

For All Emergency Medical Care Providers

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Rushing Through Car Seat Stages: Extremely Risky for Children

"I'm in school now so I don't have to ride in a booster anymore," says a six-year-old at a Maryland elementary school. Unfortunately, his parents are the source of that idea, and regrettably, many other parents are making this same mistake.

Rushing children into the next stage of restraint use—whether it is turning a rearfacing young child forward-facing in their car seat too soon, or moving a child out of a booster and into seat belt—can have devastating consequences. According to the Centers for Disease Control and Prevention (CDC), car crashes are a leading cause of death for all children and the leading cause of unintentional injury and death for ages 5 to 24 years.

Ten years of data from National Highway Traffic Safety Administration's (NHTSA) Crashworthiness Data System (CDS) indicate that children aged 3 to 4 years who ride in booster seats instead of car seats are at higher risk of all injuries. And for children aged 4 to 8 years old "there is strong evidence of reduced risk of injury when restrained by booster seats rather than lap and shoulder belts," according to the CDS. The Children's Hospital of Philadelphia's multi-year research using

State Farm Insurance crash data found that booster use among children aged 4 to 8 years reduced the risk of serious injury in a car crash by 45% compared to use of seat belts. In this study, children in this age group who were in booster seats did not suffer abdominal injuries in crashes. Sub-optimally restrained children across the studied age groups were 3.5 times more likely to have an abdominal injury to the intestine, bladder, liver, or spleen.

Given the clear benefits of booster seats for children who have outgrown their harnessed car seats, most states have laws requiring their use. Maryland's law requires that children use a booster or car seat until they are 8 years old, unless they are 4 feet 9 inches or taller, and then they are permitted to use a seat belt. However, being 8 years old does not instantly convey safety in a seat belt. In fact, an 8-year-old child who is 4 feet 2.5 inches is in the 50th percentile for height, and most children will not reach the suggested 4 feet 9 inches height standard—when a seat belt might fit properly—until around age 11. (See www.carseat.org/Boosters/630.htm for the fivestep test for seat belt fit.)

Car seats have changed considerably in the last two decades, to where they now

accommodate a wide range of children's sizes. Different harnessed seats are available that protect children from preemies up to 90 lbs., and boosters cover a wide range from approximately 40 lbs. to 120 lbs. This means that parents have no reason to rush their child on to the next stage prematurely, putting their children at unnecessary risk in a crash. To keep kids the safest, parents should "max out" each car seat's use—use it to the weight or height limits that are indicated in the seat's guidelines before advancing to the next stage. Drivers rush enough on the roads, so it is important to discourage rushing next-stage car seat use too!

For free car seat resources in Maryland, including the new 30-second public service announcement, contact cps@miemss.org.

Submitted by:

Susanne Ogaitis-Jones, MSPH, CPST-I, MIEMSS Child Passenger Safety Health Care Project

Ocean City Training Program





MIEMSS is working in conjunction with the Ocean City Beach Patrol (OCBP) on a training program titled "Initial Care and Treatment of Suspected Spinal Injuries in the Surf." Lt. Ward Kovacs (left photo, far left) monitors the filming as members of the OCBP perform the proper technique. The OCBP crew goes through the steps of rescuing a victim with a possible spinal injury during the video shoot (right photo).

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Public Comment Sought on EMS Board Regulations for Freestanding Medical Facilities

During the 2016 legislative session of the Maryland General Assembly, Freestanding Medical Facilities - Certificate of Need, Rates, and Definition, which establishes a process for acute care general hospitals seeking to convert to a freestanding medical facility, was enacted into law.

As part of this process, the new law includes requirements for acute care general hospitals seeking to convert without first having to obtain a Certificate of Need from the Maryland Health Care Commission.

These requirements include that the

conversion "will maintain adequate and appropriate delivery of emergency care within the statewide emergency medical services system as determined by the State Emergency Medical Services Board."

The EMS Board has begun preparing regulations to enforce this new law, including determining the factors that the EMS Board needs to consider, as well as establishing a timeline for the process. MIEMSS met with members of the EMS community and other stakeholders to develop draft regulations, and is now seeking informal

comments from interested parties. A copy of the draft regulations is available on the MIEMSS website at bit.ly/2b6l9pp. Informal comments on the draft should be emailed to Lisa Myers, Director of Cardiac and Special Programs at lmyers@miemss.org by 5:00 pm on September 8, 2016.

Once the draft regulations are approved by the EMS Board, they will be posted in The Maryland Register (www.dsd.state.md.us/MDR/mdregister.html) for 30 days for formal public comment; additional comments will be accepted during this time.

MIEMSS Develops Stroke Education Material for Providers

In an effort to more broadly inform prehospital and hospital personnel in Maryland about warning signs, symptoms, and recognition of a stroke, MIEMSS has developed the following educational materials, funded by a grant from the Maryland Department of Health and Mental Hygiene.

The Maryland Medical Protocols for Emergency Medical Services Providers was updated in 2016 to include the Los Angeles Motor Scale (LAMS) in diagnosing stroke patients. If the Cincinnati Prehospital Stroke Scale is positive, providers then perform the LAMS test, informing the receiving hospital of the score during "stroke alert" notification.

As part of the grant, laminated LAMS pocket cards were created and distributed to providers during EMS conferences, the Maryland State Firemen's annual convention, and to local jurisdictions.

MIEMSS also videotaped lectures on neurological emergencies and stroke by two noted physicians; one was taped at the 2016 Miltenberger Emergency Services Symposium and a second was taped during the EMS Care 2016 conference. These programs are available on CD and may be used for company drills and in-service training to better inform both EMS and hospital personnel regarding the latest information in stroke care.

Licensure and Certification TIDBIT

- **Q.** I have taken and successfully completed a paramedic refresher program within my NREMT recertification cycle. When I log onto the NREMT website to enter my education, the NREMT courses displayed do not match the classes I attended. Am I still able to recertify my NREMT?
- A. Yes, you may still recertify through the NREMT. During the next few NREMT recertification cycles, Maryland providers may use either the Traditional or NCCP/NCCR NREMT recertification model. Providers who complete a refresher program through the Traditional model may add a course under the National category to meet the minimum hour requirement for that section. Be sure to select MD-approved refresher course for the "Class Detail." Classes not placed in the National category can be added to the Local and Individual categories. Note: each course can only be used or added once to fulfill the overall minimum hour requirement for NREMT renewal. Additional information on the NCCP process is on the MIEMSS website under the EMS Providers tab.

- 2016 —

EMS & Prevention Educational Conferences

Peninsula Regional Medical Center Annual Trauma Conference Topics in Trauma Sentember 23, 2016

September 23, 2016 Ocean City, Md.

Mid-Atlantic Life Safety Conference September 27, 2016 Johns Hopkins Applied Physics Lab Laurel, Md.

MIEMSS Hosts Baltimore City YouthWorks Students for Career Exploration

MIEMSS recently hosted five Baltimore City YouthWorks students as they explored possible careers in emergency services and the medical field. YouthWorks is a service of the Baltimore City Mayor's Office of Employment Development. The students came to MIEMSS to learn about careers in EMS, fire and rescue, emergency management, nursing, and other medical professions. Through this program, the group explored both career and volunteer paths in emergency services. The experience helped each student develop an awareness of opportunities in the community, gave them a chance to put theories into practice, and offered experiences for personalized learning. They gained valuable insight and experience in prehospital care, as well as the multiple disciplines of fire service, through hands-on experiences.

During their time with MIEMSS, the students visited the Baltimore City Fireboat, Howard County Department of Fire and

New Primary Stroke Center

Doctor's Community Hospital, located in Lanham in Prince George's County, was recently designated by MIEMSS as a Primary Stroke Center. The hospital is now receiving stroke patients who meet the criteria for transport as directed by *The Maryland Medical Protocols for Emergency Medical Services Providers*.

New Director Named for NHTSA's Office of EMS

The National Highway Traffic Safety Administration (NHTSA) has announced the appointment of Dr. Jon Krohmer as the director of the Office of EMS. Dr. Krohmer comes to this position with a wealth of EMS experience and expertise, and will lead NHTSA's collaborative efforts to improve emergency care across the nation. He is a board-certified emergency physician and has been actively involved in EMS for over 30 years. He is currently serving as the MIEMSS jurisdictional medical director for Caroline County.

For more information about NHTSA's Office of EMS, please go to <u>www.ems.gov</u>.

Rescue Services, the Queen Anne's County Department of Emergency Services, the Level Volunteer Fire Company, the Baltimore/ Washington International Thurgood Marshall Airport Fire and Rescue Department, the Maryland Emergency Management Agency, the Maryland Department of the Environment, the R Adams Cowley Shock Trauma Center, the Maryland State Police Aviation Command, and the Harford County Emergency Operations and 9-1-1 Center. The students became certified in CPR and learned how to use an automated external defibrillator (AED). They experienced the workings of Maryland's trauma and EMS system and how it operates-from the initial call to a

9-1-1 center, to the emergency response, to transport to a hospital or trauma center—and learned about the patient care that is rendered throughout.

The students also participated in prevention activities. They each designed, developed, and produced a poster related to an injury prevention message on, for example, pedestrian safety, distracted driving, or violence prevention.

Many thanks to all the EMS/fire departments and other agencies and organizations that opened their doors to these students so they could have a great learning experience.





YouthWorks students hosted by MIEMSS this year learned about the Maryland State Police Aviation Command and were able to explore an AW-139 helicopter at Martin State Airport (top photo), and also were invited to visit the University of Maryland Shore Emergency Center at Queenstown where EMS Board member Mary Alice Vanhoy talked to them about emergency care in the hospital (bottom photo).

This conference is a one-day educational opportunity to provide current issues and trends related to the trauma patient.

Objectives

- Discuss current methods of diagnosis and management of patients with traumatic, complex injuries
- Discuss the pre-hospital and hospital practices routinely given to patients with traumatic injuries
- Identify complications related to the care of the trauma patient

Who Should Attend

Nurses involved in caring for the adult and pediatric trauma patient.

Pre-hospital providers interested in expanding their knowledge of caring for the trauma patient and related topics.

Accreditation

This activity has been submitted to the Maryland Nurses Association for approval to award seven contact hours. The Maryland Nurses Association is accredited as an approver of continuing nursing education by the American Nurses Credentialing Center's Commission on Accreditation.

Pre-hospital Care Providers

Seven hours of trauma credits will be awarded at the completion of the conference.

Conference Location

Clarion Resort Fontainebleau Hotel, 10100 Coastal Highway, Ocean City, Maryland will be the site for Peninsula Regional's 26th Annual Topics in Trauma Conference. The Clarion is Ocean City's finest full-service hotel. The oceanfront hotel with its 40,000-square-foot conference center provides an ideal location for the conference.

Hotel Accommodations

Rooms have been reserved at a special rate of \$135 plus tax for a double until August 23, 2016, so make your arrangements early. Refer to the Peninsula Regional Trauma Conference when making reservations at the Clarion Resort Fontainebleau Hotel, 1-800-638-2100.

Exhibitors

An array of vendors are expected to exhibit. This is an excellent opportunity to network with available resources.



All proceeds will go to Peninsula Regional Medical Center Foundation for Trauma Education.

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www.peninsula.org

EDUCATION

26th Annual PRMC TOPICS IN TRAUMA



September 23, 2016

EXCEPTIONAL HEALTHCARE. EXCEPTIONAL PEOPLE.



2016 PRMC Trauma Conference Schedule

0715-0755 Registration/Breakfast 0755-0800 Opening Remarks 0800-0900 On the Edge of Homicide:

Strangulation as a PreludePamela Holtzinger, RN, MSN, BHA,
CEN, FNA A&P, SANE-A, SANE-P
Coordinator, Forensic Nurse Program

Frederick Memorial Hospital

0900-1000 Unstable Pelvic Injuries, a life or

death emergency with a case

presentation

Timothy S. Arnett, BS, NREMT-P Captain, Anne Arundel County Fire

Department

1000-1015 Break

TRACK 1

1015-1115

Blood Goes Round and Round. Any Variation on this is a Bad Thing.

Kevin Pearl, MD, MS

Clinical Assistant Professor of Emergency Medicine, University of Maryland Emergency Medicine Associate Medical Director, Talbot County Department of Emergency Services

&

David Timms, BS, NRP

Captain, Talbot County Department of Emergency Services

1115-1215

Blunt & Penetrating Chest Trauma Update From Basics to Cutting Edge

Kerry A. Forrestal, MD/MBA, FACEP Peninsula Regional Medical Center

TRACK 2

1015-1115

Halting the Hemorrhage: Pharmacologic Management of Severe Traumatic Bleeds

Patrick Dougherty, PharmD, BCPS

Clinical Pharmacist-Emergency Medicine

Peninsula Regional Medical Center

1115-1215

Five Minute Fire Drills-Effortlessly Preparing Your Institution for Trauma Activations

Cindy Colson, MSN, RN, NRP

Trauma Coordinator, Children's National Medical Center

1215-1315 Lunch

1315-1415 Scoop, STOP, and Run:

Pre-Hospital Trauma Care

Ben Lawner, DO, MS, EMT-P, FACEP Assistant Professor of Emergency Medicine, University of Maryland

School of Medicine

1415-1515 Burn Disaster: Triage and

Treatment in a Burn Mass

Casualty Disaster

Robert E. Guilday, MD, FACS

Associate Director, The Nathan Speare Regional Burn Treatment Center, Crozer-Chester Medical Center

&

Gerarda M. Bozinko, BSN, RN, CCRN

Burn Outreach Program

Coordinator/Clinical Educator, Burn

Center

1515-1530 Break

1530-1630 SIZE MATTERS

Overview of Pediatric Multi-System Trauma Patient

Brion McCutcheon, MD, FACS Trauma Program Medical Director Peninsula Regional Medical Center

Don't forget to complete evaluations



CONFERENCE REGISTRATION FORM

(online registration recommended) www.peninsula.org/events

Name
Address
City/State/Zip
Day Phone
Affiliation/Institution
Position/Title or Specialty
Email_
EMS Provider #/PRMC Employee #
Please choose one:
□ Track 1 □ Track 2
Conference Registration Fees:

□ RN/EMS \$85.00

☐ Students (unlicensed) \$65.00 with student ID; students must register by mail to get discount

Please return completed form, along with payment, by $\mathbf{September\ 16}$ to:

Peninsula Regional Medical Center 100 East Carroll Street, Salisbury, MD 21801

Attn: Trauma Department

Make check payable to: Peninsula Regional Medical Center

For disability accommodations, please contact the trauma office at 410-912-2844.

Registrations are due by September 16, or until the conference is full.

Registration fee includes conference, exhibits, continental breakfast, buffet lunch, afternoon break with snacks, coffee, tea, iced tea, and water.

Handouts will not be available at the conference. Electronic copies will be available online prior to the conference for registrants to download and print themselves. A link to download the handouts will be sent by email to registrants the week prior to the conference.

Please note: Enrollment is **limited**, full registration fee must accompany registration form. Registrations will be accepted in the order received. Telephone registration for the conference will not be accepted. **Confirmation will be sent if e-mail address is provided.**

Refunds: No refunds will be granted.

Maryland Association of Counties Annual Conference





MIEMSS recently exhibited information about its services and departments at the Maryland Association of Counties Annual Conference in Ocean City. Among those that visited the display were Maryland Governor Larry Hogan (left photo, second from left) and EMS Board members Vic Broccolino (left) and Fred Cross (right photo).



Save the Date

Winterfest 2017 - 20th Anniversary

Preconferences

Full conference *January 28 and 29, 2017*

January 26 and 27, 2017

ı İsland, Md.

Tilghman Island, Md.
Detailed information coming soon!

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



Governor Larry Hogan Lt. Governor Boyd Rutherford

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(unless noted otherwise for specific photos)