

Maryland EMS News

For All Emergency Medical Care Providers

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Upgrades to SYSCOM/EMRC in Full Swing

The SYSCOM/EMRC communications center in MIEMSS' Baltimore headquarters is undergoing a major renovation to both its infrastructure and technical capabilities as a component of the Statewide EMS Communications upgrade initiative and integrating communication with the Maryland FiRST 700 MHz statewide radio project. Construction on the structure modifications began on Monday, June 23, 2014, and will last about 16 weeks.

The technical upgrade will begin mid-October and may take up to three months to complete.

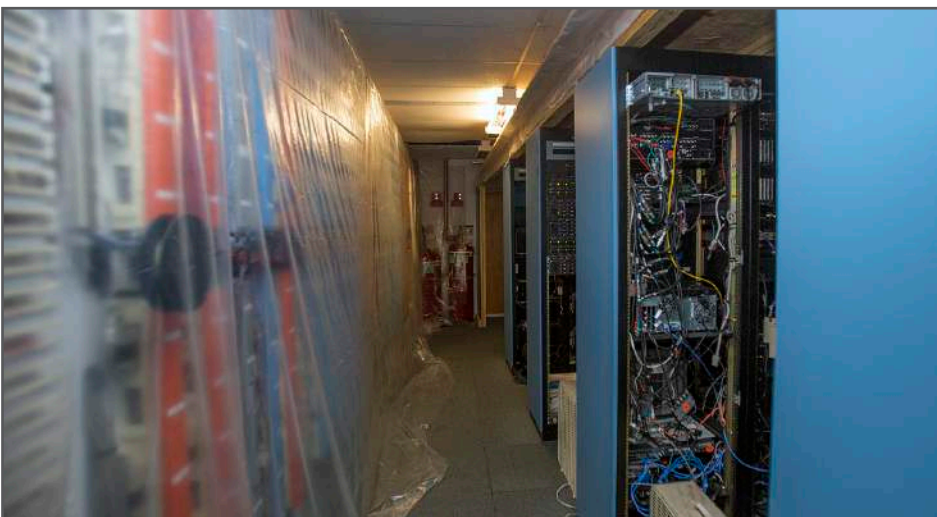
The upgrades include:

- The installation of technologically advanced communications equipment
- Modernization of the current facility to accept the new equipment
- Relocating existing critical communications equipment during the upgrade
- Upgrading the HVAC and electrical systems

- Improving the fire suppression system
- Providing for continuity of operations in the current communications center while renovations are completed

The renovations are taking place while SYSCOM/EMRC continues to be an active emergency communications hub and within the room's existing footprint. As part of the overall communications systems upgrade, MIEMSS remains committed to exploring the feasibility of an independent backup communications center.

There will be no tours of SYSCOM/EMRC during construction, but its daily operations will be unaffected by the renovations. The new SYSCOM/EMRC should be fully operational by January 2015.



SYSCOM/EMRC in MIEMSS Headquarters is currently undergoing a major renovation. The space will have a completely new look and include significant upgrades to the communications system. Behind the scenes, delicate equipment is being protected from dust and debris from the construction. The renovations are expected to be complete by early 2015.

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MIEMSS Staff Attend 122nd Annual MSFA Convention



MIEMSS staff received several visitors during the MSFA Annual Convention. In top photo, Congressman Steny Hoyer (second from left) pays a visit to the MIEMSS booth and is joined by MIEMSS Acting Co-Executive Director Pat Gainer (third from left) and several other staff members. Senator Roy Dyson (fourth from left), center photo, visits former and current MIEMSS staff, all wearing orange or purple. In the bottom photo, Delegate John F. Wood and his wife (second and third from left), also stopped by the MIEMSS booth during the conference.

Patricia Gainer, MIEMSS Acting Co-Executive Director, and MIEMSS staff members recently participated in the 122nd Annual Convention and Conference of the Maryland State Firemen's Association (MSFA) in Ocean City, Maryland.

Ms. Gainer gave a presentation on important EMS issues such as the near statewide implementation of eMEDS[®], the renovation of MIEMSS EMRC/SYSCOM in the Baltimore office, a draft guide for jurisdictions on the Active Assailant Incident, and MIEMSS' support of the Veterans Full Employment Act.

MIEMSS would like to congratulate the award winners from the convention and, in particular, Susan M. Tingler of the Abingdon Volunteer Fire Company, who received the Josiah Hunt EMS Award for outstanding EMS individual of the year.

We would also like to recognize Past President Jackie Olson for a successful year as President of the MSFA and for the leadership qualities that she provided to the members of the emergency services in Maryland. MIEMSS would like to congratulate David Keller III of Citizens Truck Company #4 on his recent election as President of the MSFA. We also congratulate First Vice President Johnie F. Roth, Jr. of Sandy Spring Volunteer Fire Department and Second Vice President Mike Davis of Cockeysville Volunteer Fire Company on their election to MSFA leadership roles. We look forward to working with President Keller and the other officers in the coming year.

MIEMSS thanks all emergency services providers of Maryland for the job that they do every day in making our state a safer place to work and live.



At the Maryland State Firemen's Association Annual Convention, Acting Co-Executive Director Pat Gainer spoke to the attendees about MIEMSS' accomplishments over the past year and thanked MSFA for their leadership (top photo). Ms. Gainer (pictured) and Dr. Richard Alcorta also received a certificate of appreciation from newly-elected MSFA President David Keller.

Cardiac Arrest Steering Committee's Hands-Only CPR Event at Ripken Stadium

On June 29, 2014, the MIEMSS Cardiac Arrest Steering Committee coordinated a Hands-Only CPR Event at Ripken Stadium in Harford County during an Aberdeen IronBirds baseball game. There were 2,392 fans in attendance whose awareness about sudden cardiac arrest and hands-only CPR was raised through PSAs and on-field demonstrations. Over 390 individuals actually learned hands-only CPR. Cardiac arrest survivors were in attendance and escorted IronBird players on to the field. Several jurisdictions participated in the event, which included ambulances at the front entrance of the stadium that provided tours for fans entering the game. Eight hands-only CPR stations were set up around the concourse area of the stadium with manikins, an AED trainer, and instructors who provided one-on-one hands-only CPR and AED training. CPR awareness cards were also distributed to fans and stadium staff to take home.



Region IV Participates in Tabletop Exercise

On Tuesday, June 10, 2014, representatives from a variety of Region IV emergency response and health care organizations participated in a Tabletop Exercise (TTX) facilitated by the Maryland Emergency Management Agency (MEMA), sponsored by the Delmarva Regional Health and Medical Advisory Group, and hosted by Eastern Shore Hospital Center in Dorchester County. The topic of the TTX was management of regional hospital and EMS resources due to a large scale hurricane that affected Maryland's Eastern Shore. Participants included the MIEMSS Region IV Office, MEMA Regional Liaison Officers, Peninsula Regional Medical Center, Union Hospital of Cecil County, several local health departments and local departments of emergency services, as well as a number of long-term care facilities. Discussions regarding hospital evacuation coordination at the state and local level, the prioritization process for limited resources, and the legal and financial implications of transfer of care were all productive. MEMA will provide an after action report that will inform future planning efforts by the Delmarva Regional Health and Medical Advisory Group, a regional health care coalition for emergency preparedness.



MIEMSS' Cardiac Arrest Steering Committee coordinated a Hands-Only CPR Training Event at the Ripken Stadium, home of the Aberdeen IronBirds, on June 29. Top, volunteers demonstrate to the crowd how to administer hands-only CPR and properly use an AED. Bottom, even one of the IronBird mascots, Ripcord, received CPR training at the event.

Preventing Infant Injuries from Car Seat Misuse

Experts Advise Caregivers to Avoid Using Car Seats as Portable Beds

“But my baby was in her car seat!” said a mother to the EMT who was examining the baby for fall injuries. The car seat had been resting on a low wall with the baby sleeping inside of it, unsecured in her harness straps, when the family dog bumped into the seat knocking everything to the hard ground. Her hospital examination showed that the baby only suffered minor bumps and bruises, but many children who suffer falls like this are not so lucky.

In a study using the Consumer Product Safety Commission’s National Electronic Surveillance System database from 2003-2007¹, Dr. Shital N. Parikh looked at infants less than one year old and estimated that there were 43,562 car seat-related injuries that did not involve traffic events. Of these, 85% were related to falls with the majority (65%) involving the child falling out of the car seat. Fifteen percent of these involved the car seat falling from an elevated surface, including 8% from shopping carts and 10% from a table

or countertop. More than half of the injuries occurred to infants less than 4 months old, and about half occurred at home. Over 84% of the infants suffered a head injury; neck injuries were also common, and three deaths were reported during this time period. There have also been cases of strangulation from a baby getting tangled in unfastened car seat harness straps.

In today’s busy, mobile world, parents often use their car seats as a portable bed, moving their infant from car to stroller to tabletop. But safety experts recommend that car seats be used mainly as travel devices and not as household seating devices. For some newborns, sitting semi-upright as in car seats or other seating devices can result in airway obstruction and/or a decline in blood oxygen according to the American Academy of Pediatrics. The condition, plagiocephaly, in which the baby’s soft skull gradually becomes flattened, is more common in babies who are in sitting devices excessively. Related to this

is that babies spending too much time in sitting devices are not getting enough supervised “tummy time,” which is so important for nerve and muscle development.

To keep children as safe as possible, caregivers must always buckle the child up with the harnesses whenever their child is in the car seat—not just when traveling in a vehicle. Furthermore, the harness system must be snug on the child. Test for tightness by pulling on the straps over the child; they are snug enough if no webbing can be pinched.

Many children sitting in the child seat part of shopping carts are also suffering injuries that could be prevented. A study conducted by Nationwide Children’s Hospital reported that an average of 66 children a day between 1990 and 2011 ended up in emergency departments after falling out of shopping carts, getting hurt in tipovers, running into the cart, or getting their arms and legs trapped in the cart. If a cart has restraint straps, be sure to buckle up children to keep them from climbing or falling out. The same advice holds for toddlers and older children in strollers or swings. Finally, in addition to using each seating device’s safety features properly, caregivers must always supervise their children closely; these devices are not intended to be babysitters or cribs.

¹ Parikh SN, Wilson L. Hazardous Use of Car Seats Outside the Car in the United States, 2003–2007. *Pediatrics*. 2010 Aug;126(2):352-357.

MIEMSS Joins Governor’s Overdose Prevention Council

Governor Martin O’Malley announced the formation of the Overdose Prevention Council to counter an increase in the number of overdose deaths in an executive order released on June 27, 2014. Under Governor O’Malley’s leadership, the state has added drug and alcohol overdose deaths to the Administration’s 16 strategic goals and is currently working to drive down overdose deaths by 20% by 2015. A representative from MIEMSS will serve on this council.

“Maryland is more committed than ever to tackling the scourge of substance abuse afflicting so many of our neighbors, friends, and family members,” said Governor O’Malley. “With this Executive Order, I have tasked key State agencies to better coordinate and create strategies to drive down the number of overdoses in the state, provide needed treatment options, and expand our current outreach strategies. By working together to lift our fellow Marylanders out of addiction, we will ensure that we continue to keep our neighborhoods safe, and protect the health of our loved ones.”

To address the epidemic, the Council will advise and assist in establishing a coordinated, statewide effort to reduce the number of fatal and non-fatal overdoses in Maryland. The Department of Health and Mental Hygiene (DHMH) is launching a statewide public education campaign to raise awareness about opioid overdoses by initiating a Facebook page and partnering with local health departments to distribute posters, pamphlets, and emergency cards to assist those seeking information on the education and prevention of opioid overdoses.

To combat overdose deaths in Maryland, MIEMSS approved the use of intranasal naloxone by EMTs effective July 1, 2014. This protocol is available for commercial services and EMRs as an optional supplement. For more information on the protocol, visit www.miemss.org.

Additional information on the Governor’s Overdose Prevention Council can be found at <http://governor.maryland.gov/documents/OPCFactSheet.pdf>.

SAVE THE DATE!

Peninsula Regional Medical Center

**24th Annual Trauma Conference:
Topics in Trauma**

September 26, 2014

*Clarion Resort and Hotel
Ocean City, MD*

**Registration will be available
August 11**

Maryland Emergency Responders Receive \$4.6 million in Federal Funding

On July 3, 2014, US Senator Barbara A. Mikulski joined local and state emergency responders at the Rosedale Volunteer Fire Company to announce two federal grants totaling \$4.6 million to address equipment, training, and staffing needs for emergency responders in Baltimore County and throughout the State.

The first grant, through the US Department of Homeland Security's Assistance to Firefighters Grant Program (AFG), was for \$2,343,600 and given to the Baltimore County Fire Department for the purchase of 372 sets of Self-Contained Breathing Apparatus (SCBA). This will replace equipment currently in use that does not meet NFPA standards. Senator Mikulski also announced that the Maryland State Firemen's Association (MSFA), in partnership with the Maryland Fire Chiefs Association (MFCA), will receive \$2,250,000 in federal funding through the US Department of Homeland Security's Staffing for Adequate Fire and Emergency Response (SAFER) program to enhance volunteer firefighter recruitment and retention efforts across Maryland. The goal of the SAFER grant program is to enhance the ability of grantees to attain and maintain 24-hour staffing. The objective of the program is to award grants directly to volunteer, combination, and career fire departments to help the departments increase the number of frontline firefighters and to rehire firefighters who were laid off due to the economy. Since 2001 Maryland fire departments and EMS units have received



Senator Barbara A. Mikulski addresses attendees at a press conference at Rosedale Volunteer Fire Company to announce two federal grants totaling \$4.6 million for emergency responder needs throughout Maryland.

over \$137 million in fire grant funding.

The MSFA and MFCA will use this federal funding to implement a four-year project to develop and deliver marketing programs that demonstrate the value of volunteer fire responders to local community safety initiatives and to provide incentive programs to aid in the recruitment and retention of volunteer fire and emergency responders. The programs will permit local fire companies to address

volunteer recruitment and retention challenges unique to their respective communities. The funding will also enable the MSFA and MFCA to create scholarships for volunteer responders to attend higher education training programs and national level training conferences. The programs developed with this funding will be jointly managed by the MSFA and MFCA with the assistance of a statewide coordinator.

MIEMSS Welcomes New Staff



Michael Reynolds,
Protocol Administrator



Kim Williams,
Human Resources Officer



Rimando Roxas,
Network Specialist

A new Protocol Administrator has joined the MIEMSS team. Michael Reynolds has served as both a career and volunteer EMS provider since 1997. He has been a Maryland Paramedic since 2000. Paramedic Reynolds is an EMT instructor as well as an American Heart Association ACLS and BLS instructor. He lives in Lutherville, Maryland with his wife and three-year-old son. You can contact Paramedic Reynolds with Protocol questions via email at mreynolds@miemss.org or by contacting the Office of the Medical Director at 410-706-0880.

MIEMSS also is pleased to welcome Kim Williams, a new Human Resources Officer with more than 10 years of state Human Resources experience, most recently as a recruitment specialist with the Department of Human Resources, and Rimando Roxas, a Computer Network Specialist with MIEMSS' Communications Department.

SPIDRE DUI Team's First Year Accomplishments

On July 2, 2014, the Maryland State Police joined law enforcement officials from Baltimore County, Anne Arundel County, Prince George's County, Deputy Transportation Secretary Wilson H. Parran, Mothers Against Drunk Driving advocate Donna Hathaway Beck, and other state officials and safety advocates to highlight the accomplishments of the State Police Impaired Driving Effort (SPIDRE), an elite team of state troopers focused on reducing the number of alcohol-related crashes in Maryland. SPIDRE focuses on reducing alcohol-related crashes in Maryland by targeting areas across the state with high crash rates involving impaired drivers. The SPIDRE team is dedicated to reaching the O'Malley-Brown Administration's goal of zero deaths on Maryland roadways.

The SPIDRE Team began enforcement in early May 2013, working in partnership with local police departments. SPIDRE enforcement has yielded the following results: 6,384 traffic stops; 1,052 DUI arrests; 211 criminal and other arrests; and 13,173 citations, warnings, and repair orders. This effort is funded by the Maryland Department of Transportation's Highway Safety Office. Last year in Maryland, 152 people were killed in alcohol-related crashes, accounting for 33% of all

traffic fatalities in 2013. Using data to identify high risk areas, these specially trained Maryland state troopers and their partners continue to make arrests in these concentrated areas to further reduce the number of deaths and

injuries caused by impaired driving. MIEMSS supports these efforts and encourages all EMS providers to report suspected impaired drivers as they travel Maryland's roads.



Anne Arundel County Police Chief Kevin Davis addresses the group during the SPIDRE Press event with (left to right) Deputy Transportation Secretary Wilson H. Parran, Maryland State Police Lieutenant Colonel Jerry Jones, Prince George's County Deputy Police Chief Hank Stawinski, and Baltimore County Police Chief Jim Johnson. At the far left is Milt Chaffee, the MVA Administrator and Governor's Highway Safety Representative, who served as the event emcee.

Disciplinary Actions

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

B-2013-655 (EMT) – March 10, 2014. For receiving probation before judgment for driving a vehicle while under the influence of alcohol: Probation for one year with random alcohol testing at Provider's expense.

B-2013-654 (EMT) – March 10, 2014. For theft scheme of \$1,000 to under \$10,000 perpetrated against a person in the Provider's care: EMT certification revoked.

B-2013-643 (EMT) – March 10, 2014. For continuing to function on an expired license: Provider was reprimanded.

B-2013-662 (EMT) – April 14, 2014. For testing positive for morphine: EMT certification suspended pending documentation of successful completion of a rehabilitation program and documentation of a negative toxicology screening. Thereafter, Provider will be on probation for one year with random drug testing at Provider's expense.

B-2013-661 (EMT) – April 14, 2014. For not disclosing prior convictions on application: Provider was reprimanded and placed on probation for the remainder of the period of certification.

B-2014-670 (EMT) – June 11, 2014. For testing positive for cocaine: EMT certification suspended pending documentation of successful completion of a rehabilitation program and documentation of a negative toxicology screening. Thereafter Provider will be on probation for one year with random drug testing at Provider's expense.

B-2013-658 (CRT) – June 11, 2014. For admitting to signing and back-dating a patient refusal box: The disciplinary action of the Providers' Jurisdictional EMS Operational Program was affirmed and Provider was reprimanded.

B-2014-642 (CRT) – June 11, 2014. For continuing to function on an expired license: Provider was reprimanded.

B-2013-637 (Paramedic) – June 11, 2014. For failing to take over care as requested and initiate ALS care: Provider was placed on probation for one year during which the Provider must complete remedial training in patient assessment and documentation within six months, meet with the State EMS Medical Director to discuss the patient care encounter, and write a scholarly paper describing the ALS provider roles and responsibilities when working with a BLS crew.

B-2013-640 (Paramedic) – June 11, 2014. For testing positive for amphetamine and methamphetamine: Probation for one year with random drug testing at Provider's expense.

Prince George's New Pink Paramedic Unit

The Prince George's County Fire and Emergency Medical Services Department has a new paramedic transport unit that is completely pink, which will join their pink fire truck (also known as the Pink Pumper, or "Pinky"). The two vehicles are being used to promote breast cancer awareness. The department is now looking for help naming the pink paramedic unit. It was placed into service during a ceremony on Sunday, July 6, 2014, and will operate out of the College Park Fire/EMS Station near the University of Maryland.

The department offered the following guidelines for nickname suggestions: "Be creative. Think of a one- or two-word nickname. 'Pinky' is already in use by our Pink Pumper. Be professional—we will not use any nickname that uses slang or inappropriate language." Members of the public are invited

to send in their ideas for nicknames via the department's social media accounts or through email at PGFDPIO@co.pg.md.us. Suggestions will be accepted through the end of July. The person who submits the nickname that is

selected will receive an official pink uniform shirt that is worn by Prince George's County Firefighters and Medics during the month of October, Breast Cancer Awareness Month.



This new pink Paramedic Unit has joined the force at Prince George's County Fire and Emergency Medical Services Department. Suggestions from the public for its new nickname are being accepted by the Department through the end of July. Photos by Spencer Stevenson.


Licensure and Certification
 TIDBIT

Q. I heard that MIEMSS will start using the NREMT for initial certification testing for classes that begin this fall. On the NREMT website, it says that an applicant must be 18 years of age in order to be certified. What does this mean for my 17-year-old who is planning to take an EMT cadet course through the local high school this fall?

A. The NREMT will test applicants under the age of 18, but not issue a certification. Your child will test with the class and will be provided a Maryland EMT certification after successful completion of the cognitive and practical examinations. Applicants may apply for certification through NREMT once they reach their 18th birthday.

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Lt. Governor Anthony Brown

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