

Vol. 41, No. 8

For All Emergency Medical Care Providers

Maryland Poison Center and Emergency Medical Services *Vital Public Services Working Together*

The Maryland Poison Center is designated by MIEMSS as a specialty referral center for EMS providers in Maryland. Pharmacists and nurses who are nationally certified as Specialists in Poison Information staff the poison center 24/7. In 2014 the specialists handled 48,407 calls, with more than 1,800 from EMS providers.

The Maryland Poison Center is a valuable resource for medical consultations, and poison center staff can give the best treatment advice for each patient. The poison professionals follow patients through their hospital stay, continuing to make treatment recommendations. Patients managed with poison center expertise experience shorter hospitalizations (median length of stay of two days versus five days without poison center assistance) helping health care providers serve more patients and decrease health care costs (Journal of Toxicology and Environmental Health, Part A. 2007; 70(2):107-110). Records are kept on outcomes and treatments for each patient. This information allows the Maryland Poison Center to continually assess and study the effects of drugs, chemicals, and poison treatments.

What information can the poison center provide to EMS providers?

- Assessment of poisonings, overdoses, and envenomations
- Range of toxicity (toxic dose information)
- Overdose and poisoning signs and symptoms
- Toxidrome identification
- Specific treatment recommendations for each patient
- Decontamination recommendations
- Assistance in locating antidotes and antivenom
- Drug interactions
- Pill identification
- Identification of chemicals that may be hazardous to first responders and providers
- Access to public health emergency information (e.g., food recalls, terrorism)

In addition to the above, the poison specialists can determine whether EMS transport is needed. In many cases, patient and/or provider consultation with the poison center through 9-1-1 can avoid a trip to the



Photo Courtesy of Lisa Booze, PharmD, CSPI

hospital and save health care resources. More than 63% of all calls to the poison center are managed outside of a health care facility with poison center advice. A report by the Lewin Group, released in 2012 by the American Association of Poison Control Centers, estimated that every dollar invested in the poison center system saves \$13.39 in medical costs and lost productivity, for a total savings of more than \$1.8 billion every year.

Can EMS providers share patient information with the poison center?

Absolutely! Poison centers fall under "covered entities" in the HIPAA Privacy Rule regulations (45 CFR 164.501, 506(c)) and are considered part of the health care team. Calls and patient information are kept confidential and poison centers are held to the same HIPAA requirements that other health care providers abide by.

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Maryland Poison Center and Emergency Medical Services

Vital Public Services Working Together



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What happens to the information I give to the poison center?

All calls are entered into a data collection system as the call is taken. The data gathered is encoded and shared nationally through the National Poison Data System (NPDS), a data collection system that is administered by the American Association of Poison Control Centers (AAPCC). Calls to all US poison centers are uploaded and analyzed every eight minutes to detect trends and events that might be of public health significance (e.g., food poisoning, environmental hazards, product recalls, or terrorism). NPDS is the only near real-time comprehensive poisoning surveillance database in the United States. Data from US poison centers have also been used to help pass federal, state, and local laws and regulations for synthetic drugs of abuse, liquid nicotine, laundry detergent packets, and more.

What other services does the Maryland Poison Center offer to EMS providers?

The staff of the Maryland Poison Center is actively involved in training EMS providers through classes, drills, continuing education presentations, and onsite training opportunities at the poison center. Additionally, the Maryland Poison Center publishes ToxTidbits, a monthly e-newsletter for health professionals. Topics include the toxicity of specific poisons and drugs, antidote use, drug abuse trends, and more. To sign up to receive ToxTidbits and for more information on health professional education, go to www.mdpoison. com/healthcareprofessionals. Get up-to-date toxicology news and information by following the Maryland Poison Center on Twitter at @MPCToxtidbits.

How can EMS providers help the Maryland Poison Center?

Consulting with a poison center on all poisonings helps to identify public health threats such as terrorism, new drugs of abuse, and food poisoning. In addition, the center analyzes and researches cases on which it has been consulted to determine the effectiveness of treatments and to identify where public education efforts are needed. EMS providers can help the center help the public. Educational materials such as pamphlets, telephone stickers and magnets, and posters are available from the Maryland Poison Center for school visits, health fairs, open houses, and safety days. By promoting the Maryland Poison Center, providers can help prevent poisonings, ensure patients will get the help they need right away if a poisoning occurs, and save time and money by avoiding unnecessary use of EMS and emergency department services. Calling the poison center also provides providers with peace of mind that they are speaking to health care providers who are experts in managing poisonings or overdoses, allowing the focus to remain on patients. See the poison center website for more information: www.mdpoison.com.



National EMS Week 2015: May 17–23

National Emergency Medical Services Week brings together local communities and medical personnel to publicize safety and honor the dedication of those who provide the day-to-day life-saving services of medicine's "front line." This information can be used throughout the year for public education and safety programs. This year, EMS Week will be celebrated May 17–23. Wednesday, May 20 will be observed as Emergency Medical Services for Children (EMSC) Day.

This year's national theme, "EMS Strong," is being organized into a year-long campaign to give EMS a significantly greater visibility among other health professions and communities. This effort will place EMS where it belongs: as an indispensable part of the health care continuum. The EMS Strong initiative will promote awareness and interest about the profession year-round.

MIEMSS will observe EMS Week with the annual Stars of Life and Right Care When It Counts Awards ceremony to recognize Maryland EMS providers and citizens that have gone above and beyond in their life-saving efforts.

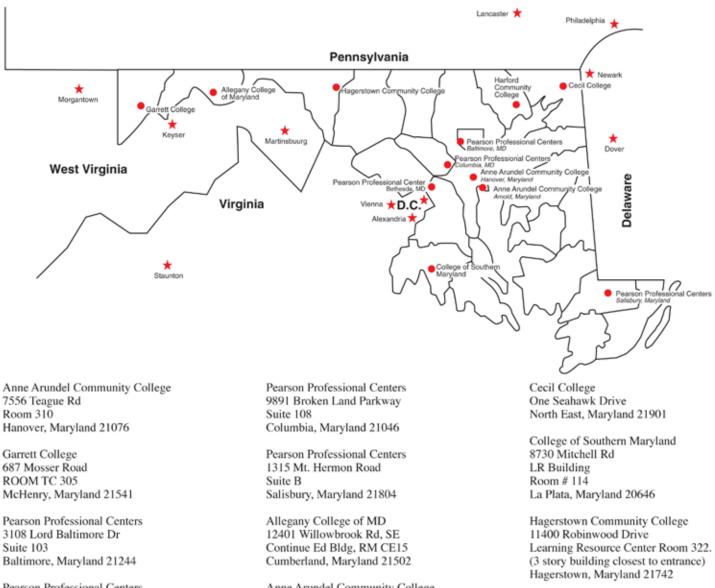


Q. I have been receiving emails from MIEMSS recently. Is something new?

A. The MIEMSS Office of Licensure and Certification started using a new licensure tracking system on March 19, 2015. For providers with valid email addresses, changes in their licensure record, such as affiliation changes and change of address, will prompt an automatic email update. The office will be using and finalizing the new system over the next few months. Information will be coming out soon about provider access to the new Maryland Provider Registry.

NREMT Pearson-VUE Maryland Test Sites

(★ Out-of-State NREMT Pearson–VUE Test Sites)



Pearson Professional Centers 4350 East West Highway Suite 525 Bethesda Towers Bethesda, Maryland 20814 Anne Arundel Community College 101 College Pkwy Building: Student Union Room: 240 Arnold, Maryland 21012

Harford Community College 401 Thomas Run Road Edgewood Hall Bel Air, Maryland 21015

MIEMSS is pleased to announce that Harford Community College has been added as a NREMT Pearson–VUE Maryland Test Site. This map shows all Maryland and select out-of-state locations. To search for other NREMT exam test locations, visit <u>http://www.vue.com/vtclocator/</u>.

4th Annual Talbot County CPR Marathon

Talbot County Department of Emergency Services (DES) offered free CPR and AED training to the public on February 25, 2015, in recognition of the American Heart Association's "National Heart Month." CPR classes were run every hour beginning at 9:00 am with the last class beginning at 7:00 pm. This year, in addition to the traditional CPR classes, they also offered "Hands-Only" CPR.

The Talbot County DES, with the support of the Talbot County Paramedic Foundation, Talbot County Health Department, Talbot County Chamber of Commerce, Chesapeake Publishing, WCEI/WINX Radio, University of Maryland Shore Regional Health, and Talbot County Department of Parks and Recreation, conducted the CPR Marathon. They trained 302 members of the community during their marathon.



Statewide Recruitment Day: April 12, 2015

The Maryland State Firemen's Association is hosting a Statewide Recruitment Day at local fire and EMS departments across Maryland on April 12, 2015, from 11:00 am to 4:00 pm. Members of the public are invited to visit local stations and learn how they can join and participate as a volunteer responder, an administrative member, or auxiliary member in their local Fire/Rescue/EMS department.



Save the Date!

EMS/Firefighter Night at Oriole Park

Baltimore Orioles vs. Seattle Mariners



Wednesday, May 20, 2015

Open to all Maryland Emergency Services Providers!

More information to come!



Maryland's First Statewide Volunteer Recruitment Open House April 12, 2015

To locate a local participating department go to: www.MDVolunteer.org

EMS Care 2015



April 30-May 3, 2015 Ocean City, MD

Presented By: Maryland's Regional EMS Advisory Councils The Maryland Institute for Emergency Medical Services Systems (Page intentionally left blank)

Maryland EMS Care 2015 April 30 – May 3, 2015 at the Clarion Resort Fontainebleau Hotel

The Program

This year's program brings some new and exciting nationally recognized speakers to town, as well as some of your favorite presenters from years past. There's something for everyone at this year's conference, to include prehospital EMS providers, nurses, and fire/rescue personnel. Two full days of pre-conference workshop offerings will begin on Thursday, April 30, 2015. Hot speakers on hot topics, and an enticing resort setting make this an inviting conference for all emergency services providers.

Continuing Education

All workshops have been approved by the Maryland Institute for Emergency Medical Services Systems (MIEMSS) for continuing education for ALS and BLS providers. EMTs can fulfill the 12 hours of didactic (4 Medical, 4 Trauma, and 4 Local) training required for recertification throughout the weekend, and a 12-hour EMT skills class will be available as a pre-conference offering. Conference staff will be available on-site to assist attendees with their CEU requirements. As an additional benefit, we are also pleased to announce that all "Critical Care" track CEU's have been approved by UMBC for CCEMTP renewal. For specific questions regarding continuing education requirements, please contact the MIEMSS Office of Licensure and Certification at 410-706-3666 or 800-762-7157.

The Hotel

EMS Care 2015 will be returning to the beautiful Clarion Resort Fontainebleau Hotel located at 10100 Coastal Highway, Ocean City, Maryland, 21842. The room rates for the Conference are as follows: Double/Double \$120/night, Executive King \$140/night, Studio King \$150/night, Cabana \$170/night. All rates are based on single or double occupancy; a \$15/night charge will be applied for extra persons. Children under 18 stay free in their parent's room. To receive these rates, you must make your reservations **NO LATER** than March 30, 2014. After this date, the room rates will return to the prevailing rate. The block of rooms reserved for Conference participants will fill up quickly. For more information or to make your reservations, call 1-800-638-2100 and request the EMS Care group rate or visit the Clarion website: <u>www.clarionoc.com</u>. **NOTE: All reservations should be made directly through the Clarion in Ocean City, MD. Reservations made through corporate Clarion may not accurately reflect room availability.**

Stay for the Fun!

The Conference is located in the heart of beautiful Ocean City, Maryland. The beachfront hotel is within easy walking distance to many local attractions and just a short drive from the boardwalk, outlet shopping, the all-new Casino at Ocean Downs, and an abundance of fabulous restaurants. If you prefer to stay in, the Clarion offers numerous amenities including an indoor swimming pool, a health spa, a children's playground on the beach, arcade games, Breaker's Pub, and their famous "All You Can Eat Prime Rib, Crab Legs, and Seafood Buffet" in the oceanfront Horizon's Restaurant.

<u>Vendors</u>

Vendors from a variety of disciplines will be joining us this year beginning at 5:30 PM on Friday, May 1, followed with the annual vendor reception from 6:30 PM – 8:30 PM. This free reception with our vendors will be complemented by good food, a cash bar, door prizes, and, as always, outstanding fellowship! Vendors will be displaying this year from Friday evening, until 6 PM Saturday. Be sure to stop by and visit each of the vendors to enter for a chance to win a free iPad Mini, to be given away during Sunday's closing keynote session.

Health & Wellness

Kick EMS Care off right by joining us for a Saturday morning fun run/walk beginning promptly at 6 AM. All fitness levels are welcome! Conference staff will lead a 5k (3.1 miles) distance run and a 1 mile walk, but participants are welcome to complete the distances that meet their wellness needs. Participants will gather in front of the Clarion and the run will take place on the sidewalks along Coastal Highway.

On Sunday, we're excited to offer *Get In Gear Beach Boot Camp*. Join us on the beach at 6am for a sunrise 45-minute boot camp class, followed by a 15 minute stretch/cool down. The class will include popular high intensity interval training elements with an added challenge of working out in the sand! Hoorah!

Entertainment

As an added bonus, this year's Friday evening vendor reception will be immediately followed by a Bonfire on the Beach in celebration of our fifth year of EMS Care back in OC. Come out for the fun from 8:30 PM - 10:30 PM.

On Saturday evening, we'll be returning to *Seacrets* for more festivities, including our annual drop-in trivia competition. Bring your friends and family for just \$5/person and join in the fun from 7:30 PM – 10 PM. So come on out, eat a little, drink a little, enjoy the rivalry, and laugh A LOT!

Fees and Expenses

This year we are pleased to announce that those registering before April 1, 2015 will receive the discounted "Early Bird" registration rate of \$175 for the full two-day conference, or \$90 for a one-day Saturday or Sunday registration. Beginning April 1st, the standard full two-day (Saturday/Sunday) conference registration fee will be \$195, or \$100 for a one-day registration (either Saturday or Sunday). This fee includes all expenses for workshops, lectures, AV material, and printing costs. Also included are wellness activities, a continental breakfast and full lunch on Saturday, a full buffet breakfast and lunch on Sunday, as well as morning and afternoon snacks on both days. Preconference workshops are offered for an additional fee as indicated on the attached registration form.

Registration

Registration is limited and on a first-come, first-served basis. **Online registration** for EMS Care is available at <u>https://www.regonline.com/emscare2015_1672517</u>. Registrations completed online will receive an email confirmation. All mailed and/or faxed registrations received by April 15, 2015, will receive written confirmation letters. Mailed and/or faxed registrations received after April 15 may not receive confirmations prior to

on-site conference check-in. Upon receipt of your confirmation, please review all workshop selections carefully. Any requests for changes to your schedule must be received prior to April 21, 2015, and should be emailed to <u>EMSCare@miemss.org</u>. Requests for refunds must be submitted in writing prior to April 15, 2015. All cancellations are subject to a 20% processing fee. Returned checks are also subject to a \$25 processing fee.

Walk-in registrations will be accepted pending availability of space.

Directions

Driving directions to the Clarion Resort Fontainebleau Hotel are available on the hotel website at <u>www.clarionoc.com</u>.

For More Information

Contact your MIEMSS Regional Office, or visit the MIEMSS website at <u>www.miemss.org</u>, or follow the Maryland EMS Care page on Facebook.

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Pre-Conference Activities

Thursday, April 30, 2015

Statewide CISM Coordinator Symposium (9 AM – 4 PM)

This bi-annual meeting of the Maryland CISM coordinators brings together team coordinators / leads from Maryland's local and state CISM and crisis response teams. This group works to build relationships, mutual aid links, and share training opportunities from across the state. This is a closed meeting, and is limited to CISM team coordinators/ team leads and one back-up or alternate team member. Those wishing to attend should obtain prior approval from their team coordinator. {5 hrs, Cat L/2}

EMS Strike Team Training (1 PM – 5 PM)

David Stamey, CCEMTP – MIEMSS Region II Administrator Brian LeCates, NREMTP – Talbot County Department of Emergency Services

This course will provide an introduction to Maryland's Ambulance Strike Team (AST) program. This will include the minimum requirements, requesting process, deployment, and operations of ASTs. Through a review of past deployments, a review of the Maryland AST Manual, and a short exercise, students will get an idea of what it is like to work as part of an AST. This course will meet the MIEMSS requirement for AST provider level training for the ambulance crews that will staff Maryland's pre-designated ASTs.

Course Fee: \$25 {4 hrs, Cat L/2}

Cardiac Review and 12-Lead for the Basic Provider (1 PM – 5 PM)

Todd Baker, NREMTP, CCEMTP – Southeastern Emergency Equipment This session will focus on the identification of structures using a porcine heart, as well as a review of cardiac anatomy and physiology. Introductory 12-lead concepts for the EMT will also be covered, including: why 12-leads are necessary, proper skin prep, proper lead placement, and what a STEMI looks like. This class is NOT designed to teach you how to diagnose an MI using a 12-lead EKG, but it will help you to better understand what to look for, and what needs to be reported to responding paramedics or medical control. Course Fee: \$25 {4 hrs, Cat M/A}

EMS Care Cadaver Lab (8 AM – 12 PM) & (1 PM – 5 PM)

This is an Advanced Skills Cadaver Workshop. It will offer a unique, hands-on experience with skill reviews including advanced airway, vascular access, and a surgical anatomy review. Facilitated by Dr. Mary Ripple, a Pathologist from the Office of the Chief Medical Examiner, and Paul Burke, an Emergency Medicine Physician Assistant and retired Captain from Baltimore County Fire Department, this four-hour workshop will be offered off site at the Peninsula Regional Medical Center (PRMC). Morning and afternoon sessions will be available, with each session limited to twelve registrants to ensure that each participant will have significant hands-on training opportunity. **Only ALS providers may register**. Course Fee: \$75 {4 hrs, Cat A}

Thursday, April 30 & Friday, May 1, 2015

Pediatric Advanced Life Support (PALS) (8 AM - 5 PM)

The Pediatric Advanced Life Support Course is designed for pediatricians, emergency physicians, family physicians, mid-level providers, nurses, paramedics, respiratory therapists, and other healthcare providers who initiate and direct advanced life support in pediatric emergencies. This course is open to Advanced Life Support EMS providers, nurses, mid-level providers, and physicians only. Course Fee: \$100 {16 hrs, Cat A}

At the conclusion of the program, participants will be able to:

- Recognize the infant or child at risk of cardiopulmonary arrest;
- Identify strategies for prevention;
- Demonstrate the cognitive and psychomotor skills necessary for resuscitating and stabilizing the infant or child in respiratory failure, shock, or cardiopulmonary arrest;
- Demonstrate the use of the various airway and oxygen adjuncts and methods for optimum ventilation and airway control;
- Identify normal vs. abnormal cardiac rhythms and the appropriate pharmacologic and electrical therapies;
- State the indications and dosages of medications used in cardiopulmonary arrest and the effects on the cardiovascular system;
- Perform techniques to obtain vascular access in infants and children via intraosseous cannulation using EZ-IO.
- Perform advanced skills in the assessment and treatment of cardiopulmonary arrest in the pediatric patient.

Prerequisite: online pretest must be taken prior to attending the course. Textbook will be mailed with online access code after payment has been received.

Speakers and materials for this course have been sponsored by the University of Maryland Upper Chesapeake Health System. All fees associated with this pre-conference offering are intended to cover conference resort fees, meals, and refreshments.

EMT 12-Hour Skills Refresher (Thurs., 6 PM – 10 PM; Fri., 8 AM – 5 PM)

This course is a required part of recertification for all EMTs. By coupling this course with careful selection of conference breakout sessions, EMTs can meet all requirements necessary for recertification. This class will be hosted by the Ocean City Fire Department at an off-site location. Enrollment is limited to 30 registrants. Course Fee: \$25 {12 hrs, Cat S}

Friday, May 1, 2015

Suicide Awareness: An Introduction for Crisis Responders (8 AM – 5 PM)

Victor Welzant, PsyD – International Critical Incident Stress Foundation The ability to recognize and effectively intervene with suicidal individuals is one of the most challenging issues facing first responders and crisis intervention personnel. This course is recommended for first responders (fire/EMS/police/etc.) and critical incident stress management team personnel who wish to increase their awareness of suicide. This course will equip participants with information and basic skills to recognize the signs of an individual (including a co-worker) that is considering suicide, and to understand actions that can be taken to intervene. Course Fee: \$30 {8 hrs, Cat L/2}

BLS PEPP – 3RD Edition: Pediatric Education for Prehospital Providers (8 AM – 5 PM)

The PEPP-3 BLS Course is an 8-hour course designed by the American Academy of Pediatrics specifically designed to teach BLS providers how to better assess and manage ill or injured children. PEPP features case-based lectures, liveaction video, hands-on skills stations, and small group scenarios. The program has been updated and includes new lectures and hands-on skill stations. Additional scenarios and special equipment have been added by the Pediatric EMS Advisory Council (PEMAC) to correlate with EMS Scope of Practice in Maryland. Participants will qualify to receive an AAP course completion card by participating in the 1 day course and successfully complete a written test. Course Fee: \$50 {8 hrs, Cat M/A}

Prerequisite: online pretest must be taken prior to attending the course. Textbook will be mailed with online access code after payment has been received.

Speakers and materials for the PEPP – 3^{rd} Edition Course have been sponsored by the Maryland EMS for Children State Partnership Grant and EMSC Program. All fees associated with this preconference offering are intended to cover conference resort fees, meals, and refreshments.

<u> ACLS Refresher (8 AM – 5 PM)</u>

Matt Goldstein, DHSc, PA-C, NRP - Startbeat

The Advanced Cardiac Life Support (ACLS) renewal course is a refresher course designed for healthcare providers who have taken ACLS before and who either direct or participate in the resuscitation of a patient. In this course you will receive training in effective team behaviors and have the opportunity to practice as a team member and team leader. At the end of the course you will participate in a megacode testing station. A simulated cardiac arrest scenario will test the knowledge of core case material and skills, knowledge of algorithms, understanding of arrhythmia interpretation, and use of appropriate basic drug therapy. Registrants must have a current ACLS card. Registrants must pre-purchase the Advanced Cardiovascular Life Support (ACLS) Provider Manual. Course Fee: \$50 {8 hrs, Cat A}

Speakers and materials for this course have been sponsored by the Startbeat Heart Institute. All fees associated with this pre-conference offering are intended to cover conference resort fees, meals, and refreshments.

Firefighter Rehab and Medical Monitoring: The NEW (2015) NFPA Rehab Standard (8:00 AM - 2:00 PM)

A revised version of NFPA 1584: *Standard on the Rehabilitation Process for Members During Emergency Operations and Training Exercises* was published in January 2015. Research, coupled with EMS and Fire Service experience over the past 8 years, has changed our understanding of hydration, nutrition, cooling, and medical monitoring. This 4-hour session will explain the fundamentals of firefighter rehab; emphasizing a practical, real world approach to implementing nononsense firefighter rehab and medical monitoring. Learn about the shifting emphasis away from sports drinks, the reintroduction of caffeine, and a new ban on the use of energy drinks by firefighters. Gain important insight into new evolving strategies for passive cooling of firefighters and practical methods for rest and recovery. Explore changes in vital sign measurement and new assessment parameters for use in rehab. Understand the roles of EMS, firefighters, company officers, and incident commanders in the rehab process. The tremendous breadth of material covered in this class won't leave you disappointed! Course Fee: \$35 {4 hrs, Cat M/A}

Speakers and materials for this course have been sponsored by Medtronic Physio Control. All fees associated with this pre-conference offering are intended to cover conference resort fees, meals, and refreshments.

Improving Quality and Efficiency with the eMEDS® QA/QI Module (9 AM – 12 PM)

Jason Cantera, eMEDS® guru at MIEMSS, will present a 3 hour training session on the new eMEDS® Quality Assurance/Quality Improvement Module. This lecture will cover the basics of the QA/QI module, and will incorporate current best practices. Users will leave with a solid understanding of the benefits and features of this new addition to the MIEMSS eMEDS® system. Course Fee: \$25 {3 hrs, Cat L/2}

Advanced Service Administrator Training with LIFENET Integration (1 PM – 5 PM)

MIEMSS EMS Applications Coordinator Jason Cantera and Jim Springer of Medtronic Physio Control will present a 4-hour training session covering many of the advanced service administrator features of eMEDS®, including how to integrate LIFENET into your eMEDS® reports. Jason will cover a variety of topics including tips and tricks for basic system management for the service level administrator. He will use the Report Writer to demonstrate how to get out what your providers put in. Jim Springer will discuss best practices, methods for data import, and common problems encountered when initially setting up LIFENET integration from your system into eMEDS®. Course Fee \$25 {4 hrs, Cat L/2}

<u>2015 Prehospital EMS Provider Protocol Rollout (BLS and ALS)</u> (5:30 PM – 7:30 PM)

Are you computer-phobic? Do you wish that you could do the yearly protocol update in a real classroom instead of a virtual one? Here's your chance! Join MIEMSS Licensure and Certification staff for the presentation of this year's protocol update in a classroom setting. In no time at all, you will have met your continuing education requirements for this year's update. No fuss, no muss... and best of all, no computer. {2 hrs, Cat L/2}

2015 EMS Care Vendor Reception (6:30 PM - 8:30 PM)

Stop by and mingle with our impressive cadre of vendors and "talk shop" with your peers. While you're there, be sure and indulge in some tasty hors d'oeuvres. A cash bar will also be available.

Main Conference Program Descriptions:

Saturday, May 2, 2015

7:30 AM – 8:30 AM: Conference Registration and Continental Breakfast

8:30 AM – 8:45 AM: Opening Ceremonies

8:45 AM – 9:15 AM: EMS State of the State

The latest developments and trends in Maryland EMS will be highlighted by the Maryland Institute for Emergency Medical Services Systems Executive Director Dr. Kevin Seaman. {0.5 hrs, Cat M/A}

9:15 AM – 10:45 AM: Keynote Address

EMS Articles You Have to Know

Benjamin J. Lawner, DO, MS, EMTP, FACEP - University of Maryland School of Medicine

EMS protocols have a hard time keeping pace with the constant turnover in the medical literature. So, sit down, fasten your lap belt, close the protocol book, and take a look at the latest emerging trends in prehospital medicine. EMS providers have made significant contributions to the fields of cardiac arrest resuscitation, trauma care, and airway management. Dr. Lawner will summarize important articles of 2014 and suggest how the findings will impact your daily practice. {1.5 hrs, Cat T/B}

11:15 AM – 12:15 PM: General Session

An Arresting Story: Johns Hopkins and the Management of Sudden Cardiac Arrest

David Efron, MD, FACS - The Johns Hopkins Hospital

On January 28, 2013, Anne Efron suffered a sudden and unexpected cardiac arrest. From out of hospital CPR, and multiple defibrilations, through being placed on ECMO and the placement of an automatic internal cardiac defibrillator, Anne's journey is unveiled. The rich history and the role that Johns Hopkins has played in the development of tools for the management of cardiac arrest are reviewed along the way. {1 hr, Cat M/A}

1:15 PM – 2:45 PM: Breakout #1

(1A) Bleeding Everywhere: How to Stop a Gusher

Mike McEvoy, PhD, NRP, RN, CCRN

Bleeding is a life-threatening emergency and strategies for hemorrhage control continually change. This session will review best practices for assessment and management of external and internal bleeding including locating the source of bleeding, tourniquets, hemostatic agents, permissive hypotension, wound closure, the Golden Hour, and novel hemorrhage control devices coming soon to your ambulance. From a routine scalp laceration to an arterial pumper, this session will give you the information you need to respond appropriately and prevent significant blood loss. {1.5 hrs, Cat T/A}

(1B) Emerging Infectious Diseases: Implications for EMS

Ken Lavelle, MD, FACEP, NREMTP - Capital Health Systems, Trenton, NJ

Over the past 20 years the number of new infectious diseases has increased significantly: from SARS to MERS, EV-68 to Ebola. Dr. Lavelle will discuss the practical implications for EMS due to an outbreak or response to a patient exposed to these agents. {1.5 hrs, Cat M/B}

(1C) Do You See What I See? Battered, Broken, and Burned

Allison M. Jackson, MD, MPH, FAAP – Children's National Health System

Children of all ages are at risk to be victims of abuse, and identification of early signs is key to linkages for protection. A difficult but important trauma topic for EMS providers is to understand their role, increase awareness and provide critical documentation. Dr. Allison M. Jackson, Chief of the Child and Adolescent Protection Center at Children's National Health System will share current statistics and key things to look for when caring for infants, children and youth. {1.5 hrs, Cat T/B}

(1D) Safety Management System for Ambulance Operations

Jonathan Godfrey, RN, CMTE – Children's National Health System

DC Children's Transport and Butler Medical Transport developed an evidence based system to improve operational safety, reduce costs and improve employee satisfaction. The results were shocking (in a good way). A review of the two year process, as well as data that was collected, will show other EMS or transport organizations the tools to build their own Safety Management System (SMS). {1.5 hrs, Cat L/2}

(1E) Big Data Leads to Big Results

EMS Battalion Chief Alan Butsch – Montgomery County Fire and Rescue Service

Data is becoming the lifeblood of EMS management. The last 24 months have seen the MCFRS launch several new EMS initiatives. However, initiatives are useless without meaningful measurements and feedback. Chief Alan Butsch will discuss the data and feedback loops that have enabled MCFRS to achieve a threefold increase in ROSC for cardiac arrest victims, near perfect transport ePCR completion, and steady improvement in overall documentation. The presenter will also discuss Montgomery County's CountyStat program and MCFRS' monthly EMS "dashboard" data report. {1.5 hrs, Cat L/2}

(1F) Managing the Difficult Airway

Matt Levy, DO, M.Sc. - Johns Hopkins Emergency Medicine and Howard County Department of Fire and Rescue Services

David Stamey, CCEMTP – MIEMSS Region II Administrator

This course is designed to enhance students' knowledge of current advanced airway practices and techniques. It will improve students' overall skill level and introduce each student to the latest airway equipment. Included will be a hands-on surgical airway lab where students will have the opportunity to practice a surgical airway. {1.5 hrs, Cat T/A} **Limited to 18 registrants**

3:00 PM – 4:30 PM: Breakout #2

(2A) Approaches to Geriatric Trauma

Terrance Baker, MD – MedStar Good Samaritan Hospital

This intensive, content rich workshop is appropriate for all levels of prehospital providers and will demonstrate principles of triage, evaluation and treatment of common traumatic conditions in geriatric patients. Attendees will learn the management of common geriatric trauma conditions from experienced faculty. {1.5 hrs, Cat T/B}

(2B) Excited Delirium and EMS Sedation

Ken Lavelle, MD, FACEP, NREMTP - Capital Health Systems, Trenton, NJ

Excited Delirium is a syndrome that has recently been recognized that impacts EMS, law enforcement, and hospital medicine. These victims are at high risk of sudden death, and the actions of both law enforcement and EMS may forestall this outcome. This program will discuss the condition, its history and symptoms, and the actions that EMS can take to possibly prevent death. A review of a recent pilot project in Pennsylvania involving EMS use of Ketamine will be discussed. {1.5 hrs, Cat M/A}

(2C) Ouch – It Hurts! Pediatric Pain Assessment and Management in the Field

Jennifer Guyther, MD – University of Maryland Medical System

No one likes pain – everyone experiences pain differently. Managing pain in the EMS environment requires specific assessments, immobilization, appropriate medications, environmental controls and parental participation. Dr. Jennifer Guyther, University of Maryland emergency medicine and pediatric faculty, will engage the audience in discussing cases that need multiple interventions to decrease a child's pain. {1.5 hrs, Cat M/A}

(2D) Case Studies in On-Scene Communications: The Razor's Edge Between Getting it Right or Wrong

Roger Stone, MD, MS, FACEP, FAAEM - Montgomery County EMS Medical Director

EMS Battalion Chief Alan Butsch – Montgomery County Fire and Rescue Service

It is eye-opening how many times subtle differences in real-time communications between providers can lead to vastly different outcomes. It happens frequently that these are found in "hot washes" after various incidents of all types, or after root analyses of bad outcomes. This lecture, heavily weighted on audience participation, will go through case studies which underscore the value of good communications habits and crew resource management towards "getting it right" and hedging bets for favorable patient outcomes. {1.5 hrs, Cat L/2}

(2E) Hazards (and Opportunities) Ahead: The Future of EMS Len Guercia, MA, EMTP – The Holdsworth Group

It is getting increasingly difficult to operate an EMS agency, and the road ahead is full of potholes and hazards. This session is designed to explore the main issues that many see as the biggest challenges and changes to the future of the EMS industry. Topics such as service, staffing, reimbursement, and marketing will be covered in enough depth to provide an overview and get participants headed in the right direction for exploring the impact and/or opportunities that apply to their agency. {1.5 hrs, Cat L/2}

(2F) How Low Do You Go to Stop the Flow? Current Trends in Trauma Resuscitation

Benjamin J. Lawner, DO, MS, EMTP, FACEP - University of Maryland School of Medicine

Your patient's blood pressure is dropping and the nearest trauma center is 20 minutes away by ground. Do you pause for aeromedical intercept or evacuation? What are the most important interventions you can perform that will directly affect survival? Dr. Lawner will review the recent trauma literature and highlight EMS interventions directly linked to patient outcome. {1.5 hrs, Cat T/A}

Sunday, May 3, 2015

7:00 AM – 8:30 AM: Breakfast Buffet

8:30 AM – 10:00 AM: <u>They are Drinking and It Isn't "the Kool-Aid"</u> Matt Goldstein, DHSc, PA-C, NRP - Startbeat

Alcohol is responsible for over 600,000 ER visits in the United States each year. EMS providers encounter many of these patients by way of calls for the isolated intoxicated subjects, or for more complex situations such as domestic violence, suicide attempts, or even death when alcohol is involved. The most difficult of these situations is when serious illness or injuries are masked by alcohol and the EMS provider treats the patient as someone who is "just drunk." This talk will discuss the pathophysiology of alcohol intoxication and its effects on the human body as well as the EMS provider's approach to treating these patients in a comprehensive manner. {1.5 hrs, Cat M/A}

10:15 AM – 11:45 AM: Breakout #3

(3A) Backboards for Spinal Trauma

Michael Millin, MD, MPH, FACEP - The Johns Hopkins Hospital

The 2015 MIEMSS protocols will include a dramatic shift in the management of blunt trauma, instructing EMS providers to allow patients that are ambulatory to lie down on an EMS stretcher and not place the patient on a backboard. This presentation will include an overview of the history of backboards and a review of the science that demonstrates that the theoretical benefit of backboards is outweighed by proven harm. {1.5 hrs, Cat T/B}

(3B) What is ALS Gonna Do For This Guy? Pitfalls in ALS to BLS Downgrades

Roger Stone, MD, MS, FACEP, FAAEM - Montgomery County EMS Medical Director

In many EMS models around the State and Country, we are seeing more "divorcing of the medic from the cot," with chase cars or paramedic engines joining BLS transport units; or two transport units, one of each level of care, meeting at an ALS dispatch. This is a discussion of "ALS to BLS downgrade" and the pitfalls of labelling the patient BLS, when one could reasonably initiate ALS care... if one just felt like it. This lecture will show why "an ALS patient is what you make of it, "and there are many opportunities for an upgrade to really help our patients. {1.5 hrs, Cat M/A}

(3C) Destination Dilemma – Determining Where to Take the Pediatric Trauma Patient

Jennifer Anders, MD, FAAP – The Johns Hopkins Children's Center

"Pediatric consult needed - I have an injured pediatric patient." Which ones can be transported to a local emergency department? Which ones should be transported to a pediatric trauma center? This session will highlight essential information that will improve consults to paint an accurate picture of a pediatric trauma patient. Both prehospital and hospital providers will participate in making destination decisions for these cases. {1.5 hrs, Cat T/B}

(3D) Liberia, Post-War, and Ebola: Impact on the Country's National Fire Service

Chief John Butler – Howard County Department of Fire and Rescue Services A group made up of fire and emergency medical professionals from throughout the United States is committed to help rebuild the Liberia (Africa) National Fire Service. Following a fifteen-year civil war, that ended in 2003, Liberia was left in ruins; among the casualties was the National Fire Service. Upon arrival of the team of U.S. Firefighters led by Howard County Fire and Rescue's Chief John Butler and Chief Ken Prillaman of Brooklyn Park, Minnesota, the Liberia National Fire Service had just one working fire engine and one ambulance, protecting a country the size of Ohio with almost 4 million residents. This presentation will focus on the work done from a non-profit, humanitarian perspective, by a handful of professional, passionate responders that helped prepare the Liberian National Fire Service for conventional fire protection and emergency medical service, as well as emerging threats such as the Ebola Virus. {1.5 hrs, Cat L/2}

(3E) A Roadmap for Success: Implementing a Mobile Integrated Healthcare Program in Your Service Area

Allison J. Bloom, Esq. – The Bloominghill Group, LLC

Mobile Integrated Healthcare (aka "Community Paramedicine") programs are sweeping the industry, and there is no "one-size-fits-all" approach. But, there are common denominators and best practices for creating a successful program. And, of course, there are the legal issues to consider. Join industry consultant and attorney Allison Bloom as she demystifies the ins-and-outs of starting a Mobile Integrated Healthcare program in your service area and provides you with the practical tools you will need to successfully get started. {1.5 hrs, Cat L/2}

(3F) Critical Care Monitoring Nuts and Bolts Mike McEvoy, PhD, NRP, RN, CCRN

Arterial lines and invasive pressure monitoring are fundamental critical care transport skills. This session will examine the goals of hemodynamic monitoring and offer pearls for managing and troubleshooting arterial lines and other pressure monitoring devices. We will also explore uses of both invasive and non-invasive patient monitoring technologies including evolutions in pulse oximetry, capnography, acoustic monitoring, ultrasound and bioimpedance technologies that could

help providers improve patient outcomes. Trends in patient care monitoring that guide critical thinking will be presented with an eye towards future evolution in monitoring technologies. {1.5 hrs, Cat M/A}

11:45 AM – 12:45 PM: Lunch Presentation

Maryland's Strategic Highway Safety Plan Blending the 4-E's of Highway Safety

Thomas Gianni, Chief – Maryland Highway Safety Office

Maryland's Strategic Highway Safety Plan is the state's vision to drive highway fatalities toward zero deaths. The speaker will identify the underlying concepts of this plan, its development and its implementation through all 4-E's of Highway Safety: Engineering, Enforcement, Education and Emergency Medical Services. Upon completion the audience will better understand Maryland's successful journey toward reaching its goals for making highways safer for all of us. {0.5 hrs, Cat L/2}

12:45 PM – 1:45 PM: Breakout #4

(4A) Ophthalmology in the EMS Setting

Chimene Richa, MD – University of Maryland Medical System

This course reviews the basic bedside eye exam and concerning findings that indicate emergent disease. The ocular exam can indicate more severe disease processes, requiring higher levels of care or transport to specialty centers. For example, abnormal pupils and/or eye muscle movement difficulties can indicate intracranial pathology, such as a stroke. Globe rupture, orbital fracture, and ocular foreign body management will also be covered, as well as discussion of other ocular emergencies and their emergent management. {1 hr, Cat T/B}

(4B) ECG: What an EMT Could Know and a Paramedic Should Know Matt Goldstein, DHSc, PA-C, NRP - Startbeat

Time is muscle and EMS providers can save time, muscle, and lives by performing and transmitting a high-quality prehospital ECG. Obtaining the ECG is not just reserved for ALS providers. BLS providers have an increasing role in utilizing the ECG. This lecture will highlight how to recognize the good, the bad, and the ugly and will discuss common pitfalls in the EMS use of ECGs. Participants will learn how to perform a high-quality ECG, identify potential life threatening results, and transmit/communicate these findings to the appropriate emergency department. {1 hr, Cat M/A}

(4C) What's Hot and What's Not: Pediatric Burn Case Reviews Jennifer Fritzeen, MSN, RN, PCNS-BC

Children's National Health System Pediatric Burn Center

When a burn occurs, seconds count and initial prehospital care and transport decision are critical. Based upon Maryland statewide burn data and changes in outpatient care capabilities, the Pediatric Burn Center at Children's National Health System will present the new treatments that are resulting in, shortened hospital stays and dramatic results. {1 hr, Cat T/A}

(4D) The Art of the Consult: Being Efficient and Effective on the Radio Matt Levy, DO, M.Sc. - Johns Hopkins Emergency Medicine and Howard County Department of Fire and Rescue Services

This session will focus on how to succinctly and successfully conduct a radio consult. The session will briefly review some of the challenges and pitfalls of consults and will use multimedia resources to engage audience participation. An aviation style check list will be introduced as a tool to aide providers. {1 hr, Cat L/2}

(4E) An Ounce of Prevention: EMS Innovations in Cardiovascular Care Improve Fire Fighter Health

Kevin Seaman, MD, FACEP - Executive Director, MIEMSS

This interactive session will spotlight Howard County Department of Fire and Rescue Services innovative partnership with Howard County General Hospital, a Maryland Cardiac Interventional Center and a member of the Johns Hopkins Medical System. The hospital approached the Fire Department requesting to improve Door-to-Balloon (DTB) times for patients experiencing an ST Elevation Myocardial Infarction (STEMI). The collaboration combined detailed Quality Improvement feedback to providers who identified STEMI in the field, as well as cardiology input into continuing education sessions for providers. The result ...success! Average DTB time was 92 minutes and EMS provider success at identifying STEMI was 85%. EMS expanded to work on cardiac arrest survival, achieved 50% neurologically good survival, and became the East Coast partner for the Seattle Resuscitation Academy. New initiatives include an innovative partnership with Johns Hopkins Cardiology to improve firefighter cardiovascular health. {1 hr, Cat M/A}

(4F) EMS Toxicology: Approach to the Poisoned Patient

Lisa Booze, Pharm D, CSPI - Maryland Poison Center

Overdoses and poisonings present with a variety of clinical effects. In most cases, the drug or toxin can be quickly identified by a careful history and a directed physical examination. When the toxin is not known, there are clues such as toxidromes, that may point the EMS provider toward a specific type of toxin. This program will review the important aspects of a history, the identification of toxidromes and specific treatments and antidotes that may be considered for poisonings. {1 hr, Cat M/A}

2:00 PM – 3:00 PM: Breakout #5

(5A) Prehospital Management of Traumatic Brain Injuries: Lessons Learned from Combat Casualty Care

Col. Raymond Fang, MD - C-STARS Baltimore

"Primary" brain injury results from the initial traumatic event and is currently irreversible. Modern trauma care focuses on prevention of "secondary" brain injury which can occur immediately following the event. Prehospital care providers must be aware of the risks of secondary brain injuries and management strategies to reduce its impact. {1 hr, Cat T/B}

(5B) The Misuse and Abuse of Prescription and OTC Drugs

Lisa Booze, Pharm D, CSPI - Maryland Poison Center

Every day in the United States, more than 6,700 people are treated in emergency departments and 114 die following the misuse and abuse of pharmaceuticals. Among people 25 to 64 years old, unintentional drug overdose causes more deaths than motor vehicle accidents. The toxicity of the most common prescription and over-the-counter medication misuse and abuse (opioids, sedatives, stimulants) will be reviewed as well as efforts to reduce the number of fatalities, such as bystander naloxone programs. {1 hr, Cat M/A}

(5C) Pediatric Assessment: From Tots to Teens

Jennifer Guyther, MD – University of Maryland Medical System

Different age groups require different assessment techniques: ABC vs. CAB, sick or not sick and toe-to-head vs. head-to-toe. Pediatric Emergency faculty from our State Pediatric EMS Advisory Committee (PEMAC) will lead you through key questions, critical decision points and communication techniques to solve the puzzles children of all ages present. {1 hr, Cat M/A}

(5D) Care Under Fire: An Integrated Active Assailant Response

TFC Travis Nelson – Maryland State Police / MEMA

Sgt. Kevin Straight, MS, NRP, TP/C – Maryland State Police Special Operations Division

This course will review the interdisciplinary response of Fire, EMS, Police, and Emergency Management to an active assailant incident. It will review on-scene security and safety concerns, as well as discuss how to quickly access patients while the incident is evolving. The course will examine methods on how to integrate the Police and EMS / Fire initial response and explore equipment options. {1 hr, Cat T/B}

(5E) eMEDS® Q&A

Jason Cantera – MIEMSS EMS Applications Coordinator

Jason Cantera, MIEMSS EMS Applications Coordinator, will be in the hot seat answering YOUR questions on Maryland's ePCR tool. Bring your best questions on system capabilities, how to's, and best practices to share with the group. This breakout is aimed at the field level provider and will address questions on Field Bridge and State Bridge. {1 hr, Cat L/2}

(5F) Pediatric Sepsis

Jason Woods, MD – Children's National Health System

Sepsis is one of the leading causes of death around the world and kills more than 6 million infants and young children annually. Diagnosis is unfortunately often delayed due to subtlety of symptoms leading to progression on the disease pathway and potential for disastrous outcomes. This session will review the pathophysiology, signs/symptoms and treatment of sepsis to help both nurses and EMS providers rapidly identify and aggressively treat this critical illness and prevent death. {1 hr, Cat L/2}

3:15 PM – 4:15 PM: Closing Keynote

You Can't Make Me Go! Consent and Refusals in Prehospital Care

Allison J. Bloom, Esq. – The Bloominghill Group, LLC

This informative session will explore the rights of patients to consent or refuse care; the documents that they, their families, or other public safety and/or healthcare providers may present or employ to obtain care for the patient; and, the circumstances where another person may or is required to consent or refuse care on behalf of a patient. {1 hr, Cat L/2}

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	Saturday, May 2, 2015						
7:30-8:30	Registration / Continental Breakfast						
8:30-8:45	Opening Ceremonies						
8:45-9:15	EMS State of the State {M/A}						
9:15-10:45	EMS Articles You Have to Know {T/B}						
10:45-11:15	Vendor Break						
11:15-12:15	An Arresting Story: Johns Hopkins and the Management of Sudden Cardiac Arrest {M/A}						
12:15-1:15	Lunch						
	Trauma	Medical	Peds	Ops	Mgmt / Leadership	Critical Care	
1:15-2:45	Bleeding Every- where: How to Stop a Gusher {T/A}	Emerging Infectious Diseases: Implications for EMS {M/B}	Do You See What I See? Battered, Bro- ken, and Burned {T/B}	Safety Management System for Ambulance Operations {L/2}	Big Data Leads to Big Results {L/2}	Managing the Diffi- cult Airway {A}	
2:45-3:00	Break						
3:00-4:30	Approaches to Geriatric Trauma {T/B}	Excited Delirium and EMS Sedation {M/A}	Ouch – It Hurts! Pe- diatric Pain Assess- ment and Manage- ment in the Field {M/A}	Case Studies in On- Scene Communications {L/2}	Hazards (and Oppor- tunities) Ahead: The Future of EMS {L/2}	How Low Do You Go to Stop the Flow? {A}	

	Sunday, May 3, 2015							
8:30-10:00	They are Drinking and It Isn't "the Kool-Aid" {M/A}							
10:00-10:15	Break							
	Trauma	Medical	Peds	Ops	Management	Critical Care		
10:15-11:45	Backboards for Spinal Trauma {T/B}	What is ALS Gonna Do For This Guy? {M/A}	Destination Dilemma – Determining Where to Take the Pediatric Trau- ma Patient {T/B}	Liberia: Post-War and Ebola {L/2}	A Roadmap for Suc- cess {L/2}	Critical Care Moni- toring Nuts and Bolts {A}		
11:45-12:45	Lunch Presentation - Maryland's Strategic Highway Safety Plan: Blending the 4-E's of Highway Safety {L/2}							
12:45-1:45	Ophthalmology in the EMS Set- ting {T/B}	What an EMT Could Know and a Paramed- ic Should Know {M/A}	What's Hot and What's Not - Pediatric Burn Case Reviews {T/A}	The Art of the Consult: Being Efficient and Ef- fective on the Radio {L/2}	An Ounce of Preven- tion {L/2}	EMS Toxicology: Approach to the Poisoned Patient {A}		
1:45-2:00	Break							
2:00-3:00	Prehospital Management of Traumatic Brain Injury {T/B}	The Misuse and Abuse of Prescription and OTC Drugs {M/A}	Pediatric Assessment: From Tots to Teens {M/A}	Care Under Fire: An In- tegrated Active Assailant Response {T/B}	eMEDS® Q&A {L/2}	Pediatric Sepsis {A}		
3:00-3:15	Break							
3:15-4:15	You Can't Make Me Go! Consent and Refusals in Pre-Hospital Care {L/2}							

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EMS Care 2015

Registration Form – Count Me In!!!





~ SUBMIT ONE REGISTRATION FORM FOR EACH ATTEND Please print your name as you wish it to appear on your name badge: First Name: I			
Provider ID: Primary Affiliation:			
Address: C			
Daytime Phone: Email Address:			
(Email and phone number should be unique to each registra	ant. Do NOT use one email address for multiple registrants)		
Certification/Licensure (Circle One): EMR EMT CRT-I Para	amedic EMD RN Student Other		
Please select the program	<u>ns that you plan to attend:</u>		
re-Conference Workshops:	WE'RE GOING GREEN!		
hursday/Friday, April 30 and May 1, 2015	(Please select how you would like to receive your conference materials) Thumb Drive (Electronic) Binder (Printed)		
EMT 12-Hour Skills Refresher (\$25)			
Pediatric Advanced Life Support (PALS) (\$100)	Registration Fees:		
hursday, April 30, 2015	EARLY BIRD (Received before 4/1/15)		
Statewide CISM Coordinator Symposium (FREE)	Pre-Conference(s) Sub-Total:		
EMS Strike Team Training (\$25)	Full Conference (Sat/Sun) (\$175):		
Cardiac Review and 12 Leads for the Basic	Conference One-Day Pass (\$90):		
Provider (\$25)	(Sat Sun) <i>Total:</i>		
EMS Care Cadaver Lab (\$75)	Standard (Received on or after 4/1/15):		
riday, May 1, 2015	Pre-Conference(s) Sub-Total:		
Suicide Awareness: An Introduction for Crisis Responders (\$30)	Full Conference (Sat/Sun) (\$195):		
BLS PEPP (\$50)	Conference One-Day Pass (\$100):		
ACLS Refresher (\$50)	(Sat Sun) <i>Total:</i>		
Firefighter Rehab and Medical Monitoring (\$35)			
Improving Quality and Efficiency with the eMEDS QA/QI Module (\$25)	Payment: Pay by Check Payable to: Emergency Education Council of Region III		
Advanced Service Administrator Training with LIFENET Integration (\$25)	Mail To: MIEMSS Region III 653 West Pratt Street		
2015 EMS Protocol Update (BLS & ALS) (FREE)	Baltimore, Maryland 21201		
Vill you be attending the FREE Vendor Reception Friday, May 1	Pay by Purchase Order (see mailing address above)		
rom 6:30PM-8:30PM? YES! No	Pay by Credit Card		
Vill you be attending the FREE Bonfire , Friday, May 1 from :30PM-10:30PM? YES! No	Fax credit card registrations to 410-706-8530		
Vill you be attending EMS Care Trivia at Seacrets, Saturday May 2	VISA: Master Card: AMEX: Discover:		
rom 7:30PM-10PM (\$5 paid on site) YES! No	Card #:		
Iain Conference Breakout Sessions: (Please circle)	Expiration Date: (MM/YY) Security Code:		
aturday, May 2, 2015: Morning Run/Walk: (I'm Attending)	Billing Address:		
Breakout 1: A B C D E F	Check if same as mailing address		
Breakout 2: A B C D E F	Street:		
unday, May 3, 2015: Morning Get in Gear Beach Boot Camp: (I'm Attending)			
Breakout 3: A B C D E F	City:State:Zip: (Billing Address needed for credit card authorization)		
Breakout 4: A B C D E F Breakout 5: A B C D E F	Signature:		



EMS Care 2015

Registration Form – Count Me In!!!

Online Registration available at https://www.regonline.com/emscare2015_1672517



Maryland EMS Care Conference Attendee Terms and Conditions

REGISTRATION:

Registration for Maryland EMS Care Conference incurs an obligation on your part to complete the registration process including paying registration fees. Registrations may be paid immediately by credit card. Registrations submitted with payment by check require payment within ten (10) days of submission. Registrations submitted with payment by purchase order require payment within thirty (30) days of submission. An invoice will be sent to the registrant with a request for payment when fees are to be paid by company check or purchase order. All registrations must be paid in full upon commencement of conference proceedings. If you fail to cancel prior to the cancellation deadline, April 15, 2015, registration fees are not refundable. If you register for the Maryland EMS Care Conference, but do not attend and do not cancel prior to the cancellation deadline, you are still liable for the registration fees.

PRE-CONFERENCE OFFERINGS:

All pre-conference offerings are subject to cancellation due to low enrollment. In the event a course is cancelled, participants will be given a full refund of the course fees. The decision to cancel a pre-conference course will be made at the discretion of the EMS Care planning committee and will be made on April 22, 2015.

PAYMENT PROCESSING:

By submitting the conference registration form, you agree to the charges to the submitted credit card of registration fees for Maryland EMS Care Conference 2015. If registration is made by check or purchase order, you agree to be responsible for the charges whether you attend the conference or not. Returned checks are also subject to a \$25 processing fee.

ATTENDEE REFUNDS:

No refunds will be given for cancellations made after April 15, 2015. Cancellations made before April 15, 2015, will be refunded less a 20% administrative fee. Refund requests must be made by email to <u>emscare@miemss.org</u>. You may transfer your registration to another person without penalty, provided you inform the Maryland EMS Care Conference by email.

By registering for EMS Care 2015, you agree to grant the Emergency Education Council of Region III and the Maryland Institute for Emergency Medical Services Systems (MIEMSS) the right to distribute, transmit, publish, copy, or otherwise make use of, either in whole or in part, either digitally or in any other medium known or later discovered, the photographs taken during the conference. Attendees assume all risk incidental to participation in all activities, loss or damage to property, and release management, its employees and agents against all claims.

SPECIAL ACCOMODATIONS:

Anyone needing special accommodations or having special dietary requirements should contact the Region III Office of MIEMSS by April 15, 2015, at 410-706-3996 or EMSCare@miemss.org.

2015 EMS & Prevention Educational Conferences

Please go to the MIEMSS website for details on these events.

Miltenberger Emergency Services Conference: April 10–11, 2015 Wisp Ski Resort, McHenry, Md.

EMS Care 2015: April 30–May 3, 2015 Clarion Resort Fountainebleau Hotel, Ocean City, Md.

MSFA Annual Convention: June 20–26, 2015 Ocean City, Md.

MIEMSS Safety Corner

Back Injuries

During your tenure as an EMS provider, you're certain to have known a provider who has experienced a back injury on a call—perhaps even had one yourself. Unfortunately, it is all too common of an occurrence. According to the Centers for Disease Control and Prevention, in 2012 there were 24,200 EMS worker injuries requiring treatment in a hospital emergency department—37% of these injuries were sprains and strains.

Lifting is a repetitive task that we perform day in and day out. By following a few simple lifting techniques, you can help to reduce your chances of a back injury.

- Stand close to the patient with your feet shoulder-width apart
- Tighten your stomach muscles before you start the lift
- Keep your back straight
- Bend with your knees, hips forward
- Lift the weight with your leg muscles
- Do not twist as you lift
- Do not reach while lifting

When it comes to back injuries, lifting is not the only culprit. The awkward environment in which we work in takes a toll on our backs—from being on your knees performing CPR to reaching up into an overturned vehicle to free an entrapped patient to twisting and reaching for equipment. Take care of your patient AND yourself.

MIEMSS, Maryland EMS News 653 W. Pratt St., Baltimore, MD 21201-1536



Governor Lawrence Hogan, Jr. Lt. Governor Boyd Rutherford

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