

For All Emergency Medical Care Providers

Vol. 42, No. 10 September 2016

September is National Disaster Preparedness Month

Data from federal, state, and nonprofit organizations show that only 50% of families have talked about disaster preparation and response; fewer than that have written plans and kits prepared and even fewer have PRACTICED these plans. Take the time now to have a discussion with your family and members of your community about the issue of disaster preparedness, for everyone's health and safety. If you are a provider, consider creating a bulletin board or display for your station or for your next community event that focuses on these "steps for safety."

- 1. Emergency Contact and
 Communication Plan
 Every family member and caregiver
 should have a copy of the family's
 emergency contact list, including local
 contacts as well as those who live
 out-of-state. Local lines may not be
 available during a disaster, and your
 out-of-state contacts will be better
 prepared to keep a list of "who is
 where." Remember that cell phones
 are the first to become overloaded;
 however, texting often goes through
- when voice phone calls cannot. As part of your plan, identify where you would meet your family members away from your home in the event you are separated during an emergency. For more information on creating a contact list, visit www.ready.gov and search under communication plan.
- 2. Disaster Supply Kit
 Each child and adult (and even pets)
 should have a ready-to-go emergency
 kit that is updated at least twice a
 year. The kits should include food,
 water, clothing, and shoes for three
 days. Medications for seven days is
 recommended by most experts. Add
 items that do NOT require electricity
 for entertainment and for comfort,

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A disaster preparedness kit, like that shown here, should include necessities like medication, clothing, and water, but flashlights, radios, and batteries are also a good idea.

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New Licensure System Ready to Launch

MIEMSS is pleased to announce the arrival of its new Licensure System. This updated system is designed to allows users to electronically conduct many functions that previously could only be accomplished by MIEMSS' Licensure and Certification staff. The new system is now available to users to create the individual profiles they need to access the system. Once a profile is created,

providers will immediately be able to access a number of applications:

- Initial provider application (for new providers/students or for current providers to upgrade provider level)
- Renewal application for current providers
- Change of information (eg, address)
- · Extension request

Reciprocity application for providers new to Maryland

- Reinstatement application for lapsed providers
- Request to surrender licensure or certification
- Replacement card request Additional applications, including affiliation requests and ePINS, will be

available this fall.

In order to begin the transition to the Licensure System, MIEMSS is requesting that all EMS providers and administrators access the new system to update their profiles no later than October 15, 2016.

To get started, the new Licensure System can be accessed by visiting www.miemsslicense.com. Informational "how-to" videos are available on MIEMSS' homepage. At a later date, the current provider login system will be closed and the Provider Login button will be linked to the new licensure system at this web address.

Should you need additional assistance or have any questions, please contact Licensure Support at 410-706-7381 or Licensure-Support@miemss.org.

September is National Disaster Preparedness Month

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such as blankets and favorite pillows. Other items you may want to include are radios and flashlights with appropriately-sized batteries and solar-charged battery packs for your phone. Helpful resources for kit preparation are www.ready.gov/kit, www.ready.gov/kit, www.savethechildren.org.

3. Evacuation/Shelter-in-Place Plan
A written family plan that includes
home evacuation routes, safe rooms,
and two meet-up locations is a good
idea. One location should be nearby
and have roads that are safe to walk

for all ages. The second should be further away from the home, such as a relative's house or community center (be sure your out-of-state contact knows both locations). The real KEY to a plan is to practice it at least twice a year: read it aloud with your family and be sure to update contact emails, phone numbers, addresses, and printed maps (remember, GPS devices may not work during actual disasters). You should also practice shutting off your utilities, or at least know how to do so,

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Maryland Governor Declares Fall Prevention Week

Governor Larry Hogan declared September 18- 24, 2016, as Fall Prevention Awareness Week in Maryland. During 2014, statistics show that falls were the leading cause of injury-related emergency room visits for Marylanders aged 65 and over, and were the leading cause of injury-related deaths among Maryland citizens in that age group.

One out of ten falls causes a serious injury, such as a hip fracture or head injury. In addition to the physical and emotional pain, many people need to spend at least a year recovering in a long-term care facility. However, falling is not an inevitable part of aging and fall-based injuries are largely preventable. Through practical lifestyle adjustments, evidence-based programs, and community partnerships, the number of falls among seniors can be reduced substantially.

The Maryland Trauma Quality Improvement Council held educational events across the state to increase awareness and prevention of fall injuries (see article on page 3).



Maryland's Trauma System Holds Fall Prevention and Awareness Events

In recognition of September's Fall Prevention Awareness Week 2016, the Maryland Trauma Quality Improvement Committee (TQIC), made up of representatives from the Maryland Trauma Centers, recently held fall prevention awareness events at Trauma Centers across the state. Governor Larry Hogan declared September 18-24, 2016, as Fall Prevention Awareness Week in Maryland. During 2014, statistics show that falls were the leading cause of injury-related emergency room visits for Marylanders aged 65 and over, and were the leading cause of injury-related deaths among Maryland citizens in that age group. Our Maryland Trauma Centers see the tragic results that occur when individuals experience falls. Each of these Trauma Centers prepared events to bring statewide awareness to fall prevention. Except where noted, events took place on September 22, 2016.

R Adams Cowley Shock Trauma

<u>Center</u> – The R Adams Cowley Shock Trauma Center Prevention Council provided education on fall prevention from 11:00 AM to 2:00 PM in the hospital atrium.

The Johns Hopkins Hospital Adult and

Pediatrics – The Johns Hopkins Hospital Adult and Pediatric Trauma Centers hosted a combined Geriatric and Pediatric Falls Prevention Fair from 11:30 AM to 2:30 PM in the Peterson Courtyard on the main floor of the Sheikh Zayed Tower. The highlight of the day's events were two tai chi demonstrations, shown through research to improve balance and flexibility while reducing fall risk, and a surprise appearance by the American Trauma Society injury prevention mascot, Trauma Roo.

Johns Hopkins Bayview Medical Center partnered with Johns Hopkins Wilmer Eye Institute Trauma Center to host the 2nd Annual Fall Prevention Awareness Fair in the Knott Conference Room from 11:00 AM to 2:00 PM. This was a multidisciplinary health fair that provided information on the many

causes of falls. Jade Leung from the Maryland Department of Health and Mental Hygiene presented Dr. Richard Bennett, the president of the medical center, with the Governor's Fall Prevention Proclamation.

Suburban Hospital - Johns Hopkins

Medicine – Suburban Hospital had a display set up outside the cafeteria between 11:00 AM and 2:00 PM. In addition to the display, a physical therapist from Suburban's "Balancing Act" program was on hand to demonstrate exercises to improve balance and to talk about fall prevention strategies.

Sinai Hospital – A Fall prevention fair, "Ready, Stand, Balance," was held at the Jewish Community Center in Owings Mills from 9:00 AM to 12:00 PM.

Prince George's Hospital Center – An informational table sharing brochures, fall prevention strategies, and activities was set up in the main lobby of the hospital from 10:00 AM to 2:00 PM.

Peninsula Regional Medical Center – On September 21, a table was located in the hospital main lobby with a focus on fall prevention, home safety, and medication safety.

Meritus Medical Center – An informational table was located in the cafeteria. A reunion was held for participants of the "Stepping On" fall prevention class.

Western Maryland Regional Medical

<u>Center</u> – Fall prevention classes at two senior centers were held. Informational tables with posters and literature were located in the Emergency Department and other family waiting areas, as well as in the cafeteria.

<u>Children's National Health System</u> – An interactive, educational handout designed specifically for children was distributed in all outpatient clinics.

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Trauma Roo, representing the American Trauma Society, participated in a tai chi demonstration at The Johns Hopkins Hospital during one of their fall prevention events. Photo courtesy of Czarina Faye Andaya.

Fall Prevention Awareness Week in Maryland

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As part of Fall Prevention Awareness Week in Maryland, the Maryland Trauma System held a number of public events. Peninsula Regional Medical Center, The Johns Hopkins Hospital, the R Adams Cowley Shock Trauma Center, the Johns Hopkins Bayview Trauma Center, and the Johns Hopkins Wilmer Eye Institute showcase their events as part of the statewide effort. Trauma Roo photo courtesy of Czarina Faye Andaya.

MOLST Form Clarification

The Maryland Orders for Life-Sustaining Treatment (MOLST) form contains medical orders for EMS providers and other medical personnel regarding cardiopulmonary resuscitation and other life-sustaining treatment options for a specific patient. It is valid in all health care facilities and programs throughout Maryland. This information is

Announcements

provided to clarify the validity of electronic signatures on the MOLST form and electronic copies of the MOLST form.

A MOLST form requires a signature by a physician, nurse practitioner, or physician assistant in order to be valid. An electronic signature is acceptable. A MOLST form that has been signed electronically may display acopy of the health care provider's signature or may say "Electronically signed by Dr. John Smith," for example.

Under COMAR 10.01.21.03, health care facilities and programs are responsible for maintaining the MOLST form (or a copy of it) with the patient's other active medical orders, and providing the original or a copy of the form to accompany the patient when the patient is transferred or discharged from a facility or program. An electronic copy of a MOLST form is valid, recognizing that not all ambulances/EMS providers are equipped to receive, store, or transmit an electronic copy, and they are not required to do so. If a patient can only provide an electronic copy of the MOLST form, the EMS provider should document the MOLST form and honor it. The sending facility will still be responsible for ensuring that a MOLST form is available to accompany the patient to the receiving

If you have additional questions regarding the MOLST form, please feel free to contact the Office of the Medical Director at 410-706-0880 or ralcorta@miemss.org, or Assistant Attorney General Sarah Sette at 410-706-8514 or sette@miemss.org.

Upcoming Pediatric Education Opportunities

All events will take place at MIEMSS, 653 W. Pratt St., Baltimore, Md.

- October 28, 2016 PEPP Hybrid Course
- November 2, 2016 12:30 PM to 3:30 PM EMSC Research Forum
- November 29, 2016 APLS Hybrid Course

For more information, email pepp@miemss.org



Number of EMS Operational Programs participating: 22 of 24 with the completion of Phase 5. Two more EMSOPs will come on board in fall 2016, and then CARES will be implemented statewide!

Total number of runsheets exported to CARES from January 1 to July 31, 2016: 1,605

This Month's CARES Tip

It is important that the CARES captures every cardiac arrest and that the EMS Operational Program get credit for that cardiac arrest management. If a patient goes into cardiac arrest before care is turned over to the hospital, the provider must record that the patient was in cardiac arrest and fill out the CARES tab on eMEDS®. Within the CARES tab, it is essential that "yes" be entered for the data element "Was resuscitation attempted by 9-1-1 provider or AED shock given prior to arrival of EMS?" This data element must equal "yes" in order for the record to be exported to CARES.

MIEMSS Protocol Clarification Memo

As there were significant revisions in this year's protocols, MIEMSS received several requests for clarification regarding *The 2016 Maryland Medical Protocols for Emergency Medical Services Providers*. MIEMSS and the Office of the Medical Director are appreciative of the thoughtful and constructive comments and clarification requests, and diligently reviewed the protocols to address these issues.

To explain those revisions, the State EMS Medical Director released a clarification memo regarding the protocols on June 14, 2016, which can be found at www.miemss.org/home/documents/memos. The newly updated version of the protocols incorporating those changes is now available on MIEMSS' website. If you have any questions regarding this memo, please contact the Office of the Medical Director at 410-706-0880.

Disciplinary Actions

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

B-2016-757 (Paramedic) – March 8, 2016. For continuing to practice as a Paramedic from May 1, 2015, through May 13, 2015, notwithstanding the fact that the Provider's Maryland Paramedic license had expired: Provider was reprimanded.

B-2016-756 (Paramedic) – March 23, 2016. For continuing to practice as a Paramedic from May 1, 2015, through May 13, 2015, notwithstanding the fact that the Provider's Maryland Paramedic license had expired: Provider was reprimanded.

B-2016-754 (Paramedic) – March 23, 2016. For continuing to practice as a Paramedic from May 1, 2015, through May 13, 2015, notwithstanding the fact that the Provider's Maryland Paramedic license had expired: Provider was reprimanded.

B-2016-760 (EMT) – March 23, 2016. For pleading guilty and receiving probation before judgement for driving or attempting to drive a motor vehicle under the influence: Provider was placed on probation for one year with random alcohol testing at Provider's expense with reports sent to the MIEMSS Compliance Office.

B-2015-732 (EMT) – March 23, 2016. For receiving probation before judgment for driving under the influence: Provider was placed on probation for one year with random alcohol testing at Provider's expense with reports sent to the MIEMSS Compliance Office.

B-2015-746 (EMT) – March 23, 2016. For being found guilty of 2nd degree assault: Provider was placed on probation concurrent with the court-ordered probation with random drug and alcohol testing at Provider's expense with reports sent to the MIEMSS Compliance Office.

B-2016-751 (EMT) (Applicant) – March 23, 2016. For pleading guilty and receiving probation before judgment for driving or attempting to drive a motor vehicle while impaired by alcohol: the certification process was allowed to proceed, and if certified the Applicant shall be placed on probation for one year with random alcohol testing at Applicant's expense with reports sent to the MIEMSS Compliance Office.

B-2016-752 (EMT) – March 23, 2016. For pleading guilty and receiving probation before judgment for driving while impaired by alcohol: Provider was placed on probation for one year with random alcohol testing at Provider's expense with reports sent to the MIEMSS Compliance Office.

B-2016-767 (EMT) – March 31, 2016. For testing positive for alcohol following a post-accident drug and alcohol toxicology screening: Provider was placed on probation for three years with random alcohol testing at Provider's expense with reports sent to the MIEMSS Compliance Office.

B-2016-755 (Paramedic) – April 25, 2016. For continuing to practice as a Paramedic from May 1, 2015, through May 13, 2015, notwithstanding the fact that the Provider's Maryland Paramedic license had expired: Provider was reprimanded.

B-2016-753 (Paramedic) – April 25, 2016. For continuing to practice as a Paramedic from May 1, 2015, through May 13, 2015, notwithstanding the fact that the Provider's Maryland Paramedic license had expired: Provider was reprimanded.

B-2016-768 (EMT) – April 25, 2016. For testing positive for cannabis following a post-injury report drug screening: Provider's EMT certification was suspended pending documentation of successful completion of a rehabilitation program and documentation of negative drug and alcohol test results. Thereafter the Provider was placed on probation for three years with random drug and alcohol testing at Provider's expense with reports sent to the MIEMSS Compliance Office.

B-2016-761 (EMT) (Applicant) – June 27, 2016. For receiving probation before judgment for driving a motor vehicle while under the influence of alcohol per se: certification process was allowed to proceed, and if certified the Applicant shall be placed on probation for one year with random alcohol testing at Applicant's expense with reports sent to the MIEMSS Compliance Office.

B-2016-731 (Paramedic) – June 27, 2016. For substance abuse that caused Provider to miss work assignments without leave and required Provider to attend two rehabilitation

programs: Provider was placed on probation for three years with random alcohol testing at the Provider's expense with reports sent to the MIEMSS Compliance Office.

B-2016-756 (CRT) – June 27, 2016. For continuing to practice as a Cardiac Rescue Technician from May 1, 2014, through September 23, 2015, notwithstanding the fact that the Provider's Maryland CRT license had expired: Provider was reprimanded.

B-2016-762 (Paramedic) – June 27, 2016. For continuing to practice as an EMT from July 1, 2015, through July 13, 2015, notwithstanding the fact that the Provider's Maryland EMT certification had expired and Provider was on probation for driving under the influence: Provider was reprimanded and placed on probation for three years with random alcohol testing during probation at Provider's expense with reports sent to the MIEMSS Compliance Office.

B-2016-782 (EMT) – August 23, 2016. For receiving three years supervised probation before judgment for sexual solicitation of a minor: Provider's certification was revoked.

B-2016-789 (EMT) – August 25, 2016. For pleading guilty to driving while impaired by alcohol: Provider was placed on probation for three years with random alcohol testing at the Provider's expense with results sent to the MIEMSS Compliance Office.

B-2016-776 (EMT) – (by Disposition Agreement) September 13, 2016. For pleading guilty to driving under the influence of alcohol: Provider was placed on probation for remainder of current certification period with results of all drug and alcohol tests Provider is required to take during probation to be sent to the MIEMSS Compliance Office, and Provider is required to continue his current rehabilitation program.

B-2016-775 (EMT) – (by Disposition Agreement) September 13, 2016. For striking a patient who spat on him: Provider is suspended until completion of an anger management course approved by the EMS Board, and then Provider shall be on probation for one year during which quarterly performance reports shall be submitted to the MIEMSS Compliance Office.



MARYLAND'S STARS OF LIFE AWARDS

Each year, the Maryland Institute for Emergency Medical Services Systems celebrates EMS Week by honoring men and women across Maryland who have contributed to the EMS system. We use the term "Stars of Life" because it combines our symbol, the Star of Life, with our shared vision, "the elimination of preventable death and disability from injury or sudden illness." This year, we are again opening the award nomination process to everyone who receives the Maryland EMS News. Awardees will be selected by a statewide committee of career, volunteer, and commercial EMS providers. For further information, call 410-706-3994 or email awards@miemss.org.

The categories of Maryland Star of Life, Maryland EMS Citizen, EMS Provider of the Year, and EMD Provider of the Year relate to specific incidents occurring from January 1, 2016, through December 31, 2016. Multiple awards may be presented.

MARYLAND STAR OF LIFE AWARD

This award may be given to an individual, multiple individuals, or teams on the same incident for an outstanding rescue by EMS personnel.

MARYLAND EMS CITIZEN AWARD

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

EMS PROVIDER OF THE YEAR

For a provider who has made outstanding contributions in the past year to the continuous improvement of emergency medical services in Maryland (for example, in the areas of quality assurance, public or EMS education, prevention, delivery of EMS services, and new technology).

EMD PROVIDER OF THE YEAR

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

OUTSTANDING EMS PROGRAM

For a program that offers an innovative approach to reducing death and disability. The program must be affiliated with an EMS system component, such as a hospital, educational facility, rescue squad, or EMS organization.

LEON W. HAYES AWARD FOR LIFETIME EXCELLENCE IN EMS

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

MARYLAND EMS-CHILDREN (EMS-C) AWARD

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

MARYLAND EMS-GERIATRIC (EMS-G) AWARD

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

MARYLAND'S STARS OF LIFE AWARDS 2017 NOMINATION FORM

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*Address:	(P.O. Box or Street)		
	(1.0. Box of Succe)		
(City)		(State)	(Zip)
*Telephone Nos. (H)	(W)	(Cell)	
Nominee's Level of Certification or	r Licensure (if applicable)		
Professional Affiliation	Telephone	No	
Award Category (Please select only	y one category on this she	et):	
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NOMINATIONS MUST BE RECEIVED AT MIEMSS BY FRIDAY April 7, 2017

* Must be completed!!

Mail to: Jim Brown, MIEMSS, 653 W. Pratt St., Baltimore, MD 21201-1536 FAX to: 410-706-3485 (attn: Jim Brown) or scan and email to awards@miemss.org You can complete and submit this form online at http://www.miemss.org under "What's New"



The Right Care When It Counts Maryland EMSC 2017 Program



The Maryland EMS for Children program is <u>In Search Of</u> children and youth in Maryland who have demonstrated <u>Steps to Take in an Emergency</u> or <u>Ways to be Better Prepared for an emergency</u>. Actions taking place January 1, 2016, through December 31, 2016, are eligible for nomination. We will be recognizing children and youth who acted so that others would receive "The Right Care When It Counts." Each nominee will receive a patch and certificate and be eligible for a state award at a ceremony during EMS Week 2016. Questions? Email awards@miemss.org

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

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

NOMINATIONS may be sent in at any time during the 2016 year. DEADLINE: Must be received at MIEMSS by FRIDAY - April 7, 2017. Mail to: Jim Brown, MIEMSS, 653 W. Pratt St., Baltimore, MD 21201-1536 FAX to: 410-706-3485 (attn: Jim Brown) or scan and email to awards@miemss.org



The Right Care When It Counts Maryland EMSC 2017 Program



Contact information for th Name:				
Best Phone Number(s) to r Address:	each you:			
Email:	Fax:			
Child or y	outh who acted so "The Right Care			
Child/ Youth's Name:		Age:	Gender: _	
Parent's Name:				
Parent's Name: Address:				
Phone(s): (H) Email:	(W)	(ce		
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Best method to reach this	person:			
Primary language spoken at	t home:			
PLEASE indicate if you have spo			COMMENDED) _	YESNO
Description of event/incid	lent and the action to	aken		
 PLEASE include any printed 	materials about this nom	ination and if the chil	d/youth has been re	ecognized locally

NOMINATIONS may be sent in at any time during the 2016 year. DEADLINE: Must be received at MIEMSS by FRIDAY - April 7, 2017. Mail to: Jim Brown, MIEMSS, 653 W. Pratt St., Baltimore, MD 21201-1536 FAX to: 410-706-3485 (attn: Jim Brown) or scan and email to awards@miemss.org

SAVE THE DATE!

This January come to
Tilghman Island for all your
EMS Continuing Education
needs at



and help celebrate the **20**th Anniversary of the Conference!

Preconferences (including EMT Skills class)

January 26 and 27, 2017

Full Conference

January 28 and 29, 2017

More information may be found on Facebook at Winterfest EMS

September is National Disaster Preparedness Month

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- since electricity, gas, and water lines might break in high winds, floods, or earthquakes. Have one place that all important documents are kept, but that can also be easily carried. Remember to include your pets in your plans. Additional information is available at www.ready.gov/make-a-plan and www.ready.gov/make-
- 4. Health/Special Needs
 Be sure your emergency plan meets
 the needs of everyone in the family,
 including children, seniors, and those
 with disabilities or special access/
 functional needs. Your family may be
 the first contact for assisting elderly
 neighbors or those with special needs.
 Discuss the plan with all family
 members and in-home caregivers.

- Everyone should know what to do—and how to assist others—in an emergency.
- 5. Knowing Risks for Common Disasters in Your Area Maryland is at risk for a number of different types of disasters: earthquakes, floods, hurricanes, and even "snowmageddons," to name a few. Each type of natural disaster has specific responses and items to add to your preparedness kit. Become familiar with these and others by visiting www.ready.org or mema.maryland.gov. Your supplies for shelter-in-place and evacuation are also slightly different for each type. Consider creating index card checklists depending on the time of year and type of disaster. Maryland and its surrounding areas are also, unfortunately, at higher risk for manmade disasters, but every community needs to be prepared.
- 6. Knowledge of CPR and First Aid The more members of your family who are first aid, CPR, and automated external defibrillator (AED) trained. the better prepared your family will be to handle emergencies. If you want to learn to respond and support your community (and your family has enough coverage to take care of those with special needs), consider taking a Community Emergency Response Teams (CERT) course (www.fema. gov/community-emergency-responseteams). The CERT teams provide assistance at mass gatherings and during disasters.

Many thanks to MIEMSS' EMS for Children Program and its Family Advisory Network (FAN) Council for providing these tips for family safety.

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



Governor Larry Hogan Lt. Governor Boyd Rutherford

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