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NASEMSO News

NASEMSO Reimagined 2020 Takes Shape

In lieu of an in person experience this year, the NASEMSO Board of Directors has agreed upon a series of online sessions to conduct the annual business of the association and to inspire creative thinking on the future of EMS. Festivities will begin on the evening of October 12 with a social offering titled "We Are Family!" Complete with a rousing EMS Trivia game and prizes that you won't want to miss! We anticipate six one-hour sessions will be provided during the week at staggered intervals. Final timing, topics, and speakers are currently being confirmed and information will be offered at https://nasemso.org/news-events/meetings/ as it becomes available. A proposed agenda will be emailed to all NASEMSO members soon. Due to the generosity of FirstNet Built with AT&T, NASEMSO will be able to provide this info to state officials and invited guests without a registration fee!! Please complete the complimentary registration to receive the login and password to enter any session!! For questions, please feel free to contact NASEMSO Program Manager, Kathy Robinson!

NASEMSO to Develop Version 3 of Model EMS Clinical Guidelines

NASEMSO is seeking panel members from national EMS physician organizations to participate in the development of Version 3 of the <u>National Model EMS Clinical Guidelines</u>. Since 2014, the model guidelines project has been led by the NASEMSO Medical Directors Council in collaboration with national EMS physician organizations, including: American College of Emergency Physicians (ACEP), National Association of EMS Physicians (NAEMSP), American College of Osteopathic Emergency Physicians (ACOEP), American Academy of Emergency Medicine (AAEM), American Academy of Pediatrics,

Committee on Pediatric Emergency Medicine (AAP-COPEM), American College of Surgeons, Committee on Trauma (ACS-COT) and Air Medical Physician Association (AMPA). The project has been made possible by funding from the National Highway Traffic Safety Administration, Office of EMS, and the Health Resources and Services Administration (HRSA), Maternal and Child Health Bureau's EMS for Children Program. EMS physicians interested in participating should contact their respective national EMS physician organizations directly for consideration in serving as an organizational representative for this project. The national EMS physician organizations cited above are requested to submit the names of their selected representative and an alternate representative to Co-Principal Investigators, <u>Dr. Carol Cunningham</u> or <u>Dr. Richard Kamin</u> by October 15.

NASEMSO Members Receive NAEMT National Awards During Recent Ceremonies

A colleague with numerous professional affiliations, NASEMSO member Douglas F. Kupas, MD, FAEMS, FACEP, was recognized with the 2020 Rocco V. Morando Lifetime Achievement Award for his lifetime of commitment, contributions and leadership to Emergency Medical Services (EMS). The award is NAEMT's most prestigious and is generously sponsored by the National Registry of Emergency Medical Technicians (NREMT). The presentation was made during NAEMT's annual General Membership Meeting held virtually on Sep. 15. Read more at here. Congratulations, Doug!!

In related news, LA State EMS Director Susan Bailey has received NAEMT's 2020 Presidential Leadership Award for outstanding contributions to the profession. Congratulations, Susan!!

NASEMSO Joins National Orgs on Uniform Guidance in Prehospital Use of Ketamine for Trauma Patients

Several national associations have collaborated to establish consensus-based uniform guidance on the use of ketamine in the care of the trauma patient. It is intended for use by emergency medical services (EMS) personnel, EMS medical directors, emergency physicians, trauma surgeons, nurses and pharmacists in their treatment of the acute trauma patient both in and out of the hospital and within their respective domains. The document, now published online in Prehospital Emergency care, is not intended to be a comprehensive discussion of pain control options in the trauma patient. Instead, it combines the collective expertise of the author organizations with current published evidence to offer unified guidance on the role of ketamine in this patient population. Dr. Aaron Burnett, State EMS Medical Director for MN, represented NASEMSO on the panel. Read more at https://www.tandfonline.com/doi/full/10.1080/10903127.2020.1801920.

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Air Medical FAA Approves BVLOS Waivers for Public Safety Organizations

Public safety organizations that fly drones can now apply for a beyond visual line of sight (BVLOS) waiver from the Federal Aviation Administration (FAA). The FAA recently released the BVLOS waiver guide for first responders. If the waiver is granted to an organization, BVLOS flights must comply with a variety of spatial regulations and only be performed when absolutely necessary. During a BVLOS flight, a drone can't be flown more than 1,500 feet away from the pilot. Additionally, a pilot can't fly

a drone "any higher than 50 feet above or greater than 400 feet laterally of the nearest obstacle. Read more here.

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<u>Communications</u> FirstNet Authority Board Seeks Applications

The National Telecommunications and Information Administration (NTIA) is seeking applicants for up to four seats for appointment or reappointment on the First Responder Network Authority (FirstNet) Board for terms beginning in January 2021. The Board, established as part of the Middle Class Tax Relief and Job Creation Act of 2012 (Act), oversees and guides the construction, operation, maintenance, and improvement of the nationwide public safety broadband network (NPSBN). NTIA anticipates that the Federal Register Notice requesting submissions of interest for Board appointments or reappointments will publish September 18, 2020 and is available on Public Inspection here. NTIA facilitates the recruitment and vetting of candidates to help ensure that the statutory composition of the Board is maintained as members are appointed by the Secretary of Commerce. As noted above, NTIA will seek a diverse candidate pool that will collectively represent the interests of public safety and industry. For more information about the Board visit https://firstnet.gov/about/board.

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Health and Medical Preparedness HHS and FEMA Offer New Fact Sheet on Reusable PPE for EMS; Seeks Comments on Strategy

The Assistant Secretary for Preparedness and Response (ASPR) and the Federal Emergency Management Agency (FEMA) have posted a new fact sheet of interest to EMS. Reusable personal protective equipment (PPE) provides an important opportunity for cost- effective preservation of critical life-saving equipment in an environment in which PPE is in short supply and appropriate disinfection supplies are available. This option can also provide substantial long-term cost savings in a conventional care environment. This fact sheet provides useful information for healthcare and emergency medical service organizations regarding re- usable, National Institute for Occupational Safety and Health (NIOSH)-approved elastomeric half-mask respirators (EHMRs) and powered air-purifying respirators (PAPRs) to expand options to meet respiratory protection demand. Read more at https://files.asptracie.hhs.gov/documents/elastomeric-half-mask-respirators-and-powered-air-purifying-respirators-and-powered-air-purifying-respirators-in-healthcare-and-ems-settings-fact-sheet.pdf.

In related news, the National Institute for Occupational Safety and Health (NIOSH)—in coordination with the Strategic National Stockpile—posted a Federal Register Notice (FRN) titled "A National Elastomeric Half Mask Respirator (EHMR) Strategy for Use in Healthcare Settings During an Infectious Disease Outbreak/Pandemic". Through this FRN, NIOSH is seeking input regarding the national distribution plan of purchased EHMRs, as well as identifying potential organizations interested in receiving a portion of these EHMRs with the commitment to provide a report of user acceptability and feasibility of implementation. Comments must be received by October 14, 2020. Please see the FRN for details here.

NASEM Offers New Disaster Planning Resource on Mortality and Morbidity Following MCI

In the wake of a large-scale disaster, from the initial devastation through the long tail of recovery, protecting the health and wellbeing of the affected individuals and communities is paramount. Accurate and timely information about mortality and significant morbidity related to the disaster are the cornerstone of the efforts of the disaster management enterprise to save lives and prevent further health impacts. Conversely, failure to accurately capture mortality and significant morbidity data undercuts the nation's capacity to protect its population. Information about disaster-related mortality and significant morbidity adds value at all phases of the disaster management cycle. As a disaster unfolds, the data are crucial in guiding response and recovery priorities, ensuring a common operating picture and real-time situational awareness across stakeholders, and protecting vulnerable populations and settings at heightened risk. *A Framework for Assessing Mortality and Morbidity After Large-Scale Disasters* reviews and describes the current state of the field of disaster-related mortality and significant morbidity assessment. This report examines practices and methods for data collection, recording, sharing, and use across state, local, tribal, and territorial stakeholders; evaluates best practices; and identifies areas for future resource investment. For more information or to download the free pdf version, go to <u>https://www.nap.edu/catalog/25863/a-framework-for-assessing-mortality-and-morbidityafter-large-scale-disasters</u>.

GAO Offers Insight to Federal Tactical Teams

In a new report by the U.S. Government Accountability Office (GAO), GAO identified 25 federal tactical teams within the executive branch, and the characteristics of these teams varied. The 25 tactical teams were across 18 agencies, such as agencies within the Departments of Homeland Security, Justice, Energy, and the Interior. The number of reported team members per team ranged from two to 1,099. More than half (16 of 25) of the teams reported that they are composed of team members working for the team on a collateral basis. Most teams (17 of 25) had multiple units across various locations. Teams conducted different types of deployments, but some types were common among teams, such as: supporting operations of other law enforcement entities, such as other federal, state, and local law enforcement (16 of 25); providing protection details for high-profile individuals (15 of 25); responding to or providing security at civil disturbances, such as protests (13 of 25); and serving high-risk search and arrest warrants (11 of 25). Appendix I of the report provides details on each of the 25 tactical teams, such as each team's mission; staffing; types and frequency of training; and number and types of deployments from fiscal years 2015 through 2019. This is a public version of a sensitive report issued in August 2020. Information deemed to be sensitive by the agencies in this review, such as the quantities of firearms, tactical equipment, and tactical vehicles in team inventories, has been omitted from this report. Read GAO-20-710, *Federal Tactical Teams: Characteristics, Training, Deployments, and Inventory* at https://www.gao.gov/products/GAO-20-710.

FirstNet's Public Safety Blimp Deployed in Hurricane Disaster Recovery Support

FirstNet's first blimp is operational and aiding first responders over Cameron Parish, LA in the aftermath to Hurricane Laura, according to AT&T. The blimp – technically referred to as an aerostat – can fly as high as 1,500 feet and reduces the need for ground-based assets. FirstNet One was introduced last December. The 55-foot blimp at the time was the 76th deployable network asset belonging to the FirstNet fleet. The blimp can stay aloft for up to two weeks. It's tethered to a trailer for either satellite or wireline backhaul. It provides double the coverage area of other assets, including SatCOLTs or flying Cells on Wings (COWs) drones.

HURREVAC Resource Aids Evacuation Planning for Government Officials

The <u>Hurricane Decision Support Tool (HURREVAC</u>) is a free web-based platform available to government emergency managers that provides evacuation timing guidance. HURREVAC combines real-time National Hurricane Center forecast products and storm surge modeling with evacuation clearance times from Hurricane Evacuation Studies. This web site provides program access and technical support for eligible users in government emergency management. It is maintained by Sea Island Software, the contractor tasked with development, operation, and maintenance of the HURREVAC program. Need more

information or training on HURREVAC? Start with a program overview or training videos. If you don't yet have the software, please visit the registration page to apply for program access.

National Engagement Period: NIMS Resource Typing Definition for EMS

FEMA's National Integration Center is seeking public feedback on four National Incident Management System resource typing definitions. The current release includes job resource typing definitions under the Emergency Medical Services core capability:

- Emergency Medical Responder
- Emergency Medical Technician
- Emergency Medical Technician Advanced
- Paramedic

To provide comments on the draft, complete the <u>feedback form</u> and submit the form to <u>fema-nims@fema.dhs.gov</u> no later than 5:00 p.m. EDT on Thursday, October 15.

FMS Training Available from the Strategic National Stockpile

A Federal Medical Station (FMS) is a deployable healthcare facility that can provide surge beds to support healthcare systems anywhere in the U.S. that are impacted by disasters or public health emergencies.

FMSs are not mobile and cannot be relocated once established. Each FMS comes with a three-day supply of medical and pharmaceutical resources to sustain from 50 to 250 stable primary or chronic care patients who require medical and nursing services. An FMS may be staffed using local or regional providers; providers operating under an <u>Emergency Management</u> <u>Assistance Compact</u> (EMAC); or federal providers, primarily from theU.S. Public Health Service Commissioned Corps. An FMS may be used to:

- Provide temporary holding and care for patients to decompress a local hospital, increasing beds available for patients with disaster-related trauma or illness
- · Receive patients from nursing homes and skilled nursing facilities who were forced to evacuate due to the disaster
- · Provide low acuity care for patients with chronic illnesses whose access to care is impeded due to the disaster

If an FMS is being established for patients, social distancing and PPE requirements may necessitate the establishment of an Alternate Care Site using the FMS. The <u>Alternate Care Site (ACS) Toolkit</u> contains detailed information for what should be considered in selecting a site, coordinating wraparound logistical support services, PPE, and staffing needs in a during the COVID-19 pandemic. Learn more at <u>https://www.phe.gov/emergency/events/COVID19/SNS/Pages/sns-trng-videos.aspx</u>.

Emergency Response Guidebook 2020 Edition Now Available

The ERG is a guidebook intended for use by first responders during the initial phase of a transportation incident involving hazardous materials/dangerous goods. This popular resource published by the U.S. Department of Transportation it is now available from the U.S. Government Bookstore. For more information, go to <u>https://bookstore.gpo.gov/products/emergency-response-guide-book-2020-edition</u>.

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Seplaki Provides Overview on NJ Response to SUD in ASTHO Blog

In 2019, the New Jersey Office of Emergency Medical Services rolled out "Five Minutes to Help" to address the topic of Substance Use Disorder (SUD.) This innovative program was developed in partnership with the Rutgers University's Center for Public Health Workforce Development and Seton Hall University's School of Health and Medical Services, who developed the online module. The "Five Minutes to Help" program consists of an online and a classroom component. The program's goal is to educate first responders on the foundations of motivational interviewing and how to apply it to individuals treated for a suspected opioid overdose, provide recovery resources, and address the stigma of SUD. NASEMSO member and NJ State EMS Data Manager, Tim Seplaki, provides an overview of the program in the current edition of ASTHO's Expert Blog. Read more at https://www.astho.org/StatePublicHealth/Creating-a-Shift-in-Emergency-Medical-Services-to-Address-Substance-Use-Disorder/09-15-20/.

2020 NEMSIS Mid-Year Public-Release Research Dataset is now available!

The 2020 NEMSIS Mid-Year Public-Release Research Dataset includes 19,749,812 EMS activations submitted by 10,620 EMS agencies serving 47 states and territories during the first half of the 2020 calendar year. This mid-year release is provided due to overwhelming requests from researchers interested in investigating EMS response during the Spring outbreak of COVID-19. Request a copy of the dataset by going to this link and filling out a request form: <u>https://nemsis.org/using-ems-data/request-research-data/</u>. The NEMSIS TAC developed and released a document that outlines the revision process to the National Data Standard: <u>https://nemsis.org/wp-content/uploads/2020/08/Data-Standard-Revision-Guide-2020_final.pdf</u>

In related news, on the new NEMSIS 101 page, you will find various resources and links that will help you to understand various aspects of NEMSIS including development, implementation and support of the National EMS Data Standard. To include a great video that provides a concise introduction to NEMSIS. <u>https://nemsis.org/nemsis-101/</u>

NCDP Announces New Course Offerings

The National Center for Disaster Preparedness, Columbia University (NCDP) is offering two free-web based trainings intended for the whole community: AWR-357-W: Principles of Community Economic RecoveryandPER-376-W: Preparedness Actions to Promote Economic Resilience and Recovery. AWR-357-W addresses economic recovery within the National Preparedness Goal and provides resources for whole community planning. PER-376-W encourages economic resilience among private organizations (non-profit and for-profit) confronted with natural disasters. The courses and more information on them can be found at www.ncdpcourses.org.

NQF Seeks Panelists Nominations on Risk Adjustment Models Project

The National Quality Forum (NQF) has announced a new partnership with the Centers for Medicare and Medicaid Services (CMS) and the launch of a new project to conduct an environmental scan of data sources used for risk adjustment, functional or social risk factors available for testing, and approaches to conceptual and statistical methods for risk adjustment. This environmental scan will benefit from deep expertise in reviewing existing risk-adjusted measures and programs. NQF will also develop Technical Guidance for measure developers that includes best practices on when and how to adjust for functional and social risk factor in measure development and the appropriateness of a standard risk adjustment framework. For more information, go to http://www.qualityforum.org/Risk_Adjustment_Guidance.aspx.

"Your Patient Is Logging on Now: The Risks and

Benefits of Telehealth in the Future of Healthcare"

From the TDC Group a medical malpractice firm, authors consider the risks of electronic communications, data breaches, and cyber liability, especially when providers are seeing patients from a variety of devices in a variety of locations. <u>Read</u> more here.

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Medical Direction FDA Greenlights Injection to Aid Tracheal Intubation.

The Food and Drug Administration recently approved a new drug for facilitating tracheal intubation and to provide skeletal muscle relaxation during surgery or mechanical ventilation. FDA said that approving <u>cisatracurium besylate USP 20 mg/10mL</u> injections via an abbreviated new drug application addresses a shortage for a medical product that is in increased demand. The agency noted the drug's side effects include bradycardia, hypotension, flushing, bronchospasm and rash.

Pediatric Emergency Care Research Report Highlights IO Access in Pediatric Population

A new study reported in *Pediatric Anesthesia* analyzes anatomic dimensions of the proximal tibia in the pediatric population with respect to intraosseous needle placement and needle tip position. Authors report that "radiographs from 190 patients (104 boys/86 girls) were included. When fully inserted to skin level, up to 10.5% of needles do not reach medullary cavity at one and 18.5% at two patient's fingerbreadths distal to tibial tuberosity. The opposite cortical wall is touched or penetrated in 16% and 25%, respectively. Up to 96% of too deep needle tip positions occur in children younger than 24 months, as do too superficial tip positions in 59%." Conclusions suggest that infants and toddlers are at highest risk for malpositioning. Access the article at https://onlinelibrary.wiley.com/doi/full/10.1111/pan.13979.

AHRQ Highlights Patient Handoff Tool for Pediatrics

A new article based on research funding from the Agency for Healthcare Research and Quality (AHRQ) describes one pediatric hospital's experience adapting and implementing the <u>I-PASS handoff program</u> for inpatient nursing bedside report, physician handoff, and imaging/procedures handoff. The project demonstrates that I-PASS can be successfully used across a hospital system in various settings to reduce handoff-related errors. Click <u>here</u> to read more.

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Rural HHS Releases Rural Action Plan

The U.S. Department of Health and Human Services (HHS) released the Rural Action Plan, the first HHS-wide assessment of rural healthcare efforts in more than 18 years and the product of HHS's Rural Task Force. This action plan provides a roadmap for HHS to strengthen departmental coordination to better serve the millions of Americans who live in rural communities across the United States. Eighteen HHS agencies and offices took part in developing the plan, which includes 71 new or expanded activities for FY 2020 and beyond. Efforts that will be undertaken in FY 2020 include nine new rural-focused administrative or regulatory actions, three new rural-focused technical assistance efforts, 14 new rural research efforts, and five new rural program efforts. These efforts build on 94 new rural-focused projects the HHS Rural Task Force identified as having launched over the past three years. The plan includes "Investing \$5 million in FY 2020 to recruit and train EMS personnel in rural areas." Read more at https://www.hhs.gov/about/news/2020/09/03/hhs-releases-rural-action-plan.html.

New NOSORH Issue Brief Focuses on Rural Population Health and Health Equity

As the terms "population health" and "health equity" become integrated into the rural health vocabulary, it is important to establish a unified understanding of what these terms mean. This issue brief aims to define population health and health equity, with particular attention to the nuances for rural clinical partners. It can be used to educate rural health and clinical care partners on their approaches to population health and health equity and engage rural health stakeholders in meaningful discussions that improve the health and well-being of rural residents. A new issue brief developed by the National Organization of State Offices of Rural Health (NOSORH) with support from the Federal Office of Rural Health Policy (FORHP) is now available at https://files.constantcontact.com/75140471301/a539e9b6-a8a3-429f-bd2f-66c2c0f53597.pdf.

Federal Partners

NHTSA Offers Video Presentations from Recent NEMSAC Meeting

The National Highway Traffic Safety Administration Office of EMS has posted video recordings of the recent NEMSAC meeting. There are 24 video files on a range of topics. Each phase of the meeting is listed. To access the recordings, go <u>here.</u> The link to access the videos will expire 10/16/2020. Please note that links are optimized for file downloads only, not viewing. As a reminder, the NHTSA OEMS also maintains an active and informative <u>YouTube channel</u>.

FDA Warns That Certain Surgical Gowns Insufficient as PPE

The U.S. Food and Drug Administration (FDA) is alerting health care facility risk managers, procurement staff, and health care providers that gowns sold as medical gowns, including surgical gowns, sold by Laws of Motion PPE (LawsofMotionPPE.com) have potential quality issues that affect the level of fluid barrier protection. The FDA is recommending that gowns manufactured or sold by Laws of Motion PPE should not be used as personal protective equipment at this time while the FDA continues investigation. For more information, go to https://www.fda.gov/medical-devices/letters-health-care-providers/stop-using-gowns-including-surgical-gowns-laws-motion-ppe-letter-health-care-providers.

CMS Announces New Start Date for ET3

The Centers for Medicare & Medicaid Services (CMS) is pleased to announce that the first performance period for the Emergency Triage, Treat, and Transport (ET3) Model will now begin on January 1, 2021. The Model was delayed from its original start date of May 2020, in order to support the community of organizations that were focused on responding to the Coronavirus disease 2019 (COVID-19) Public Health Emergency. Selected applicants will be receiving a revised Participation Agreement (PA) in mid-October, 2020. Further public updates will be available on the ET3 Model website at https://innovation.cms.gov/innovation-models/et3.

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Industry News ACEP and ASA Issue Joint Statement on Ketamine Use

The American College of Emergency Physicians (ACEP) and the American Society of Anesthesiologists (ASA) have announced a collaborative statement on the use of ketamine in prehospital settings. "Ketamine is a dissociative anesthetic that is widely used in the emergency department and in prehospital care for effective pain management, sedation, the control of delirium in acute psychotic emergencies and drug intoxications. Its safe use in prehospital care is dependent on an appropriate medical assessment by a paramedic with medical direction guiding appropriate dosing, monitoring as soon as feasible, and timely transport to an emergency department for further assessment and treatment. ACEP and ASA firmly oppose the use of ketamine or any other sedative/hypnotic agent to chemically incapacitate someone solely for a law enforcement purpose and not for a legitimate medical reason." View statement at https://www.emergencyphysicians-on-ketamine-use.

NREMT Seeks Applicants for Board of Directors

The Board of Directors of the National Registry of Emergency Medical Technicians (National Registry) is accepting applications for the Public Health At-large Board position with a term beginning November 2020. National Registry board members serve four-year terms and are required to attend at least two in-person Board of Directors meetings each year. Members-at-large may also sit on up to three Board committees that require additional in-person meetings or conference calls. Candidates for this position are expected to have demonstrable experience in Public Health leadership and administration. Previous involvement in National Registry initiatives or EMS experience is preferred. Read more at https://www.nremt.org/rwd/public/document/newsboard-of-director-applicants.

Fitbit Receives Regulatory Clearance for ECG App to ID AFib

As part of the submission process to regulatory agencies, Fitbit conducted a multi-site clinical trial in regions across the U.S. to evaluate a new algorithm's ability to accurately detect atrial fibrillation from normal sinus rhythm and to generate an ECG trace, or recording of a heart's electrical rhythm, that is qualitatively similar to a Lead I ECG. The study showed that the algorithm exceeded target performance, demonstrating the ability to detect 98.7% of AFib cases (sensitivity) and was 100% accurate in identifying study participants with normal sinus rhythm (specificity). "Fitbit Sense" is the company's first device compatible with an ECG app that enables users to take a spot check reading of their heart that can be analyzed for the heart rhythm irregularity AFib. Users simply hold their fingers to the stainless steel ring on the watch while being still for 30 seconds to get a reading that can be downloaded and shared with a doctor. Read more at https://www.businesswire.com/news/home/20200914005215/en/.

National Action Plan to Advance Patient Safety

A new report from the Institute for Healthcare Improvement, Safer Together: A National Action Plan to Advance Patient

Safety, harnesses the knowledge and insights of the National Steering Committee for Patient Safety (NSC) members, including influential federal agencies, leading health care organizations, patient and family advisors, and respected industry experts, into a set of actionable and effective recommendations to advance patient safety. The National Action Plan centers on four foundational and interdependent areas, prioritized as essential to create total systems safety. The recommendations in these four areas build on the substantial body of experience, evidence, and lessons learned that the NSC has gathered and will test and implement together to allow for future refinements as our understanding, experience, and evidence evolve over time. In addition, two supplementary resources offer further guidance: a Self-Assessment Tool and an Implementation Resource Guide. Read more at http://www.ihi.org/Engage/Initiatives/National-Steering-Committee-Patient-Safety/Pages/National-Action-Plan-to-Advance-Patient-Safety.aspx.

NOW STREAMING: 'Outbreak: The First Response' Available on Yahoo.com

"Outbreak: The First Response," a new documentary on the COVID-19 response in the Seattle area, is now available for live streaming on <u>Yahoo.com</u>. Produced by Soledad O'Brien Productions with the support of the de Beaumont Foundation, the documentary is told through the eyes of the county's health director, a family experiencing homelessness, and a family with a relative in a nursing home. "Outbreak" reveals the impact of this historic pandemic and is a must-see for anyone who's working to make communities safer and healthier. We hope you'll watch and tell others about it. You can view the documentary on Yahoo Life. For more information, visit debeaumont.org/outbreak or email the de Beaumont Foundation.

Management of Acute Pain From Non–Low Back Musculoskeletal Injuries

New clinical guidelines for the treatment of acute pain are now available via funding provided by the National Safety Council. McMasters University reviewed over 200 clinical trials addressing 45 different pain treatments (for acute pain, non-lower back) in nearly 40,000 patients and found that the best pain relief can be achieved through using topical nonsteroidal antiinflammatory agents (NSAIDs), and the next best pain treatment comes from combining an NSAID and acetaminophen. Opioids placed third in handling pain relief, but was not a recommended treatment for this type of pain, when balanced with potential bodily harm, including the potential for addiction and gastrointestinal issues. NSC will continue to review the results of the study and work with internal and external stakeholders to ensure the information gained in this study is used to help medical professionals effectively treat workplace injuries. This is one potential impact area of many, and NSC will evaluate additional options. This research was funded by a donation to NSC and will have significant impact throughout the practice of medicine. Read more at https://www.acpjournals.org/doi/10.7326/M19-3601.

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Interesting Abstracts

Tackle Football in Childhood: Does Age Matter Towards Concussion Recovery?

In a new study published in *Neurology*, researchers noted that kids who played tackle football at a young age weren't at increased risk for prolonged or worsened concussion symptoms as college players. In adjusted models, the estimated age of first exposure to American football -- defined as a player's age at the time of concussion diagnosis minus his self-reported number of years playing football -- was not related to longer symptom recovery, worse balance, or worse cognitive performance soon after concussion, reported Thomas Buckley, EdD, of the University of Delaware in Newark, and co-authors in <u>Neurology</u>.

FDA Panel: Reformulated OxyContin Did Not

Reduce Overall Abuse

The Food and Drug Administration (FDA) Division of Epidemiology (DEPI) II recently evaluated studies from the peer-reviewed and selected grey literature examining the impact of reformulated OxyContin on its use, nonmedical use and opioid-related morbidity and mortality in order to improve their understanding of the broader public health impact of OxyContin's reformulation, intended to reduce misuse and addiction. The FDA concluded that although there appears to be a reduction in abuse by non-oral routes as a result of the reformulation, there is no reliable evidence on the impact of OxyContin's reformulation on the overall risk of addiction. Download the FDA's report on the literature review and conclusions here.

Yale Study Shows Bedside MRI Feasible in ICU

Among 50 patients scanned in Yale's ICU, the Hyperfine's <u>Swoop portable MRI system</u> identified neuroimaging abnormalities for eight of the 20 on ventilation for COVID-19 (40%) and 29 of the 30 without COVID-19 (97%).

Point-of-care MRI examinations were performed on 50 patients (16 women [32%]; mean [SD] age, 59 [12] years [range, 20-89 years]). Patients presented with ischemic stroke (n = 9), hemorrhagic stroke (n = 12), subarachnoid hemorrhage (n = 2), traumatic brain injury (n = 3), brain tumor (n = 4), and COVID-19 with altered mental status (n = 20). Examinations were acquired at a median of 5 (range, 0-37) days after intensive care unit admission. Diagnostic-grade T1-weighted, T2-weighted, T2 fluid-attenuated inversion recovery, and diffusion-weighted imaging sequences were obtained for 37, 48, 45, and 32 patients, respectively. Neuroimaging findings were detected in 29 of 30 patients who did not have COVID-19 (97%), and 8 of 20 patients with COVID-19 (40%) demonstrated abnormalities. There were no adverse events or complications during deployment of the portable MRI or scanning in an intensive care unit room. Read more here.

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UPCOMING Events

OCTOBER 2020

<u>American College of Surgeons Clinical Congress</u> (October 4-8, Virtual) <u>American College of Emergency Physicians Annual Meeting</u> (October 26 - 29, Virtual)

NOVEMBER 2020

<u>Air Medical Transport Conference</u>. (November 2-4, **Now Virtual!**) <u>IAEM EMEX 2020</u> (November 13-18, Virtual)

State and Regional Conferences

14th Annual Virtual Tacoma Trauma Conference (November 13, Virtual)

Please use these links to access monthly course schedules and registration info related to:

- NAEMSE Instructor Course Level 1
- NAEMSE Instructor Course Level 2
- <u>CAAHEP Accreditation Update & Evaluating Student Competency Workshops</u>





Your input to Washington Update is welcome and can be sent directly to our Editor:

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