



# Washington Update

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**February 6, 2014**

## *In This Issue...*

### **NASEMSO NEWS**

1. Update on NASEMSO 2014 Mid-Year Meeting
2. NASEMSO Supports Standardized Ambulance Equipment List
3. NASEMSO 2014 Council and Committee Calendar Now Available
4. NASEMSO Provides Comments to the National EMS Advisory Council

### **FOR THE STATES**

5. New Federal Rule Allows Patient Access to Lab Reports
6. NACCHO Releases 2013 National Profile of Local Health Departments
7. ASTHO Releases State Legislative Prospectus for 2014

### **COMMUNICATIONS**

8. GAO Says NG 9-1-1 Needs Protection from Cyberattacks
9. Improving 9-1-1 Reliability; Reliability and Continuity of Communications Networks

### **DOMESTIC PREPAREDNESS**

10. Are You Ready? An In-Depth Guide to Citizen Preparedness
11. [SAMHSA Provides Technical Assistance on Disaster Behavioral Health](#)
12. WebWISER 4.5 Now Available from National Library of Medicine
13. CDC Releases 2013-2014 National Snapshot of Public Health Preparedness
14. House Passes Medical Preparedness Allowable Use Act

### **GOVERNMENT AFFAIRS**

15. OFR Now Offers Online Training

### **HITS**

16. Yellow Dot Programs Gaining Attention
17. Advocates for Highway and Auto Safety releases the 2014 Roadmap to State Highway Safety Laws

### **PEDIATRIC EMERGENCY CARE**

18. New National Advisory Committee Focuses on Pediatric Needs During Disasters or Public Health Emergency

19. FDA Approves Pediatric Use of Dexcom's G4 Platinum Continuous Glucose Monitoring System

**TRAUMA**

20. DCoE Webinar: TBI Management in the Deployed Environment: The Concussion Care Center Model
21. CDC: Traffic Deaths Among Children Dropped 43% Over the Decade

**FEDERAL PARTNERS**

22. NEMSAC Announces 2014 Public Meeting Dates
23. Second Wave of CMS Enrollment Moratoria Impacts Ambulance Suppliers
24. ACIP Revises Immunizations Schedules
25. CDC Issues Assessments of State Prescription Drug Overdose Laws
26. New Report Tracks the Behavioral Health of America
27. SAMHSA Provides Guidance on Managing Pain in Patients with Substance Use Disorders
28. FDA Increases Awareness on Drug Products That Contain Acetaminophen

**INDUSTRY NEWS**

29. Brady Campaign Surveys Gun Laws One Year After Newtown
30. ATA Seeks Public Comment for New Telemedicine Guidelines
31. PEC Provides Open Supplement on EMS Evidence Based Guidelines
32. NAEMSE Seeks Nominations for Hero Award
33. AAMS Seeking Nominations for the 2014 Excellence in Community Service Award
34. NAEMT Seeks Nominations for the Field EMS Bill Advocate of the Year Award
35. ACEP Announces National EMS Week Will Take Place May 18-24, 2014
36. IV Saline Solutions in Short Supply
37. RWJF Commission Announces New Recommendations
38. Safety of Benzodiazepines and Opioids in Very Severe Respiratory Disease: National Prospective Study

**UPCOMING EVENTS**

**\*\*\*STATEWIDE EMS CONFERENCES\*\*\***  
**\*\*\*National Conferences and Special Meetings\*\*\***

**1. Update on NASEMSO 2014 Mid-Year Meeting**

Members and others interested in attending NASEMSO’s Mid-Year Meeting March 3-5, 2014 in Orlando, FL are encouraged to check back for updated agendas and information available on the [NASEMSO website](#). Registration is currently available and the special room block at the Rosen Centre is available **until February 9**. At that time, any remaining rooms in the block will be returned to the hotel inventory and rates will revert to the regular rate.

The **NASEMSO EMS Drug Shortages Summit** will be held March 5 in Orlando, Florida. While the drug shortage problem has abated somewhat, it is a long term situation which will continue to impact our nation, posing challenges for both providers and patients. Sponsored by the NASEMSO Medical Directors Council, the Summit will feature nationally known speakers, including Erin Fox, PharmD, Director of the University of Utah Health Care's Drug Information Service. Dr. Fox has been a leader in responding to the drug shortage crisis. She has been nationally recognized for her contributions, receiving the American Society of Health-Systems Pharmacists' (ASHP)

Award of Excellence and the Cheers award from the Institute for Safe Medication Practices. The Summit will bring together experts in the field to examine the extent and causes of the problem and identify the best practices for coping with the shortages in EMS. For more information and to register, see [NASEMSO Drug Shortages Summit](#)

**2. NASEMSO Supports Standardized Ambulance Equipment List**

Four decades ago, the Committee on Trauma of the American College of Surgeons (ACS) developed a list of standardized equipment for ambulances. In 1988, the American College of Emergency Physicians (ACEP) published a similar list. The two organizations collaborated on a joint document published in 2000, and the National Association of EMS Physicians (NAEMSP) participated in the 2005 revision. The 2005 revision included resources needed on emergency ground ambulances for appropriate homeland security. All three organizations adhere to the principle that emergency medical services (EMS) providers at all levels must have the appropriate equipment and supplies to optimize out-of-hospital delivery of care. The document was written to serve as a standard for the equipment needs of emergency ground ambulance services both in the United States and Canada. Equipment requirements will vary, depending on the certification or licensure levels of the providers (as defined by the National EMS Scope of Practice Model 2007), local medical direction and jurisdiction, population densities, geographic and economic conditions of the region, and other factors. In 2013, NASEMSO participated in the revision of *Equipment for Ground Ambulances* and now offers it as a resource for state EMS offices at <http://www.nasemso.org/Advocacy/Supported/index.asp>.

**3. NASEMSO 2014 Council and Committee Calendar Now Available**

A calendar matrix covering a proposed 2014 schedule of NASEMSO Council and Committee Meetings is currently available at the top of the “[Members Only](#)” welcome page. Please feel free to contact your Council/Committee Chair or staff liaison for assistance as needed. Chairs can forward any corrections or revisions to NASEMSO Program Manager, [Rachael Alter](#). Revisions to the calendar will be posted as they become available, so be sure to check back!!

**4. NASEMSO Provides Comments to the National EMS Advisory Council**

NASEMSO has provided comments to the National EMS Advisory Council (NEMSAC) on its *Recommendations for Revision of the Education Agenda* for the Future. NASEMSO reiterated its support for the original plan that includes timely revisions involving various components of the Agenda with consideration to evidence-based practice and integration with evolving model documents. [For more information...](#)

**5. New Federal Rule Allows Patient Access to Lab Reports**

Today, the US Department of Health and Human Services (HHS) published an updated rule that provides patient access to completed laboratory test results. The final rule amends the Clinical Laboratory Improvement Amendments of 1988 (CLIA) regulations to specify that, upon the request of a patient (or the patient’s personal representative), laboratories subject to CLIA may provide the patient, the patient’s personal representative, or a person designated by the patient with copies of completed test reports that can be identified as belonging to that patient using the laboratory’s authentication process. At the same time, the final rule eliminates the exception under the Health Insurance Portability and Accountability Act of 1996 (HIPAA) Privacy Rule to an individual’s right to access his or her protected health information when it is held by a CLIA-certified or CLIA-exempt laboratory. While patients can continue to get access to their laboratory test reports from their doctors, these changes give patients a new option to obtain their test reports directly from the laboratory while maintaining strong protections for patients’ privacy. Under the HIPAA Privacy Rule, patients, patient’s designees and patient’s personal representatives can see or be given a copy of the patient’s protected health information, including an electronic copy, with limited exceptions. In doing so, the patient or the personal representative may have to put their request

in writing and pay for the cost of copying, mailing, or electronic media on which the information is provided, such as a CD or flash drive. In most cases, copies must be given to the patient within 30 days of his or her request. **The rule also explains that the changes to the HIPAA Privacy Rule would [result in the preemption of a number of state laws](#) that prohibit a laboratory from releasing a test report directly to the individual or that prohibit the release without the ordering provider’s consent because the state laws now would be contrary to the access provision of the HIPAA Privacy Rule mandating direct access by the individual.** These regulations are effective on April 7, 2014. HIPAA covered entities must comply with the applicable requirements of this final rule by October 6, 2014. [For more information...](#)

**6. NACCHO Releases 2013 National Profile of Local Health Departments**

The National Association of County and City Health Officials (NACCHO) recently released the main report, figures and data from the 2013 [National Profile of Local Health Departments](#) (Profile) study. This year's Profile provides a comprehensive view of local health department infrastructure and practice and includes information in the following areas:

- Governance
- Emergency preparedness
- Finance
- Quality improvement
- Workforce
- Accreditation
- Programs and Services
- Policy development activities

**7. ASTHO Releases State Legislative Prospectus for 2014**

The Association of State and Territorial Health Officials (ASTHO) recently released a [2014 State Legislative and Regulatory Prospectus](#). The report provides an overview of the issues affecting state health agencies and public health. ASTHO reviewed available pre-filed bills and surveyed state health agency legislative liaisons on priorities and issues they expect their legislatures to address in the coming year.

**8. GAO Says NG 9-1-1 Needs Protection from Cyberattacks**

Next-Generation 9-1-1, which relies on IP-based technology, can be vulnerable to cyberattacks and needs protection from federal agencies, according to a recent Government Accountability Office report. The GAO called on the Department of Homeland Security to coordinate with the Commerce, Justice and Transportation departments, as well as the Federal Communications Commission, to ensure the emerging emergency response system is protected from threats that could range from phishers to a terrorist group. By the end of this year, DHS expects to have updated infrastructure protection plans that will include NG 9-1-1 and the National Public Safety Broadband Network. To read *CRITICAL INFRASTRUCTURE PROTECTION: More Comprehensive Planning Would Enhance the Cybersecurity of Public Safety Entities’ Emerging Technology*, GAO-14-125, click [here](#).

**9. Improving 9-1-1 Reliability; Reliability and Continuity of Communications Networks**

In a new document, the Federal Communications Commission (FCC or Commission) adopts rules to improve the reliability and resiliency of 911 communications networks nationwide by requiring that 911 service providers take “reasonable measures” to provide reliable 911 service. Providers subject to the rule can comply with the reasonable measures requirement by either implementing certain industry-backed “best practices” the Commission adopted, or by implementing alternative measures that are reasonably sufficient to ensure reliable

911 service. The FCC also requires 911 service providers to provide public safety answering points (PSAPs) with timely and actionable notification of 911 outages. [For more information...](#)

**10. Are You Ready? An In-Depth Guide to Citizen Preparedness**

The Federal Emergency Management Agency (FEMA) has posted a guide that has been designed to help the citizens of this nation learn how to protect themselves and their families against all types of hazards. The focus of the content is on how to develop, practice, and maintain emergency plans that reflect what must be done before, during, and after a disaster to protect people and their property. Also included is information on how to assemble a disaster supplies kit that contains the food, water, and other supplies in sufficient quantity for individuals and their families to survive following all types of natural and man-made disasters and hazards from tornadoes to terrorism, floods to fires, extreme cold to extreme heat in the event they must rely on their own resources. The "Are You Ready? An In-Depth Guide to Citizen Preparedness" from FEMA can be used as a reference source or as a step-by-step manual. An interactive course based on *Are You Ready?* is also [available](#).

**11. SAMHSA Provides Technical Assistance on Disaster Behavioral Health**

The Substance Abuse and Mental Health Services Administration (SAMHSA) has published a new issue of [The Dialogue](#), a quarterly technical assistance journal for professionals in the disaster behavioral health field. This issue includes discussion of the public and mental health responses to Hurricane Sandy, the impact of the Deepwater Horizon oil spill, and the Boston Marathon bombing.

**12. WebWISER 4.5 Now Available from National Library of Medicine**

The new release of the Wireless Information System for Emergency Responders, WebWISER 4.5, integrates content from the Chemical Hazards Emergency Medical Management (CHEMM) tool. Also, it updates the Emergency Response Guidebook (ERG) content to ERG's 2012 version. WebWISER is a system designed to assist emergency responders in hazardous material incidents. It provides a wide range of information on hazardous substances, including substance identification support, physical characteristics, human health information, and containment and suppression advice. CHEMM integration brings the following new features to WISER:

- New hospital provider and preparedness planner profiles, along with a [customized home screen](#) for all WISER profiles
- [Acute care guidelines](#) for six known mass casualty agents/agent classes
- The addition of a wealth of CHEMM reference material
- [CHEMM Intelligent Syndrome Tool \(CHEMM-IST\)](#), a new help identify tool designed to diagnose the type of chemical exposure after a mass casualty incident

WebWISER 4.5 can be accessed from the "Latest News" section at [wiser.nlm.nih.gov](http://wiser.nlm.nih.gov), where more information can be obtained.

**13. CDC Releases 2013-2014 National Snapshot of Public Health Preparedness**

On January 24, CDC released the [2013-2014 National Snapshot of Public Health Preparedness](#). The CDC's fifth preparedness report demonstrates how federal investments enhance the nation's ability to respond to public health threats and emergencies. Activities that occurred during 2012 and 2013 are presented in the framework of CDC's three priorities:

- Improving health security at home and around the world.
- Better preventing the leading causes of illness, injury, disability, and death.
- Strengthening public health through collaboration with healthcare.

**14. House Passes Medical Preparedness Allowable Use Act**

The Medical Preparedness Allowable Use Act (H.R. 1791) was recently passed by the U.S. House of Representatives. The bill makes sure homeland security grant dollars are available for medical preparedness activities, including the purchase of vital medical equipment and supplies used by first responders. This bill amends the Homeland Security Act of 2002 to make it clear that grant funds under the State Homeland Security Grant Program and Urban Area Security Initiative may be used to enhance medical preparedness and purchase medical countermeasures. The bill does not include any new funding not already provided through current grant programs. The Bill has been introduced in the Senate and referred to the Committee on Homeland Security and Governmental Affairs.

Government Affairs

**15. OFR Now Offers Online Training**

The Office of the Federal Register (OFR) regularly offers a workshop entitled “Federal Register, What is it and How to Use it”. The workshop provides an overview of the regulatory process and the OFR’s role in that process. Specifically, it discusses the role of OFR’s publication of the Federal Register and the Code of Federal Regulations in the regulatory process. Until now, this workshop was only available to those who could attend the workshop in person, at OFR offices in Washington, DC. The entire workshop is now available on video, complete with supporting materials at <https://www.udemy.com/federal-register-workshop>.

**16. Yellow Dot Programs Gaining Attention**

The “Yellow Dot” Program was created to assist citizens in the “golden hour” of emergency care following a traffic accident when they may not be able to communicate their needs. Citizens are advised that placing a yellow dot in the vehicle’s rear window alerts first responders to check the glove compartment for vital information will ensure they will receive proper medical attention. Various law enforcement and transportation agencies are involved in the initiative, which seems to be regionally or state based.

**17. Advocates for Highway and Auto Safety releases the 2014 Roadmap to State Highway Safety Laws**

Advocates for Highway and Auto Safety (Advocates) has released its eleventh annual report card grading all 50 states and the District of Columbia on their performance in adopting 15 basic highway safety laws on adult and child occupant protection, impaired and distracted driving, and teen driving. This year’s report has new, stronger ratings for state seat belt laws resulting in knocking past top ranking states down from the highest tier (GA, KS, MD, NJ, NY, NC and TN). The 2014 Roadmap of State Highway Safety Laws report will feature the best and worst performing states, states making the most and least progress over the past year, dangerous loopholes in each state that contribute to preventable death and injury, and state-specific data on traffic deaths, injuries and related economic losses. [For more information...](#)

**18. New National Advisory Committee Focuses on Pediatric Needs During Disasters or Public Health Emergency**

Addressing the needs of children in disasters will be the focus of a new advisory committee of the U.S. Department of Health and Human Services (HHS). The National Advisory Committee on Children and Disasters (NACCD) will provide expert advice and consultation to the HHS Secretary on comprehensive planning and policies to meet the needs of children before, during, and after a disaster or public health emergency. Nominations are being accepted from non-federal health care professionals and representatives from state, tribal, territorial, or local health departments with expertise in pediatric disaster planning, preparedness, response, or recovery. The submission deadline for nominations is February 14, 2014. For more information and instructions on how to apply, download [National Advisory Committee on Children and Disasters, Federal Register Notice, January 16, 2014 \(PDF\)](#)

**19. FDA Approves Pediatric Use of Dexcom's G4 Platinum Continuous Glucose Monitoring System**

The U.S. Food and Drug Administration today approved the expanded use of the Dexcom G4 Platinum Continuous Monitoring System for patients with diabetes ages 2 to 17 years. The G4 Platinum System, which monitors blood glucose levels in people with diabetes, had been approved for patients ages 18 and older. The FDA has not approved the use of CGM values alone to determine dosing of diabetes medications. CGMs must be calibrated by blood glucose meters, and treatment decisions such as insulin dosing should be based on readings from a blood glucose meter. [For more information...](#)

**20. DCoE Webinar: TBI Management in the Deployed Environment: The Concussion Care Center Model**

Feb. 13, 2014: 1:00 p.m.-2:30 p.m. (EST) Traumatic brain injury (TBI) occurs when trauma to the head disrupts the function of the brain. TBI is commonly known as the signature wound of the Afghanistan and Iraq conflicts. Drawing on personal experience at the National Atlantic Treaty Organization Role 3 Hospital in Kandahar, Afghanistan, the presenters will share their approach to TBI management in the deployed, multidisciplinary setting. The discussion will delineate the role of the concussion care center, a role proven instrumental in contributing to a significant increase in the return-to-duty rates for service members. Additionally, the presentation will highlight psychological and trauma coping aspects affecting recovery following a concussion in a forward deployed location. At the conclusion of this webinar, participants will be able to:

- Describe the interdisciplinary treatment approach to TBI in the deployed setting
- Explain the phases of recovery at a concussion care center
- Identify early interventions following a concussion to prevent posttraumatic stress disorder (PTSD)
- Evaluate the impact of post concussive symptoms and PTSD on cognitive functioning

Sign up for the webinar at: [DCoE TBI Webinar February 2014 Registration](#)

**21. CDC: Traffic Deaths Among Children Dropped 43% Over the Decade**

Motor vehicle crashes are a leading cause of death among children in the United States. CDC analyzed 2002–2011 data from the Fatality Analysis Reporting System to determine the number and rate of motor-vehicle occupant deaths, and the proportion of unrestrained child deaths among children aged <1 year, 1–3 years, 4–7 years, 8–12 years, and for all children aged 0–12 years. Of note, a third of all children who died in motor vehicle accidents in 2011 were not restrained. The 8- to 12-year age group had the highest proportion of unrestrained deaths. This report summarizes their findings. [Vital Signs: Restraint Use and Motor Vehicle Occupant Death Rates Among Children Aged 0–12 Years — United States, 2002–2011](#) Erin K. Sauber-Schatz, PhD, Bethany A. West, MPH, and Gwen Bergen, PhD MMWR 2014;63:1–6

**22. NEMSAC Announces 2014 Public Meeting Dates**

The National EMS Advisory Council (NEMSAC) has announced dates for three 1.5-day public NEMSAC meetings in the Washington, DC metropolitan area, to be held Apr. 23-24, Sept. 9-10, and Dec. 3-4, 2014. You can review NEMSAC meeting materials, membership, and previous recommendations, and register to attend the meetings, at [www.EMS.gov/NEMSAC.htm](http://www.EMS.gov/NEMSAC.htm).

NEMSAC is currently working on four objectives:

- Recommending minimal updates to the EMS Education Agenda for the Future
- Recommendations on federal support to the implementation of the National EMS Culture of Safety Strategy
- Recommendations on revising or updating the 1996 EMS Agenda for the Future
- Recommendations on Federal implementation of the Patient Protection and Affordable Care Act for EMS.

**23. Second Wave of CMS Enrollment Moratoria Impacts Ambulance Suppliers**

The Centers for Medicare & Medicaid Services (CMS) has announced new temporary moratoria on the enrollment of new ground ambulance suppliers in the Greater Philadelphia area. CMS is also extending for six-months the current enrollment moratoria of Houston area ground ambulance supplier enrollments in its Medicare, Medicaid and Children’s Health Insurance Program (CHIP) operations. This is the second wave of the agency’s use of this powerful tool to fight fraud and safeguard taxpayer dollars while ensuring patient access to care is not interrupted. CMS also consulted with the Health and Human Services Office of Inspector General and the Department of Justice, and found that fraud trends warranted a moratorium on home health providers and ambulance suppliers in these geographic areas. Part of the work included a review of key factors of potential fraud risk including a disproportionate number of providers and suppliers relative to beneficiaries, and extremely high utilization. All the geographic areas named in the moratoria ranked high in these fraud risk factors. [For more information...](#)

**24. ACIP Revises Immunizations Schedules**

Each year, the Advisory Committee on Immunization Practices (ACIP) reviews the recommended immunization schedules for persons aged 0 through 18 years to ensure that the schedules reflect current recommendations for Food and Drug Administration–licensed vaccines. In October 2013, ACIP approved the recommended immunization schedules for persons aged 0 through 18 years for 2014, which include several changes from the 2013 immunization schedules. [For more information...](#)

ACIP also annually reviews and updates the *Recommended Immunization Schedule for Adults Aged 19 Years and Older*. This schedule provides a brief summary of and a link to the complete ACIP recommendations for the use of vaccines routinely recommended for adults in the form of two figures, footnotes for each vaccine, and a table that includes primary contraindications and precautions. [For more information...](#)

**25. CDC Issues Assessments of State Prescription Drug Overdose Laws**

The Centers for Disease Control and Prevention (CDC) Public Health Law Program issued several new documents assessing state prescription drug overdose laws: A [Menu of State Prescription Drug Identification Laws](#); [Menu of Pain Management Clinic Regulation](#); and [Menu of State Laws Related to Prescription Drug Overdose Emergencies](#). The resources are designed to provide a picture of some of the legal and regulatory strategies states have used to address prescription drug misuse, abuse, and overdose.

**26. New Report Tracks the Behavioral Health of America**

The "National Behavioral Health Barometer" (Barometer) provides data about key indicators of behavioral health problems including rates of serious mental illness, suicidal thoughts, substance abuse, underage drinking, and the percentages of those who seek treatment for these disorders from population and treatment facility-based data sets and provides point-in-time and trend data reflecting the status and progress in improving key behavioral health indicators. The Barometer shows these data at the national level, and for each of the 50 states and the District of Columbia. A digital version is now available for free from the Substance Abuse and Mental Health Services Administration (SAMHSA). [For more information...](#)

**27. SAMHSA Provides Guidance on Managing Pain in Patients with Substance Use Disorders**

The Substance Abuse and Mental Health Services Administration (SAMHSA) has produced *Managing Chronic Pain in Adults With or in Recovery From Substance Use Disorders*, which provides clinicians with a quick reference guide for treating chronic pain in adults with a history of substance abuse. The document covers patient assessment

through treatment and includes an algorithm for managing chronic pain and a summary of non-opioid analgesics. Related materials are also available on the [SAMHSA web site](#).

**28. FDA Increases Awareness on Drug Products That Contain Acetaminophen**

The Food and Drug Administration (FDA) is recommending health care professionals discontinue prescribing and dispensing prescription combination drug products that contain more than 325 milligrams (mg) of acetaminophen per tablet, capsule or other dosage unit. There are no available data to show that taking more than 325 mg of acetaminophen per dosage unit provides additional benefit that outweighs the added risks for liver injury. Further, limiting the amount of acetaminophen per dosage unit will reduce the risk of severe liver injury from inadvertent acetaminophen overdose, which can lead to liver failure, liver transplant, and death. Cases of severe liver injury with acetaminophen have occurred in patients who took more than the prescribed dose of an acetaminophen-containing product in a 24-hour period, took more than one acetaminophen-containing product at the same time or drank alcohol while taking acetaminophen products. [For more information...](#)

**29. Brady Campaign Surveys Gun Laws One Year After Newtown**

Eight states (CA, CO, CT, DE, IL, MD NJ, NY) have enacted major gun reforms to reduce gun violence since the tragic events in Newtown Connecticut, according to a new [state analysis](#) by the Brady Campaign to Prevent Gun Violence and the Law Center to Prevent Gun Violence. The "2013 State Scorecard: Why Gun Laws Matter," ranks all fifty states based on thirty policy approaches to regulating guns and ammunition, such as background checks on gun sales, reporting lost or stolen firearms, and prohibiting dangerous people from purchasing weapons. California received an A- and continues to top the list of states with the strongest gun reform measures in the country. Year-over-year, Connecticut jumped from ranking 4<sup>th</sup> to 2<sup>nd</sup> and is joined by New Jersey, New York, Delaware, and Maryland at the top of the list of states with strong gun laws, all of which also passed live-saving gun legislation in 2013.

**30. ATA Seeks Public Comment for New Telemedicine Guidelines**

The American Telemedicine Association (ATA) is seeking public comment related to its [draft Core Guidelines for Telemedicine Operations](#). Comments will be collected through February 8, 2014. These guidelines provide an update to the previously published Core Standards for Telemedicine Operations (November 2007) and cover fundamental requirements to be followed when providing healthcare services using telecommunications technologies and other electronic communications between patients, practitioners, and other healthcare providers.

**31. PEC Provides Open Supplement on EMS Evidence Based Guidelines**

Prehospital Emergency Care (PEC), the official journal of several national EMS organizations, has published an open supplement titled "Evidence Based Guidelines in EMS." Included are the following topics:

- Evidence-based Guidelines for Prehospital Practice: A Process Whose Time Has Come
- The Development of Evidence-based Prehospital Guidelines Using a GRADE-based Methodology
- An Evidence-based Guideline for Pediatric Prehospital Seizure Management Using GRADE Methodology
- An Evidence-based Guideline for Prehospital Analgesia in Trauma
- An Evidence-based Guideline for the Air Medical Transportation of Prehospital Trauma Patients
- The Implementation and Evaluation of an Evidence-based Statewide Prehospital Pain Management Protocol Developed using the Prehospital Evidence-based Guideline Model Process for Emergency Medical Services

[For more information...](#)

**32. NAEMSE Seeks Nominations for Hero Award**

The National Association of EMS Educators (NAEMSE) is currently seeking nominations for awards presented at their Annual Symposium and Trade Show to be held in Reno, NV, September 16-21, 2014. NAEMSE seeks to recognize EMS instructors who are dedicated to excellence in service to their students. Complete details and nomination packets may be found at the following link: <http://www.naemse.org/hero/>

**33. AAMS Seeking Nominations for the 2014 Excellence in Community Service Award**

The AAMS Excellence in Community Service Award recognizes an emergency medical transport individual OR organization(s) demonstrating broad-based continuing commitment to their referring/receiving agencies and/or the communities they serve. The award recipient will exhibit an outstanding history of leadership or substantial involvement/partnership in customer or community based project(s) that contribute to the quality of life within the communities they serve. Although eligibility requires membership with the Association of Air Medical Services, the recipient is NOT LIMITED to practices solely in air or ground medicine. This recipient will have shown professional and personal values that typify the ideals of "giving of oneself", and "making a difference in/or enhancing the lives of others." We welcome projects of all sizes and scope, no matter the financial resources involved. Nomination [submission deadline](#) is Friday, February, 14th 2014.

**34. NAEMT Seeks Nominations for the Field EMS Bill Advocate of the Year Award**

A new national award has been established to recognize EMS professionals for their volunteer efforts to pass H.R. 809, the Field EMS Quality, Innovation and Cost-Effectiveness Improvement Act (also known as the "[Field EMS Bill](#)"). Individuals can be nominated by a colleague and nominations are open to all EMS professionals. Up to three individual awards will be granted this year. Recipients will have their expenses paid to EMS On The Hill Day on March 26, 2014, in Washington, D.C. [For more information...](#)

**35. ACEP Announces National EMS Week Will Take Place May 18-24, 2014**

The American College of Emergency Physicians (ACEP) has announced that the annual National EMS Week is set for May 18-24, 2014. This year's theme is "EMS: Dedicated. For Life." Order a planning guide for your office, or place a bulk order for distribution to local EMS agencies. ACEP asks for assistance with the shipping expense if possible, but taking on this cost is not required if you cannot. Single copies of the planning guide can be ordered or downloaded [here](#). If you would like to order in bulk for distribution, please use the order form [here](#). Questions should be directed to [Deb Fly](#).

**36. IV Saline Solutions in Short Supply**

An industry-wide shortfall of 0.9% normal saline solutions (1000 ml bags) is being reported due to high customer demand and the current influenza season. Manufacturers have increased production and managing inventories via temporary allocation and fulfillment processes. Continuous releases are occurring but it is anticipated that backorders will continue through April and shortages could worsen in the meanwhile. At least one manufacturer is producing solutions at maximum capacity in amounts exceeding those of prior years and is making investments to further increase supply in 2014. While many products are in short supply, the product most affected is the 1,000 mL bags of sodium chloride. As this shortage worsens, other solutions such as lactated ringers may be affected. EMS agencies and medical directors should strive to conserve NSS whenever possible until the current crisis is over. The American Society of Health System Pharmacists (ASHP) recommends the following steps to help mitigate the effect

- Consider using oral hydration whenever possible.
- Use smaller bag sizes for low rate infusions when possible.
- Switch products to match availability. Consider using alternative fluids such as dextrose

containing solutions or lower concentrations of sodium chloride that may be available (0.45%).

[For more information...](#)

**37. RWJF Commission Announces New Recommendations**

On January 13, the Robert Wood Johnson Foundation's Commission to Build a Healthier America released new recommendations to improve the health of all Americans. The Commission recommends that as a nation, we should:

- Invest in the foundations of lifelong physical and mental well-being in our youngest children;
- Create communities that foster health-promoting behaviors; and
- Broaden health care to promote health outside of the medical system.

Local health departments are instrumental in efforts to achieve all three of these goals.

**38. Safety of Benzodiazepines and Opioids in Very Severe Respiratory Disease: National Prospective Study**

Low-dose opioids may be safely used to reduce breathlessness in patients with severe chronic obstructive pulmonary disease, a new study in the British Medical Journal finds. Using Swedish registries, researchers followed roughly 2200 patients starting long-term oxygen therapy for COPD. Some 40% were using benzodiazepines, opioids, or both at baseline. During a median 2.5 months' follow-up, three-quarters of all patients were hospitalized. Use of benzodiazepines or opioids was not associated with increased admission rates. After 1 year, half of all patients had died. Benzodiazepines were associated with a 20% increase in mortality, as were high-dose opioids. Lower-dose opioids (30 mg or less of oral morphine equivalents/day), however, did not increase mortality. The researchers say their research "supports the safety of regular low dose systemic opioids to reduce breathlessness in severely ill patients with respiratory compromise." They add that "benzodiazepines should not be the first line treatment ... given the unclear evidence of net clinical benefit." [For more information...](#)

**UPCOMING EVENTS**

**\*\*\*STATEWIDE EMS CONFERENCES\*\*\***

2014 ITLS Ohio Emergency Care Conference. Feb. 27-March 2, 2014. Crowne Plaza North. Columbus, OH. [For more information...](#)

\*Twenty-Eighth Annual Conference on the Prevention of Child Abuse. March 3-4, 2014 Omni Colonnade Hotel San Antonio, Texas. [For more information...](#)

13<sup>th</sup> Annual Update in Acute and Emergency Care Pediatrics Conference. Knoxville, TN on March 28-29, 2014. [For more information...](#)

\*35<sup>th</sup> Annual Virginia EMS Symposium, November 5-9, 2014, Norfolk Waterside Marriott, Norfolk, Va. For more information, visit <http://www.vdh.virginia.gov/OEMS/symposium/index.htm>.

**\*\*\*National Conferences and Special Meetings\*\*\***

**NAEMSE Instructor Course Level 1**

February 7-9, 2014

Macon, GA

February 21-23, 2014	Sacramento, CA
March 14-16, 2014	Elizabeth, NJ
April 4-6, 2014	Champaign, IL
April 25-27, 2014	Greenville, SC
<b>NAEMSE Instructor Course Level 2</b>	
March 7-8, 2014	Orland Park, IL
March 21-22, 2014	Loudon, VA
May 2-4, 2014	Sacramento, CA
May 16-17, 2014	Macon, GA

EMS Today. February 5-8, 2014. Washington Convention Center, Washington, DC. [For more information...](#)

\*Twitter chat: The [2014 Preparedness Summit](#) will host a twitter chat with this year's Summit Town Hall speakers, February 14 at 1:00 pm ET. Follow @prepsummit and use #ps14.

AAEM Scientific Assembly. February 11-15, 2014. New York Hilton. New York, NY. [For more information...](#)

NASEMSO Mid-Year Meeting, March 3-5, 2014. Rosen Center, Orlando, FL. [For more information...](#)

ENA Leadership Conference. March 5-9, 2014. Phoenix, AZ. [For more information...](#)

\*AAMS Spring Conference. March 11, 2014. Washington, DC. [For more information...](#)

EMS on the Hill Day, March 26, 2014, Washington, DC. Registration and information is now available at [www.naemt.org](http://www.naemt.org).

\*[2014 Preparedness Summit](#). April 1-4, 2014 in Atlanta GA.

\*National Public Health Week. April 7-13, 2014. [For more information...](#)

Fire-Rescue Med. April 29-May 3, 2014. Arlington, VA. [For more information...](#)

ACEP Leadership and Advocacy Conference. May 18-21, 2014. Washington, DC. [For more information...](#)

\*National EMS Week. May 18-24, 2014. This year's theme is "EMS: Dedicated. For Life." [For more information...](#)

Pinnacle EMS Leadership and Management Conference. July 21-25, 2014. Scottsdale, AZ. [For more information...](#)

ITS America World Congress. September 7-11, 2014. Detroit Marriott at the Renaissance Center. Detroit, MI. [For more information...](#)

NAEMSE Symposium. September 16-21, 2014. Peppermill Resort Hotel. Reno, NV. [For more information...](#)

Air Medical Transport Conference. September 22-24, 2014. Nashville, TN.

NASEMSO Annual Meeting. October 6-10, 2014. Westin Cleveland and Cleveland Public Auditorium, Cleveland, OH.  
[For more information...](#)

ENA Annual Meeting. October 7-11, 2014. Indiana Convention Center. Indianapolis, IN. [For more information...](#)

ACEP Annual Meeting. October 27-October 30, 2014. Chicago, IL. [For more information...](#)

EMS Expo. November 9-13, 2014. Nashville, TN. [For more information...](#)

See more EMS Events on NASEMSO's web site at  
<http://www.nasemso.org/Resources/Calendar/index.asp>

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