

For All Emergency Medical Care Providers

Vol. 43, No. 1 January 2017

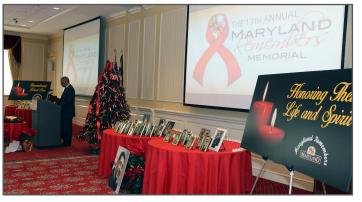


Maryland Medical Protocols and EMS Update for 2017

The printed versions of the 2017 Maryland Medical Protocols for EMS Providers are scheduled to be available to providers in early spring. This year, the full protocol book (three-hole punched for a binder), a set of replacement pages, the smaller spiral-bound full protocols, and the pocket protocols will all be printed. One pocket protocol will be distributed free of charge to each Maryland provider. The full binder-sized protocol, set of replacement pages, and spiral version, as well as additional pocket protocols, will be available for purchase from MIEMSS' Office of Licensure and Certification.

Providers will also soon be able to enroll in the EMS Update for the 2017 Maryland Medical Protocols for EMS Providers through the Online Training Center (www.emsonlinetraining.org). Once the training is online, DVD versions may be requested through the MIEMSS Regional Offices for use at company-level drills. Remember, all Maryland EMS providers must complete the 2017 Protocol Update matching their level of certification or licensure before July 1, 2017.





At the 13th Annual Maryland Remembers Memorial program in Annapolis on December 15, 2016, Maryland Lieutenant Governor Boyd K. Rutherford (left photo, seated far right) joined transportation officials, law enforcement personnel, and highway safety advocates in remembering and honoring victims who have lost their lives in impaired driving crashes. Families of victims killed in impaired driving crashes were invited to display photos of their loved ones at the memorial event (right photo). On average, in the month of December, 13 people are killed and 280 are injured in impaired driving crashes in Maryland. Be a role model for your friends, family, and others by committing to safe and sober driving! It's not worth the risk.

ALS Renewal Application Available Electronically on February 1

Providers due to renew their Maryland CRT or paramedic certification by April 30, 2017, will see an Application for Renewal—CRT or Application for Renewal—Paramedic on the Application page of the MIEMSS Licensure System starting February 1, 2017. You can access the system through the Provider Login on www.miemss.org or directly at www.miemss.org or directly at www.miemsslicense.com. We highly encourage providers to use this online process for renewal. It's easy and fast! Turnaround time for renewals done online is much faster than those sent by mail. To ensure timely processing, renewal requests must be submitted by April 15, 2017. Contact the Office of Licensure and Certification at 410-706-3666 or 1-800-762-7157 if you need assistance.

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Tips from the NSC for Safe Winter Driving

The National Safety Council (NSC) has compiled a list of tips for drivers who need to venture out when the winter weather gets severe. Of course, if you do not need to be on the road during snow, sleet, or icy conditions, stay home! As EMS providers, that is not always possible; so please be prepared and be safe by following these tips.

Prepare yo	bur car for winter. Start with a checkup that includes:		Exterior windshield cleaner
	Checking the ignition, brakes, wiring, hoses, and fan belts		Ice scraper and snow brush
	Changing and adjusting the spark plugs		Wooden stick matches in a waterproof container
	Checking the air, fuel, and emission filters, and the PCV		Scissors and string/cord
	valve		Non-perishable, high-energy foods like unsalted canned
	Inspecting the distributor		nuts, dried fruits, and hard candy
	Checking the battery		A gallon of water
	Checking the tires for air, sidewall wear, and tread depth		Blankets and warm clothes, such as heavy woolen mittens,
	Checking the antifreeze level and the freeze line		socks, and a cap
Make sure	you stock necessary equipment and supplies. In your trunk,	If you beco	ome stranded:
you should			Do not leave your car unless you know exactly where you
	1 1 5 1 7 7 1 51		are, how far it is to possible help, and are certain you will
	jack		improve your situation.
	A shovel		To attract attention, light two flares and place one at each
	Jumper cables		end of the car a safe distance away. Hang a brightly colored
	Tow and tire chains		cloth from your antenna.
	A bag of salt or cat litter		If you are sure the car's exhaust pipe is not blocked, run
	Tool kit		the engine and heater for about 10 minutes every hour or so
			depending upon the amount of gas in the tank.
-	urvival kit" inside the car in case you get stranded:		To protect yourself from frostbite and hypothermia, use the
	6 6		woolen items and blankets to keep warm.
	Reflective triangles and brightly-colored cloth		Keep at least one window open slightly. Heavy snow and
	Compass		ice can seal a car shut.
	First aid kit		Eat a hard candy to keep your mouth moist.



Q. Before my EMT certification is due to expire, do I need to put in an application in MIEMSS' new provider Licensure System?

A. The paper "bubble sheet" student application has been replaced with the electronic Application for Renewal–EMT available in our new Licensure System (www.miemsslicense.com). Even if you completed a paper form when you took your last refresher or skills course, we are asking that you complete the electronic application to ensure your renewal is processed quickly. Historically, EMR and EMT providers have completed their certification renewal applications at the time they take their refresher or skills course. That practice will continue, but it will be done electronically within the new Licensure System. Most college-based programs moved to the electronic application process in fall 2016. As of January 1, 2017, all EMS Education Programs are directing students to the MIEMSS Licensure System to complete their applications online. We are encouraging all providers to access the MIEMSS Licensure System to update their provider profile data and get accustomed to the system. If you have any questions, contact the Office of Licensure and Certification at 1-800-762-7157 or 410-706-3666.

Ambulances, Medicare, and Co-Pays: Recent Changes in Law

Ambulance providers owned and operated by a state or a political subdivision of a state, such as a county or fire department, are generally exempt under Medicare rules from being required to collect co-pays.¹

However, a waiver of co-pays could still be a violation of the federal anti-kickback statute. A recent regulatory change has resolved that problem.

Effective January 7, 2017, the Office of the Inspector General by regulation has

exempted from the anti-kickback statute an ambulance provider owned or operated by a state or a political subdivision that waives Medicare co-payments, provided:

- The ambulance is engaged in an emergency response at the ALS or BLS level:
- 2. The ambulance provider offers the reduction to all of its residents or to all individuals transported; and
- 3. The ambulance provider or supplier

does not later claim the amount reduced or waived as a bad debt for payment purposes under a Federal health care program or otherwise shift the burden of the reduction or waiver onto a Federal health care program, other payers, or individuals.

42 CFR § 1001.952(k)(4).

¹ The Centers for Medicare & Medicaid Services ("CMS") Medicare Benefit Policy Manual ("BPM") Chapter 16, section 50.3.1 provides that: A [state or local government] facility which reduces or waives its charges for patients unable to pay, or charges patients only to the extent of their Medicare and other health insurance coverage, is not viewed as furnishing free services and may therefore receive program payment.

Pub. 100-02 BPM Chap. 16, section 50.3.1 at: http://www.cms.hhs.gov/manuals/Downloads/ bp102c16.pdf (formerly Medicare Carrier Manual section 2309.4 and Medicare Intermediary Manual section 3153.3A).



All EMS Operational Programs are now on board, and CARES is statewide!

Total number of runsheets exported to CARES from January 1 to November 30, 2016: 3,908

This Month's CARES Tip

Who Initiated CPR? (CARES-23) and Who First Defibrillated Patient? (CARES-28)

These data elements have six choices:

When completing the data elements, answer as follows:

- Lay Person
- Lay Person Family Member
- Lay Person Medical Provider
- · Law Enforcement
- Non-Transporting Fire/EMS Unit
- EMS (Transporting Unit Personnel)

If there is a bystander at the scene who started CPR or first defibrillated the patient, choose "Lay Person."

If there is someone at the scene who is related to the patient and who started CPR or first defibrillated the patient, choose "Lay Person Family Member." However, if the lay person family member is also a medical provider, choose "Lay Person Medical Provider."

If the patient had CPR initiated or was first defibrillated by a medical provider (EMT, nurse, physician, etc.) who was not part of the organized response, but just happened to be at the scene, choose "Lay Person Medical Provider."

If law enforcement personnel were part of the organized response and started CPR or first defibrillated the patient, choose "Law Enforcement."

If a dispatched EMS/fire first responder, who was not part of the unit that transported the patient or declared the patient dead at the scene, initiated CPR or first defibrillated the patient, choose "Non-Transporting Fire/EMS Unit."

If the EMS transporting unit (or the unit that declared the patient dead at scene) initiated CPR or first defibrillated the patient, choose "EMS (Transporting Unit Personnel)."

— 2017 –

EMS and Prevention Educational Conferences

Miltenberger Emergency Services Seminar

March 10, 2017 (Pre-conference) March 11, 2017 (Full Conference) Rocky Gap Conference Center Flintstone, Maryland

Public Fire and Life Safety Educator Seminar

March 25, 2017 MFRI Headquarters College Park, Maryland

EMS Care 2017

April 26–30, 2017 Ocean City, Maryland

Point/Counterpoint 2017

May 11–12, 2017 Baltimore, Maryland

Safe Kids Maryland and the EMS for Children's Family Advisory Network











January 2017 Safety Message: CO Poisoning

Carbon monoxide, or CO, is a gas that has no color, no odor, and makes no noise when it leaks. The Centers for Disease Control and Prevention (CDC) reports that at least 430 people die in the United States each year from unintentional CO poisoning, and approximately 50,000 people in the country visit the emergency department each year due to CO exposure or poisoning.

Maryland EMS for Children has posted two online learning modules for EMS providers (with MIEMSS-approved continuing education) that review the causes, dangers, and treatment recommendations related to CO. Please visit www.emsonlinetraining.org to enroll:

- The Silent Killer reviews the mechanisms of CO poisoning in children. Through case reviews, providers will gain a working knowledge of the recognition, evaluation, and treatment of CO poisoning.
- Carbon Monoxide Hazards and Response discusses the hazards and prevalence of CO poisoning, the process to respond to a CO incident, and how to appropriately treat patients.

Both the CDC and Safe Kids Worldwide have simple, specific safety measures that every family should review.

- Place CO detectors on every level of your home, especially near sleeping areas.
- Change the batteries in your CO detector every six months and test them monthly (along with your smoke alarms).
- Service your heating system; water heater; and any other gas, oil, or coal burning appliances every year.
- ✓ If the detector sounds, leave your home immediately, and then call 9-1-1.
- Seek prompt medical attention if you suspect CO poisoning and are feeling dizzy, light-headed, or nauseated.

- ✓ Remember the DON'Ts:
 - Mon't use a generator, charcoal grill, camp stove, or other gasoline or charcoal-burning device inside your home, basement, or garage. If used outside, be sure it is far away from a window.
- Don't run a car or truck inside a garage attached to your house, even if you leave the door open.
- **Don't** burn anything in a stove or fireplace that isn't vented.
- **M** Don't heat your house with a gas oven.



Upcoming Pediatric Education Opportunities

• February 18, 2017 (8 AM to 5 PM)

PEPP-3 Hybrid Course for BLS and ALS Providers

EMS continuing education approved by MIEMSS
Location: Lexington Park VRS, St. Mary's County, Maryland
REGISTRATION: http://bit.ly/2hgnxwU

• March 10, 2017 (8 AM to 5 PM)

Pediatric Vascular Access Workshop

Friday Preconference at Miltenberger Emergency Services Seminar

EMS and RN continuing education approved

Location: Allegany College of Maryland, Cumberland

REGISTRATION: Through the Miltenberger Conference at www.miltenbergerseminar.com

• March 25, 2017 (8:30 AM to 3:30 PM)

Public Educator and Life Safety Seminar

EMS continuing education approved by MIEMSS Location: MFRI Headquarters, College Park, Maryland

REGISTRATION: Available soon through www.mfri.org/seminars

• April 27, 2017 (8 AM to 5 PM)

When the Stork Dials 9-1-1 Workshop

Thursday Preconference at EMS Care Conference

EMS continuing education approved by MIEMSS

Location: Ocean City, Maryland

REGISTRATION: Available soon through the EMS Care Conference

• April 27-28, 2017 (8 AM to 5 PM)

PALS Course (Taught by UMMS Upper Chesapeake Medical Center)

Two-Day Preconference at EMS Care Conference

EMS continuing education approved by MIEMSS

Location: Ocean City, Maryland

REGISTRATION: Available soon through the EMS Care Conference

For more information, email pepp@miemss.org



Miltenberger Emergency Services Seminar

March 10 & 11, 2017 Rocky Gap Casino Resort, Flintstone, MD

Presented by

The Maryland Institute for Emergency Medical Services Systems, the Maryland Fire and Rescue Institute, the Region I Emergency Services Education Council, Garrett College, and Allegany College of Maryland

The fifteenth Miltenberger Emergency Services Seminar will be held on March 10 & 11 at Rocky Gap Casino Resort in Flintstone, Maryland. Please join us and participate in the excellent educational opportunities this program offers, along with the chance to enjoy the relaxing atmosphere in the mountains of Western Maryland.

The Miltenberger Emergency Services Seminar is designed to meet the continuing education needs of emergency services providers in Western Maryland and the surrounding area. The large diversity of workshops offered at this year's seminar include EMS, Nursing, Fire, and Dispatch. A strong inter-working relationship among public safety and health care providers is the key to the successful outcome of any incident.

The program this year will feature a variety of pre-seminar workshops during the day and evening on Friday and the all-day seminar on Saturday. Some classroom spaces are limited in size, so please register early.



The keynote speaker for Saturday's seminar is Dr. Alasdair K. Conn, Chief of the Massachusetts General Hospital Emergency Department at the time of the Marathon bombings. He will be presenting *Terrorist Bombings in Boston! The Emergency Response and Lessons Learned*.

Registration Information

Pre-registration is <u>required</u> and must be received via our new website, *www.miltenbergerseminar.com*, or at the MIEMSS Region I Office by February 27, 2017. Everyone registering by this date for the daylong classes on Friday or the seminar on Saturday will receive a t-shirt. Please register early to ensure yourself a place in this outstanding program. Registration confirmation notices will be mailed. If the confirmation notice has not been received by March 6, 2017, it is the responsibility of the attendee to verify that their registration has been received. Late registration will be accepted on a space available basis.

Cancellations

Cancellation notices submitted in writing to the MIEMSS Region I Office and postmarked no later than March 2, 2017, will be eligible for a full refund. If a registrant is unable to attend, another person may be substituted with a letter from the original registrant or sponsoring agency authorizing the substitution. No refunds will be issued for cancellations after March 2, 2017.

Fees

All daylong workshops on Friday are \$35 and the Friday evening presentation will be \$15. There is a \$75 registration fee for the Saturday seminar and it covers all activities, including continental

breakfast, breaks, luncheon, and printed materials. Payment may be made in the form of check or by credit card; there is a \$30 fee for all returned checks. If your company or agency would like to be invoiced for the program, please contact the MIEMSS Region I Office at 301-895-5934 or 301-746-8636. Payment information must accompany registration. This affordable registration fee is possible due to the generous support of the Western Maryland Health System, Garrett Regional Medical Center, R Adams Cowley Shock Trauma Center, Maryland Emergency Number Systems Board, Emergency Medical Services for Children, MIEMSS, and MFRI.

Continuing Education Credits

All workshops and lectures are approved for continuing education credits by MIEMSS. Conference materials will also be available to request continuing education credits from neighboring jurisdictions and other organizations.

Nursing Contact Hours

Western Maryland Health System (WMHS) is approved (PW 13-03-506-1001) as a provider of continuing nursing education by the Maryland Nurses Association, an accredited approver by the American Nurses Credentialing Center's Commission on Accreditation. WVBRN provider registration number is WV96-0009RN. Friday's "Pediatric Vascular Access Workshop" and "Hot Topics in Ischemic Stroke/Shock—The Killing Force" each provide 7 contact hours. The Saturday seminar provides contact hours as noted below. To receive nursing contact hours, participants are required to attend the entire session and submit the course evaluation.

Courses Eligible for Nursing Credit

Friday: Pediatric Vascular Access Workshop (7Hrs)

Ischemic Stroke/Shock-The Killing Force (7Hrs)

Saturday: Terrorist Bombings in Boston! (1.25Hrs)

Infants: Sick or Not Sick (1.25Hrs)

Saving the Exsanguinating Trauma Patient (1.25Hrs)

Shock – Why Vital Signs are Vital (1.25Hrs)

Megacode Simulator (1.25Hrs)

Pediatric Ventricular Assist Devices (1.25Hrs) Medical Response to Human Violence (1.25Hrs)

Trauma Case Review (1.25Hrs)

NAS – Neonatal Abstinence Syndrome (1.25Hrs

limited to ED, Nursery, OB)

Schedule Changes and Right to Cancel

Every effort has been made to ensure accurate information in this brochure. However, due to unforeseen circumstances, it may become necessary to make changes to the schedule. The Miltenberger Emergency Services Seminar Planning Committee reserves the right to cancel or make changes in course offerings, presenters, and session times without prior notice to attendees.



Hotel Accommodations

A **limited** number of rooms have been reserved at Rocky Gap Casino Resort at special discounted rates for Miltenberger Emergency Services Seminar participants. These special prices can be guaranteed **ONLY** until Tuesday, February 7, 2017. After this date, the availability of discounted rooms cannot be guaranteed. The room rates are \$139 per night plus tax. All room rates are subject to state and county taxes. **To obtain these discounted rates,**



please identify yourself as a participant of the Miltenberger Emergency Services Seminar. Please reserve your room early by calling Rocky Gap Resort at 301-784-8400 or 1-800-724-0828.

Directions to Rocky Gap Casino Resort

Take I-68 West to Rocky Gap State Park, Exit 50. Make a right off the exit. The resort is visible from the road.

Take I-68 East to Rocky Gap State Park, Exit 50. Make a left at the stop sign and cross over the bridge. The resort is visible from the road.

Directions to Allegany College of Maryland's Continuing Education Center

Take I-68 West to Exit 44, Willowbrook Road. Turn left at traffic light onto Willowbrook Road and continue for approximately 1 mile. Take I-68 East to Exit 44, Willowbrook Road. Turn right at the bottom of the ramp onto Willowbrook Road, continue for approximately 1 mile.

Directions to MFRI - Western Maryland Regional Training Center

Take I-68 West to Exit 42, US 220 S. toward Keyser, WV, keep left on ramp, turn left on US 220 S., continue approximately 3.7 miles, turn left onto Arnel Ave, then right on Hazmat Drive.

Take I-68 East to Exit 42, US 220 S. toward Keyser, WV, turn right on US 220 S., continue approximately 3.7 miles, turn left onto Arnel Ave., then right on Hazmat Drive.

Special Accommodations

If you require special accommodations, please provide information about your requirements when you register.

Additional Information

You may wish to bring a sweater for your own comfort. For additional information, please contact the MIEMSS Region I Office at 301-895-5934 or 301-746-8636. You may also want to visit Rocky Gap's website at www.rockygapresort.com to check out the resort and other activities available during your stay.



Miltenberger Pre-Conference Programs at Allegany College of Maryland and Rocky Gap Resort on March 10, 2017

FRIDAY; 8:30 a.m. – 4:30 p.m. at ALLEGANY COLLEGE OF MARYLAND'S CONTINUING EDUCATION CENTER

1) Pediatric Vascular Access Workshop

Sponsored by the EMSC Partnership for Children Grant with support from the pediatric specialty centers in Maryland.

This workshop is designed to provide technical updates on vascular access in children for advanced health care providers (EMS and RN). Through didactic sessions, video demonstration, and hands-on practice, participants will gain experience with IV, IO, and implanted vascular access. When to, how to, and most importantly, why to start medication and fluid administration for children in emergent situations will be discussed in both case examples and simulation.

Full Day 7-hour workshop developed by EMSC. **HANDS-ON/LIMITED NUMBER OF PARTICIPANTS; REGISTER EARLY**. (7 Hrs total; 3.5 Hrs Cat A/M and 3.5 Hrs Cat B/T) **Lunch will be provided.**

2) Dispatch Course: Spirit to Serve

Presented by Public Safety Training Consultants

Service and staff empowerment are key to success. How do those of us in the 9-1-1 and emergency communications profession encourage people to have a spirit to serve? For protocol driven agencies using products like Priority Dispatch (IAED) and other systems, how do you stay protocol compliant and still offer sincere and vital customer service? We will show ways of taking the "robotic voice" out of any call taker and blend pre-arrival compliance with spectacular service delivery! Students will walk away with positive examples of a spirit to serve.

We will demonstrate ideas of employee driven service while maintaining information gathering, professionalism, policy compliance, complacency avoidance, risk management and instilling true service while they listen to the caller rather than just hear the caller. This class is tailor made for anyone from line-level to management. Everyone will walk away with tools you can use and ideas to improve quality assurance scores. An additional segment of the class is a thought process of a "let's move forward" mantra rather than bad habits that perpetuate bad service. We will show students effective ways of managing their issues of call complacency or repetitive call dismissal. (7 Hrs BLS: L, ALS: 2) **Lunch will be provided.**

3) Stroke / Shock

Hot Topics in Ischemic Stroke

Presenter: Barbara Cysyk, BSN, RN, SCRN, Manager, University of Maryland Upper Chesapeake Health Stroke Center
Recent updates to guidelines are prompting stroke centers to redesign their processes and protocols. Topics will include prehospital recognition and notification; stroke mimics; the changing criteria and faster treatment of IV tPA; criteria for endovascular treatment (clot retriever); and management of glucose, temperature, and hydration in acute stroke.

(3.5 Hrs BLS: M, ALS: A)

Shock - The Killing Force

Presenters: Juan Arrisueno, MD, WMHS Trauma Services Chair; Birat Dhungel, MD, WMHS Trauma Surgery; William May, MD, WMHS Emergency Medicine

Shock is a life-threatening condition of circulatory failure. The effects of shock are initially reversible, but rapidly become irreversible, resulting in multi-organ failure (MOF) and death. When a patient presents with undifferentiated shock, it is important that the clinician immediately initiate therapy while rapidly identifying the etiology so that definitive therapy can be administered to reverse shock and prevent MOF and death.

The definition, classification, etiology, and pathophysiology of shock are discussed in this review. The clinical presentation and diagnostic evaluation of undifferentiated shock and the evaluation of patients with specific forms of shock will be discussed by three physicians. (3.5 Hrs BLS: M, ALS: A)

Lunch will be provided.

4) Community Paramedicine / MICH / Active Assailant and Safe Zones

Mobile Integrated Community Health Program: A Team Approach to Population Health

Presenter: Sgt. Jared Smith, MA, NRP, MICH EMS Manager, Queen Anne's County Department of Emergency Services

The Mobile Integrated Community Health Program utilizes an innovative approach that allows EMS to work with an array of health care and social service partners to improve the health of the community. Queen Anne's County has completed a pilot program that has worked well to combine efforts with the Department of Health and local hospitals. This presentation will discuss how the program works and how it is benefiting stakeholders as well as the citizens of Queen Anne's County.

Community Paramedicine: The Eagle County, Colorado Program

Presenter: Eagle County Paramedic Services

EMS resources that are often underutilized have been filling a void for an underserved rural population in Eagle County, Colorado for the last eight years. In this session, officials from Eagle County Paramedic Services will present their expanded-role community paramedicine program, discuss the specialized training requirements paramedics must undergo, and review lessons learned over their years of service. Join us as they share their experiences of the development and implementation of one of the longest-running community paramedic programs in the country.

(3.5 Hrs BLS: M, ALS: A)

Active Assailant and Safe Zones

Presenter: Cpl. Travis Nelson, Liaison Officer, Maryland State Police, MD Emergency Management Agency, State Emergency Operations Center

This course will review the interdisciplinary response for fire, EMS and emergency management to an active assailant or potentially volatile incident. It will review security and safety concerns on scene and how to quickly access patients while the incident is still evolving. The course will examine methods on how to integrate the police and EMS/fire initial response and explore equipment options. Discussion topics will also include appropriate personal protective equipment considerations and differentiate cold, warm and hot zone operations.

(3.5 Hrs BLS: L, ALS: 2)

Lunch will be provided.

FRIDAY EVENING; 6:00 p.m. – 9:00 p.m. at ROCKY GAP CASINO RESORT

5) "Hey, Let's Be Careful Out There."

Presenter: Sgt. Alexander Kelly, MSP

The sergeant's words of advice from long ago on Hill Street Blues still apply very much today. This course will provide fire and EMS with recommendations for enhancing provider/rescuer safety in the risky environments in which we most frequently operate. Vehicle crash scenes, behavioral emergencies, and substance abuse/manufacturing will be featured. We will maintain a light outlook on a dark subject. Lively discussion and questions a must. (3 Hrs BLS: L, ALS: 2)

SATURDAY- MARCH 11, 2017

6:45 a.m.	Registration	·	
8:00 a.m.	Welcome/State of the State		
8:30 a.m. General Session	Terrorist Bombings in Boston! The Emerger During the terror filled bombing incident at the detail the emergency medical response and what	recy Response and Lessons Learned. Presenter: finish line of the Boston Marathon in 2013, con at worked and what did not work in the early materials and its strategies to enhance survival in a finish.	trolled chaos ensued. Dr. Conn will describe in nagement of the disaster victims. Dr. Conn will
9:45	Break		
10:00 a.m. Breakout Session 1	NURSING Infants: Sick or Not Sick, Always Small, and Sometimes Scary Presenter: Linda Arapian, RN, MS, CEN, CPEN, EMT, Pediatric Nurse Clinician, Montgomery County Fire and Rescue This presentation will address the new term – BRUE: Brief Resolved Unexplained Events (Formerly Apparent Life-Threatening Events). Any emergency call with an infant needs to be handled with care. When an infant under one year has experienced a sudden and brief change in their A, B, C and D's – a careful assessment is needed. There are also two patients (or three); clear communication and guidance are needed as they prepare for transport to a hospital for evaluation. (1.5 Hrs BLS:M, ALS:A)	ALS B Saving the Exsanguinating Trauma Patient: From CPR to EPR Presenter: Samuel A. Tisherman, MD, FACS, FCCM, Professor, Department of Surgery, Program in Trauma, University of Maryland School of Medicine For trauma patients who suffer a cardiac arrest from exsanguinating hemorrhage, the chances for survival are less than 10%. Surgeons can't stop the bleeding before it's too late. Emergency Preservation and Resuscitation (EPR) using very deep levels of hypothermia might decrease metabolic demands during cardiac arrest to buy time for the surgeons to control the hemorrhage. (1.5 Hrs BLS:M, ALS:A)	BLS Bleeding Control (BCon)/Stop the Bleed Presenters: Wayne B. Tiemersma, NRP, EMS Chief, Garrett County Department of Public Safety; Elizabeth Wooster, PhD, BSN, MsEM, CEN, NRP, WMHS, Trauma Program Manager Our nation has a history of learning hard lessons from wartime experiences; hemorrhage control is no different. The Hartford Consensus directs that all responders have the education and equipment for hemorrhage control and strongly endorses civilian bystanders to act as immediate responders. Immediate responders represent a foundational element of the ability of the United States to respond to these events, and are a critical component in our ability to build national resilience.
11:15	Drawing		
11:30	Buffet Lunch		
12:15	Lunch Over		
12:30 p.m. Breakout Session 2	Presenter: William May, MD, WMHS Emergency Medicine Early recognition and treatment of shock patients foster a decrease in multi-organ failure or death. Dr. May will discuss the major causes of shock as well as the significant signs that a patient may be in shock. Participants will discuss the determining assessment factors in recognizing the shock patient including a review of treatment options to show how positive patient outcomes are gained through early intervention and recognition. (1.5 Hrs BLS:M, ALS:A)	Presenters: Crissy Martz, RN, NRP, WMHS; Doug Beitzel, NRP, Garrett College MEGACODEthe dreaded experience that occurs every time you take the ACLS course. It no longer has to elicit fear and dread. This hand-on course will work megacodes on a high-fidelity patient simulator, which will record quality CPR, airway management, drug administration, etc. All events are videotaped and the simulator timestamps events as they take place. Put your megacode skills to the test, and then learn during a stress-free debrief session following each megacode simulation. (1.5 Hrs BLS:M, ALS:A)	Immediate responders must be empowered to act, to intervene, and to assist. It is no longer sufficient to "see something, say something." Immediate responders must now "see something, do something." This course teaches the basic life-saving medical interventions, including bleeding control with a tourniquet, bleeding control with gauze packs or topical hemostatic agents, and opening an airway to allow a casualty to breathe. Anyone may one day find themselves in a "see something, do something" situation. (3 Hrs BLS:T, ALS:B)
2:00 p.m. Breakout Session 3	Pediatric Ventricular Assist Devices (VAD) – Technology and Tender Care Required Presenter: Gary Oldenburg, MS, RRT-NPS, ECMO and VAD Program Manager, Children's National Health System Children have been receiving both right and left VADs for more than five years and they are taking them to school, the mall, and the ball park. Types of heart disease that benefit from VADs, both as a bridge toward transplant and as destination therapy, will be discussed. Just as children come in many sizes—so do the assist devices. Come learn about the children, the devices, and the needs in transport to the hospital. (1.5 Hrs BLS:M, ALS:A)	County, Colorado Program EMS resources that are often underutilized have been filling a void for an underserved rural population in Eagle County, Colorado for the last eight years. In this session, officials from Eagle County Paramedic Services will present their expanded-role community paramedicine program, discuss the specialized training requirements paramedics must undergo, and review lessons learned over their years of service. Join us as they share their experiences of the development and implementation of one of the longest running community paramedic programs in the country. (1.5 Hrs BLS:M ALS:A)	Presenter: Laura S. Buchanan, Assistant Professor of Surgery, R Adams Cowley Shock Trauma Center, University of Maryland The elderly are the largest growing segment of our population. Our senior citizens have unique issues related to their care, especially in emergency traumatic events. This session will review the effects of trauma on aging adults, and the effect of an aging population on trauma care and the emergency trauma systems that must handle this ever-expanding group of patients. (1.5 Hrs BLS:T, ALS:B)
3:15	Break	O Mahila Internated Committee III	D.T. Comp. Don't
3:30 p.m. Breakout Session 4	Medical Response to Human Violence Cases Presenter: Debra A. Wolford, RN, FNE, A/P, DV/FNE/Forensic Program Coordinator, Western Maryland Regional Medical Center This course will cover current topics and guidelines when responding to and caring for victims of human violence. We will discuss child abuse, intimate partner violence, sexual assault, and strangulation cases, and how your first TOUCH matters every time. Human violence is affecting all of us. (1.5 Hrs BLS:T, ALS:B)	Mobile Integrated Community Health Program: A Team Approach to Population Health Presenter: Sgt. Jared Smith, MA, NRP, MICH EMS Manager, Queen Anne's DES This program utilizes an innovative approach that allows EMS to work with an array of health care and social service partners to improve the health of the community. Queen Anne's County has completed a pilot program that worked well to combine efforts with the Department of Health and local hospitals. How the program works and benefits stakeholders and county citizens will be	Presenter: Elizabeth Wooster PhD, BSN, MS, MsEM, CEN, CPEN, CTRN, CFRN, CNRN, NRP, Trauma Program Manager, WMHS Trauma / Emergency Services This is a compelling story of a patient's journey through the trauma system. The program will focus on prehospital care, hospital care, and integration back into the routine of life. The camaraderie of all the providers and emergency medical system in place make all the difference in this patient's outcome. (1.5 Hrs BLS:T, ALS:A)
4.45	Considerate Forder	discussed. (1.5 Hrs BLS:M, ALS:A)	
4:45	Seminar Ends		

SATURDAY- MARCH 11, 2017

6:45 a.m.	Registration		
8:00 a.m.	Welcome/State of the State		
8:30 a.m.	During the terror filled bombing incident at the detail the emergency medical response and what	recy Response and Lessons Learned. Presenter: finish line of the Boston Marathon in 2013, con at worked and what did not work in the early materials and its strategies to enhance survival in a finish line of the property o	trolled chaos ensued. Dr. Conn will describe in nagement of the disaster victims. Dr. Conn will
9:45	Break		
	EMS	DISPATCH	FIRE
10:00 a.m. Breakout Session 1	Awareness Presenter: Lt. Chuck Ternent, Cumberland Police Department Although all public safety responders have a common goal, each component may have different duties and priorities while on the scene of an emergency. This class will help fire and EMS responders better understand the role of law enforcement and how to work as a team on a crime scene. (1.5 Hrs BLS:L, ALS:2)	Presented by Public Safety Training Consultants Learn the dynamics of the stress responses 911 professionals encounter. Understand acute and delayed reactions to post-traumatic stress. Develop skills to actively empower yourself and co-workers to cope with stress. Utilize innovative tools to facilitate the recovery process after work related or personal stressors. Students will be guided through day of lecture, discussion and exercises to understand and recognize a variety of stress types. Cumulative, occupational and critical incident stress will all be addressed. A variety of coping techniques will be introduced and demonstrated. Critical Incident Stress De-briefing (CISD) and stress management (CISM) programs will be explained. This is a real-life view of 911 stress!	Solar PV Safety and Dangers of Natural Gas) Solar PV Safety for Firefighters Presented at MFRI by: Firefighter Ray Stovall, Jr. and Fire Lieutenant Tony Granato More than one million buildings now have solar panels, and the number grows every day. When you encounter solar technology, will you be armed with the right knowledge to operate confidently and safely? You've been dispatched to a residential kitchen fire. When you arrive, you see solar panels on the roof. Are you prepared? What are your concerns? If the fire spreads to the roof, can you apply water to energized solar panels? How do you shut the system off? Can you be shocked just by being up there?
11:15	Drawing		
11:30 12:15	Buffet Lunch Lunch Over		
12:30 p.m. Breakout Session2 2:00 p.m. Breakout Session 3	Minutes, Hours, and Days Presenter: Barbara Moore, MSN, RN, CRNP, Mt. Washington Pediatric Hospital Every 25 minutes, a baby is born suffering from opiate withdrawal. Use of opiates during pregnancy can result in a drug withdrawal syndrome in newborns that varies depending on the type of drug, length of use, and frequency of use. Newborns with NAS are more likely than other babies to also have low birthweight, respiratory complications, delays in development, and withdrawal syndrome. The newly born (1 hour) and the neonate (28 days) will need extra support and care. (1.5 Hrs BLS:M, ALS:A) M Altered Level of Responsiveness Presenters: Wayne Tiemersma, NRP, Garrett County EMS Chief; Doug Beitzel, NRP, Garrett College Drugs, diabetes, hypoxia, traumajust a few things that can cause altered levels of responsiveness in our patients. We are seeing an increase in call volume for these type of patients. Learn about these through a lecture and hands-on scenarios using a lifelike, interactive, high-fidelity patient simulator. This simulator is able to record and time stamp all your actions during the scenario. Review and watch your team in action during a debrief session to follow. (3 Hrs BLS:M, ALS:A)	Call Takers and Dispatchers need stress management, as do first responders. Dispatchers envision each call they take from the public and often don't have an outlet for those images. They deserve a day of honest discussion and education. Our instructors are subject matter experts and know real-life coping tools. This class will make a difference in your dispatchers' personal and professional lives for coping with all varieties of stress. (6 Hrs BLS:L, ALS:2)	Don't wait for an emergency to learn the answers to these important questions. By participating in this 3-hour interactive course, you will more confidently, safely, and effectively operate around solar-equipped structures. (3Hrs BLS:L, ALS:2) CONTINUED OFF-SITE AT WMRTC Unknown Dangers of Natural Gas Presented at MFRI by: Kerry Puffinburger, Field Operations Leader, Columbia Gas of Maryland Recently the news media has streamed a number of explosions and incidents involving gas lines. This class will focus on the several areas involving natural gas emergencies, including the properties of natural gas and propane, the flammable limits and ranges of natural gas and propane, fire ground tactics (do's and don'ts), and the elimination of ignition sources. The student will learn methods of dealing with fires, explosions, and all related gas emergencies. (3 Hrs BLS:L, ALS:2)
3:15	Break		
3:30 p.m. Breakout Session 4	ALTERED LEVEL OF RESPONSIVENESS CONTINUED	SURVIVING DISPATCH STRESS CONTINUED	CONTINUED OFF-SITE AT WMRTC
1.15	Cominon Ends		
4:45	Seminar Ends		

Miltenberger Emergency Services Seminar

Opening Announcements / EMS State of the State

8:00

8:30

Terrorist Bombings in Boston! The Emergency Response and Lessons Learned

	Nursing	ALS	BLS	EMS	Dispatch	Fire
10:00		В.	ن	D.	Ë	4
	Infants: Sick or	Saving the	Bleeding	First Response	Dispatch	Solar PV
	Not Sick, Always	Exsanguinating	Control (Bcon)	and Crime Scene	Stress	Safety for
	Small & Sometimes	Trauma Patient:	Stop the Bleed	Awareness		Firefighters
	Scary	From CPR to EPR				8
12:30		· ·	<u>:</u>		- -	-
	Shock - Why	Megacode	Bleeding	NAS - Neonatal	Dispatch	Unknown
	Vital Signs	Simulator	Control	Abstinence	Stress	Dangers
	are Vital		Continued	Syndrome - Minutes,	Continued	of Natural Gas
				Hours, & Days		
2:00	۲.	K.	ר	M.		
	Pediatric	Community	"Only as Old	Altered Level	Dispatch	Solar PV
	Ventricular Assist	Paramedicine: The	as You Feel?"	of Responsiveness	Stress	& Natural Gas
	Devices (VAD)	Eagle County,			Continued	Continued
	Technology & Tender	Colorado Program				
	Care Required					
3:30	ż	0.	<u>۵.</u>			
	Medical Response	Mobile Integrated	Trauma Case	Altered Level	Dispatch	Solar PV
	to Human Violence	Community Health	Review	of Responsiveness	Stress	& Natural Gas
	Cases	Program: A Team		Continued	Continued	Continued
		Approach to				
		Population Health				

MILTENBERGER EMERGENCY SERVICES SEMINAR - REGISTRATION FORM

(Please duplicate form and use for additional registrants)

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PRIMARY AFFILIATION:							
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SIGNATURE: (I certify that the information on this form is correct.)		DATE:					
PRE-CONFERENCE WORKSHOPS Place check next to the class you wish to attend	SATUI	RDAY SEI	MINAR (our choice out Sessior	
	Session 1:						
	Session 1.	A	В	С	D	E	F
FRIDAY- DAYLONG CLASSES	Session 1.	A	В	С	D		
FRIDAY- DAYLONG CLASSES 1. Pediatric Vascular Access Workshop – (\$35)	Session 2:	A G	В	C C Continued	D	E Continued	F Continued
				С		E	F
1. Pediatric Vascular Access Workshop – (\$35)				С		E	F
1. Pediatric Vascular Access Workshop – (\$35) 2. Dispatch Course – (\$35)	Session 2:	J G	Н	C Continued	I M	E Continued E Continued	F Continued F Continued
 Pediatric Vascular Access Workshop – (\$35) Dispatch Course – (\$35) Stroke / Shock – (\$35) Community Paramedicine / MICH / Active Assailant and 	Session 2:	G	Н	C Continued	I	E Continued	F Continued
 Pediatric Vascular Access Workshop – (\$35) Dispatch Course – (\$35) Stroke / Shock – (\$35) Community Paramedicine / MICH / Active Assailant and 	Session 2: Session 3:	J G	Н	C Continued	I M	E Continued E Continued	F Continued F Continued
 Pediatric Vascular Access Workshop – (\$35) Dispatch Course – (\$35) Stroke / Shock – (\$35) Community Paramedicine / MICH / Active Assailant and Safe Zones – (\$35) 	Session 2: Session 3:	G J N	Н К О	C Continued L P	I M M Continued	E Continued E Continued	F Continued F Continued
1. Pediatric Vascular Access Workshop – (\$35) 2. Dispatch Course – (\$35) 3. Stroke / Shock – (\$35) 4. Community Paramedicine / MICH / Active Assailant and Safe Zones – (\$35) FRIDAY EVENING	Session 2: Session 3: Session 4:	G J N Workshop(s	H K O) E or F, do	C Continued L P O not choose	I M M Continued e any other	E Continued E Continued E Continued	F Continued F Continued r the day.
1. Pediatric Vascular Access Workshop – (\$35) 2. Dispatch Course – (\$35) 3. Stroke / Shock – (\$35) 4. Community Paramedicine / MICH / Active Assailant and Safe Zones – (\$35) FRIDAY EVENING	Session 2: Session 3: Session 4: If you choose	G J N Workshop(s shop F - Fire taking Work	H K O) E or F, do e class bein	C Continued L P D not choose ag held at W	I M Continued any other	E Continued E Continued E Continued classes for FRI, no fee	F Continued F Continued r the day. e applies.

PLEASE INDICATE YOUR T-SHIRT SIZE:
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VISIT OUR WEBSITE - MILTENBERGERSEMINAR.COM - TO REGISTER AND PAY

0r

Mail Registration Form and Payment to: MIEMSS Region I Office, P.O. Box 113, Frostburg, MD 21532

Make Check or Money Order Payable to
** Region I Emergency Services Education Council**

PRE-REGISTRATION IS REQUIRED AND MUST BE RECEIVED VIA THE WEBSITE (WWW.MILTENBERGERSEMINAR.COM) OR IN THE MIEMSS REGION I OFFICE BY February 27, 2017. (ALL THOSE ATENDING FRIDAY DAYLONG CLASSES OR SATURDAY'S SEMINAR, WHO ARE REGISTERED BY THIS DATE, WILL RECEIVE A T-SHIRT.)

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



Governor Larry Hogan Lt. Governor Boyd Rutherford

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