For All Emergency Medical Care Providers

Vol. 34, No. 5 April 2008

National Provider Identifier

The Health Insurance Portability & Accountability Act (HIPAA) requires the adoption of a standard unique identifier for health care providers known as the National Provider Identifier or NPI. The NPI is a 10-digit, intelligence-free numeric identifier. "Intelligence free" means that the numbers do not carry information about health care providers, such as the state in which they practice or their provider type or specialization. The provider's NPI will not change and will remain with the provider regardless of job or location changes.

All health care providers, whether they are individuals (such as physicians, nurses, dentists, chiropractors, physical therapists, pharmacists, or EMS providers) or organizations (such as hospitals, home health agencies, clinics, nursing homes, residential treatment centers, labo-

ratories, ambulance companies, etc.) are eligible to obtain an NPI. All health care providers or entities that bill for their services are required to obtain an NPI.

There have been some grace periods in effect, but after May 23, 2008, no other identifier will be accepted for any HIPAA standard transactions. If you are a health care provider who bills for services, you probably need an NPI. If your EMS Company bills Medicare for services, your EMS company definitely needs an NPI. Getting an NPI is easy and is free. Health care providers must also share their NPI with other providers, health plans, clearinghouses, and any entity that may need it for billing purposes. For more information, please go to:

 $\underline{http://www.cms.hhs.gov/NationalProvIdentStand/Downloads/NPI_Contingency.pdf}$

New Emergency/Trauma Center at PRMC

The new Robert T. Adkins, MD Emergency/Trauma Center at Peninsula Regional Medical Center in Salisbury officially opened March 24, marked by a ribbon-cutting ceremony and public tours. On March 26, all emergency/trauma services transitioned from the current Emergency/Trauma Center to the new center.

The new Emergency/Trauma Center is more than twice as large as the previous facility and has been designed to comfortably and safely



Participating in the ribbon-cutting ceremony of the new Emergency/Trauma Center at PRMC is Dr. Robert T. Adkins (fourth from the right), for whom the new center is named. Director of PRMC's Emergency Department and EMS Medical Director of Region IV before his retirement, Dr. Adkins' interest in EMS, trauma, and emergency medicine goes back to the late 1960s.

accommodate 90,000 patient visits per year. All of the treatment rooms within the department have an identical layout to allow for maximum flexibility. In addition to expanded treatment areas, the new Emergency/Trauma Center also includes four large, sophisticated trauma rooms. The center has also been designed with separate entrances for ambulances (off Vine Street) and walk-in patients (off Locust Street) to allow for more privacy and efficient movement.

Peninsula Regional Medical Center's new Emergency/Trauma Center also boasts a dedicated CT scanner, plus other radiology and ultrasound technology for rapid access to these services.

The Layfield Tower, where the new Emergency/Trauma Center is located, is expected to be fully ready for occupancy in the late spring or early summer. The Medical Center's Pediatric Unit has already joined the Emergency/Trauma Center in occupying the Layfield Tower, which will

(Continued on page 2)

Disaster Drill at Hagerstown Airport

Saturday, April 19 was not exactly "work as usual" for Washington County Hospital employees Kelsey Schroades, a member of the hospital's decontamination team, and Erica Elgin, a phlebotomist. The two were among the last of approximately 20 people trying to hurry through the screening process to board a plane on the tarmac at Hagerstown Regional Airport as part of a disaster drill. All were role-playing, but Ms. Schroades and Elgin had the roles of terrorists. Looking totally unsuspicious, they drew weapons out of their carry-on bags as they approached the two screeners and fired into the crowd. A law enforcement officer on duty at the screening checkpoint quickly drew his gun and

fatally wounded Ms. Schroades, but he was then wounded by Ms. Elgin who was also hit by gunfire from the law enforcement officer. Although wounded, Ms. Elgin was still able to make it out to the terminal apron and fire her gun directly at the aircraft which had already been boarded by most of the "mock" passengers. The gunfire caused the plane to explode. During the chaos, the Airport Security Coordinator heard the gunshots, monitored the scene on the CCTV system, and called 9-1-1, thus setting in motion a multi-agency response to the disaster exercise.

The realism of the scenario was enhanced by the moulage of victims' wounds, as well as smoke coming from the plane on the tarmac. The

Center will also serve as the catalyst

for a transition of many key services

Medical Center's ongoing \$100 mil-

lion renovation and expansion pro-

from Vine Street to the space occu-

Emergency/Trauma Center at the end

Outpatient Services will relocate

to new locations, all part of the

ject. For example, by 2009,

pied by the former

of Locust Street.

Washington County Sheriff's Department, police, and Special Response team secured the airport drill area before fire and EMS crews were allowed on the scene. Safety officers, controllers, evaluators, and official "spectators" were also at the site

Among the participating agencies were the following:

- Air Traffic Control Tower
- Fire and Rescue Communications (911)
- Hagerstown Regional Airport
- Washington County Department of Fire and Emergency Services
- MIEMSS
- Maryland State Police Aviation Division
- Washington County Health Systems, Inc.
- Washington County Sheriff's Department
- Washington County Special Response Team

The fire and rescue companies included:

- Community Rescue Service
- Hagerstown Regional Airport Fire/Rescue Services
- Northrop Grumman-California Microwave Systems Fire Department

(Continued on page 3)

New Emergency/Trauma Center at PRMC

(Continued from page 1)

also become the new home of the Medical Center's 24 bed Intensive Care Unit on the second floor. Additionally, two floors of general patient care rooms will complete the upper levels of the four-story tower.

The Layfield Tower and its Robert T. Adkins, MD Emergency/Trauma



New trauma bay.

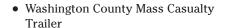


(L-r) John Barto (MIEMSS Region IV Administrator), Dr. Robert T. Adkins (for whom the new center is named), and Dr. William Todd (Medical Director of the Emergency Department at PRMC and EMS Medical Director for Wicomico, Worcester, and Somerset counties).

Disaster Drill at Hagerstown Airport



SWAT team members ensure the area is secure before fire and EMS crews are allowed on the scene

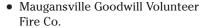


Williamsport Fire & EMS The Hagerstown Regional Airport conducts a disaster exercise every three years to test the effectiveness of the Airport's Emergency and Security Plans and to test the response of the participating local agencies that would be affected by a similar disaster. Fire and rescue com-

panies work with personnel from

other jurisdictions and have an opportunity to find out problems in communication and implementation of protocols.

An evaluation or "hotwash" at the Maugansville Goodwill Volunteer Fire Company followed the exercise.



- Longmeadow Volunteer Fire Company
- Rescue Hose Company # 1, Greencastle, PA
- Volunteer Fire Company of Halfway
- Marion EMS, Marion, PA
- Washington County Emergency Rehab Unit
- Washington County Special **Operations**



tarmac during the disaster drill.

Prehospital Stroke Module for ALS Providers

MIEMSS is conducting a pilot project using the American Heart Association's Stroke Prehospital Care Online course. The course is designed specifically for prehospital care providers. It is a self-paced, continuing education product that teaches the pathophysiology and risk factors of stroke, as well as recognition, assessment, and management of potential stroke. Through four interactive cases, participants are presented with patients who have stroke-related complaints and are prompted to make prehospital management decisions.

A student's computer must be set up with a built-in or separate sound card along with either speakers or a headset. The stroke course consists of four modules that use audio heavily.

MIEMSS will grant one hour of stroke continuing education credit to students who successfully complete the course. Students complete an online test after completing all four modules. The course generally requires 1-2 hours to complete. Registration is currently limited to ALS providers, and the course must be completed within 30 days of receiving a passcode. Providers may sign up electronically at

http://www.miemss.org/home/PrehospitalModuleRegistrationForm/tabid/171/Default.aspx

NHTSA's Office of Emergency Medical Services (OEMS)

The National Highway Traffic Safety Administration (NHTSA) Office of Emergency Medical Services (OEMS) is trying to keep people informed about the activities of their office. The latest edition of the OEMS quarterly newsletter, "EMS Update," is now available online. To access EMS Update, go to www.EMS.gov. You'll find "EMS Update" by clicking on the "News" icon on the top, red navigation bar. The OEMS website, which was developed to meet the varied needs of the EMS community, contains not only the latest news from OEMS but also functions as a portal to other Federal EMS websites and resources. Find information and updates on groundbreaking initiatives and programs, including Emergency Medical Services for Children, the National EMS Information System, the Federal Interagency Committee on EMS, Enhanced 9-1-1 and Next Generation 9-1-1, the National EMS Advisory Council, and more.

EMAIS®

An enhanced, printable Patient Care Report (PCR) from EMAIS® is currently being tested and will be deployed shortly. This final version of the report will incorporate recommendations from both EMS jurisdictions and hospitals that use EMAIS®. Currently, 19 jurisdictions are utilizing EMAIS®, along with 7 Operational Programs statewide. Targeted Data Exports have been constructed for EMAIS® Jurisdictions and Programs to use in local EMS management. In addition, Distance Learning solutions are being investigated for EMAIS® initial training.

Law Enforcement Emergency Medical Care Course

MIEMSS continues to work with the law enforcement community in developing an emergency medical care course that will contain core first-responder content (e.g., CPR/AED, patient assessment, medical and trauma care), as well as law enforcement-specific content (e.g., Care under Fire, with emphasis on self-care and fellow-officer care in a hazardous environment). Draft 2.0 of the curriculum is out for public comment, with a pilot course scheduled to be held in May.

National EMS Memorial Bike Ride

The National EMS Memorial Bike Ride will take place from May 17-24, 2008, in conjunction with EMS Week. Two separate groups will bike—one beginning in New York City and the other in Lexington, Kentucky—and merge to form one group in Roanoke, Virginia at the National EMS Memorial Service that honors EMTs and paramedics who have lost their lives in the line of duty.

The bicyclers will be coming through Maryland on May 19 and will be holding a memorial service at the Maryland Fire and Rescue Memorial in Annapolis that evening at 5:00 PM. Many local jurisdictions are assisting with logistics for the riders as they travel through our state. They will leave the following morning to hold a ceremony at the Capitol in Washington, DC before moving on to Roanoke.

According to their website, the cyclists are hoping to raise awareness for EMS in every town through which they ride. More information on the ride can be found at: www.muddyangels.org.

Draft National EMS Education Standards Available for Review

MIEMSS continues to monitor the status of the EMS education standards project and participated in the national stakeholders' meeting held in February. Draft 3.0 is now available for public comments, and the new standards (final copy) are scheduled to be published by August 2009. The effort is being coordinated by National Association of EMS Educators (NAEMSE), with funding by the National Highway Traffic Safety Administration (NHTSA) and the Health Resources and Services Administration (HRSA). This project represents the next step in implementing the *EMS Education Agenda for the Future: A Systems Approach*. Visit the project website at http://www.nemsed.org to view and download the draft standards.

Retention and Recruitment

The U.S. Fire Administration and the National Volunteer Fire Council (NVFC) released Retention and Recruitment for the Volunteer Emergency Services:
Challenges and Solutions (Second Edition), a comprehensive guide that examines the obstacles to successful retention and recruitment efforts as well as solutions to these obstacles. A copy of the guide may be downloaded in PDF format at www.nvfc.org. A printed copy can also be ordered from the U.S. Fire Administration's Publication Center.

New Ruling Affirms Standards for Public Safety Vests

The Federal Highway Administration has determined that the standards for Public Safety Vests (ANSI 207-2006) were found to be compatible with ANSI/ISEA Class II requirements for night-time visibility and will be included in the next revision of the Manual for Uniform Traffic Control Devices (MUTCD). The National Traffic Incident Management Coalition (NTIMC) promoted development of the Public Safety Vest standard, which is designed with

functional features to make it easier for public safety responders to have access to their equipment and to do their work unencumbered while wearing high-visibility safety gear. The requirements are slated to take effect November 24, 2008.

Mark Your 2008 Calendar

May 3, 8:30 - 4:30

Bystander Care Instructor Course

Easton Volunteer Fire Dept.

Contact: MIEMSS Region IV Office, 1-877-676-9617

May 7, 12:45 - 3:00

Family Advocacy Forum on Bereavement: Dealing with Unexpected Death in Children & Care for the Caregiver

MIEMSS, Room 212 (follows PEMAC meeting and networking lunch)

Hosted by the Maryland EMSC Program in collaboration with Johns Hopkins Children's Center

Presented by the Johns Hopkins Pediatric Emergency Dept.: Kristen Johnson, BS, CCLS (Child Life Specialist) & Elizabeth Reder, MA, CT (Bereavement Coordinator) Contact: Maryland EMSC Program Office, 410-706-1758

May 10

BWI EPLEX Exercise

Hosted by BWI Fire & Rescue Department. Additional ambulances still needed. If interested, call Gary Pace at 410-859-7814.

May 10

Roadway Incident Safety for Emergency Responders

Allegany County Dept. of Public Safety & Homeland Security

11400 PPG Road

Cumberland, MD 21502

Contact: MIEMSS Region I Office, 301-895-5934

May 17

Roadway Incident Safety for Emergency Responders

Myersville Volunteer Fire Company

301 Main Street

Myersville, MD 21773

Contact: MIEMSS Region II Office, 301-791-2366

May 18-24

National EMS Week

Planning Guides are available online at http://www.acep.org/emsweek or by contacting Denise Fechner at dfechner@acep.org.

May 21

2008 EMS Stroke Conference:

Critical Role in Prehospital Care

Peninsula Regional Medical Center

Salisbury, Maryland

Information: www.peninsula.org (click on "Classes and

Events" on the right-hand side). Contact: Kim Webster, 410-543-7328, kimberly.webster@peninsula.org

June 8

Trauma Care 2008

Maryland Committee on Trauma Baltimore Marriott Waterfront Hotel Contact: Claire Leidy, 410-328-3662

June 14-20

MSFA Convention

Ocean City, MD

Information: www.msfa.org

June 16-20

Statewide Pandemic Flu Exercise

Jurisdictions interested in attending should contact their Regional Offices.

July 22-27

Firehouse Expo

Baltimore Convention Center

Information:

http://www.publicsafetyevents.com/pub/fhe/index.po

September 4-7 Pyramid 2008

Holiday Inn Select

Solomon's Island, MD

Contact: MIEMSS Region V Office, 301-474-1485

September 23

MidAtlantic Life Safety Conference

Johns Hopkins Applied Physics Lab, Laurel Contact: Fire Marshal's Office, 1-800-525-3124

Inaugural EMS Policy Summit

On March 27, Advocates for EMS held its first EMS Policy Summit, a featured session at the EMS Today Conference in Baltimore. The purpose of the session was to get everyday EMS providers to interact with representatives from various federal agencies that are involved with EMS issues. The keynote speaker was Dr. Jeff Runge, Assistant Secretary and Chief Medical Officer at the Department of Homeland Security's Office of Health Affairs. Following a session on the importance of advoca-

cy, a roundtable discussion featuring federal partners was held to discuss how the policies and regulations at the federal level affect the everyday street provider. In an exchange of information and ideas between the federal partners and those who attended the session, suggestions were provided by the audience on how those at the federal level could communicate in a more effective manner with EMS providers.

Working with People with Disabilities

"Working with People with Disabilities: A Guide for First Responders" is a 26-minute training DVD designed to help emergency medical services, fire, police, and others work effectively and compassionately with persons with disabilities. Developed by and for first responders, it is endorsed by several public and private disabilities advocacy groups, as well as by the Maryland State Firemen's Association, the Maryland Fire and Rescue Institute,

MIEMSS, and the Maryland Department of Disabilities. It was produced by the Baltimore County Fire Department in cooperation with the Baltimore County Commission on Disabilities, with financial support for captioning, duplication, and distribution from Maryland RELAY.

For a free copy of the DVD, contact Fire Director James M. Korn: jkorn@baltimorecountymd.gov.

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Governor Martin O'Malley
Lt. Governor Anthony Brown
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Maryland Institute for Emergency Medical Services Systems 653 W. Pratt St., Baltimore, MD 21201-1536 www.miemss.org

Chairman, EMS Board: Donald L. DeVries, Jr., Esq.
Executive Director, MIEMSS: Robert R. Bass, MD
Managing Editor: Beverly Sopp (410-706-3248)
Design & Layout: Gail Kostas
Photography: Jim Brown, Dick Regester, Brian Slack, Fernando Tosti
(unless noted otherwise for specific photos)