Maryland
EMS News
For All Emergency Medical Services Clinicians
Vol. 52 No. 10
October 2026



Life in the Trenches:
Harford County EMS Prep for Complex Rescue Operations

Plus:

Volunteer Firefighter/EMT and Family Honored

Topics in Trauma Roundup

MD State Senator, Husband Receive National Award

Upcoming Events

SPECIAL SUPPLEMENT: Maryland Mobile Integrated Health Professionals Fall Newsletter











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A Special Supplement to *Maryland EMS News*

Maryland Mobile Integrated Health Professionals
Fall 2026 Newsletter

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ON THE COVER: *EMS clinicians from the Harford County Department of Emergency Services take part in trench rescue operations. (Photo: Harford County Department of Emergency Services)*

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Governor Wes Moore
Lt. Governor Aruna Miller

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Maryland State Senator, Husband Receive National Ski Patrol Award for Life-Saving Actions



Pictured from left: Wayne Tiemersma, MIEMSS Region I/II EMS Coordinator; William (Bill) Hester, Wisp Ski Patrol; Maryland State Senator Kathryn (Katie) Hester, Wisp Ski Patrol; Chris Meyer, Wisp Volunteer Patrol Director. [Photo: Rob Voorhees – Wisp Ski Patrol Director]

ON SEPTEMBER 26, 2026, during the 2026 Wisp Ski Patrol fall training, Maryland State Senator Kathryn (Katie) Hester and her husband, William (Bill) Hester, were awarded the National Ski Patrol Purple Merit Star for their life-saving actions during a February 22, 2025, incident at Deep Creek Lake.

Katie (who represents District 9, including Howard and Montgomery Counties) and Bill had finished their shift with the Wisp Resort Ski Patrol and were on their way to their nearby vacation home on Deep Creek Lake around 5:30 p.m. when they encountered an automobile stopped on the bridge along Glendale Road and a woman standing nearby looking over the side of the bridge. The couple stopped to inquire about what was happening. The woman explained that she had witnessed a side-by-side utility task vehicle (UTV) driving on the ice-covered lake as she her husband were crossing the bridge. However, when the UTV drove under the bridge and failed to emerge from the other side, she grew concerned. When her husband turned their car around to investigate, they found a man on the ice calling for help. The UTV had broken through the ice. They immediately called 9-1-1.

Katie and Bill went straight to their house, retrieved life vests and stand-up paddle boards, instructed their daughter and her friends to bring blankets to the shore, and returned to the scene. They paddled out to the man on the ice, who by then had slipped into the water. He explained that his friend was still trapped in the submerged UTV. Katie and Bill grabbed the man beneath his arms and took him back to shore, where the children waited with blankets to help warm him.

Units from Garrett County EMS, Deep Creek Volunteer Fire Company, Bittinger Volunteer Fire Department, Deer Park Community Volunteer Fire Department, Maryland Department of Natural Resources, Garrett County Sheriff's Office, and Maryland State Police (MSP) soon arrived and took control of the scene. The patient helped by the Hesters was transported to Garrett Regional Medical Center and later taken by helicopter to J.W. Ruby Memorial Hospital in Morgantown, West Virginia, from which he was released the following day. Water rescue teams retrieved the patient submerged in the UTV. Bittinger EMS transported the patient to MSP Trooper 5. He was flown to Ruby Memorial Trauma Center where, sadly, he passed away on February 23. A subsequent investigation revealed that the surviving patient had initially crawled onto the ice following the incident, but became hypothermic after returning to the water in an effort to save his friend. Dr. Rameen Shafiei, medical director for Allegany and Garrett County EMS, attested that he, too, "would have likely died if not for the life-saving actions made by Bill and Katie Hester."

The Purple Merit Star, the National Ski Patrol's highest meritorious service award, is given to members who individually save or are primarily responsible, in conjunction with others, for saving a human life through rendering emergency care to someone who has been stricken by a sudden illness or traumatic incident. The Purple Merit Star may be presented regardless of where the lifesaving act was performed, provided the emergency care was rendered under the sole direction and sole responsibility of patrollers. ✱

Frederick County First Responders Receive Recognition of EMS Excellence for MVC Response

ON SEPTEMBER 9, 2026, the Frederick County Division of Fire and Rescue Services (FCDFRS) presented a Recognition of EMS Excellence to FCDFRS members and crews that responded to a motor vehicle collision involving a tree on May 12, 2026.

Emergency Communications Specialist Morgan MacKenzie recognized the signs of cardiac arrest over the phone and guided the caller through lifesaving CPR instructions before help even arrived. When the Mobile Community Crisis Car arrived on scene, Lt. Benjamin McGinnis and Frederick Police Department Officer Garrett Hall found the driver pulseless and not breathing. They quickly extricated the patient, applied an AED, and delivered a shock. Crews continued resuscitation efforts – achieving return of spontaneous circulation (ROSC), securing the patient's airway, and administering medications to stabilize his condition.

Thanks to the rapid recognition, decisive action, and seamless teamwork of everyone involved, the patient subsequently made a full recovery and was able to go home.

Congratulations to the following personnel recognized for their outstanding lifesaving efforts:

- **ALS2** – Lieutenant Brian Jenkins
- **Crisis Car 900** – Lieutenant Benjamin McGinnis, Officer Garrett Hall (FPD)
- **EMS901** – Lieutenant Margaret Nowaczyk
- **Emergency Communications** – Specialist Morgan MacKenzie
- **Ambulance 29** – Firefighter Zachary Fletcher, Firefighter Frank Condito
- **Paramedic Engine 23** – Lieutenant Jason Dickinson, Lieutenant Michael Steele, Technician Tyrone Jenkins, Firefighter Nicholas Maxey, Firefighter Jamontrez Williams

[Photos: Frederick County Division of Fire and Rescue Services]

This outcome is a powerful reminder of what's possible when every link in the chain of survival — from the 9-1-1 call to hospital discharge — works together.



Share *Your* EMS News

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Send press releases, agency/departmental accouncements, and other EMS-related news to ptandy@miemss.org for possible inclusion in a future issue of *Maryland EMS News*.

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FREDERICK
COUNTY
MARYLAND


FREDERICK
COUNTY
MARYLAND
ENGINE
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FREDERICK
COUNTY
FIRE/RESCUE





Maryland EMSC Honors Howard County Volunteer Firefighter/EMT and Family for Commitment to Child Passenger Safety



Terri Taylor (center) with Maryland EMSC Child Passenger Safety Coordinator Susanne Ogaitis-Jones (left) and Program Director Cyndy Wright-Johnson.

EACH YEAR, the Maryland EMS for Children (EMSC) Program at MIEMSS presents an annual award recognizing a Maryland EMS clinician who has provided exemplary service in child passenger safety (CPS). This year's award, presented on September 21, 2026, was especially meaningful as it recognized not only Terri Taylor but also her family for their years of dedication to keeping children safe.

A former career firefighter and EMS clinician with Howard County Fire and Rescue Services (HCFRS), Terri currently serves as a volunteer firefighter/emergency medical technician with the Fifth District Volunteer Fire Department. For more than 30 years she has been actively involved in CPS in Maryland, and has served as the Safe Kids Coordinator for HCFRS Community Outreach since 2006. The coalition's mission is to keep children safe through evidence-based injury prevention programs. Terri's work encompasses a wide range of topics, including poison prevention, water safety, fall prevention, bicycle and pedestrian safety, fire and burn prevention, and child passenger safety.



Terri's enthusiasm and passion for injury prevention have inspired much of her family to become involved in CPS, as well. Her husband, John (first certified in 2008); son, Matt (first certified in 2014), father, Elza Redman; mother, Charlotte, who is now deceased; daughters Jenna (first certified in 2003) and Joni; and brother, Keith, have all actively assisted with Howard County seat checks and other CPS events.

When he is not volunteering in Howard County, Matt regularly works as an EMS clinician in Frederick County, where he is able to share his CPS knowledge and expertise. The entire family has consistently been willing to do whatever is needed to educate families about CPS. Over the years, they have personally assisted hundreds of families with car seat installations and education.

Terri's own commitment to occupant protection extends well beyond the typical responsibilities of a CPS Technician and Safe Kids Coordinator. She is continually looking for ways to improve the effectiveness and efficiency of caregiver education. For example, she has implemented group instruction sessions on properly harnessing children in car seats before conducting individual car seat checks.

Terri also frequently assists with teaching the 32-hour Child Passenger Safety Technician certification courses held throughout Maryland and is considered by her colleagues to be a "brilliant" instructor. Additionally, she serves on the Howard County Child Fatality Review Team, which evaluates unexpected child deaths with the goal of preventing future tragedies and improving community safety. Her expertise in EMS and injury prevention is invaluable to this work.

The Taylor-Redman family has been exceptionally generous with their time and has helped coordinate the use of Howard County Fire and EMS facilities for statewide injury prevention events. In addition to hosting CPS certification courses, the family has supported the Safe Transportation of All Children (adaptive car seat) courses, CPS press events, and Maryland CPS Board meetings.

The award was presented to Terri and her family during a school bus occupant protection course held at the Fifth District Fire Department in Clarksville. Terri arranged for



Terri Taylor and some of her family (L to R, grandson, Bennett; John, Matt, Terry, Joni and Cody).

the department to host the class, and then attended the course herself to expand her knowledge. Having previously worked as a school bus driver, she was eager to update her understanding of school bus occupant safety and apply that knowledge to her ongoing injury prevention efforts.

Terri's commitment to safety also extends beyond child passenger protection. She volunteers with MIEMSS and Janet Bahouth's (Crash CORE) efforts to educate first responders about motor vehicle crash scene cues. Through training and the development of resources such as a Crash Cues Checklist and a Hot Wash sheet, this initiative seeks to enhance triage decision-making and documentation. Terri's firsthand knowledge of firefighters and EMS clinicians working at crash scenes continues to make a significant contribution to advancing this project.

Terri and her family were nominated unanimously for this award by the staff of Maryland Kids in Safety Seats, MIEMSS' CPS and Occupant Protection Healthcare Project, the Maryland Highway Safety Office (which funds MIEMSS' CPS and OP Healthcare Project), and other CPS



leaders throughout Maryland. These colleagues are deeply appreciative of Terri and her family for their extraordinary dedication, generosity, and service to child passenger safety.

Congratulations to Terri and her family on this well-deserved recognition! ✱



Does the public stop by your fire station for help with their car seat? Do you have a Child Passenger Safety Technician (CPST) on staff and available? Most stations do not, so be ready to refer the public appropriately. A new resource is available for fire and rescue stations: a 4" x 6" sticker to affix near the phone or front desk that refers the public to the local CPST or to Maryland Kids in Safety Seats. An 8.5" x 11" laminated version is also available. To obtain these free stickers, contact cps@miemss.org.



FALL NEWSLETTER

ISSUE NO. 3 OCTOBER 2026



MARYLAND MIH
MOBILE INTEGRATED HEALTH PROFESSIONALS

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In The News-Jennifer Mott, RN, BSN, CP-C

From the Charles County Department of Emergency Services Facebook page

"Charles County Department of Emergency Services is proud to recognize Jennifer Mott, RN, BSN, CP-C, Mobile Integrated Health (MIH) Program Manager, for successfully graduating from the NAEMT Lighthouse Leadership Program Class of 2026!

As part of this national leadership program, Jenny developed and implemented a project focused on improving care for diabetic patients through Charles County's MIH program. Her work has already made a positive impact on how we identify, educate, and assist patients experiencing diabetic emergencies.

In recognition of her accomplishments, Jenny was also invited to speak at the program's graduation ceremony during EMS World 2026, representing Charles County DES on a national stage.

Additionally, Jenny has authored an article highlighting her work and the MIH initiative, which is expected to be published in EMS1 in the near future.

We are extremely proud of Jenny's dedication, leadership, and continued commitment to improving patient care and advancing emergency medical services in Charles County.

Congratulations, Jenny! Well deserved!"

MARYLAND MIH
MOBILE INTEGRATED HEALTH PROFESSIONALS



GUEST ARTICLE

The Power of Pharmacy in Mobile Integrated Health

By Melanie Chapple, PharmD

As a pharmacist serving in the Maryland Mobile Integrated Health (MIH) programs of Queen Anne's County and Talbot County, and soon to be Caroline County, I have seen firsthand how impactful it can be to bring medication expertise directly into the community. These programs were designed to reduce emergency department (ED) visits, prevent avoidable hospital readmissions, and remove barriers to care, especially in rural areas where access is not always easy. Having a pharmacist as part of the MIH team brings unique value to patients and providers alike.

Meeting Patients Where They Are

Through 15- to 20-minute telehealth visits, I am able to review patients' medication histories, assess their adherence, and provide education about their therapy. Many of the people we serve are managing complex conditions such as heart failure, COPD, and diabetes, and often take more than 10 medications. That complexity comes with risks including drug interactions, side effects, affordability concerns, and simply confusion about how to organize and take medications correctly. My role is to catch those problems early, provide solutions like medi-planners or blister packs, and ensure patients have the knowledge and resources to safely manage their care at home.

GUEST ARTICLE CONTINUED

Breaking Down Barriers

One of the most rewarding parts of this work is helping patients overcome obstacles that go far beyond the those presented by the pills in their medicine cabinet. Transportation challenges, financial strain, and health literacy all play a role in whether someone can stick with their prescribed treatment. By collaborating with paramedics, health department nurses, and community providers, we can address these barriers in real time. This might mean helping a patient obtain affordable medications, setting up remote monitoring for blood pressure and blood sugars, or simply answering questions about side effects.

Real Impact on Health Outcomes

Medication-related issues are a leading cause of unnecessary ED visits and hospital readmissions. By reconciling medications after hospital discharge, optimizing therapies, and ensuring patients know how to use their inhalers, insulin, or anticoagulants properly, pharmacists help keep people healthier and at home. The ripple effects are enormous: fewer complications, more confidence for patients and families, lower costs for the healthcare system, and stronger connections between patients and their local providers.



Why This Work Matters

For me, this is more than a job. It is a calling to improve healthcare access in the community where I live and raise my family. I would go on a lecture circuit tomorrow to advocate for MIH programs, particularly in rural areas where resources are stretched thin and gaps in care are significant. To help break down barriers -- whether social, financial, or medical -- for our neighbors is incredibly rewarding. And to do it as part of a collaborative team alongside paramedics, nurses, and providers who are equally committed to patient well-being is an experience I cherish every day.
Mobile Integrated Health is the future of community-based care. Having pharmacists integrated into these teams ensures that medications, which are the cornerstone of most treatment plans, are obtained affordably and used safely and effectively is a model that not only saves lives but strengthens communities, and I am proud to be part of it.



UNIVERSITY of MARYLAND MEDICAL SYSTEM

Biography

Melanie Chapple, PharmD, earned a Bachelor of Science in Chemistry from Washington College in 1996 and a Doctor of Pharmacy from the University of Maryland at Baltimore in 2000. She completed an ambulatory care residency with a managed care emphasis at the University of Maryland School of Pharmacy in 2001. Dr. Chapple continued her career as a staff/clinical pharmacist for 15 years at University of Maryland Shore Regional Health (UM SRH), which extends health care services throughout region served by UM SRH, which includes Caroline, Dorchester, Kent, Queen Anne's and Talbot counties. In 2016, she moved into her current role as a transitions pharmacist in the Population Health Department at UM SRH. She works hand in hand with the transitional nurse navigators and has been a leading advocate for improving medication reconciliation at UM SRH. Dr. Chapple also consults with the University of Maryland Shore Medical Group-Primary Care team and provides telehealth medication consults for the Queen Anne's and Talbot County Mobile Integrated Health teams. Over the last six years, Dr Chapple has developed outreach medication consulting programs at the senior centers throughout the five-county region served by UM SRH.



"Melanie's expertise, guidance, and commitment to Mobile Integrated Health have been an invaluable resource to MIH teams across Maryland's Eastern Shore. Having access to her expertise is especially important for rural communities, where innovative approaches to healthcare access and care coordination can make a meaningful difference in the lives of our residents."

Rachael Cox MIH Coordinator Talbot County

PROGRAM SPOTLIGHT

Montgomery County Mobile Integrated Health

Submitted by: Avital Graves, MBA, MHA, NRP - MIH Program Manager

HOW IT STARTED

Montgomery County's Mobile Integrated Health program began in 2016 and was formally taking on patients in early 2017. The original goal of the program was to address the top 250 high utilizing patients in Montgomery County. That number originated from the thought that it would offset the necessity for another fully staffed ambulance needing to be added to the MCFRS fleet (roughly $1M annual cost). The program began in the EMS Operations division being run by two career MCFRS Captains with a rotating roster of 8-10 paramedics who would pick up cases on overtime. The medics were joined on visits by a nurse from one of the hospital home health programs in the county.

GROWTH & EXPANSION

In 2019, it was apparent that the MIH program needed more staff. A deal was struck between MCFRS and the Montgomery County Department of Health and Human Services to add a full-time social worker and nurse from the Adult Protective Services division to be embedded in the MIH team. The deal also provided funding for the hiring of a full-time civilian manager and a data analyst.

Over the past seven years, the program has continued to evolve and now employs two full-time paramedics in addition to the nurse and social worker positions. The team handles a caseload of over 1,000 unique patients annually and has completed over 300 home visits. The team focuses on connecting patients with existing resources within Montgomery County, including County services, non-profits, healthcare providers, and social services.

Mobile Integrated Health in Montgomery County addresses several aspects of system utilization beyond EMS. MIH monitors 911 utilization at the homeless shelters in the County to determine which calls are appropriate and where diversion can occur before the 911 call takes place. They also provide education and training to shelter staff regarding 911 call best practices, and dispel frequent myths and misconceptions. MIH also works closely with the almost 40 skilled nursing facilities in the county to identify opportunities to reduce their 911 dependency, including partnerships with private ambulance companies, infusion centers, and on-site practitioners who can support and treat patients in place.



GROWTH & EXPANSION

MIH has also worked to increase access to Narcan in Montgomery County and became an Opiate Response Program in 2021 to order Narcan directly from the Maryland Department of Health. Thousands of kits have been distributed to the local community and beyond, contributing to an overall decline in opiate overdoses and fatalities. Collaboration with the Montgomery County Department of Health and Human Services Harm Reduction Team and grassroots peer support teams have helped MIH understand the science of addiction and how to meet people where they are. MIH engaged the MCFRS Community Action Team to offer free Narcan training in the community, along with Hands-Only CPR and Stop the Bleed programs. Most recently, MIH trained the MCFRS Community Outreach team to begin providing Narcan training in the community when they offer fire safety awareness.

LESSONS LEARNED

Over the years working in MIH, it has become evident that MIH serves as a unifier. The program has been able to bring together hospital partners, community organizations, healthcare providers and others to work together towards common solutions. MIH identifies global solutions for patient needs that can be shared and applied in a multitude of settings. Additionally, MIH strives to get all parties involved on the same page so that patients experience consistent treatment at all county hospitals.

LESSONS LEARNED

MIH has also demonstrated that it truly is a program that meets the needs of the community it serves. One example was the creation of the Montgomery County Hoarding Taskforce, founded by MIH Manager, Avital Graves. Referrals from the field indicated an increase in hoarding conditions and there were no centralized resources or groups able to coordinate responses to the issues. The Montgomery County Hoarding Taskforce brings together code enforcement, Adult Protective Services, MCFRS, Montgomery County Sheriffs, Animal Services, Housing Opportunities Commission and others to address needs and coordinate responses to these homes, ensuring safety in the community and preventing deadly fires before they happen.

LOOKING TO THE FUTURE

MIH is working towards a Treatment in Place pilot that will offer support in the Northern part of the County that was affected by the recent closure of the Germantown Emergency Center. MIH is also looking towards 24-hour buprenorphine induction available to residents once the renovated Stabilization Center opens at the Montgomery County Crisis Center. The Stabilization Center will also be able to accept Emergency Evaluation Petitions, becoming the first transport destination outside of Montgomery County Emergency Departments. This change will allow for faster EMS drop-offs with much quicker ambulance turnover times. A behavioral health Diversion Center is scheduled to open in FY29 with even more capacity for sobering services as well as inpatient monitoring with Advanced Level Practitioners. Bottom of Form

In summary, Montgomery County's MIH program has continued to grow and expand to meet the needs of the evolving community. The team strives to provide services without duplication of effort, catch those who fall through cracks in the system, and continue to identify creative solutions to common problems. The collaborative approach cultivated by MIH has expanded to a multitude of other outreach efforts being replicated within and outside of the county, and continues to be an example of what can happen when efforts are made to reach across the table and identify common goals and outcomes that interest all participants.





TALBOT COUNTY
MOBILE INTEGRATED HEALTH

DID YOU KNOW?

35.8% of adults in Maryland live with high blood pressure, slightly higher than the national average of 34.0%

Source: americashealthrankings.org

Mobile Integrated Health (MIH) programs help individuals manage high blood pressure through regular monitoring, medication management, education, lifestyle coaching, and connections to healthcare and community resources to improve blood pressure control and prevent complications.

Program Update

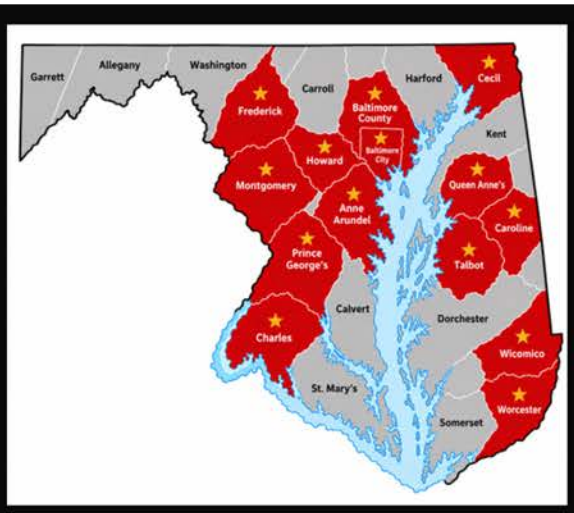
In celebration of Mobile Integrated Health (MIH) Awareness Week in October, the Talbot County MIH team is offering free blood pressure screenings at multiple locations throughout the county. As of this publication, the team has already conducted several screenings, with additional events planned throughout the month. During its first visit to a local senior center, the team identified four individuals who enrolled in the MIH program, expanding access to ongoing support and chronic disease management.

The Talbot County MIH team is also excited to announce the addition of new paramedics and EMTs, increasing its capacity to provide services and expanding availability for in-home visits. In addition to the team's registered nurse and MIH coordinator, the program now includes six paramedics and four EMTs, strengthening its ability to connect residents with personalized healthcare services and community resources.

MARYLAND MIH
MOBILE INTEGRATED HEALTH PROFESSIONALS

BY THE NUMBERS

Program updates from across the state



Howard

Since **partnering with the county's Long-Term Care Ombudsman Program** a year ago, our MIH team has helped educate EMS clinicians and residents about the program's advocacy services and available resources. Over the past year, **we have referred more than 40 patients living in nursing homes and assisted living facilities** who needed additional advocacy and support services that the facility was not providing.

You're doing AMAZING work!!

Worcester

FY 26 Served **235 unduplicated patients**

CRISP reports **$654,462** of healthcare savings after enrollment for 3 months

Wicomico-SWIFT

SAFE Fall program **enrolled 200 fall-related patients**, of those, only two had a repeat fall within 60 days

3 successful Buprenorphine inductions last quarter

Cecil

90 Day 911 Utilization Reduction
The average 911 calls per patient **fell from 5.1 to 1 per patient**

This resulted in the **avoidance of 114 hours** of unit time which equates to **$177,992 in operation expenses saved**

Readmission risk score **fell from 22% to 8.8%**

WAY TO GO!!!

Talbot

43% reduction in 911 utilization

90% success rate in closed loop referral to SDOH need

Charles County

5 Buprenorphine inductions since initiation of MODEL-T in October 2025

Diabetes improvement initiative since March 2026 **195 diabetic emergency encounters** and **35 glucometer starter packs distributed**

MARYLAND MIH MOBILE INTEGRATED HEALTH PROFESSIONALS

Stay tuned for our Spring Newsletter
May 2027

NEWSLETTER EDITORS: Lynn Wells
Rachael Cox



67th Annual Mid-Atlantic Life Safety Conference

IN 1959, GOVERNOR J. MILLARD TAWES, a past president of the Maryland State Firefighters Association, convened Maryland's first statewide conference on fire prevention. Since then, the Mid-Atlantic Life Safety Conference (MALSC) has grown into one of the foremost annual events of its kind in the nation. Today, MALSC's stable of experienced subject matter experts deliver an expanded array of keynote presentations and educational programming that encompasses emergency medical services, emergency management, first responder health and safety, and community risk reduction. MALSC participants return to their jurisdictions prepared to implement new information and strategies designed to enhance life safety on many fronts. The 67th Annual Mid-Atlantic Life Safety Conference, held September 15, 2026, in Annapolis, Maryland, continued this rich tradition.

"For 67 years, we have put together a great program that allows everybody to learn what's going on in today's world," said Office of the State Fire Marshal Chief Deputy of Support Services Joe Walters, who chairs the conference committee. "The best part about it is that it's local and relatively inexpensive for what you get, including the opportunity to mingle with everybody from the newest member of the public safety sector to the most experienced in leadership. You can sit down and have an actual conversation and learn from everybody."

(Above: Maryland State Police Superintendent Colonel Michael A. Jackson announced the appointment of Prince George's County Fire and Emergency Medical Services Department Deputy Fire Chief Carroll H. Spriggs, II, for a six-year term as Maryland State Fire Marshal. Spriggs succeeds Chief Deputy Jason Mowbray, who had served as Acting State Fire Marshal since December 2023.)



Mark your calendar for the **68th Annual Mid-Atlantic Life Safety Conference**, September 28, 2027, at the Crowne Plaza Annapolis, and learn more at https://www.midatlanticlifesafetyconference.com.



Retired Frederick County Career Fire Captain and Life Member of the Junior Fire Company of Frederick Tim Shelton (center) was honored with the 2026 John C. Spiker, Sr., Excellence in Life Safety Educator of the Year Award for his exceptional commitment to public education, firefighter training, and community service.



Worcester County Fire Marshal Matthew Owens (second from left) received the 2026 Fire Chief James E. Jarboe Public Safety Lifetime Achievement Award in recognition of his extraordinary commitment to the fire service, law enforcement, and public safety throughout hits 45-year career.











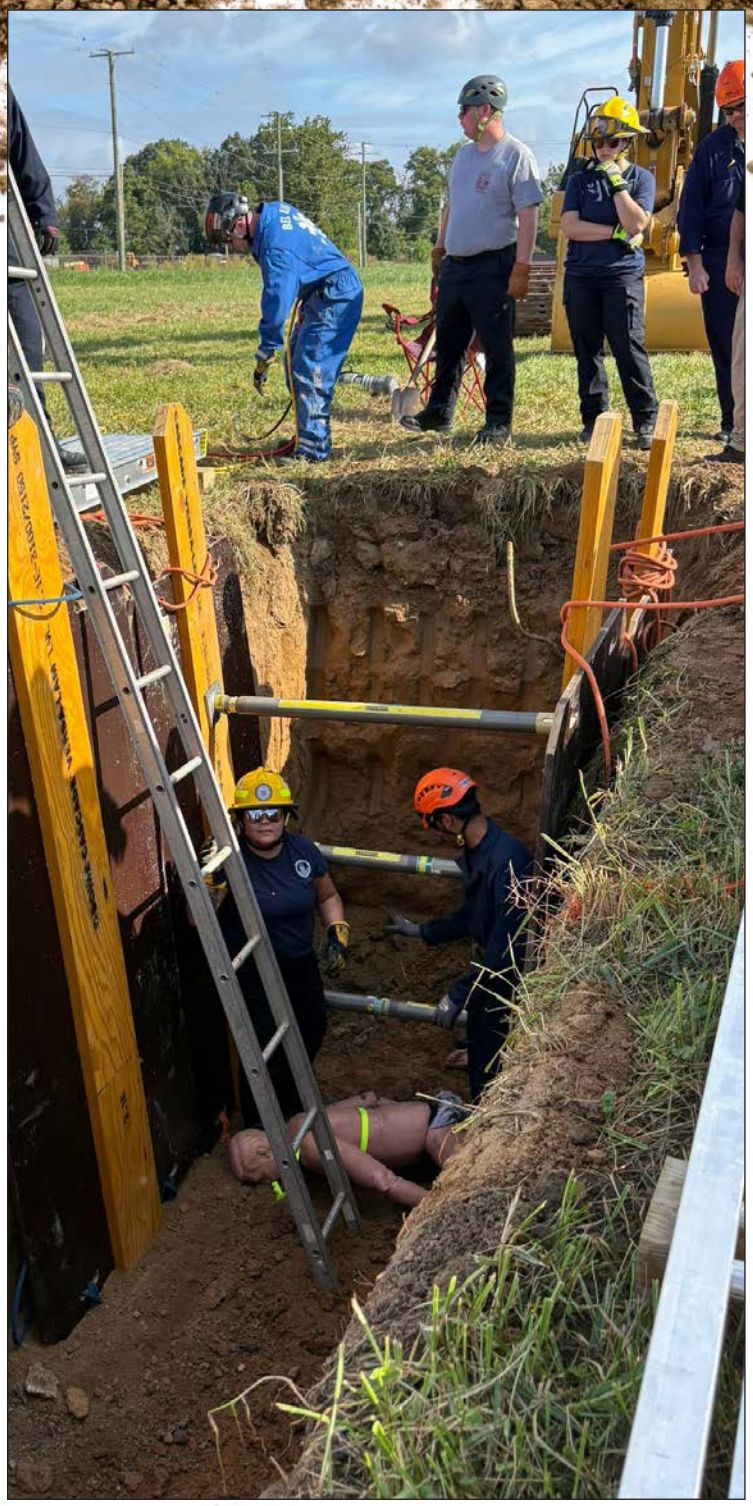
Conference exhibitors and sponsors keep MALSC attendees up-to-date on the latest products and services in the field of public safety.

Life in the Trenches for

EMS clinicians from the Harford County Department of Emergency Services took part in trench rescue operations in September as part of their ongoing training to provide advanced medical support during special operations incidents.

Team members learned how to stabilize and shore up trench walls, safely operate within the hazard area, provide emergency medical care to trapped or injured patients, and assist with their safe extrication. The training helps prepare clinicians to bring EMS care closer to the patient during complex technical rescue incidents.

[Photos: Harford County Department of Emergency Services]



Harford County EMS











2026 Maryland TraumaNet EMS Clinician/RN Award Nominations Open



THE MARYLAND TRAUMA CENTER NETWORK (TraumaNet) seeks nominations for the 2026 TraumaNet EMS Clinician and RN Awards. Nominate an EMS clinician or nurse who exemplified commitment to care of trauma or burn patients in cases occurring in calendar year 2026.

EMS Clinician Award Criteria
This award recognizes a single clinician for acts above and beyond the standard of care for any trauma or burn patient(s). Any practicing EMS clinician in good standing from the State of Maryland is eligible.

RN Award Criteria
This award recognizes a single staff nurse who provides care above and beyond the accepted standard of care for any trauma or burn patient(s). Any practicing staff nurse in good standing from the State of Maryland is eligible.

Nominations will be accepted through January 15, 2027. Awards will be distributed at the Maryland Committee on Trauma's Point/Counterpoint Conference 2027 in Baltimore, Maryland. To submit nominations, scan the QR code, or go to https://tinyurl.com/MDTraumaNet2026Awards. ✱

PEDIATRIC EMS & ED READINESS

Maryland EMS for Children

Catalyst Roundtable:

Accelerating Innovation in Pediatric Emergency Care

Join the state PEMAC Committee for an afternoon filled with discussions, data, and new directions.

Date: November 4, 2026 (Wednesday)
Time: 12:30 PM – 3:00 PM
Location: MIEMSS HQ: Conference Room 212

RSVP Required: pepp@miemss.org
In-person with networking lunch

- ❖ Prehospital Treatment of Pediatric Hemorrhage: TXA & Whole Blood experience
- ❖ Pediatric E-Scooter Injuries: Emerging Trends and Opportunities for Prevention
- ❖ Maryland Pediatric EMS Dashboard
- ❖ Maryland Outcomes for Pediatric Out of Hospital Cardiac Arrest: Assessment of Protocol and QI Efforts

Join Virtually:
Go To Meeting platform (no pre-registration required)
https://meet.goto.com/CynthiaWrightJohnson/mdemsc_november_catalyst_roundtable_forum

For more information, please contact the Maryland EMS for Children Department @

PedsReady@miemss.org

ACS Awareness Week 2026



NOVEMBER 15-21, 2026, marks the American Heart Association's second annual Acute Coronary Syndrome (ACS) Awareness Week, dedicated to raising awareness about ACS and chest pain. ACS refers to a sudden reduction in blood flow to the heart, most often caused by erosion or rupture of unstable coronary artery plaque and subsequent thrombosis. Each year, ACS affects approximately 805,000 Americans, including 605,000 first events and 200,000 recurrent events. Proper management for each of these conditions is key to reducing both immediate and long-term complications.

Learn more at https://tinyurl.com/ACSAwarenessWeek2026. *



2026 2027 UPCOMING EVENTS

NOV 15-21	ACUTE CORONARY SYNDROME (ACS) AWARENESS WEEK (Nationwide) https://tinyurl.com/acs-awareness-2026
NOV 23	MARYLAND REMEMBERS (Towson, MD) https://zerodeathsmd.gov/maryland-remembers/
JAN 29-31	WINTERFEST EMS CONFERENCE (Easton, MD) https://miemss.org/home/Public/Conferences-and-Events/Winterfest-Conference
FEB 01	DEADLINE FOR RIGHT CARE WHEN IT COUNTS AWARD NOMINEES https://miemss.org/home/Public/Awards
MAR 12-13	MILTENBERGER EMERGENCY SERVICES SEMINAR (Rocky Gap Casino Resort) https://www.miltenbergerseminar.com/
JUNE 17-18	POINT/COUNTERPOINT CONFERENCE (Baltimore, MD) https://mdcot.com/point-counter-point-2027/

Send EMS-related calendar events to ptandy@miemss.org for possible inclusion in a future issue of *Maryland EMS News*.

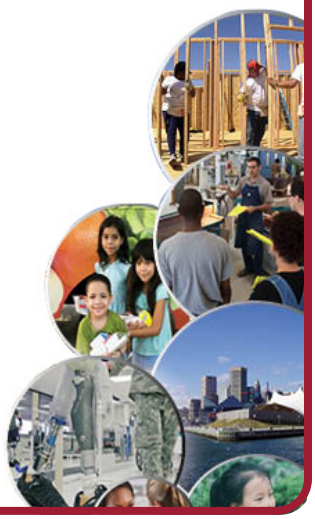
Maryland Charity Campaign

Oct. 5 – Dec. 11, 2026 mcc.maryland.gov

Support Your Favorite Charities!

- Donate to causes that mean the most to you.
- 700+ local, national, and international charities to choose from.
- Pledge now and pay via payroll deduction in 2027.
- Charities include organizations that provide support for cancer patients, stream clean-up, physical therapy for babies, food for rescued animals, victims of human trafficking, trees for low-income areas, libraries, and much more.
- Watch your in box for more info or scan the QR code!

Maryland Cares: Small Gifts, Big Impacts



The updated **2026 Maryland Medical Protocols for EMS app** is LIVE for both iOS & Android. This new version adds a brand-new Protocol Search system built into a redesigned Protocol List, a Brief Alcohol Withdrawal Scale calculator for quick BLS/ALS treatment guidance based on observed symptoms, a new-and-improved Protocol viewer, and a restyled home screen with version & release date indication to ensure you are always up to date. As always, everything is pre-built into the app and no internet connection is ever required to utilize any and all functionality.



If your device has not already updated to the latest version or you have yet to install the app, direct links to both the iOS & Android app downloads can be found at https://www.miemss.org/home/Clinicians/EMS-Protocols-App.



TidalHealth Peninsula Regional hosted its annual Topics in Trauma Conference on September 18, 2026, in Salisbury, Maryland. The conference welcomed a diverse multidisciplinary audience, including prehospital clinicians, nurses, advanced practice providers, physicians, and other healthcare professionals for a full day of learning, collaboration, and innovation in trauma patient care. Strong participation from both in-person and virtual attendees ensured an inspiring opportunity to share knowledge, strengthen partnerships, and advance excellence in the field of trauma care. ✱













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 from August 2026 to October 2026, as a result of prohibited conduct. For more information, contact Lisa Chervon, Chief of the MIEMSS Office of Integrity, at lchervon@miemss.org or (410) 706-2339. Additionally, MIEMSS maintains a searchable database of all EMS Board decisions at https://www.miemss.org/home/public, which can be found under Public Orders Report in the left-hand column.

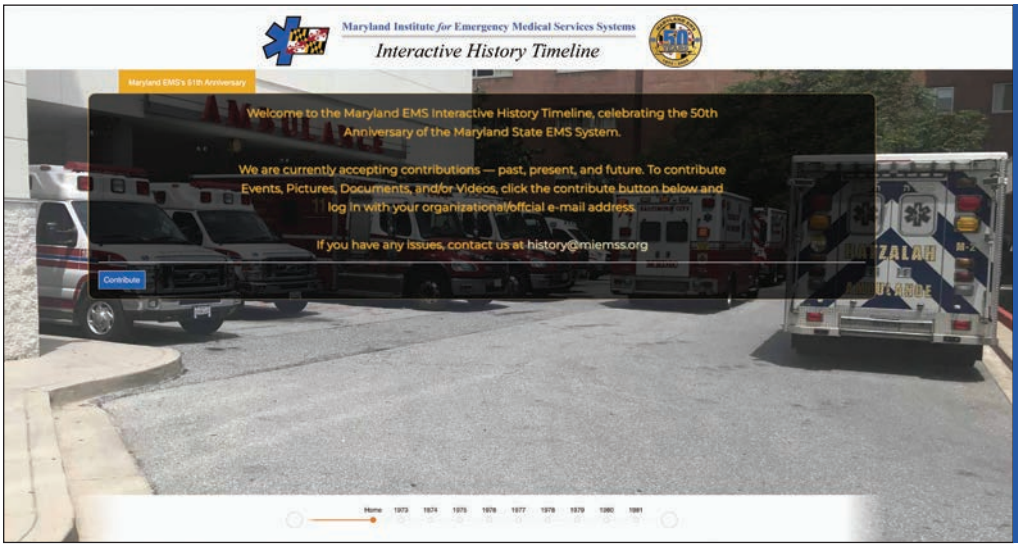
IRC25-044 (Applicant) August 25, 2026. In 2003, the Applicant pled not guilty to the crime of driving while under the influence of alcohol per se. The Applicant was found guilty, and sentenced to 360 days in jail, with all but 100 days suspended, and supervised probation. MIEMSS also received information indicating that, in 2007, the Applicant pled guilty with agreed statement of facts to the crime of malicious destruction of property. The Applicant was found guilty, and sentenced to sixty (60) days in jail, with all but twenty (20) days suspended, and twenty-four (24) months of supervised probation. In 2011, the Applicant pled guilty to the crime of driving a vehicle while impaired by alcohol. The Applicant was found guilty, and sentenced to sixty (60) days in jail. In 2015, the Applicant pled guilty with agreed statement of facts to the crimes of robbery, wearing and carrying a dangerous weapon with intent to injure, and driving a vehicle while under the influence of alcohol. The Applicant was found guilty, and sentenced on February 5, 2016, respectively, to fifteen (15) years in jail with all but seven (7) suspended and three (3) years' probation; three (3) years in jail with all suspended; and three (3) years in jail with three (3) years supervised probation. All of the aforementioned incidents were disclosed by the Applicant when applying for Initial Applicant Certification to MIEMSS. As a result, the EMT Applicant's application for initial EMS certification was denied.

IRC26-015 (EMT) August 25, 2026. In October 2025, the EMT was assigned to an Accelerated Rehabilitative Disposition (ARD) program by the Court of Common Pleas of York County, Pennsylvania, for the offense of driving a vehicle while under the influence of alcohol – 1st Offense. The terms of the program required that the EMT complete thirty-five (35) hours of community service within four (4) months, completion of DUI classes within six (6) months, abstinence from alcohol/illegal drugs, and attendance of a Victim Impact Panel within six (6) months. As a result, the EMT's certification was placed on probation for one (1) year.

IRC26-016 (EMT) August 25, 2026. In June 2022, the EMT pled not guilty with agreed statement of facts to the crime of driving a vehicle while under the influence of alcohol per se, in the District Court for Harford County. The EMT was subsequently issued supervised probation before judgment for a period of six (6) months. Additionally, in May 2025, the EMT submitted an Application for Renewal of EMT Certification to MIEMSS, and failed to disclose the aforementioned disposition. As a result, the EMT's certification was placed on probation for one (1) year, and the EMT was reprimanded for failure to disclose the criminal disposition.

IRC26-017 (Paramedic) August 25, 2026. In May 2024, the Paramedic pled guilty to the crime of driving a vehicle while under the influence of alcohol per se. The Paramedic was subsequently issued unsupervised probation before judgment for a period of one (1) year. Additionally, in February 2025, the Paramedic submitted an Application for Renewal of Paramedic License to MIEMSS, and failed to disclose the aforementioned disposition. As a result, the Paramedic's license was placed on probation for one (1) year, and the Paramedic was reprimanded for failure to disclose the aforementioned criminal disposition.

IRC26-020 (EMT) August 25, 2026. In August 2024, the EMT pled guilty to the crime of driving a vehicle while impaired by alcohol. The EMT was subsequently issued unsupervised probation before judgment for a period of twelve (12) months. As a result, the EMT's certification was placed on probation for one (1) year.



Make History with MIEMSS

We are currently accepting contributions — past, present, and future. To contribute Events, Pictures, Documents, and/or Videos, visit the website below or scan the QR code and log in with your organizational/official e-mail address.

Maryland EMS History Timeline (history.miemss.org)



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