

M I E M S S

*Report to
Maryland State Firemen's
Association*

February 17, 2008

Robert R. Bass, MD, FACEP

MIEMSS Executive Director's Update

February, 2008

MIEMSS Announces Retirement of Three Longtime Employees. On January 1, 2008, three long time employees of MIEMSS ended State service in retirement. Andy Trohanis, Director of Licensure and Certification, retired after 37 years of service. Bill Seifarth will replace him as Director of that department. Tom Miller, Director of MIEMSS Communications Department, has retired after 28 years of service. Rich Berg is the Acting Director of that department. Dave Ramsey retired from the Region I Administrator position following 33 years of service. Rick Meighen, Region II Administrator, will cover both Regions I and II until the position is filled.

EMS Operation, EMS Educator and EMS Medical Director Summit. On January 23, 2008, MIEMSS held a summit for EMS Medical Directors, highest EMS operational program officials, and lead EMS educational program officials. Two major presentations were given; since the implementation of the 2007 Trauma Decision Tree criteria, MIEMSS presented a retrospective review of the EMS patients flown to a trauma center. The second presentation and discussion was on the National EMS Education Standards which are out for public comment and review. The National EMS Scope of Practice document which delineates the four levels of providers for the model EMS System and the role that both the CRT I-99 and AEMT may have in Maryland's system were discussed.

Legislative Update. The Maryland General Assembly began on Wednesday, January 9, 2008, for its regular annual session. The dates for the Budget Hearings have been set. Several bills have been introduced relating to emergency services providers:

- ∞ House Bill 24 – Law Enforcement Officer and Emergency Responder Protection Act of 2008 – would make it a crime to intentionally cause physical injury to a firefighter, rescue squad member, or emergency medical services responder engaged in fighting a fire, performing emergency services, or proceeding to a fire or other emergency. An individual violating this prohibition would be guilty of assault and subject to 15 years imprisonment, a fine of up to \$15,000, or both.
- ∞ House Bill 31 – Vehicle Laws – Registration Plates Honoring Emergency Medical Services Providers – would require MVA, in consultation with the EMS Board, to develop and make available a specially-designed registration plate honoring EMS providers; EMS providers licensed or certified under §13-516 would be eligible for such a plate; fees would be charged for the plates so the MVA could recover their costs associated with the plates.
- ∞ House Bill 556 and Senate Bill 522 – To add to the EMS Board membership 1) a helicopter pilot employed by the Maryland State Police and 2) another member from the public at large.
- ∞ Senate Bill 810 – Would require that an owner of a private helicopter be reimbursed from EMSOF for costs incurred in transporting individuals from emergency medical treatment.
- ∞ House Bill 1333 – Would require the Governor to appoint the MIEMSS Executive Director, instead of the EMS Board.

MIEMSS Reminds EMS Providers It Is Not Too Late to Get Flu Shots. This year, the yearly flu season began on September 30, 2007, and ends on May 18, 2008. Based on the information gathered through the DHMH influenza surveillance program, the activity level for Maryland is “**WIDESPREAD**” for the week ending February 2, 2008. MIEMSS reminds members of the emergency services community that it is too late to get their annual influenza vaccination. Typical flu symptoms included fever, dry cough, sore throat, runny or stuffy nose, headache, muscle aches and extreme fatigue.

Ways to decrease the chances of getting the flu are:

- ∞ Avoid prolonged contact with individuals showing possible symptoms of the flu.
- ∞ Maintain a healthy lifestyle to build your immune system.
- ∞ Eat balanced meals, including plenty of fresh fruits and vegetables, and drink lots of water.
- ∞ Get plenty of rest.
- ∞ Wash hands frequently.
- ∞ Get vaccinated for the flu (flu vaccines are 70% to 90% effective among healthy adults).

Volunteer Ambulance Inspection Program (VAIP). Following many meetings and going through various approval processes, the latest version of the Volunteer Ambulance Inspection Program has been printed and is available through MIEMSS Regional Offices. The latest revisions include updates that make it compatible with the current protocols.

2008 Update Pages for Maryland Medical Protocols for EMS Providers. EMS providers will soon be receiving “green replacement pages” that address the 2008 protocol additions, deletions, and changes. The changes will go into effect July 1, 2008, as will the protocol changes printed on the “blue replacement pages” that providers received earlier in 2007. Prior to July 1, all EMS providers (ALS and BLS) must complete a protocol rollout session that covers all the new material, including the *“Trauma Decision Tree, System Resource Utilization, Special Considerations and Protocol Clarification”*. The Instructor portion for the 2008 Update *Train the Trainer 2008 Protocol Rollout* was presented by Dr. Alcorta on February 15, 2008. DVDs of the program will be available in the near future.

SEMSAC BLS Committee. The BLS Committee is continuing to work on the next EMT-B instructor skills update. Second in the series of proposed skills updates, this presentation will review injuries to long bones, the hip, and pelvis. At the last working meeting, assignments were made for scripting the various long bone injuries and traction splinting. The Committee met on January 3, 2008 to finalize the layouts. A schedule for the photo shoot and video taping has been set for mid-February. The Committee will also establish a proposed schedule for instructor rollouts.

Draft National EMS Education Standards Available for Review. Comments for the National EMS Education Standards were due February 1, 2008 and MIEMSS continues to monitor the status of the project. The new standards are set to be published by August, 2009. The effort is being coordinated by NAEMSE; with funding by the National Highway Traffic Safety Administration (NHTSA) and the Health Resources and Services Administration (HRSA). This project represents the next step in implementing the *EMS Education Agenda for the Future: A Systems Approach*. Visit the project Web site at <http://www.nemsed.org> to view and download the draft standards.

Maryland Cardiac Rescue Technicians (CRTs). As of February 7, 2008, there are 208 CRTs in the State. The CRT Program is currently scheduled to end on June 30, 2008; however, the EMS Board is considering extending the CRT program until the newly proposed Advanced EMT educational standards can be implemented. The following is a breakdown by Region:

| | |
|-------------|-----|
| Region I: | 8 |
| Region II: | 3 |
| Region III: | 164 |
| Region IV: | 14 |
| Region V: | 4 |
| Commercial: | 8 |
| Inactive: | 7 |

Current Maryland EMS Providers. The total number of current Maryland EMS Providers is 30, 437 as of February 7, 2008 (current, extended, military and inactive status) and distribution is as follows:

| | |
|-------|--------|
| EMD | 818 |
| FR | 9,829 |
| EMT-B | 16,466 |
| CRT | 208 |
| CRT-I | 685 |
| EMT-P | 2,431 |

Podcast on Retention and Recruitment. The National Volunteer Fire Council (NVFC) teamed up with Firehouse.com to record a podcast on two of the biggest challenges facing volunteer fire departments – retention and recruitment. The podcast for fire and emergency professionals is available online at www.radiofirehouse.com, as well as the NVFC web site at www.nvfc.org. Over the last three decades, the ranks of the volunteer fire service have declined by 7%, yet volunteers comprise 72% of firefighters in the U.S. In the podcast, a discussion into the key findings of this study as well as the overriding concept of leadership when it comes to the issues of retention and recruitment. Also discussed are some of the best practices seen to address the retention and recruitment challenges as well as how leadership plays an important factor in the solution.

In 2007, the U.S. Fire Administration and the NVFC released a comprehensive guide; **Retention and Recruitment for the Volunteer Emergency Services: Challenges and Solutions (Second Edition)**, that examined the obstacles to successful retention and recruitment efforts as well as the solutions to these obstacles. A copy may be downloaded in pdf format of the guide at www.nvfc.org or order a hard copy from the U.S. Fire Administration's Publication Center.

Freestanding Emergency Medical Facilities (FEMF) Regulations. Under Health General Article 19-3A, DHMH will be licensing freestanding emergency medical facilities. Such facilities must comply with emergency transport protocols established by MIEMSS. The EMS Board has adopted an optional supplemental protocol for FEMFs and draft regulations for the designation of these facilities have been developed. The regulations were published in the *Maryland Register* for comment on February 1, 2008.

EMS Week May 18-24, 2008. The slogan for 2008 EMS Week is “EMS: Your Life is Our Mission” and Wednesday, May 21, 2008 has been identified as EMS for Children Day. MIEMSS is planning for the annual Stars of Life program; which recognizes Maryland's outstanding responders, programs, and citizens and the Right Care When it Counts program for children; recognizing children that have made a difference in the care of others. Please go to the MIEMSS web page, www.miemss.org, and go to ***What's New*** then **Maryland EMS News** for nomination forms.

Bystander Care Program. Three Bystander Care classes were taught during January, one with the assistance of two new instructors who recently completed the Instructor's Course. John Donahue, the Director of Regional Programs, has assumed oversight responsibilities for the program following the retirement of Dave Ramsey. The current status of the program, as well as several long-range plans for the future, has been reviewed. Both NHSTA and MOSH have been contacted to discuss the possibility of partnering with those agencies. The revisions to the student manual, instructor's manual, and PowerPoint program has recently been completed in order to bring the program into compliance with current protocols. These new documents will be incorporated into the next training. The coordinator staffed an information booth at the Winterfest EMS conference and continues with arrangements for future instructor's courses to be held at the Miltenberger and EMS Care '08 conferences

Roadway Incident Safety for Emergency Responders. MIEMSS recently modified a Maryland State Highway Safety Office grant to facilitate an eight hour Hands-On-Training Workshop for Safety and Training Officers, Chief and Line Officers, EMS Providers, Firefighters, Law Enforcement Personnel, Emergency Vehicle Operators, and Public Works Personnel in each MIEMSS Region. The workshop will provide an overview of the safety hazards often found at roadway incidents, as well as "Best Practices" designed to help save lives and prevent injuries to emergency response personnel. The goals are to create awareness of important safety issues and to encourage the development of training and operating procedures to safeguard personnel working at roadside crashes or other emergency incidents. This workshop will be held at no cost to the participant. Six hours of CEU's will be available. Please contact your MIEMSS Regional Office to register. Lunch will be provided.

Region I - May 10, 2008, 8am to 4pm

Location: Allegany County Department of Public
Safety and Homeland Security
11400 PPG Road
Cumberland, MD 21502
Contact: Region I Office- (301) 895-5934

Region II – May 17, 2008, 8am to 4pm

Location: Myersville Volunteer Fire Company
301 Main Street
Myersville, MD 21773
Contact: Region II Office- (301) 791-2366

Region III – March 22, 2008, 8am to 4pm

Location: Joppa-Magnolia Volunteer Fire Company
1403 Old Mountain Road South
Joppa, MD 21085
Contact: Region III Office- (410) 706-3996

Region IV – March 15, 2008, 8am to 4pm

Location: Calhoon M.E.B.A. Engineering School
27050 St. Michaels Road
Easton, MD 21601
Contact: Region IV Office- (410) 822-1799

Region V – March 8, 2008, 8am to 4pm

Location: Branchville VD
4905 Branchville, Road
College Park, MD 20740
Contact: Region V Office- (301) 474-1485

Sponsoring Agencies: Maryland Institute for Emergency Medical Service Systems (MIEMSS) and the State Highway Administration (SHA)

Active Centralized Routing Project (ACRP). In response to both EMS and hospital based requests, MIEMSS has developed an Active Centralized Routing Project template which is available as an Optional Supplemental program for any 9-1-1 EMS operational program. The draft template is currently being circulated for comment and lining up of applicants who wish to participate in the project. The focus of the project is to optimize EMS unit availability for 9-1-1 responses by reducing turn around times (return to service times) at the hospitals. Each EMS operational program that participates will dedicate a Supervisor (gatekeeper) to the dispatch center; provide them with computer and a communications frequency to direct EMS units to the appropriate hospitals. This ACRP is based on both Washington, DC's and Baltimore City's improved EMS Unit availability using this strategy. If your EMS Operational Program is interested in participating in this project, contact Richard Alcorta, MD (ralcorta@miemss.org) for details.

Regional Programs and Emergency Operations. The Regional Administrators are continuing the establishment of Regional Health and Medical Committees.

- ∞ Region I continues to coordinate efforts between the regions EMS, Public Health, Hospitals and Emergency Management Agencies for planning training and exercises.
- ∞ Region II continues work on expanding their Interstate Hospital Mutual Aid Agreement.
- ∞ The Region III Health and Medical Task force is administering the Prophylaxis Cache funds and the VoIP project funded with UASI funds. In association with the Prophylaxis Project they are seeking approval from the FDA to have their cache included in the Shelf Life Extension Program (SLEP).
- ∞ Region IV participated in the statewide Pandemic Influenza Program focusing on Medical Surge and Emergency Medical Dispatch protocols for a pandemic. The results should be published shortly.
- ∞ Region V is re-organizing their group to better represent their needs at the statewide Health and Medical Meetings.

The GEMAC Health and Medical Committee has embarked on major planning effort. A matrix is underdevelopment that documents current and previous goals and initiatives and cross-references them to the States Core Priorities, DHS's Target Capabilities List, and Priorities set by DHHS. This focuses us on what our state's priorities should be while preparing for Federal Grant Applications. This effort is already proving to be useful as the DHS has now mandated a State Preparedness Report prior to next year's grant applications.

The distribution of the HRSA grants has been decided for FY06 and we have received an extension to expend the funds. Work has begun to ensure that projects funded by federal funds are in-line with the various agencies priorities

The Technical Advisory Groups and Focus Groups continue to be active:

- ∞ The Communications/IT TAG continues to meet monthly is focusing on the following items:
 - Advising MIEMSS on the Roll-out of HC Standard,
 - Preparing a state Health and Medical Communication Plan to include means for redundancy, and
 - Advising the roll-out of future technologies.
- ∞ The EMS Focus group is meeting with several groups to discuss the Mass Casualty/Catastrophic Incident plan. They anticipate final approval of the plan at their next meeting and forward it to the GEMAC Health and Medical Committee. It will then go to the EMS Board for their concurrence.
- ∞ The Hospital Disaster focus group is concentrating on ensuring that hospitals are compliant with NIMS and will be doing a "Train the Trainer" program for the Hospital Incident Command System classes. They will also be discussing the needs for Bed Tracking systems at their next meeting.
- ∞ The Medical Surge TAG is reviewing the re-write of the Medical Surge plan which will be distributed for comment shortly. This version is more operational than the previous versions.

The MIEMSS Regional offices are managing multiple projects through out the state. For more information about any of the items listed below, contact your appropriate MIEMSS Regional office

- ∞ Roadway Incident Safety for Emergency Responders. MIEMSS recently modified a Maryland State Highway Safety Office grant to facilitate a program presenting an overview of the safety hazards at roadway incidents and which is designed to help save lives and prevent injuries to emergency response personnel. This workshop will be held at no cost to the participant. Please contact your MIEMSS Regional Office to register.
- ∞ EMS Conferences are scheduled throughout the state. Please watch *The Maryland EMS News* and MIEMSS web page for registration forms as they are published.
 - Miltenberger Emergency Services Seminar at Rocky Gap holds pre-conferences February 28, 29 and March 1, 2008 for the full seminar. (Region I)
 - EMS Care '08 - The Statewide conference will be in Annapolis this year in April. EMS Care is being re-organized based on a survey of input from EMS providers to make it more informative and exciting.
- ∞ Quality Assurance Officer Classes. Contact your Regional Office for the schedule to register.
- ∞ The Maryland Virtual Emergency Response System (MVERS) is supporting the Critical Infrastructure Protection efforts in the state. Documentation of the State Capital has recently been completed.
- ∞ The Regional Offices continue to coordinate the distribution of Highway Safety Grants, 50/50 Equipment Grants, EMD, and ALS funds. Recently they have been very successful in obtaining additional funding for ATV Safety, Recruitment and Retention (SAFER), and Bystander Care programs.

Emergency Medical Services for Children Program (EMSC). 2008 Right Care When It Counts nomination forms are available and on the MIEMSS website. Previous year's award recipients are featured in the 2008 Safety Calendar that is available for printing from the website: (www.miemss.org/EMSCwww/RightCare.html)

The State Pediatric Emergency Medical Advisory Committee (PEMAC) will be holding 2008 meetings utilizing the new Go To Meeting web platform. PEMAC continues to work with MIEMSS to implement the revised ten federal EMSC Performance Measures and will present an update at the April Medical Directors Symposium. The EMSC Program and the five Regional Pediatric Medical Directors are supporting pediatric education at EMS and Life Safety Conferences across the state and implementing the AAP PEPP 2nd edition courses. The PEMAC Education Subcommittee will be updating pediatric teaching resources on CD and will continue to collaborate with the BLS Subcommittee on instructor resources. We are exploring formats for online distribution of these case studies and pediatric protocol updates. Dates and pediatric workshops for 2008 EMS & Life Safety Conferences are available. Maryland's current Federal EMSC Partnership Grant focuses on three major goals: Monitoring the impact of the EMSC initiatives based upon the federal EMSC Performance Measure, Enhancing the current EMSC data activities to include data on care of children and monitoring compliance with the federal NEMSIS data set; and Expanding current EMSC pediatric education activities to hospital and out of hospital providers through conferences and teleconferences.

The MIEMSS EMSC Program Child Passenger Safety (CPS) Hospital Assessment grant for FY 08 has expanded educational materials into hospital emergency care departments with a focus on safe transport of children in ambulances. The past three years of conference calls are posted on the website listed below. The revised Prescription for Your Child's Safety Pad is available in English and Spanish, available on the website along with other posters and segments of the Proper Occupant Protection DVD (<http://www.miemss.org/EMSCwww/CPSHome.htm>). A new display, questionnaire, and workshop have been developed to provide the current information on Safe Transports in Ambulances – SECURE children, families and providers.

The Maryland RISK WATCH Champion Teams have expanded to more after school programs with new communities in Cecil County and Kent County. RISK WATCH schools continue to receive support from the MIEMSS, Office of the State Fire Marshal, Maryland State Fireman's Association Fire Prevention Committee, and Safe Kids Maryland Coalitions. Displays of this multi-organization commitment have been at the life safety and EMS conferences across the state. More information on both life safety themes and family disaster preparedness are in the monthly updates that can be found at www.miemss.org/EMSCwww/RISKWATCH2.htm.

Yellow Alert. MIEMSS continues to monitor alert utilization by all hospitals. Statewide utilization for red, yellow, and reroute decreased by 10%, 14%, and 17% respectively in 2007 from 2006. Reports are available on the MIEMSS webpage, <http://www.miemss.org/HospitalAlert/indexChats.asp>.

The 2007-2008 flu season is now being reported by DHMH as widespread and alerts have increased significantly over the past several weeks. MIEMSS will continue to monitor and work with the regions to consider whether measures from the Hospital and EMS Emergency Department Overload Mitigation Plan should be implemented.

MIEMSS continues to meet with hospitals and state agencies to discuss Emergency Department Overcrowding. Recently, the Maryland Health Care Commission convened an Emergency Department Performance Measures Technical Advisory Committee to develop core performance measures to evaluate emergency department efficiency. Currently, no in-hospital data is collected to evaluate emergency department performance. MIEMSS is represented on the committee, as well as two members of SEMSAC. Other agencies include the Health Services Cost Review Commission and the DHMH Office of Health Care Quality. Guest participation by the Assistant Director of the Urgent Matters has also occurred. The committee has met three times and is working on a survey to be distributed to hospitals to assess their ability to collect certain data.

AED Program. Currently, there are 909 approved layperson AED facilities in Maryland with a total of 2183 sites. A list of approved facilities is updated monthly and available on the MIEMSS website at <http://www.miemss.org/Approved.doc>.

During the 2006 session of the Maryland General Assembly a law was passed that requires all high schools in Maryland to have AEDs and individuals trained in CPR/AED use. MIEMSS is continuing to work with the Maryland Department of Education on developing the corresponding regulations. The regulations have been posted for public comment in the February 1, 2008 edition of the Maryland Register and are scheduled for final consideration by the Board of Education on March 25, 2008.

AEDs are now located in all public high schools in all jurisdictions except Baltimore City and Washington County.

MIEMSS is working with the American Heart Association on legislation to remove current barriers to public access to AEDs by repealing limitations on individual use of AEDs and extending certain provisions for protection to entities and individuals participating in the Maryland Facility AED Program. Senate Bill 570-*Emergency Medical Services Board-Public Access Defibrillation Program* is scheduled to be heard on February 28, 2008 at 1:00 pm in the Senate Finance Committee.

In 2007 a bill also passed requiring MIEMSS to do a study on AEDs at pools and other public locations and provide a report to the General Assembly. MIEMSS will be using data collected from the Maryland Cardiac Surveillance System (MCASS) as a primary resource of information for the report. The AED Task Force met three times to discuss both AED topics and met on November 9, 2007 to review and approve a summary of the report and its recommendations. The final report was sent to the Senate Finance Committee and the House Health and Government Operations Committee in December, 2007. Copies of the report may be obtained by contacting Lisa Myers at 410-706-4740 or lmyers@miemss.org. The report may also be viewed or downloaded at

http://www.miemss.org/home/Portals/0/Docs/LegislativeReports/AED_Study_Legislature07.pdf

EMAIS®. An enhanced, printable Patient Care Report (PCR) from EMAIS® is currently being tested deployed shortly. This final version of the report will incorporate recommendations from both EMS jurisdictions and hospitals that use EMAIS®. The Baltimore City Fire Department began utilizing EMAIS® the beginning of February. Currently, nineteen jurisdictions are utilizing EMAIS®, along with seven Operational Programs statewide. Targeted Data Exports are being constructed for EMAIS® Jurisdictions and Programs to use in local EMS management. Distance Learning solutions are being investigated for EMAIS® initial training. Also, technology enhancements such as fax servers and FTP sites are under investigation for smoother data delivery and transfer of information.

Nursing Home EMS Triage Guidelines. These guidelines recognize the frequency of hospitalizations from long term care facilities and provide guidance to long term care clinicians on making transportation decisions. They have been developed with expert guidance from EMS physicians, providers, long term care physicians, and the nursing home industry. State agencies, long term care facility groups, and EMS services have agreed to support a feasibility trial. The proposed trial has been delayed because of Medicaid reimbursement issues.

Cardiac Centers. MIEMSS has been developing draft regulations for the designation of Acute Cardiac Interventional Centers. Once designated, these hospitals will be able to receive ambulance-transported patients with acute ST-elevation myocardial infarction (STEMI) who need certain catheter-based coronary intervention techniques, including balloon angioplasty, to relieve coronary vessel narrowing. Centers will be required to provide the needed cardiac intervention within defined time limits after patient arrival. MIEMSS is working with the Maryland Health Care Commission and cardiologists to develop the draft regulations, which should be completed in the upcoming year.

Primary Stroke Centers. MIEMSS has designated 28 Primary Stroke Centers (PSC) statewide and directed jurisdictions to implement the neurological emergencies protocol. The protocol identifies patients with acute stroke and directs them, within specific parameters, to bypass non-designated centers in favor of Primary Stroke Centers for specialized treatment. Patients must arrive at the Primary Stroke Center within two hours of symptom onset and the Primary Stroke Center must be within 30 minutes travel to bypass.

A statewide Stroke Quality Improvement Council has been convened in order to advise MIEMSS and the EMS Board on stroke quality issues and system improvement. The group established a password protected website to facilitate collaboration among its members. A subcommittee is working on Interfacility Guidelines for the transport of stroke patients. The group is also reviewing statewide data to initiate performance improvements. Initial data indicate the number of patients statewide receiving IV rt-PA for acute ischemic stroke increased twenty-fold (from 8 to 172) between 2004 and 2007.

MIEMSS conducted additional site visits in December, 2007 and January, 2008. The names of those hospitals will be released as the designations are completed. Several more hospitals have expressed interest in applying in mid-2008. As of February 1, 2008, the designated Primary Stroke Center Hospitals are:

Maryland EMS Region I (Allegany and Garret Counties)

Memorial Hospital and Medical Center of Cumberland, Inc.

Maryland EMS Region II (Washington and Frederick Counties)

Washington County Hospital Association

Maryland EMS Region III (Anne Arundel, Baltimore City, Baltimore, Carroll, Harford, and Howard Counties)

Anne Arundel Medical Center
Baltimore Washington Medical Center
Franklin Square Hospital Center
Good Samaritan Hospital
Greater Baltimore Medical Center
Harford Memorial Hospital
Harbor Hospital
The Johns Hopkins Bayview Medical Center
The Johns Hopkins Hospital
Maryland General Hospital
Mercy Medical Center
Sinai Hospital of Baltimore
St. Agnes Hospital
St. Joseph Medical Center
Union Memorial Hospital
University of Maryland Medical Center
Upper Chesapeake Medical Center

Maryland EMS Region IV (Caroline, Cecil, Dorchester, Kent, Queen Anne's, Somerset, Talbot, Wicomico, and Worcester Counties)

Atlantic General Hospital
The Memorial Hospital at Easton, MD, Inc.
Peninsula Regional Medical Center

Maryland EMS Region V (Calvert, Charles, Montgomery, Prince George's, and St. Mary's Counties)

Holy Cross Hospital
Montgomery General Hospital
Shady Grove Adventist Hospital
Southern Maryland Hospital Center
St. Mary's Hospital
Suburban Hospital

EMS Continuing Education Programs

Miltenberger Emergency Services Conference (March 1, 2008) Rocky Gap Conference Center, Contact: MIEMSS Region I Office 1-301-895-5934

ER ONE INSTITUTE 5th Annual Conference: Emergency Preparedness: Today's Questions and Tomorrow's Answers (March 3 – 4, 2008) Grand Hyatt, 1000 H Street NW, Washington, D.C. 20001; Contact: www.EROneConference.SiTELMs.org

Roadway Incident Safety for Emergency Responders Programs.

Region I - May 10, 2008 (8am to 4pm) Allegany County Department of Public Safety and Homeland Security; Contact: Region I Office- (301) 895-5934

Region II – May 17, 2008 (8am to 4pm) Myersville Volunteer Fire Company
Contact: Region II Office- (301) 791-2366

Region III – March 22, 2008 (8am to 4pm) Joppa-Magnolia Volunteer Fire Company,
Contact: Region III Office- (410) 706-3996

Region IV – March 15, 2008, (8am to 4pm) Calhoon M.E.B.A. Engineering School,
Contact: Region IV Office- (410) 822-1799

Region V – March 8, 2008 (8am to 4pm) Branchville VFD,
Contact: Region V Office- (301) 474-1485

Topics in Trauma Care Conference (March 6, 2008) Washington County Robinwood Conference Center, Contact: www.hagerstowncc.edu/coned/seminars

Public Fire and Life Safety Educator Seminar (March 8, 2008) MFRI, College Park, MD, Contact: www.mfri.org

EMS Today Conference & Exposition (March 28-29, 2008) Baltimore, MD. Please go to: <http://www.emstodayconference.com> for more information.

EMS Care '08 (April 25, 26, and 27, 2008) Annapolis, MD. Doubletree Hotel. Contact: MIEMSS Region III Office at 410-706-3996

Bystander Care Instructor Course (May 3, 2008) Easton Volunteer Fire Department. Contact Region IV Office at 1-877-676-9617

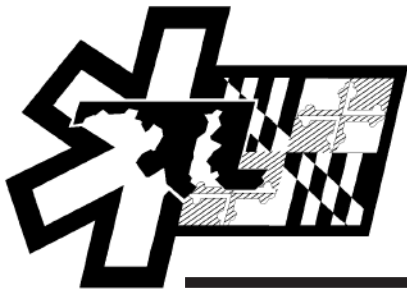
Trauma Care 2008 (June 8, 2008) Maryland Committee on Trauma. Baltimore Marriott Waterfront Hotel. Contact: Claire Leidy at 410-328-3662

Firehouse Expo (July 24-29, 2008) Baltimore, MD. Please go to: <http://www.publicsafetyevents.com/pub/fhe/index.po> for more information.

Pyramid '08 (September 4 - 7, 2008) Solomon's, MD. Details to follow.

Mid Atlantic Life Safety Conference (September 23, 2008) Laurel, MD. Johns Hopkins Applied Physics Lab

Please check with your MIEMSS regional office, the *Maryland EMS News*, or the MIEMSS web page about additional registration information.



MARYLAND'S STARS OF LIFE AWARDS

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

The categories of Maryland Star of Life, Maryland EMS Citizen, EMS Provider of the Year, and EMD Provider of the Year relate to specific incidents occurring from March 1, 2007 to February 29, 2008. Multiple awards may be presented.

MARYLAND STAR OF LIFE AWARD

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

MARYLAND EMS CITIZEN AWARD

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

EMS PROVIDER OF THE YEAR

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

EMD PROVIDER OF THE YEAR

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

OUTSTANDING EMS PROGRAM

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

LEON W. HAYES AWARD FOR EXCELLENCE IN EMS

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

MARYLAND EMS-CHILDREN (EMS-C) AWARD

This award is given for an individual or program that has demonstrated excellence in affecting the EMS care for children in Maryland.

MARYLAND EMS-GERIATRIC (EMS-G) AWARD

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

MARYLAND'S STARS OF LIFE AWARDS — 2008 NOMINATION FORM

Individual(s)/Organization(s) Nominated: _____

If there is more than one nominee, please duplicate this form or use a separate sheet for the other names and addresses and attach it to this form.

*** Address:** _____

(P.O. Box or Street)

(City)

(State)

(Zip)

***Telephone Nos.** _____ (H) _____ (W)

Nominee's Level of Certification or Licensure (if applicable) _____

Professional Affiliation _____ **Telephone No.** _____

Award Category:

- | | | |
|--|---|---|
| <input type="checkbox"/> Maryland Star of Life Award | <input type="checkbox"/> EMD Provider of the Year | <input type="checkbox"/> Maryland EMS-C Award |
| <input type="checkbox"/> Maryland EMS Citizen Award | <input type="checkbox"/> Outstanding EMS Program | <input type="checkbox"/> Maryland EMS-G Award |
| <input type="checkbox"/> EMS Provider of the Year | <input type="checkbox"/> Leon W. Hayes Award for Excellence in EMS | |

This individual/group/program/facility is being nominated for outstanding recognition because:

Please attach additional documentation such as newspaper articles, video footage, and letters of commendation.

Name of person submitting this nomination:

(Print or Type)

(Signature)

(Address)

Email Address _____

***Telephone Nos.** _____ (H) _____ (W) _____ (Cell)

FAX Nos. _____ (H) _____ (W)

*** Must be completed!!**

NOMINATIONS MUST BE RECEIVED AT MIEMSS BY April 4, 2008.
Mail to: Jim Brown, MIEMSS, 653 W. Pratt St., Baltimore, MD 21201-1536
or FAX to: Jim Brown, 410-706-3485.



The Right Care When It Counts Maryland EMSC 2008 Program



The Maryland EMS for Children program is In Search Of children and youth in Maryland who have demonstrated one of the 10 Steps to Take in an Emergency or one of the 10 Ways to be Better Prepared for an Emergency. Actions taking place between January 1, 2007 and February 29, 2008 are eligible for nomination. We will be recognizing children and youth who acted so that others would receive "The Right Care When It Counts." Each nominee will receive a patch and certificate and be eligible for a state award at a ceremony during EMS Week and EMSC Day in May of 2008.

Ten ways to be better prepared if your child has an Emergency:

1. Check if 9-1-1 is the right number to call
2. Keep a well-stocked First Aid Kit on hand
3. Make a list of Emergency Phone Numbers
4. Teach your children whom to call and what to say
5. Make sure your house number is visible from the street
6. Keep a clear and up-to-date record of immunizations
7. Write down medical conditions, medications, and dosages
8. Make a list of allergies and reactions
9. If you have health insurance, check your emergency coverage
10. Take first aid classes

Ten steps to take in an Emergency:

1. Call 9-1-1 immediately
2. Call Poison Control immediately
3. If you think your child has been seriously injured, do not move your child
4. Know how to treat your child in case of a burn
5. Be prepared if your child has a seizure
6. Know what to do if your child is bleeding
7. Know how to help a child with a broken bone
8. Do not administer the Heimlich maneuver or CPR unless you are trained
9. Have your emergency plan on hand
10. Make it easy for emergency personnel to find you

Last Date for Submission: April 4, 2008

Send to MIEMSS MEDIA Office

FAX: 410-706-3485



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Contact information for the person submitting this recommendation:

Name: _____ Affiliation: _____

Best Phone Number(s) to reach you: _____

Address: _____

Email: _____ Fax: _____

Child or youth who acted so that others would receive "The Right Care When It Counts":

Child/ Youth's Name: _____ Age: _____ Gender: _____

Parent's Name: _____

Parent's Name: _____

Address: _____

Phone(s): _____ Email: _____

Alternative contact person: _____

Best method to reach this person: _____

Primary language spoken at home: _____

Description of event/ incident and the action taken (please include any printed materials about the event):

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