

Maryland EMS News

For All Emergency Medical Clinicians

Vol. 48 No.4

Spring 2022

2022 Maryland Medical Protocols for EMS Now Available



THE MARYLAND MEDICAL PROTOCOLS FOR EMERGENCY MEDICAL SERVICES (2022 edition) is now available on the MIEMSS website (<https://www.miemss.org/home/ems-providers/protocols>). The protocols will go into effect on **July 1, 2022**.

There are multiple evidence-based updates to the protocols this year. We have added new medications and procedures, revised indications for others, and removed a few procedures as well. As a reminder, if you are using the electronic version of the protocol document, you may click on any italicized word to go to

relevant medication and related protocol pages. There is also a “Back to Contents” link located at the bottom of each page.

This year’s protocol video updates have been posted to the MIEMSS Online Training Center (www.emsonlinetraining.org); they have also been posted to MIEMSS’ YouTube channel (<https://www.youtube.com/user/MarylandEMS>). EMS clinicians should complete the protocol update version that aligns with their level of licensure: EMRs

See 2022 PROTOCOLS page 15

2022 EMS Legislative Update

THE 2022 SESSION of the Maryland General Assembly witnessed the passage of certain bills important to Maryland’s EMS System. Several of these bills are summarized below.

The ability of Maryland paramedics to administer influenza and COVID-19 immunizations as part of a public health outreach conducted by a health department or hospital / hospital system was extended to January 1, 2025. From the time the COVID-19 vaccine became available (early 2021) through September 1, 2021, EMS clinicians administered over 80,000 vaccinations to members of the general public and an additional 21,000 vaccinations to State, county, and local government employees. Given

the uncertain trajectory of COVID-19 and the annual surge of seasonal influenza, EMS may be needed to continue to administer vaccinations and boosters to the general public as part of public health efforts, and the new law authorizes paramedics to continue to provide these inoculations until 2025.

Significant changes in Medicaid reimbursement for EMS also passed the Legislature. Beginning in FY23, Medicaid payment to EMS for transportation and medical services in response to 9-1-1 calls will increase from \$100 to \$150. For the first time, Medicaid will also reim-

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Wendell Named MD ACEP 2022 EMS Physician of the Year



The Maryland Chapter of the American College of Emergency Physicians (MD ACEP) honored Dr. Jonathan Wendell as its EMS Physician of the Year at its annual meeting on April 21, 2022, at the BWI Marriott. [Pictured: Dr. Jonathan Wendell (left) and State EMS Medical Director Dr. Timothy Chizmar.]

Chizmar Visits OCFD for Paramedic RSI/Airway Training



State EMS Medical Director Dr. Timothy P. Chizmar (fifth from left), MD, FACEP, met with paramedics at the Ocean City Fire Department for their annual rapid sequence intubation (RSI)/airway training on April 20, 2022. [Pictured from left: FF/PM Duane Philips, FF/PM Kim Tull, Battalion Chief Derrick Simpson, Lieutenant Eric Borneman, Dr. Chizmar, FF/PM Eric Olson, FF/PM Chris Rathel, FF/PM Aaron Driscoll, FF/PM Ryan Wooten, FF/PM AJ Miller, Lieutenant Chris Gee, and FF/PM Vinny Tomaselli.]



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Monkeypox: What You Need to Know

MONKEYPOX IS A RARE, but potentially serious, viral illness that typically starts with flu-like symptoms and progresses to a rash, characterized by fluid-filled lesions that resemble chickenpox or herpes, within three (3) days. The rash typically starts on the face and spreads to other parts of the body.

Monkeypox is commonly encountered in some countries within central and western Africa. However, on May 24, 2022, one confirmed case was found in Massachusetts, followed by seven (7) presumptive-positive cases in other states. Various clusters have also been found across Europe. Viral spread typically requires close contact with an infected animal (e.g., primates, small mammals) or person, contaminated materials, or by respiratory droplets that can travel as far as six (6) feet.

Currently, the CDC acknowledges that EMS personnel in the US are unlikely to encounter a case, but is advising precautionary measures to reduce the risk of transmission. In the context of COVID-19, EMS and patients, at a minimum, should be wearing surgical masks on all encounters. Patients with fever and rash always warrant close attention to PPE to prevent the spread of disease by contact or respiratory routes. If you have a patient with suspected monkeypox, you should:

■ **Identify:** Consider monkeypox in a patient with flu-like illness (fever, headache, muscle aches, swollen lymph nodes) followed by a rash starting on the face and spreading to other areas of the body.

■ **Isolate:** EMS clinicians should use gloves, gown, eye protection

and a NIOSH-approved N-95 or equivalent respirator if monkeypox is suspected.

- ❑ Apply a surgical mask to the patient, if tolerated, and cover the patient with a sheet if a rash is present.
- ❑ The driver's compartment should be isolated and the exhaust fan in the patient compartment should be turned on to the highest setting.
- ❑ Limit the number of personnel making patient contact.
- ❑ Exercise caution when performing intubation, suctioning, CPAP, or other aerosol-producing procedures.

- ❑ Standard cleaning and disinfection procedures should be performed using an EPA-registered hospital-grade disinfectant with an emerging viral pathogen claim. Products with Emerging Viral Pathogens claims may be found on the EPA's List N (<https://cfpub.epa.gov/wizards/disinfectants/>). Follow the manufacturer's directions for concentration, contact time, and care and handling. Monkeypox-contaminated materials require special management;

See **MONKEYPOX** page 15



MARYLAND INSTITUTE FOR EMERGENCY
MEDICAL SERVICES SYSTEMS

SEE CAPTION FOR DETAILS



APPLY FOR THE EMT EDUCATION STIPEND

Get the financial support you need to complete training!

If you enroll in an EMT course beginning after January 1, 2022 you may be eligible for the stipend.

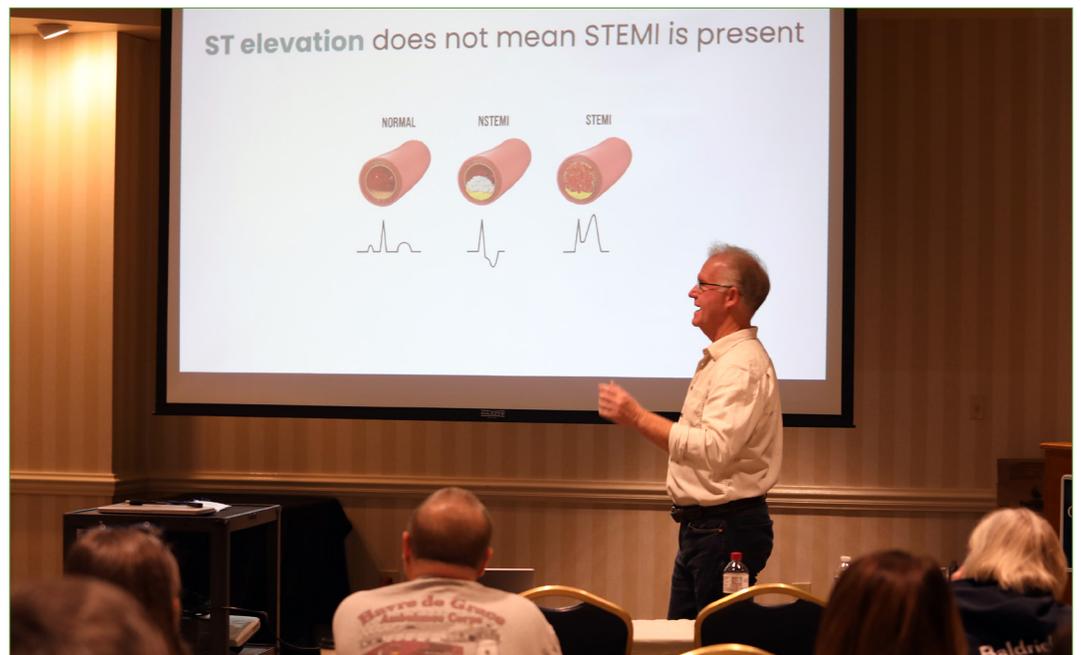
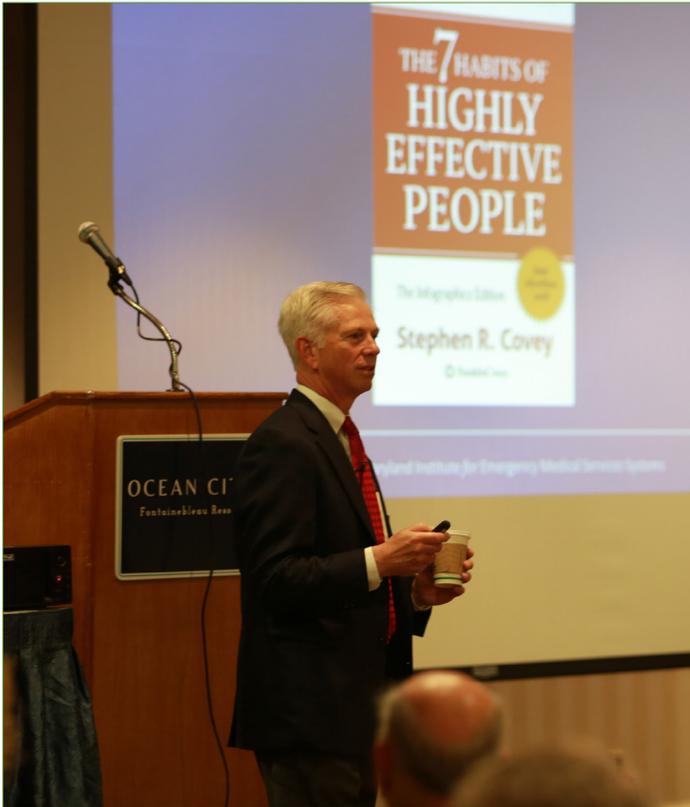
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OR scan the QR code.





EMS CARE 2022

MAY 11-15 ♦ OCEAN CITY FONTAINEBLEU RESORT ♦ OCEAN CITY, MD



EMS CARE 2022

MAY 11-15 ♦ OCEAN CITY FONTAINEBLEU RESORT ♦ OCEAN CITY, MD



EMS CARE returned to an in-person format for the first time since the start of the COVID-19 pandemic May 11-15, 2022, at the Ocean City Fontainebleu Resort in Ocean City, Maryland. Hosted by MIEMSS and the Emergency Education Council of Region 3, the event drew approximately 165 emergency medical services clinicians, nurses, and fire/rescue personnel from around the state for continuing educational programming that included three days of pre-conference activities. MIEMSS Executive Director Dr. Ted Delbridge highlighted the latest trends and developments in Maryland EMS with his "State of the State" address while State EMS Medical Director Dr. Timothy Chizmar offered an in-depth look at the science behind *The Maryland Medical Protocols for Emergency Medical Services*. Delbridge and Chizmar joined a host of local and nationally renowned speakers who addressed hot topics such as EMS crew resource management, mental health and wellness, assessing autistic patients, identifying and responding to human trafficking in local communities, and more. ■



Maryland EMS System Pioneer William "Bill" Ellery Clark Passes Away

WILLIAM "BILL" ELLERY CLARK, who had a long and distinguished career in emergency preparedness and response, died June 2, 2022, in Annapolis, Maryland, after a long battle with Alzheimer's disease. He was 83-years-old.

Bill was born in Boston, Massachusetts, on August 29, 1938, the second of three children to Captain Ellery Harding Clark, Jr. and Grace (Gelinias) Clark. Bill lived a life of service, first joining the Annapolis Volunteer Fire Department in 1954 when he was just 16 years old. He enlisted in the Navy shortly thereafter and served aboard the USS *Boston*, the world's first guided missile cruiser.

After serving in the Navy, Bill became the director of photographic and film services at the University of Maryland in College Park. While there, he was asked to cover the Apollo 11 mission for National Geographic and received an award from NASA for his work.

His experience at University of Maryland led him to a job as director of public information for the Maryland State Police. During his time with the police, he responded to the scene of major incidents, developed and coordinated complex special law enforcement programs and developed numerous highway safety programs. One of his programs received a Presidential Award from President Jimmy Carter.

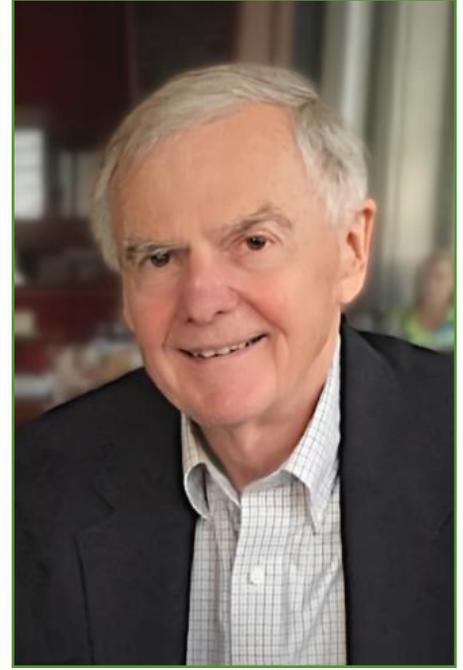
Bill later joined the Maryland Institute for Emergency Medical Services Systems (MIEMSS), where he oversaw a 700-person clinical and field operations team. He was

responsible for the direction of the statewide EMS system, which at the time was in its infancy. He led day-to-day operations, conducted mass causality exercises and developed national policy.

His medical experience at MIEMSS led him to a position in the federal Department of Health and Human Services as its first deputy director of the Office of Emergency Preparedness and the National Disaster Medical System (NDMS). He was one of the principal authors of the Federal Response Plan and involved in many federal disasters. With great foresight, he pushed for chemical and biological terrorist attack response plans. Bill served as the U.S. civil member of the NATO Joint Medical Committee for a decade. Notably, following the tragic crash of TWA Flight 800, he helped develop a new system in the U.S. to provide family assistance following major transportation accidents.

Following the terrorist attacks on September 11, 2001, Bill was asked to help develop the Department of Homeland Security. He ultimately joined the Department of Homeland Security as Chief of the Incident Response Section and later became the Team Commander of the NDMS-1 emergency response team.

Bill graduated with his Bachelor of Science from University of Maryland College Park and his Master of Science from Towson State University. In addition to being a dedicated public servant, he was actively involved as a volunteer in the fire and rescue services in Maryland, enjoyed sailing on the



WILLIAM "BILL" ELLERY CLARK

Severn River and was a talented photographer. He was seldom seen without a camera in his hands, and many family, friends and acquaintances have his photographs proudly displayed in their homes.

Bill loved his family above all else. He is survived by his beloved wife of nearly 45 years, April Clark, of Annapolis, MD, only child, Katie Clark, and son-in-law, Eric Bobak, who reside in Houston, TX. He was preceded in death by his parents; sisters, Susan Clark and Victoria (Clark) Waidner; and nephews, Chip Waidner and Jonathan Waidner.

A memorial service was held June 10 at St. Anne's Church in Annapolis. In lieu of flowers, memorial contributions can be made to the Alzheimer's Association in Bill's name. An online guest book is available at www.johntaylorfuneralhome.com. ■



Meet the Region I Pediatric EMS Medical Director and Pediatric EMS Champions

MARYLAND'S EMS SYSTEM is comprised 27 EMS operational programs divided into five regions. In this month's article, we will highlight the Region I Pediatric Team.

STEPHANIE SISLER, MD | REGION I PEDIATRIC MEDICAL DIRECTOR

Dr. Sisler is a private practice pediatrician with Lovelight Pediatrics and Garrett Regional Medical Center. Additionally, she serves as a Child Abuse Medical Provider in Garrett County. Dr. Sisler attended West Virginia University School of Medicine in Morgantown, West Virginia, where she completed her pediatric residency.

Growing up, Dr. Sisler's first job was at Subway, where she worked as a sandwich artist. She met her husband in middle school and they currently have five children – a combination of biological, adoptive, and foster. The Sisler family loves watching their children grow up where they shared their childhood.

When asked why she was interested in joining the Maryland EMS for Children team, Dr. Sisler advised it was because she was willing to fill a need in the region. This is a perfect example of their family motto, "Sislors serve," as the family is taught to have a servant's heart.



DOUG BEITZEL, NRP

GARRETT COUNTY PEDIATRIC EMS CHAMPION

Doug serves as the Program Coordinator of Allied Health at Garrett College and a Captain at City of Cumberland Fire Department. Additionally, he is a tactical medic with the Cumberland Emergency Response Team (CERT). Doug also served for nine years as a flight paramedic with STAT MedEvac and Air Methods. His favorite thing about his career? Knowing that every day is different and you are not sure where you will find yourself during a shift.



Doug shares that Garrett County is an awesome place to live and wouldn't trade it. When not working, he loves to unwind on his back porch or by a campfire. It should come as no surprise that since his favorite

See **BEITZEL** page 12

SUSAN CLARK-CECIL, NRP

ALLEGANY COUNTY PEDIATRIC EMS CHAMPION



Susan is the Training Officer for Allegany County Department of Emergency Medical Services. She continues to volunteer with Cresaptown VFD, where she has been a member for over 30 years. Additionally, Susan serves on the Quality Assurance Committee for the County. She is also an instructor for the American

Heart Association and the Maryland Fire Rescue Institute. Susan loves that all of her various roles give her the ability to meet community members and employees and help when she can.

Susan shares that, while she was growing up, her father was as a firefighter and fire chief of a volunteer department. When she told her father that she wanted

See **CLARK-CECIL** page 12

Maryland Department of Transportation Motor Vehicle Administration's (MDOT MVA)

Maryland Highway Safety Office

The MDOT MVA Highway Safety Office (MHSO) is dedicated to saving lives and working with many partners across the State to reduce the number of crashes each year. In addition, the MHSO looks for ways to reduce crash severity and ways to treat crash victims easier and faster.

Maryland aims to reduce the number of crashes, and the resulting deaths and injuries, to zero by 2030.

Look Twice, Save a Life Watch for Motorcycles

As we enter the summer, we approach the most popular time of year for motorcyclists to be on the roads—and the most dangerous.

Each year in Maryland, more than 70 motorcycle drivers and passengers are killed in traffic crashes and nearly 1,200 are injured. Historically, June, July, August, and September are the most dangerous months for motorcyclists.

Tips for Sharing the Road Safely:

- **Share the road.** Motorcyclists are entitled to the full use of the lane. Give them space and don't cut them off.
- **Look twice for motorcycles.** Always check two or more times before merging, changing lanes, or pulling into traffic.
- **Remember that motorcycles are smaller than cars.** Drivers are accustomed to looking for other cars and trucks, not motorcycles; because they are smaller than cars, motorcycles can be difficult to see.
- **Minimize and check your blind spots.** Motorcyclists are easily hidden. Check your mirrors regularly and adjust them to show more of the road.



Keeping Children Safe in the Car

Children are our most precious cargo and yet in the United States, more than 50% of car seats are installed incorrectly. Make sure that *everyone* in your care is riding as safely as possible—on every ride.

Maryland law requires that children under eight years old must ride in an appropriate child restraint unless they are 4'9" or taller. A bill recently signed into law by Governor Larry Hogan, SB0176, requires that beginning October 1, 2022, a person transporting a child under age 2 in a motor vehicle is required to secure the child in a rear-facing child safety seat that complies with applicable federal regulations until the child reaches the manufacturer's weight or height limit for the child safety seat.

For many Maryland families, following the law leads them to discontinue the use of booster seats *much* too early. In order to safely ride in a seat belt without a booster, children should pass a set of guidelines known as the [5-step test](#).

Help ensure that all Maryland children are safe in the car. For additional information on assistance with car seat usage and installation reach out to our partners at [Kids in Safety Seats \(KISS\)](#).

Emphasis Area Team Meetings

Looking to become more involved in local road safety? MHSO welcomes participation from the EMS community for all emphasis areas. Mark your calendar for the upcoming meetings:

- Impaired Driving:
April 25, 2022 (10:00 a.m. – Noon)
- Occupant Protection & Distracted Driving:
May 19, 2022 (10:00 a.m. – Noon)

Contact MHSO@mdot.maryland.gov to register

Maryland Highway Safety Summit Returns

FOLLOWING A THREE-YEAR HIATUS, the Maryland Highway Safety Summit returned for the first time since the onset of the COVID-19 pandemic on April 18, 2022, at the Maritime Conference Center in Linthicum Heights.

The daylong event, hosted by the Maryland Department of Transportation Motor Vehicle Administration (MDOT MVA) Highway Safety Office, drew emergency medical services personnel, law enforcement officers, and public safety officials from across the state, as well as national leaders for collaborative programming focused on impaired driving, aggressive driving, occupant protection, distracted driving, and vulnerable road-users. A special app enabled attendees to identify and locate specific workshops, take notes, follow conference-related social media posts, and more.

During his welcoming remarks, MDOT MVA Highway Safety Office Director Timothy Kerns, PhD, reported that since the previous summit, held in April 2019, 1,687 lives had been lost to motor vehicle crashes on Maryland's roadways.

"They were family members, friends, coworkers, and significant others," said Kerns. "Those 1,687 road-users are the core of what brings us together today."

Stakeholders from the areas of engineering, enforcement, education, and emergency medical services



MIEMSS Executive Director Dr. Ted Delbridge (right) and Colonel Kevin M. Anderson, Chief of the Maryland Transportation Authority Police, take part in "The 4 Es of Leadership in Traffic Safety" panel discussion during the 2022 Maryland Highway Safety Summit on April 18. MDOT MVA Maryland Highway Safety Office Director Dr. Tim Kerns moderated the panel, which also included Tim Smith, Administrator for the Maryland Department of Transportation State Highway Administration, and Rick Birt, President and Chief Executive Officer of Students Against Drunk Driving at a national level.

es brought their unique perspectives on road safety to the panel discussion "The 4 Es of Leadership in Traffic Safety". Panelist and MIEMSS Executive Director Dr. Ted Delbridge noted that the state's roughly 18,000 EMS clinicians must be made to feel empowered in the ongoing discussion of road safety given their "expertise" and regular presence on Maryland's roadways.

"They're out there, and they see what's going on, the same way that our law enforcement officers do," said Delbridge, adding that by the very nature of their work, EMS clinicians have a responsibility to call attention to unsafe conditions on the state's roadways. "Make them feel like they make a difference. Use their eyes, their expertise, and what they see."

The day's programming focused

on such aspects of highway safety as, among others, a speed management pilot program in Bishopville, on Maryland's Eastern Shore, and outreach strategies to diverse populations and underserved communities. Although a late-morning press conference formally reported that Maryland's 573 roadway fatalities in 2021 (which included 129 pedestrians and six bicyclists) represented a 3% decline over the prior year, MDOT Secretary James F. Ports, Jr., declared that more must be done.

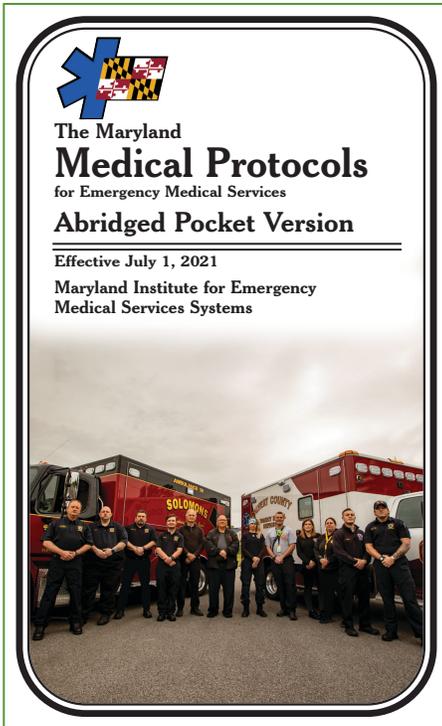
"We have the ability, and the responsibility, to stop these needless tragedies," said Ports. "Today, I challenge every person – every driver, passenger, motorcyclist, pedestrian, bicyclist – every single person who uses our roadways. Let's work together to bring the number of fatalities on Maryland roads to zero."

MDOT MVA Administrator Christine Nizer said that events like the summit offer attendees a unique opportunity to effect positive change across the state "through our conversations, action items, and what we take back with us."

"Our goal at the Maryland Highway Safety Office, the Maryland Department of Transportation, and the Motor Vehicle Administration is zero deaths on our roadways," said Kerns. "We hope you can take the

See MHSO SUMMIT page 12

Maryland EMS Protocols Included in Time Capsule Marking Garrett College's 50TH Anniversary



Garrett College officials included a pocket copy of the 2021 Maryland Medical Protocols for Emergency Medical Services in a time capsule sealed on March 9, 2022, as part of the school's 50th anniversary celebration.

WHEN GARRETT COLLEGE (GC) faculty, administrators, and students open a 25-year time capsule in 2047, they will find among its contents letters from the school's 2022 leadership, a syringe (a nod to the COVID-19 pandemic)...and a copy of the 2021 *Maryland Medical Protocols for Emergency Medical Services*, courtesy of GC's Paramedic Studies Program.

On March 9, 2022, school officials sealed the time capsule, which will remain on display in GC's Daniel E. Offutt III STEM Center until its scheduled opening in 2047. Due to the container's limited space, Paramedic Studies Program Coordinator Doug Beitzel opted for a copy of the pocket-sized edition of the *Protocols*.

"Each department was asked to submit items," explains Beitzel, who

has "seen treatments come and go" in his time as both a BLS and ALS instructor. "I thought it would be interesting in 25 years to see how we are treating patients now."

For Beitzel, GC is a part-time gig. He is also a Captain with the City of Cumberland Fire Department, where he has thus far logged two decades of service. GC's two-year program offers both a certificate and a degree.

"One interesting thing we do is offer 30 credits to someone who is already a paramedic, which is half the degree," says Beitzel. "The other 30 credits can be done totally online, so you don't have to live locally to attend the college."

On September 23, 2021, GC officials opened a time capsule from 1996 as part of the school's 50th anniversary celebration this academic year.

In addition to the items contributed by the broader GC community, the time capsule also includes artifacts submitted by Garrett County Government and the Garrett County Chamber of Commerce, as well as a letter from GC President Dr. Richard Midcap.

"Among other things, I wrote about our soon-to-be Performing Arts Center and our championship athletic teams," said Midcap. "I also warned them that, with any luck, I would be the 86-year-old guy in the back of the room with a GC polo shirt and sweat pants."

Beitzel is excited to see what the future has in store.

"My previous medical director used to always say that we 'practice medicine' because we continue to try to get it right," he says. "I will be interested to see what we have improved upon in 2047." ■

EMS Compliance Update

THE EMS BOARD is authorized to take disciplinary action against clinicians who engage in prohibited conduct to safeguard the integrity of the EMS system. COMAR 30.02.04.01 lists conduct which is prohibited. Below is a sample of actions the EMS Board has taken since December 2021 as a result of prohibited conduct. For more information, contact Lisa Chervon, Chief of the MIEMSS Office of Integrity, at [lchervon@miemss.org](mailto:Ichervon@miemss.org) or (410) 706-2339. Additionally, MIEMSS maintains a searchable online database of all decisions at <https://www.miemss.org/home/public>, which may be found under Public Orders Report in the left-hand column.

■ **IRC21-48** (EMT) *February 15, 2022*. On June 10, 2019, the EMT pled guilty to the crime of driving a vehicle while under the influence of alcohol per se and received probation before judgment. Furthermore, upon application for initial EMT certification on September 1, 2020, the EMT failed to disclose the probation before judgment disposition. As a result of the above findings, the EMT was reprimanded for failure to disclose, and placed on probation for one year.

■ **IRC21-50** (EMT) *February 15, 2022*. On September 23, 2021, the EMT pled not guilty to the crime of driving a vehicle while impaired by alcohol and received probation before judgment. As a result of the above findings, the EMT was placed on probation for one year.

■ **IRC21-051** (Applicant) *February 15, 2022*. On March 17, 2015, the Applicant was found guilty of the crime of possession of CDS paraphernalia,

and was issued a citation and ordered to pay all associated fines and court costs. The Applicant has since completed a rehabilitation program and maintained sobriety. As a result of these findings, the Applicant was placed on probation for the first cycle of the Applicant's EMT certification, and will be subject to random drug testing, with results provided to the Director of the MIEMSS Office of Integrity.

■ **IRC21-053** (CRT) *February 15, 2022*. MIEMSS has been made aware of an incident of unprofessional conduct transpiring on August 4, 2021. The CRT engaged in unprofessional conduct by approaching a patient's family member and making derogatory statements regarding the physician that was treating the patient, and suggested that the patient be transferred to another hospital for care. As a result of the above findings, the CRT was reprimanded for unprofessional conduct and placed on probation for a period of two (2) years. Additionally, the CRT is required to complete an ALS mentorship within six (6) months, the content of which will be assigned via collaboration among the State EMS Medical Director, the MIEMSS Office of Integrity, and the Cecil County EMS Operational Program.

■ **IRC21-060** (Paramedic) *February 15, 2022*. On October 12, 2021, the Paramedic pled guilty to the crime of possession of child pornography, and was issued supervised probation before judgment for a period of five (5) years. Additionally, the Paramedic is required to register as a Tier I Sex Offender. The Paramedic acknowledged receipt of the IRC Complaint and proposed to

surrender his license. The Board accepted the surrender of the EMT's certificate.

■ **B-2020-969** (Paramedic) *February 16, 2022*. On August 28, 2019, the Paramedic was found guilty of the crime of Theft by Unlawful Taking – Movable Prop, for which the Paramedic was subsequently sentenced to 24 months of supervised probation on October 13, 2020. The victim of the crime was the Paramedic's Pennsylvania volunteer company. Upon consideration of this matter, the Board issued a noncompliance notice to advise the Paramedic that the Board proposed to revoke the Paramedic's license. The Paramedic requested a hearing, and on October 20, 2021, an Administrative Law Judge conducted a hearing on the disciplinary charges against the Paramedic. On December 13, 2021, the Judge issued a detailed proposed decision, which included findings of fact, conclusions of law, and a proposed order. The Administrative Law Judge also proposed that the Paramedic's license be revoked. The EMS Board concluded that revocation was the appropriate disciplinary sanction under the circumstances of this case, and the Paramedic's license was revoked.

■ **IRC21-007** (EMT) *February 16, 2022*. On March 10, 2020, the EMT pled not guilty with an agreed statement of facts to the crime of driving a vehicle while impaired by alcohol and received 18 months' probation before judgment – supervised. The EMT failed to disclose having received probation before judgment

See COMPLIANCE UPDATE page 12

CLARK-CECIL...*(Continued from page 7)*

to be like him, his “old-school” response served as the motivation for her to become a firefighter, fire officer, and paramedic. Her family has always given back to the community, be it church, clubs, or fire departments. A fun fact about Susan: she loves decorating their home for Halloween for all of the children in the area. They typically get about 400 trick-or-treaters each year, making it one of her favorite holiday traditions.

If granted the ability to have a superpower, Susan would want to be able to keep all infants and children away from harm and pain. Due to personal experiences, she is passionate about wanting to help with pedi-

atric EMS education to ensure EMS clinicians have the knowledge and skills to care for pediatric patients in need. Susan loves teaching CPR and disaster preparation knowledge with daycare workers. She shares that the

best feeling comes with knowing that they are trained to handle emergencies should they arise. All of this and more demonstrate why Susan is ideal in her role as a Pediatric EMS Champion. ■

BEITZEL...*(Continued from page 7)*

childhood pastime was riding a bike, Doug continued that love but added a motor to his bike. Curvy roads on his motorcycle serve as means for him to relax and decompress.

What drew Doug to working with EMS and Maryland EMSC? As a paramedic for the last 20 years, he

wanted to become more involved in education and teaching ALS, as he felt it was a way to continue helping and caring for patients even when not on the aircraft or ambulance, and for when he eventually retires. His family motto of “family first” echoes one of the core principles of the Maryland EMSC Program. ■

COMPLIANCE UPDATE...*(Continued from page 11)*

on the EMT’s application for EMT certification extension on October 6, 2020. Additionally, the EMT was on two (2) years’ probation under a Disposition Agreement entered into by the EMS Board on June 9, 2020, as a result of the EMT contributing to delayed advanced life support care to a critically ill patient and submitting a false written statement pertaining to the facts of the incident. The EMT has also failed to comply with the terms of the Disposition Agreement requiring the EMT to successfully complete remedial training on response procedures, chain of command, and situational awareness within six months (6)

of the Disposition Agreement. As a result, the EMS Board proposed to revoke the EMT’s certificate. The EMT requested a hearing, and based on the testimony and exhibits, the Administrative Law Judge concluded that the evidence established that the EMT had violated COMAR

30.02.04.01A, .01T, and .01Y. The Administrative Law Judge also proposed that the EMT’s certificate be revoked. The EMS Board adopted the findings of fact as proposed by the Administrative Law Judge and issued a Final Decision, revoking the EMT’s certificate. ■

MHSO SUMMIT...*(Continued from page 9)*

information from today, return to your jobs and communities, and help us reach this goal.”

The Maryland Highway Safety Office is a division of the Maryland

Department of Transportation Motor Vehicle Administration (MDOT MVA). Learn more at <https://zero-deathsmd.gov/>. ■



Help Prevent Injuries: Become a Certified Child Passenger Safety Technician

AS A CHILD PASSENGER SAFETY TECHNICIAN (CPST), you could help parents install their child safety seats at local and regional checks, and conduct displays in your community

About the CPST Certification Course

- It is usually four full days (32 hours).
- It involves classroom instruction and lots of hands-on work with car seats and vehicles (inside and outdoors). There is a community safety seat check-up event at the end.
- It has open-book quizzes and skills tests.
- Offers CEUs for Maryland EMS clinicians.
- It costs \$95 to register, BUT a limited number of free registrations are available for qualifying Mary-



land healthcare/EMS personnel
Contact cps@miemss.org for more information.

Upcoming Maryland Classes

- Gaithersburg (Montgomery County), May 9-11; May 12-14
- Middletown (Frederick County), June 7-11
- Edgewood (Harford County), July 12-16
- Carroll County, Sept. 26-29 (tentative)
- Gaithersburg (Montgomery County), Oct 13-20
- Pikesville (Baltimore County), Nov 1-4

To learn more or to register, go to cert.safekids.org and click on “Become a Tech” and search on State: “MD.” Successful completion of the course provides CPST status for two years. ■

Warmer Weather is Coming: Know the Dangers of Leaving Children or Pets in Hot Cars

IN AN AVERAGE YEAR, 39 children die from heatstroke when left alone in cars. In 2019, 52 children died this way.

The Child Passenger Safety (CPS) and Occupant Protection (OP) Healthcare Project from MIEMSS wants to share some free resources on this topic. Also, Saturday, May 1, is designated National Heatstroke Prevention day, so it is a particularly good time to alert your community to the risks and prevention steps...before it gets hot!

- *Online patient/clinician education.* Visit <https://nsc.org/hot-cars/> for a 10-minute, self-directed training featuring excellent graphics. (Also available in Spanish)
- *Outdoor display to borrow and use with a vehicle to demonstrate how quickly the inside of a car heats up.* Go to www.miemss.org/home/emsc/cps.
- *Handouts and posters.* Visit

www.miemss.org/home/emsc/cps or email cps@miemss.org, or go to www.safekids.org/take-action-prevent-heatstroke.

■ *Media toolkit.* Go to www.safekids.org/take-action-prevent-heatstroke, or visit www.trafficsafetymarketing.gov.

Remember, deaths due to pediatric vehicular heatstroke are 100% preventable...with education! ■

Car seats save lives in cars, but what about outside the car?

KNOW THE FACTS



More than 900 U.S. children have died due to heatstroke since 1998.

More than 1/2 of these deaths were due to children mistakenly left in a vehicle; 1/4 were kids who got into a car and couldn't get out.



60% of infant deaths happening in sitting devices occur in car seats.

These Sudden Unexplained Infant Deaths (or "SIDS") were mostly due to strangulation from improperly used car seat straps or from when poor positioning blocked the infant's airways.



Infant falls from carrier seats are common; 1/3 of these cases need emergency care at the hospital for a head injury.

Most of these children are not harnessed in their seat.

THE DO'S AND DON'TS OF CAR SEAT USE

Car Seats and Child Safety in and Around Vehicles



- Lock your empty car's door to keep curious children out; put keys away.
- Dress your child in light clothes for sitting in the car seat, then layer warm items on top of the snug and buckled harness.
- Have an adult buckled up in the back seat watching the baby in case of breathing problems on the first few rides.
- Follow the car seat's instructions on its use for direction, harnessing and installation.



- Never leave your child alone in the car.
- Never unbuckle or loosen the harness when your child is using the car seat.

Car Seats Carried and Used out of Vehicles



- Always harness the child properly and fully whenever you use the car seat.
- Make sure that infants cannot turn their face into soft padding, or slump forward in any seating device.
- Place car seats in the cargo area of shopping carts or carry them to avoid tip-overs.



- Don't use your car seat as a crib. Start safe sleep habits in a regular crib or approved portable crib.
- Don't add any toys, blankets or pillows unless they came with the car seat and are used properly.
- Don't rest the car seat with the baby seated in it on a car hood, table or other high or unstable location.



Get personal assistance with your car seat:
www.MDKISS.org or
 410-767-6016

LEGISLATIVE UPDATE...

(Continued from page 1)

burse EMS for treatment provided to Medicaid patients who are not transported to a hospital and will also reimburse for transport of a low-acuity patient to urgent care services. Finally, Medicaid will begin reimbursing EMS for Mobile Integrated Health services provided to a Medicaid recipient in an amount that is at least \$150 per interaction.

Confidentiality protections were increased for peer counseling programs for fire, rescue, and EMS personnel through a new law that prohibits disclosure of written or oral communications regarding a peer counseling session by a peer support specialist or a peer support participant. The Behavioral Health Administration at the Maryland Department of Health, in consultation with MIEMSS, will report to the Legislature by October 1, 2024, on best practices and professional standards for a peer support counseling program.

As of July 1, 2022, EMTs, CRTs, and paramedics will be authorized under law to offer an opioid overdose reversal drug to an individual who received treatment for a non-fatal drug overdose or was evaluated by a crisis evaluation team. The Maryland Department of Health is required to purchase and provide opioid overdose reversal drugs to EMS clinicians and other health care providers who are required to offer them.

Finally, MIEMSS was tasked to develop a report for the Legislature regarding hospital interfacility transport of emergency and non-emergency Medicaid patients,

including the capacity under the current referral process, response time to referral requests, costs under the current system, and recommendations for improvements. The report is due to be submitted in December 2022.

Information on other bills of interest to Maryland's EMS system that were considered during the 2022 Session of the Maryland General Assembly may be found at <https://miemss.org/home/policy/legislative-reports>. ■

2022 PROTOCOLS...

(Continued from page 1)

and EMTs should complete the BLS version, CRTs and Paramedics should complete the ALS version.

Regardless of how each clinician views the video content portion of this year's update (Online Training Center, YouTube, company drill format), every EMS clinician must log in to the MIEMSS Online Training Center and complete the quiz portion in order to obtain credit for the required course. Please remember to complete your update before July 1, 2022.

For EMS base stations, the video

update is available on the MIEMSS base station website (<http://www.miemss.org/home/hospitals/base-stations>). Hospitals may download the SCORM file from this site, if desired. Importantly, each base station coordinator must maintain learning management records or signed and dated attestation forms that reflect update completion for all base station physicians and nurses.

To download the print or digital version of the 2022 *Maryland Medical Protocols for Emergency Medical Services*, or for more information, visit <https://miemss.org/home/ems-providers/protocols>. ■

MONKEYPOX...

(Continued from page 3)

work with the receiving hospital to dispose of linens and other waste appropriately.

■ **Inform:** If you suspect a case of monkeypox, inform the receiving facility as soon as possible, so that the patient may be properly isolated

upon arrival. As soon as practical after the call, notify your supervisor and infection control officer, as additional reports to the health department may be indicated. For more information, visit <https://netec.org/2022/05/19/ems-response-to-the-current-outbreak-of-monkeypox/>. ■

**MIEMSS wishes all
Maryland EMS clinicians,
their colleagues, families,
and friends a happy, safe,
and healthy summer!**



Artwork at right courtesy of Jim Jarboe, a retired Montgomery County career firefighter and member for over 65 years of the Takoma Park Volunteer Fire Department, where he continues to volunteer.

Summer Time Begins on June 21. That will bring the HOT weather.



A few safety tips...

1. Stay hydrated.
 2. Drink plenty of fluids.
Water! Water! Water!
 3. Clothing - light weight, light colored and loose fitting
 4. Pace yourself.
 5. Take frequent breaks.
- Be Safe! Stay Safe! Stay Cool!**

*Jim Jarboe
2022*

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Governor Larry Hogan
Lt. Governor Boyd Rutherford

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