Children Department; MIEMSS Executive Director Dr. Ted Delbridge; Amelia Grant; Caleigh Wilson; Olivia Fahlbush; and Dr. Jennifer Anders, Associate State EMS Medical Director of Pediatrics.

compressions and providing ventilations until Montgomery County Fire and Rescue Service (MCFRS) personnel arrived on scene.

MCFRS crews assumed patient care from the staff, and very soon determined the patient was experiencing ventricular tachycardia. After three more defibrillations, return of spontaneous circulation was achieved, and the patient was moved to the EMS unit for transport to the hospital. En route to the hospital, the patient began to wake up; by the time the ambulance arrived at the emergency room, the patient was awake and talking to the EMS crew. During his stay at the hospital, the patient received a pacemaker before being discharged, neurologically intact. He has since returned to Life Time Fitness, where he has resumed swimming laps on a regular basis.

The Chain of Survival begins with recognition of an emergency. From quickly identifying the emergency and removing the patient from the water to their early administration of high-quality CPR and defibrillation, the swift, decisive actions of Caleigh Wilson, Olivia Fahlbush, and Amelia Grant played an integral part in this positive patient outcome. In recognition of their efforts, we are pleased to recognize them with these 2022 Right Care When It Counts awards. ■

### Maryland EMS News

### 2022 RIGHT CARE WHEN IT COUNTS AWARDS

#### Ava Bauer and Alayna Oertel

**THIRTEEN-YEAR-OLD** Ava Bauer was traveling with her father, Jonathan Bauer, across the Route 90 bridge in Ocean City on May 2, 2021, when their car was involved in a multi-vehicle collision that left one of the other cars dangling over the side of the bridge. After confirming Ava's wellbeing, Jonathan instructed her to remain with their car while he went to check on other accident victims.

Ava immediately dialed 9-1-1 and took it upon herself to begin checking on the welfare and needs of other drivers and passengers in her vicinity. In the process, she provided valuable intel to the 9-1-1 calltaker while also assisting in the care of those who were injured prior to the arrival of Ocean City Fire and EMS personnel. Meanwhile, Jonathan learned that a small child in a car seat had been ejected from the car that now dangled from the side of the bridge and into the waters of Assawoman Bay. Without hesitation, he removed his shoes, told Ava to stay near their car and, despite his fear of heights and the water's relatively shallow depth, jumped from the bridge in an effort to rescue the child.

Ava helped direct her father as he made his way to the child, who by now was floating face-down. Jonathan swam toward her and, pulling her from the water, tapped her back several times until the unresponsive child coughed up water and opened her eyes.

Fortunately, an eagle-eyed 14-year-old named **Alayna Oertel** had observed both Jonathan and the child in the water from the nearby



▲ From left: Dr. Jennifer Anders, Associate State EMS Medical Director of Pediatrics; Ava Bauer; Alayna Oertel; MIEMSS Executive Director Dr. Ted Delbridge; and State EMS Board Chair Clay B. Stamp.

pontoon boat her family was operating and directed her father toward them. Alayna immediately directed her father to steer the boat towards the man and child in order to help them out of the water and get them safely to shore. Once alongside the boat, Jonathan handed the child up to the Oertel family before climbing aboard himself. Alayna and her family then transported them to a nearby boat ramp, where OCFD Paramedics were waiting to administer treatment. The child was subsequently flown via MSP Medevac Trooper 4 to an area trauma center for further care.

Governor Larry Hogan subsequently recognized Jonathan's selfless efforts with a Governor's Citation in person on May 28. He was also designated a 2022 Congressional Medal of Honor Citizen Honors Award Honoree "due to his conspicuous and selfless courage in service to his fellow Americans by going above and beyond the call of duty in aid to others."

For her own instrumental role in placing the 9-1-1 call, helping to identify injured victims on the bridge, and assisting her father in his plan to rescue himself and the young child from the water, we honor Ava Bauer with this 2022 Right Care When It Counts award. For her sharp observational skills and quick, decisive action leading to the successful rescue of the small child from Assawoman Bay, we honor Alayna Oertel with this 2022 Right Care When It Counts award. ■

#### 2022 RIGHT CARE WHEN IT COUNTS AWARDS

#### BREELLEN SISLER

**NINE-YEAR-OLD BreEllen Sisler** staying overnight with her grandmother, Donna, when, at approximately 7:00 a.m., Bree heard a loud noise upstairs. When she went to investigate, she found her grandmother on the floor of her bedroom and in extreme pain. Bree immediately informed her grandfather of the incident and initiated a 9-1-1 call.

Turning the phone over to her grandfather, she returned to be by her grandmother's side. Bree comforted her grandmother and helped her to remain calm and still, keeping her awake and ensuring she did not move before help arrived. This proved especially vital as, upon their arrival, EMS clinicians determined that Donna had suffered a broken hip, which any movement could have easily exacerbated. Donna was transported to Garrett Regional Hospital, where she underwent orthopedic surgery for her injuries.

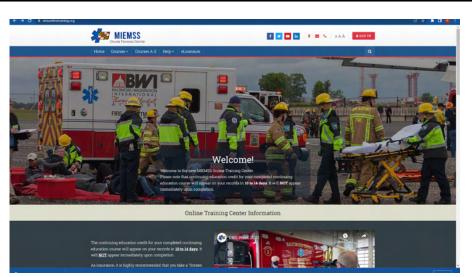


▲ From left: MIEMSS Executive Director Dr. Ted Delbridge; Dr. Jennifer Anders, Associate State EMS Medical Director of Pediatrics; BreEllen Sisler; and Cynthia Wright-Johnson, Director, Maryland EMS for Children Department.

Since then, Donna has made a full recovery and is doing well thanks to the quick thinking and immediate actions of her granddaughter, BreEllen Sisler, whose efforts we are pleased to recognize with this Right Care When It Counts award. ■

**MIEMSS IS PLEASED TO** announce the launch of the "EMS Naloxone Leave-Behind Course" on the MIEMSS Online Training Center. This brief course covers the fundamentals of the optional protocol, which is now available in most of Maryland's counties and cities. The continuing education module was developed with our partners at the Maryland Department of Health – Center for Harm Reduction Services.

Please take a few moments to login to the online training center



(www.emsonlinetraining.org) and learn how the naloxone leave-behind protocol makes a lifesaving impact for our patients.



**THE MARYLAND INSTITUTE FOR EMERGENCY MEDICAL SERVICES SYSTEMS** (MIEMSS) congratulates the newly elected and installed 2022 Maryland State Firemen's Association (MSFA) Officers:





**BEN KURTZ** *MSFA President* 



**ERIC SMOTHERS** *1st Vice President* 



**W. NEWTON "SKIP" CAREY, JR.** 2<sup>nd</sup> Vice President

We also congratulate the 2022 Ladies Auxiliary of the MSFA (LAMSFA) Officers:



MALEA DAUGHTON LAMSFA President



JEAN MAIN LAMSFA Senior Vice President



SHARI STEFFEN LAMSFA Junior Vice President

We look forward to their leadership and thank them for their dedication to both great Associations!



# MARYLAND STARS OF LIFE AWARDS

Each year, the Maryland Institute for Emergency Medical Services Systems (MIEMSS) celebrates EMS Week by honoring men and women across Maryland who have contributed to the EMS system. The eight categories for awards relate to specific incidents occurring from January 1, 2022, through December 31, 2022. For further information, call 410-706-3994, or email awards@miemss.org.

### 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 under extreme circumstances by EMS personnel.

### MARYLAND EMS CITIZEN AWARD

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

### **EMS CLINICIAN OF THE YEAR**

This award recognizes a clinician who has made outstanding contributions in the past year 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, and new technology).

### **EMD CLINICIAN OF THE YEAR**

This award is given for extraordinary efforts in assisting the public through dispatch in this vital portion of the Chain of Survival.

### **OUTSTANDING EMS PROGRAM**

This award recognizes 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.

### LEON W. HAYES AWARD FOR LIFETIME EXCELLENCE IN EMS

This award is given to an individual who has devoted a lifetime of dedication to excellence in patient care, compassion and respect for each patient, and commitment to continuous improvement of the Maryland EMS system through his/her professional and personal life.

### MARYLAND EMS-CHILDREN (EMS-C) AWARD

This award is given to an adult or program that has demonstrated ongoing dedication and commitment to improving the care for children and for promoting Family Centered Care in a Maryland EMS program or hospital.

### MARYLAND EMS-GERIATRIC (EMS-G) AWARD

This award is given to an individual or program that has demonstrated ongoing dedication and commitment to improving the EMS care of the elderly in Maryland.

# NOMINATIONS FOR 2023 are DUE by FRIDAY, MARCH 31, 2023. SUBMIT THROUGH THE ONLINE LINK: <u>http://www.miemss.org/home/documents</u>



The Right Care When It Counts Maryland EMSC 2023 Program



The Maryland EMS for Children program is <u>In Search Of</u> children and youth in Maryland who have demonstrated <u>Steps to Take in an Emergency</u> or <u>Ways to</u> <u>be Better Prepared for an Emergency</u>. Actions taking place January 1, 2022, through December 31, 2022, are eligible for nomination. We will be recognizing children and youth who acted so that others would receive "The Right Care When It Counts." Each nominee will receive a patch and certificate and be eligible for a state award at a ceremony during EMS Week 2023. Questions? Email <u>awards@miemss.org</u>

Children and youth who have met one or more of the following criteria are eligible for Right Care Awards:

- 1. Activates the Emergency Response System by calling 9-1-1 in an emergency
- 2. Calls the Poison Control Center in an emergency (1-800-222-1222)
- 3. Provides family emergency phone numbers, address, and contacts to emergency responders
- 4. Knows and practices an emergency plan at home
- 5. Applies knowledge learned in a first aid class
- 6. Performs CPR and/or uses an AED effectively
- 7. Knows his or her medical history (allergies, medications, special needs, etc.) and shares this information with emergency care providers
- 8. Participates in fire and injury prevention education in the community
- 9. Prepares, with his or her family, to respond to a disaster
- 10. Provides emergency assistance in the community

Nominations for 2023 are DUE by March 31<sup>st</sup>, 2023 (Friday). Submit through the online link: <u>http://www.miemss.org/home/documents</u>

### Monkeypox...

### (Continued from page 1)

where in the absence of other symptoms has been reported. Symptoms generally appear seven to 14 days after exposure and, for most people, clear up within two to four weeks. Individuals identified as having been potentially exposed to this case will be monitored for symptoms for 21 days after exposure.

While the risk of human monkeypox transmission remains low, the public is strongly encouraged to stay alert for any symptoms of the illness and to seek medical care immediately, especially if you meet this criteria:

Those who traveled to central or west African countries, parts of Europe where monkeypox cases were reported, or other areas with confirmed cases of monkeypox the month before their symptoms began;

- Those who have had close contact with a person with confirmed or suspected monkeypox; or
- Those who have had close or intimate in-person contact with individuals in a social network experiencing monkeypox activity,

which includes men who have sex with men

Clinicians are urged to maintain a high index of suspicion for clinically compatible illness, including the characteristic rash, and to contact their local health department for consultation and potential testing.

The Maryland Department of Health provides human monkeypox information and resources for residents and clinicians on its website. See page 17 for further information, or visit health.maryland.gov/monkeypox. Additional details about human monkeypox cases are available on the Centers for Disease Control's website at https://www.cdc.gov/ poxvirus/monkeypox/response/2022/index.html.

# MONKEYPOX

# VISUAL EXAMPLES OF MONKEYPOX RASH











Photo Credit: NHS England High Consequence Infectious Diseases Network



# The Facts About Monkeypox



### WHAT IS IT?

Monkeypox is a rare infection caused by the monkeypox virus. A small number of cases have been recently reported in the U.S., Canada, and Europe—areas where it isn't usually found.

Monkeypox can make you sick including a rash or sores (pox), sometimes with a flu-like illness.

#### HOW IS IT SPREAD?

The virus can spread to anyone through close, personal, or skin-to-skin contact, including:



Contact with monkeypox rash, sores or scabs.

These kinds of contact can happen during:

- Talking closely with someone
- Hugging, kissing, touching, massage
- Close, sexual contact

Touching fabrics and objects during sex that were used by a person with monkeypox, such as bedding, towels and sex toys

Contact with objects, fabrics (clothing,

bedding, or towels), and surfaces that

have been used by someone with monkeypox.

The virus can be spread in fluid or pus from monkeypox sores. It is not yet known if it is present in semen or vaginal fluids.

#### WHAT ARE THE SYMPTOMS?

- Monkeypox causes a rash or sores. It can also make you feel like you have the flu.
- Flu-like symptoms can include:
- Fever
- Headache Chills
- Muscle aches
  Fatigue
- A rash or sores can be on the hands, feet, chest, face, penis, or inside or on the mouth, vagina, and anus (butt).
- Sores will go through several stages before healing.
- Monkeypox can be spread from the time symptoms start until all sores have healed and a fresh layer of skin has formed—this can take several weeks.

Through respiratory droplets or saliva

from a person with monkeypox.

### WHAT TO DO IF YOU HAVE SYMPTOMS

Swollen glands

# If you have a new or unexplained rash, sores, or other symptoms...

- See your healthcare provider. If you don't have a provider or health insurance, visit <u>https://health.maryland.gov/CSTIP/local</u> to find a health department near you.
- When you see a healthcare provider for possible monkeypox, remind them that this virus may be circulating in the community.
- Avoid close physical contact with anyone until you have talked to a healthcare provider.

# If you or your partner have Monkeypox...

- Follow the treatment and prevention recommendations of your healthcare provider.
- Avoid close physical contact with anyone until all your sores have healed and you have a fresh layer of skin formed.



# For more information, please scan this code or visit <u>health.maryland.gov/monkeypox</u>

This document was last revised June 10, 2022. Maryland Department of Health | <u>https://health.maryland.gov</u>

# **Kids and Wheeled Sports Safety**

**Every hour, nearly 50 children** visit emergency departments with an

injury related to **bikes**, scooters, skates or skateboards.

Serious head injuries (concussions, internal injuries and fractures) made up 11% of ED visits across the four wheeled sports.

Fractures to the shoulder, arm, elbow, wrist or hand were the most frequent diagnoses for hospital admissions.

19%

19% of hospital admissions for **scooter injuries** to children in 2015 were because of a **head injury**.

Almost 40% of parents of children ages 5-14 years indicated that their child did not always wear a helmet when participating in one of the four wheeled sports.

11%

Among parents who say they **always wear a helmet** when riding a bike, 86% say their child also does. However, among parents who say they **never wear a helmet**, only 38% say their child always does.



Reasons why parents report their children do not always wear a helmet:

47% Parents think area is safe/View child as experienced/Don't see helmets as necessary.



### **Top Tips to Keep Kids Safe on Wheels**

- All riders should wear a properly-fitted helmet. It is the best way to prevent head injuries and death.
- Ensuring correct fit of a helmet can increase comfort and use.
- Knee pads and elbow pads are recommended for scooters, skaters and skateboarders.
   Wrist guards are also recommended for skaters and skateboarders.



# Be a "Roll Model" for Bicycle Safety

"BE A ROLL MODEL" is the National Highway Traffic Safety Administration's campaign to encourage evervone to model safe behaviors to enhance the safety of all road users, including those who bicycle. Whether you are a motorist or bicyclist, a parent/grandparent, adult, or older youth, ride for transportation or recreation, we can all play a part in being a "Roll Model" to decrease the risks of traffic crashes and preventable injuries and deaths. NHTSA invites everyone to adopt this campaign to engage adults and youths to do the right (safe) thing when riding or driving around bicycles.

In 1956, the League of American Bicyclists established May as National Bike Safety Month. Today, Bike Safety Month is celebrated in communities from coast to coast and offers a chance to showcase the many benefits of bicycling – and encourage more people to giving biking a try.

NHTSA urges bicyclists and motorists to share the roadways by obeying the traffic laws and respecting the rights of all. Being a "roll model" and respecting others' rights



go hand in hand. Being a roll model means:

- Riding and Driving Focused never distracted.
- Riding and Driving Prepared always expect the unexpected.
- Putting Safety First we never know when a crash will occur, regardless of skill level or age; always wear a bicycle helmet when on a bicycle and a seat belt when in a car.
- Following the Rules of the Road a bicyclist is considered a vehicle on the road with all the rights on

the roadway and responsibilities of motorized traffic.

- Expecting law enforcement officers to monitor and address unsafe behaviors between motorists and bicyclists that put bicyclists at risk.
- Sharing the Road both vehicle drivers (motorist and bicyclist) should look out for one another and show mutual respect.

Visit <u>https://miemss.org/home/</u> <u>bike-safety-project</u> for more bike safety information. ■



### **2022 Impaired Driving National Enforcement Mobilization**

The 2022 impaired driving national enforcement mobilization "Drive Sober or Get Pulled Over" goes into effect across the country from August 17 to September 5, 2022. Research shows that high-visibility enforcement can reduce impaired driving fatalities by as much as 20%. To maximize participation in this year's high-visibility enforcement mobilization campaign, the National Highway Traffic Safety Administration (NHTSA) has prepared campaign materials for use by law enforcement and public safety personnel. Download them here: https://www.trafficsafetymarketing.gov/get-materials/ drunk-driving/drive-sober-or-get-pulled-over/national-mobilization. Maryland Department of Transportation Motor Vehicle Administration's (MDOT MVA)

# Maryland Highway Safety Office

The MDOT MVA Highway Safety Office (MHSO) is dedicated to saving lives and working with many partners across the State to reduce the number of crashes each year. In addition, the MHSO looks for ways to reduce crash severity and ways to treat crash victims easier and faster.

Maryland aims to reduce the number of crashes, and the resulting deaths and injuries, to zero by 2030.

### MHSO Announcements

As we enter the height of summer, barbeques, vacation, spending time with friends and family, it is easy to forget that the summer months are the deadliest time to be on the road.

Speed, aggressive driving, impairment and distracted driving are all more prevalent during the summer months leading to an increase in fatal crashes. Make sure your car is road-ready by having regular maintenance performed and follow our summer traffic safety tips to ensure a safe and happy summer!



### **Emphasis Area Team Meetings**

Looking to become more involved in local road safety? MHSO welcomes participation from the EMS community for all emphasis areas. Mark your calendar for the upcoming meetings:

- **Impaired**: August 1, 2022 (10:00 a.m. 12:00 p.m.)
- Occupant Protection & Distracted Driving: August 18, 2022 (10:00 a.m. – 1:00 p.m.)

Contact <u>MHSO@mdot.maryland.gov</u> to register.

### Summer Traffic Safety Tips

#### 1. Always Wear a Seat Belt

Even if you're just driving a few blocks over to a friend's house for a barbecue, fasten your seatbelt. Most car crashes happen close to home, so buckle up. <u>Every seat.</u> <u>every ride</u>.

### 2. Follow Posted Speed Limits

You might be in a hurry, but the reality is that <u>speeding is</u> <u>dangerous</u> and it's unlikely that your additional speed will actually save much time. Speed limits are set for ideal circumstances, so always remember to adjust your speed during inclement weather and in work zones which are more common in summer.

### 3. Keep Your Eyes (and Attention) on the Road

We all know that phones are a distraction in the car, but the reality is that phones are far from the only thing taking our focus off the road. Anything that takes your eyes or focus off the road is a <u>distraction</u>—from other passengers, adjusting the radio, applying makeup and even daydreaming. While it's unrealistic to eliminate *all* distractions, do your best to minimize them while driving, this includes making sure your phone is safely away while you drive.

#### 4. Be Extra Vigilant on Evenings and Weekends

Friday and Saturday evenings are especially dangerous, resulting in the highest numbers of fatal crashes during summer. Even if the roads are less crowded, there may be more dangerous behaviors among drivers on the road. Watch for signs of <u>impaired</u> or <u>aggressive driving</u> and call 9-1-1 if you see concerning behavior. Do not attempt to follow the vehicle.

# 5. Be the SOBER Driver or Be the MAKE A PLAN Driver

Remember, the only safe Blood Alcohol Content (BAC) for driving is 0.0 as impairment can occur after only one drink. When visiting with friends or family for a celebration that involves alcohol, plan to stay the night or find a sober ride home with a designated sober driver, public transit or a rideshare.

# MDERS and PGPD Partner to Conduct Active Shooter and Barricade Full-Scale Exercise

IN APRIL 2022, the Maryland-National Capital Region Emergency Response System (MDERS) culminated an eight-month effort in partnership with the Prince George's County Police Department (PGPD) to plan and conduct a series of exercises focused on the department's response to an active shooter incident evolving into a barricaded suspect.

Planning efforts for this exercise cycle began in September 2021 for two exercises: a discussion-based. tabletop exercise (TTX) and an operations-based, full-scale exercise (FSE). Throughout the planning process, MDERS conducted bi-weekly planning meetings with PGPD leadership to establish exercise objectives, develop exercise scenarios, address logistical concerns, formulate timelines, identify participants, and assess needed resources for a realistic exercise environment. The planning team outline four primary objectives of the exercise series:

- Evaluate Prince George's County Police Supervisors and Command Staff's ability to establish and maintain command and control.
- Analyze the Prince George's County Police Department's transfer of command from patrol to special operations response
- Assess patrol officers' ability to provide first responder initial care.
- Assess Prince George's County Police Tactical Emergency Medical Services (TEMS) personnel's ability to provide point of injury and patient care, and extrication of patients.



▲ Members of the Prince George's County Police Department Special Operations Division discuss their response plan during the Barricade Full-Scale Exercise.

On March 2, 2022, PGPD conducted the first exercise utilizing the MDERS Tabletop in a Box toolkit. This discussion-based exercise allowed participants to work through three, distinct scenarios using a "crawl, walk, run" philosophy. This philosophy introduces increasingly complex elements allowing participants to progressively become familiar with the scenario and examine more intricate concepts. Twentytwo officers worked through these scenarios on an aerial-view map of the incident location using simulated models of real-world resources.

On April 13, 2022, the exercise cycle reached its capstone with a sixhour, full-scale exercise at PGPD's Public Safety Firearm and Tactical Training Complex in Upper Marlboro, Maryland. The planning team purposefully selected this 160,000 square-foot facility as it allowed exercise participants to train in a realistic environment with commercial and residential buildings, as well as provided a controlled area of play monitored closely by PGPD personnel for the safety of all exercise participants.

The FSE consisted of two scenarios designed to measure any training gaps between patrol officers and the teams who have received additional specialized training. The first scenario began with an active threat incident inside a restaurant that transitioned into a suspect fleeing and barricading inside a nearby apartment. In addition to patrol officers, this scenario necessitated the involvement of PGPD's Conflict Negotiations Team, Special Operations Divi-

See MDERS/PGPD page 24

### 988...

### (Continued from page 1)

swered by one of eight strategically located call centers across the state. These centers provide phone, text and chat-based support and information regarding local resources free of charge.

The Lifeline provides phone services in English and Spanish and uses Language Line Solutions to provide translation services in over 150 additional languages for people who call 988. Veterans can access the Veterans Crisis Line by calling 988 and pressing 1.

MDH also launched an awareness campaign to promote the new three digit number. Radio, digital and streaming ads launched this weekend and will run across the state for approximately eight weeks.



Billboards are slated to appear on the Eastern Shore and in Western Maryland in August.

"We must lead the charge in changing the narrative and educating Marylanders to call 988 for behavioral health crises," said Dr. Lisa Burgess, MDH Acting Deputy Secretary for the Behavioral Health Administration (BHA). "The 988 lifeline is a key component as we continue to expand and improve our crisis system in Maryland."

BHA is expanding crisis services across the state through the Mobile Response & Stabilization Services, a youth-specific crisis service model. Recently, BHA also developed mental health and crisis resources for coping with violence and resources to support minority mental health.

The 988 Suicide & Crisis Lifeline replaces the National Suicide Prevention Lifeline (1-800-273-8255) and Maryland's helpline (211, press 1). Both numbers will remain operational through the transitional period and beyond to ensure no resident is left without crisis support.

Learn more about 988 in Maryland at https://health.maryland.gov/ bha/Pages/988md.aspx. ■

# STAR OF LIFE...

### (Continued from page 3)

vital signs, while FF Keller assessed the patient's entrapment.

Due to a potentially complex extrication of the patient from the machine, responding units requested assistance from the R Adams Cowley Shock Trauma Center GO TEAM. Meanwhile, FF Pannebaker located a stepladder to allow Medic 23's FF/M Martin and Lt./M Steele of EMS 902, who had also arrived on scene, better patient access to initiate ALS care.

Lt. Trevey requested medevac transport, as well as an additional company for the landing zone. Chief Nalborczyk arrived on scene and assigned Battalion Chief Stolberg as the Rescue Group Supervisor. The engine company personnel's working knowledge of the farm machinery proved critical to the rapid extrication of the patient. A tourniquet was placed around the patient's upper arm to prevent additional blood loss and, using their Halligan bars, Lt. Trevey and FF Keller forced apart the rollers that had trapped the patient's arm, utilizing wedges to capture their progress. FF/M Martin and Lt. Steele subsequently established IV access, administered appropriate pain medications, and applied a basic splint to prevent further injury to the patient. Working together, crews successfully extricated the patient from the machine in less than

# EMS CLINICIAN...

(Continued from page 4)

Helicopter Field Operations. He has been published in *JEMS* magazine, been honored as flight paramedic of the year, and received several medals of valor and awards both within the Maryland State Police and State of Maryland EMS agencies. He holds a master's in emergency health services, and recently received the Governor's commendation for organizing vaccination and distribution teams during the COVID-19 pandemic. ■ 20 minutes. Once in the ambulance, EMS clinicians enhanced the initial splint and dressings, and continued patient care until the arrival of MSP Trooper 2, which flew the patient to Shock Trauma in Baltimore. Crews were later advised that the patient's arm was, in fact, saved, and that he is recovering well. ■

### EMD CLINICIAN...

(Continued from page 5)

ing excellent customer service. He provides constructive feedback to Specialists in Training, stressing the importance of critical thinking and understanding of what happens on the other end of every call – for both callers and first responders. Mr. Foreman trains specialists to no less a standard of professionalism than he requires of himself. ■

# EMS CITIZEN...

### *(Continued from page 6)*

E162 from the Frederick Division of Fire & Rescue arrived on-scene. Kristen continued to assist the responding emergency medical services personnel with placing AED pads on the patient. A shock was indicated and subsequently delivered, and CPR efforts were continued. A second unit, A248, arrived on-scene, which brought the LUCAS device to the patient. Two additional defibrillations were delivered prior to the arrival of ALS. When M30 and EMS 902 arrived at the scene, the patient was still pulseless and apneic.

ALS personnel established IO access. Reassessing the patient at the next pulse check, he was found to have a strong radial pulse, and was now beginning to breathe on his own. The patient was intubated and transferred to the ambulance for further treatment and transport to Frederick Health Hospital. The patient, who had suffered cardiac arrest prior to the vehicle crash, was later found to have underlying cardiac issues, and subsequently transferred to Johns Hopkins for further treatment. He was ultimately released, without neurological deficit, thanks to the chain of survival, which began with the quick, knowledgeable response of Kristen Haslam. ■



VISIT MIEMSS ONLINE AT WWW.MIEMSS.ORG



### EMS Program...

### (Continued from page 6)

County, the only jurisdiction in Maryland without a hospital or freestanding emergency department. The program is based upon the premise that healthcare partnerships can improve the delivery of prehospital care by delivering low-acuity primary care complaints to an appropriate and cost-effective destination. According to initial projects, 16 patients per month would meet the program's screening criteria. Caroline County not only met but exceeded that projection, screening an average of 19 patients per month between the ADP's launch and December 31, 2021. As a result, a total of 11 patients were diverted from emergency departments, saving area EDs 12.5 hours of time, and alleviating EDs located outside of the county of 1-2 patients per month. ■

### MDERS/PGPD...

(Continued from page 21)

sion, Aviation Division, and K-9 Unit.

Upon completion of the first scenario, the exercise planning team reset the facility to conduct a second scenario, targeted at a more advanced response team. The second scenario consisted of an active threat moving from a restaurant to a facility with multiple rooms. In lieu of a barricaded suspect, officers were prompted to neutralize the active threat and clear the building.

In all, 143 PGPD officers participated in the exercise, which marks MDERS's first-ever full-scale exercise. While the formal after-action review process is ongoing, and expected to conclude in July 2022, preliminary feedback from exercise participants was overwhelming positively, and numerous strengths and areas for improvement were identified by the evaluation team which will help PGPD continue to improve and expand upon their existing response capabilities. ■

# EMS-GERIATRIC...

### (Continued from page 8)

Ms. Forester is extremely response to clinicians as well, keeping them apprised of patient outcomes and educating them on available resources they can call upon in the future. She also assists clinicians in the field, providing Emergency Evaluation Petitions when needed or ensuring that the hospital is aware of unsafe discharge plans, preventing patients who cannot adequately care for themselves from returning home. ■

