



Washington Update

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UPCOMING EVENTS

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

1. NASEMSO Mid-Year Registration Form Now Available

The Meeting Registration Form for the 2012 NASEMSO Mid-Year Meeting is now available on line at www.nasemso.org. Council and Committee Meetings will tentatively be held on Monday, May 7 and the General Program will be held on Tuesday, May 8. More information will be announced as it becomes available. New this year...in our continuing effort to “go green” we will be using an online app for meeting and schedule updates. This feature will enable us to make program and room changes on site, while updating any information that has been provided in a printed program including sponsors and exhibitors. You can preview the program now on any Apple product or smartphone by going to <http://guidebook.com/getit/> and searching for the 2012 NASEMSO Mid-Year

Meeting. Attendees are reminded to register under the NASEMSO room block to attend the NASEMSO functions and to switch to the EMSC room block for the grantee meeting to prevent hotel penalties to either organization. Any questions about the Mid-Year or Annual Meeting can be forwarded to NASEMSO Program Manager [Kathy Robinson](#).

2. NASEMSO Cosponsors EMS on the Hill Day

Plan to participate in EMS on the Hill Day 2012. It is critical that we educate our congressional leaders on EMS issues and advocate for the passage of key EMS legislation. All EMS professionals are invited and encouraged to participate. [Details here](#). The deadline to register as a participant is February 15, 2012. The event will be held in Washington, DC on March 20-21, 2012.



3. 2011 National EMS Assessment Report Now Available

The Federal Interagency Committee for Emergency Medical Services (FICEMS) has released the 2011 National EMS Assessment in final draft form. Sponsored by FICEMS and funded by the National Highway Traffic Safety Administration (NHTSA), the report provides the first ever comprehensive description of emergency medical services, EMS emergency preparedness and 911 systems at state and national levels using existing data sources. The [National EMS Assessment](#), which was completed over a 24-month period from September 2009 to August 2011, provides a detailed description of the nation’s EMS systems which comprise an estimated 19,971 local EMS agencies, their 81,295 vehicles and 826,111 licensed and credentialed personnel.

4. States Eligible to Respond to FOA

A new Funding Opportunity Announcement (FOA) is available to units of state government from the Agency of Healthcare Quality and Research (AHRQ) to support *research that will inform the development of a health care system in which every consumer has ready access to reports that allow meaningful comparison of providers based on measures of quality and resource use*. This FOA will fund exploratory and developmental studies that seek to fill knowledge gaps around public reporting and establish an evidence base to inform the content, design, dissemination and use of public reports, guiding the way toward enhanced reporting practices. AHRQ intends to commit up to \$14,000,000 between Fiscal Year (FY) 2012 and FY 2014. AHRQ intends to fund up to 25 applications in response to this FOA, with an anticipated funding distribution of \$5 million in FY 2012, \$5 million in FY 2013, and \$4 million in FY 2014. Letters of Intent Receipt Date(s): February 27, 2012. Application Due Date(s): March 28, 2012. This Funding Opportunity Announcement (FOA) is a new Request for Applications (RFA). [For more information...](#)

5. IOM to Convene Meeting on LHI

The Institute of Medicine has been asked by the Department of Health and Human Services to convene a small group of individuals to begin planning for the implementation of the Leading Health Indicators (LHIs) released October 31, 2011. The general format for the day—February 14 in Washington DC-- will be a presentation and discussion with Dr. Howard Koh, Assistant Secretary for Health, followed by a formal presentation of the LHIs. This will be followed by a panel discussion. During the early part of the afternoon, participants will divide into four groups to discuss ideas for implementation activities. Following that discussion we will reconvene in general session to report on the ideas developed during the small group meetings. The meeting will be transcribed and a

report issued. Registration for the meeting is now open. Registration is limited to 50 people on a first come first serve basis. [For more information...](#)

6. PSHSB Seeks Comment on Requests for Waiver

The Public Safety and Homeland Security Bureau (PSHSB) seeks comment on several requests for waiver of the Commission’s January 1, 2013 VHF-UHF narrowbanding deadline, codified at 47 C.F.R § 90.209(b), which requires private land mobile radio licensees in the 150-174 MHz and 450-512 MHz bands to operate using channel bandwidth of no more than 12.5 kHz or equivalent efficiency by January 1, 2013. State EMS Directors (or interested persons) are encouraged to review listings within their state’s jurisdiction and respond as appropriate. Comments Due: 02/10/2012. [For more information...](#)

7. Nation’s Governors Support D Block Legislation with Conditions

The National Governors Association has written the Senate Committee on Commerce, Science and Transportation and the House Committee on Energy and Commerce conveying what they believe to be state’s rights on implementing the D Block Legislation. Specifically, they say that a national governing body over the broadband network should have a majority of seats filled by state, local and public safety representatives and shouldn’t preempt local control. [Read the letter...](#)

8. New Report from NIOSH: Lessons Learned from the Deepwater Horizon Response

The explosion on the Deepwater Horizon disaster oil rig on April 20, 2010 resulted in the death of 11 workers and injury to another 17 workers. In the weeks and months after, as large amounts of crude oil released from the Macondo Well, tens of thousands of workers engaged in on- and off-shore containment and clean-up activities. Addressing concerns about the potential effects of the spill on human and environmental health in the Gulf, including potential risk to response workers, prompted an unprecedented response from agencies all across the Federal government. The purpose of this report, [Lessons Learned from the Deepwater Horizon Response](#), is to evaluate those response activities, and in light of knowledge gained, identify ways to improve our response in the future.

9. Registration is Now Open for Personal Protective Technology March Meeting

Registration is now open for the 2012 NIOSH Personal Protective Technology Stakeholder Meeting, Hyatt Regency Pittsburgh International Airport, March 20, 2012. The focus of the meeting is personal protective equipment (PPE) selection, use, and expectations and will emphasize PPE in healthcare and public safety, including EMS.

Why attend??

- Gain a better understanding of EMS-specific Protective Clothing and Equipment
- Hear “success stories” from PPE users illustrating personal, real-life examples of how PPE has prevented serious illness
- Opportunity to provide your input and feedback on NIOSH PPE Program activities and actions to enhance worker safety and health by closing PPE research, standard, and certification gaps

To register, or for more information, go to <https://www.team-psa.com/niosh/stakeholders/2012>.

10. New GAO Report Evaluates Use of DHS Risk Assessments to Inform CBRN Response Plans

The 2001 anthrax attacks in the United States highlighted the need to develop response plans and capabilities to protect U.S. citizens from chemical, biological, radiological, and nuclear (CBRN) agents. Since 2004, the Department of Homeland Security (DHS) has spent at least \$70 million developing more than 20 CBRN risk assessments. The Government Accountability Office (GAO) was requested to assess, from fiscal year 2004 to the present, the extent

to which DHS has used its CBRN risk assessments to inform CBRN response plans and CBRN capabilities, and has institutionalized their use. In a recent report, *Chemical, Biological, Radiological, and Nuclear Risk Assessments DHS Should Establish More Specific Guidance for Their Use*, to the Senate Committee on Homeland Security and Governmental Affairs, the GAO provides their findings. For GAO-12-272, Jan 25, 2012 [Highlights](#); [View Report](#).

11. DHS Seeks to Protect Global Supply Chain from Terrorists

Secretary of Homeland Security Janet Napolitano recently unveiled the [National Strategy for Global Supply Chain Security](#) at the World Economic Forum in Davos, Switzerland. The Department of Homeland Security is committed to facilitating legitimate trade and travel, while preventing terrorists from exploiting supply chains, protecting transportation systems from attacks and disruptions, and increasing the resilience of global supply chains. The National Strategy for Global Supply Chain Security outlines clear goals to promote the efficient and secure movement of goods and foster a resilient supply chain system. It also provides guidance for the U.S. government and crucial domestic, international, public and private stakeholders who share a common interest in the security and resiliency of the global supply chain. [For more information...](#)

12. New FEMA Resilience Document Outlines 20 Year Vision

Launched in 2010, the Strategic Foresight Initiative (SFI) is a transformative, community-wide effort to create an enduring foresight capability. It is intended to advance strategic planning and thinking about the future, to prepare the community both for emerging challenges and for the key opportunities presented by our changing environment. Its core focus is to understand the factors driving change in our world, and to analyze how they will impact the emergency management field in the United States over the next 20 years. A new report from FEMA, [Crisis Response and Disaster Resilience 2030: Forging Strategic Action in an Age of Uncertainty](#), is intended to provide planners and managers with insights that can shape a range of critical decisions. Such decisions—which can be made in advance of disasters— include improving prioritization of resources and investments, managing new and unfamiliar risks, forging new partnerships, and understanding emerging legal and regulatory hurdles.

13. USDA Provides Interagency Helicopter Extraction Source List

The US Department of Agriculture (USDA) Forest Service has recently updated its “Interagency Emergency Helicopter Extraction Source List – 2012”. The intent of this source list is to provide Incident Management Teams, Geographic Area Coordination Centers, and Forests access to the availability of helicopter resources on a state, geographical and national basis to conduct human extractions (hoist/short-haul) for emergency evacuations. Both insertion/extraction techniques are used to precisely place emergency response personnel and remove critically injured victims from normally inaccessible terrain or locations. The goal is to provide emergency response to the seriously injured and to respond as quickly as possible to life threatening situations occurring on agency and interagency incidents. Emergency helicopter extraction resources identified in this document have been compiled from federal, state, municipal governments, military, and Emergency Medical Response (EMS) programs throughout the country. Many factors may determine the availability and response time of requested resources. This updated 2012 publication provides a thorough listing of helicopter resources available to conduct human extractions for emergency evacuations throughout the United States. [For more information...](#) Several other interesting aviation guides are available [here](#).

14. EMForum Posts Live Meeting Recording on Legal Issues and Disasters

The [Live Meeting recording](#) of the January 25th EMForum.org program, "Legal Issues and Disasters: Things You Should Know," with Dr. Angelyn Flowers, is now available. This is a large file and requires [Windows Media Player](#) or [Windows Media Components for QuickTime](#) or a similar product to view. The [Audio Podcast](#), presentation [Slides](#),

as well as [Ratings and Comments](#), are available from the [Background Page](#). Please take a moment to [rate this program](#) for relevance and share your comments.

15. SAMSHA Provides New Disaster Preparedness and Recovery Resource

The Substance Abuse and Mental Health Services Administration (SAMHSA) has published a new resource that lists disaster preparedness and recovery resources for range of professionals who assist individuals and communities in coping with disaster. Topics include emergency preparedness, training, disaster response, stress prevention and management, and suicide prevention. [Click here to order or download a copy of this free publication...](#)

16. Dirty Bombs Awareness Resources Identified by EMR-ISAC

(Sources: Congressional Research Service, Nuclear Regulatory Commission, and The National Academies)

In its “[Dirty Bombs: Background in Brief](#)” (PDF, 448 Kb), the [Congressional Research Service](#) recently reported that terrorists have interest in radiological dispersal devices (RDDs) to cause panic, area denial, and economic dislocation. According to the [U.S. Nuclear Regulatory Commission](#) (NRC), a dirty bomb is one type of RDD that combines conventional explosives (e.g., dynamite) with radioactive material that may disperse (i.e., spread radioactive contamination) when the device explodes. The [Emergency Management and Response—Information Sharing and Analysis Center](#) (EMR-ISAC) noted that dirty bombs may kill some people and contaminate property. However, they are also weapons of mass terror and disruption, as reports of radioactive contamination can incite fear and result in significant economic, social, and psychological harm. NRC research indicates that the probable consequences of a dirty bomb could be far greater than the initial personal and physical damage from the weapon. Materials that can be used in dirty bombs are found in laboratories, research facilities, medical centers, food irradiation plants, and other industrial sites, according to The National Academies. Therefore, public and private sector organizations as well as the emergency services should consider these sources when planning for the protection and resilience of their local critical infrastructures. See “[Radiation and Dirty Bomb Primer](#)” for additional information.

17. Barriers to Integrating Crisis Standards of Care Principles into International Disaster Response Plan

When a nation or region prepares for public health emergencies such as a pandemic influenza, a large-scale earthquake, or any major disaster scenario in which the health system may be destroyed or stressed to its limits, it is important to describe how standards of care would change due to shortages of critical resources. At the 17th World Congress on Disaster and Emergency Medicine, the IOM Forum on Medical and Public Health Preparedness sponsored a session that focused on the promise of and challenges to integrating crisis standards of care principles into international disaster response plans. [Read the Report...](#)

18. FAA Reauthorization Bill Awaits President’s Signature

The long battle over reauthorizing the Federal Aviation Administration (FAA)—which has been operating for more than four years via a series of 23 temporary funding extensions—finally came to an end Monday (February 6) with the US Senate's passage of a bill allocating \$63.3 billion to the agency through Sept. 30, 2015. (The House passed the bill on February 3.) NASEMSO members may remember that the FAA Air Transportation Modernization and Safety Improvement Act first introduced in 2011 contains language that pertains to the delivery of air medical services. Interested persons can lookup [H.R. 658 \(112th Congress\)](#), Section 310 for language that addresses the safety of air ambulance operations. Once the President signs the Bill, the Administrator is authorized to conduct a rulemaking proceeding to improve the safety of flight crewmembers, medical personnel, and passengers onboard helicopters providing air ambulance services under part 135.

19. Draft 2 EMS Culture of Safety Draft Available for Comment

A three-year cooperative agreement between the National Highway Traffic Safety Administration (NHTSA), with support from the Health Resources and Services Administration's (HRSA) EMS for Children (EMSC) Program, and the American College of Emergency Physicians (ACEP) has brought together representatives from national EMS and fire organizations to develop a national EMS "Culture of Safety" Strategy. Draft 2 of the document is now available for review. The deadline for comments is February 24, 2012. [For more information...](#)

20. AHRQ Posts New Resources and 2011 Annual Meeting Presentations

The Agency for Healthcare Research and Quality (AHRQ) has posted the following new items that may be of interest to the EMS and emergency care community:

- [Detection of Associations Between Trial Quality and Effect Sizes.](#)
- [National Advisory Council Subcommittee: Identifying Health Care Quality Measures for Medicaid-Eligible Adults—Background Report.](#)
- [Clarification and Update Notice for AHRQ Patient Centered Outcomes Research Institutional Award \(K12\) RFA-HS-12-001.](#)
- [Emergency Severity Index: 2012 Edition of the Implementation Handbook.](#)
- [Improving Patient Flow and Reducing Emergency Department Crowding: Evaluation of Strategies from the Urgent Matters Learning Network II, Executive Summary.](#)
- [Improving Patient Flow and Reducing Emergency Department Crowding: A Guide for Hospitals.](#)

In related news, to help advance its goal of improving health care for all Americans, AHRQ held its third annual conference on September 18-21, 2011, in Bethesda, MD. This conference was designed to showcase the best of the Agency's research and provide examples of how that research is being implemented at all levels in health care delivery. Entitled "Leading Through Innovation & Collaboration" the conference featured presentations in seven major themes. The following presentations are now available online:

[Plenary Sessions](#)

[Track A: Making Care Safer by Reducing Harm Caused in the Delivery of Care](#)

[Track B: Ensuring That Each Person and Family Are Engaged as Partners in Their Care](#)

[Track C: Promoting Effective Communication and Coordination of Care](#)

[Track D: Promoting the Most Effective Prevention and Treatment Practices for the Leading Causes of Mortality, Starting With Cardiovascular Disease](#)

[Track E: Working With Communities to Promote Wide Use of Best Practices to Enable Healthy Living](#)

[Track F: Making Quality Care More Affordable for Individuals, Families, Employers, and Governments by Developing and Spreading New Health Care Delivery Models](#)

In addition, the following video presentations are available.

- Leading Through Innovation & Collaboration: Addressing Health Care Disparities, Access, and Quality of Care
[Video of Plenary Session, September 19, 2011](#)
- Leading Through Innovation & Collaboration: Addressing Health System Change, Patient Safety, and Quality of Care
[Video of Plenary Session, September 20, 2011](#)

21. DHS Releases New Resources to Combat Human Trafficking

Several [new human trafficking awareness and training materials](#) for the general public, federal workforce, first responders and airline employees have been published by the Department of Homeland Security (DHS). These new materials aim to help increase awareness and provide education on the indicators of human trafficking and the importance of reporting it to officials. Human trafficking is a crime and a human rights abuse involving commercial sexual exploitation of a child or the use of force, coercion or fraud to compel someone into labor servitude or commercial sexual exploitation. Thousands of men, women, and children are trafficked in the United States every year. Take a few minutes to review some of the [indicators of human trafficking](#) and to [report human trafficking to authorities if suspected](#).

22. NIOSH Announces Project on Nonfatal Occupational Injuries

The National Institute for Occupational Safety and Health (NIOSH) and the Centers for Disease Control and Prevention (CDC) have announced pilot research that addresses two facets of nonfatal occupational injury reporting—understanding barriers and incentives to reporting occupational injuries and using this knowledge to assess and improve surveillance activities. The objectives of this project are to (1) Characterize and quantify the relative importance of incentives and disincentives to self-identifying work-relatedness at the time of medical treatment and to employers; (2) characterize individual and employment characteristics that are associated with non-reporting of workplace injuries and incentives and disincentives to reporting; (3) test the reliability of hospital abstractors to properly distinguish between work-related and non-work-related injuries; and (4) evaluate the feasibility, need, and requirements for a future larger study. This project will use the occupational and the all injuries supplements to the National Electronic Injury Surveillance System (NEISS-Work and NEISS-AIP, respectively) to identify telephone interview survey participants. NEISS-Work and NEISS-AIP, collected by the Consumer Product Safety Commission (CPSC), capture people who were treated in the emergency department (ED) for a work-related illness or injury (NEISS-Work) or any injury, regardless of work-relatedness (NEISS-AIP). Interview respondents will come from two subgroups—individuals treated for a work-related injury and individuals who were treated for a non-work-related injury but who were employed during the time period that the injury occurred. The project is entitled “*Barriers to Occupational Injury Reporting by Workers: A NEISS-Work Telephone Interview Survey.*” [For more information...](#)

23. New CDC iPad App Available

More and more people are using smart phones and tablets to view emails and social media accounts, watch movies, and read books or magazines. Increasingly, people are also using these tools to find health information. As users begin to prefer mobile technology for "just in time" internet access, it is important that CDC enables fast and efficient mobile delivery of CDC's critical health information. To this end, the CDC announces their first application (or "app") for the [Apple iPad platform](#). The CDC App is free for anyone to download. You can read more about it at [CDC Mobile iPad Application](#) on CDC's web site. If you have an iPad, tap directly on the icon for the iTunes App store.

24. CDC Revises Field Triage Guidelines

CDC has released the [Morbidity and Mortality Weekly Report: Recommendations and Reports on the 2011 Guidelines \(2011 Guidelines\) for Field Triage of Injured Patients](#). The 2011 Guidelines are an update of the guidance recommended in the 2006 Guidelines for Field Triage of Injured Patients. The new version provides changes to the decision scheme for EMS providers who care for and transport patients injured from motor vehicle crashes, falls, penetrating injuries, and other injury mechanisms each day in our nation’s communities.





25. Routine Adult Immunizations Are Vital for EMS Practitioners!!

Just a reminder: here are the most current immunization recommendations for adults from the Centers for Disease Control and Prevention (CDC). Please feel free to circulate!! [For more information...](#)

Recommended adult immunization schedule, by vaccine and age group1 — United States, 2012

VACCINE ▼	AGE GROUP ►	19–21 years	22–26 years	27–49 years	50–59 years	60–64 years	≥65 years
Influenza ^{2,*}		1 dose annually					
Tetanus, diphtheria, pertussis (Td/Tdap) ^{3,*}		Substitute 1-time dose of Tdap for Td booster; then boost with Td every 10 years					
Varicella ^{4,*}		2 doses					
Human papillomavirus (HPV) ^{5,*} Female		3 doses					
Human papillomavirus (HPV) ^{5,*} Male		3 doses					
Zoster ⁶		1 dose					
Measles, mumps, rubella (MMR) ^{7,*}		1 or 2 doses					
Pneumococcal (polysaccharide) ^{8,9}		1 or 2 doses					
Meningococcal ^{10,*}		1 or more doses					
Hepatitis A ^{11,*}		2 doses					
Hepatitis B ^{12,*}		3 doses					

* Covered by the Vaccine Injury Compensation Program

 For all persons in this category who meet the age requirements and who lack documentation of vaccination or have no evidence of previous infection
  Recommended if some other risk factor is present (e.g., on the basis of medical, occupational, lifestyle, or other indications)
  Tdap recommended for ≥65 if contact with <12 month old child. Either Td or Tdap can be used if no infant contact
  No recommendation

26. EMS Organizations Invited to Comment on Ambulance Equipment Lists

The American College of Surgeons Committee on Trauma (ACS-COT), the American College of Emergency Physicians (ACEP), the National Association of EMS Physicians (NAEMSP), the Pediatric Equipment Guidelines Committee—Emergency Medical Services for Children (EMSC) Partnership for Children Stakeholder Group, and the American Academy of Pediatrics (AAP) jointly published an “Equipment for Ambulances” document/list in 2009: [Bulletin of the American College of Surgeons, 94\(7\):23-29, July 2009](#). This list provides a national standard for the equipment needs of basic life support and advanced life support ambulances in North America. The organizations listed above and the National Association of EMS Officials (NASEMSO) are soliciting input on a revision to the current list. After reviewing the document either by accessing one of the references above or entering the web link below, you will be able to reference the section or specific piece of equipment that you believe needs to be changed and provide a description of how it should be changed. Please provide specific wording as well as references that support your recommendation. Although it is possible to suggest a change without a reference, a lack of documentation or supporting materials will make it less likely that your comment(s) will be considered. There will be a succession of web pages that will allow you to enter all of this information. Please make sure that you identify the organization that you represent, as comments will initially be sent back to your home organization for review before being considered by the collective collaborative group. You may also invite other individuals who have a vested interest in out-of-hospital emergency care to participate. The online comment site can be accessed [here](#). The comment period will be open until March 1, 2012.

27. A “Heads Up” on Managing Return to Play: Information for Health Care Professionals

The Centers for Disease Control and Prevention (CDC) is featuring a new CDC/Medscape video with expert commentary from CDC's Dr. David Sugerman. The video includes key steps health care professionals should take when managing return to play among young athletes following a concussion. For more information about

diagnosing and managing concussion, visit CDC's new free online training for health care professionals developed in partnership with the National Football League (NFL) and the CDC Foundation [here](#).

28. New Patient Safety Paper Focuses on EMS

In 2008, the Canadian Patient Safety Institute partnered with the EMS Chiefs of Canada (EMSCC) and the Calgary EMS Foundation to fund research exploring patient safety in EMS. Through a competitive process, a research team from the University of Toronto was commissioned to develop a report. Together with a Canadian advisory group, experts and stakeholders from across Canada and internationally contributed information and expertise throughout the research process to create *“Patient Safety in Emergency Medical Services Advancing and Aligning the Culture of Patient Safety in EMS”*. The findings highlight the important challenges and opportunities for improving patient safety in EMS and show researchers that collaboration across Canada is required to better define and understand patient safety incidents in EMS. [For more information...](#)

29. NHTSA Concludes Defect Investigation on Chevy Volts

The National Highway Traffic Safety Administration (NHTSA) closed its safety defect investigation into the potential risk of fire in Chevy Volts that have been involved in a serious crash. Opened on November 25, 2011, the agency’s investigation has concluded that no discernible defect trend exists and that the vehicle modifications recently developed by General Motors reduce the potential for battery intrusion resulting from side impacts. NHTSA remains unaware of any real-world crashes that have resulted in a battery-related fire involving the Chevy Volt or any other electric vehicle. NHTSA continues to believe that electric vehicles show great promise as a safe and fuel-efficient option for American drivers. However, as the reports released in conjunction with the closure of the investigation today indicate, fires following NHTSA crash tests of the vehicle and its battery components — and the innovative nature of this emerging technology — led the agency to take the unusual step of opening a safety defect investigation in the absence of data from real-world incidents. Based on the available data, NHTSA does not believe that Chevy Volts or other electric vehicles pose a greater risk of fire than gasoline-powered vehicles. [For more information...](#)

30. NAEMT Advocacy Service Available to EMS Community

The National Association of EMTs has recently revised its web site to make it easier for NAEMT members to access services and information. However, any individual can use the NAEMT web site to access their EMS advocacy service powered by CapWiz. The site is designed to help you advocate for the passage of current federal legislation in support of EMS and EMS practitioners. There are many great features on this site, and we encourage you to familiarize yourselves with the following tools and resources:

- Find your elected representatives and the leaders of federal agencies that impact EMS in our country.
- View pending EMS-related legislation in Congress and look up how your Congressmen voted on the issues. The site includes voting records back to 1996.
- See who is running for office in your area. Check out recent polling information on the candidates.
- Register to vote in your state directly from this site.
- Search for media organizations and journalists in your area.

Just go to www.naemt.org and look under the Advocacy tab to “contact Congress.” Note to our friends at NAEMT: your “new” web site looks GREAT!!

31. NFPA Standards Council Agrees to Immediate 1917 Revision Following Implementation

NASEMSO has learned that the NFPA Standards Council has approved the Committee’s proposal to put the NFPA 1917 standard back into revision cycle immediately after the new standard becomes effective in January, 2013.

The Report on Comments (ROC) will be published in February, 2012, after which the public can only propose further changes through submission of a Notice of Intent to Make a Motion (NITMAM) to the NFPA Standards Council. NITAM's must be submitted by April 6, 2012, and would be considered at the NFPA General Membership Meeting in June, 2012. If no NITMAM is submitted, the current document would be submitted for NFPA approval as a "consent document." In its current cycle, the initial NFPA 1917 document will be effective on January 1, 2013. If the document is placed back in cycle immediately thereafter, the next version of the standard would be expected to become effective in January, 2015.

32. Respironics Ventilator Recalled by Manufacturer

Respironics Trilogy 100 ventilators are being recalled due to a manufacturing issue. This issue can cause part of the blower that circulates air and other gases through the ventilator to move out of position and cause the device to alarm and stop delivering therapy to the patient. In the event of a blower failure, the ventilator will stop delivering therapy and a high priority alarm will sound to alert the caregiver to immediately respond. Failure to respond could result in the potential for harm or death of a ventilator-dependent patient. Trilogy 100 is intended for continuous or intermittent breathing support for the care of pediatric patients, weighing at least 11 pounds, through adult patients who require mechanical ventilation. The ventilators are used in hospitals, nursing homes, other health care settings, and in the home. [For more information...](#)

33. Registration Open for Emergency Medical Services Systems, Safety Strategies and Solutions Summit

The Transportation Research Board of the National Academies is sponsoring the Emergency Medical Services (EMS) Systems, Safety Strategies, and Solutions Summit on February 29, 2012, in Washington, D.C. This will be a one-day workshop reviewing the state of the art in transportation safety in EMS operations. Ongoing research and research needs statements in this area will be reviewed and discussed. This summit is not designed to address issues such as patient care. Advance registration expires February 10, 2012. For more information and details on how to register for the meeting visit the [conference website](#).

34. HHS Encourages Activities to Support American Heart Month

February is American Heart Month; a month to spread awareness about the importance of heart health. Each year, countless American families are impacted by heart disease and stroke. Although its risk factors can be prevented or controlled, it is still the leading cause of death for all Americans, and accounts for \$1 out of every \$6 health care dollars. But there are many simple steps we can take to prevent heart disease such as eating healthy foods, exercising regularly, and not smoking. [For more information...](#)

35. NREMT Launches National Certification EMR and EMT Exams

On January 1, the NREMT launched National EMS Certification examinations for the EMR and EMT levels. These examinations reflect content outlined in the National EMS Education Standards and National Scope of Practice model. Candidates who successfully pass their EMR and EMT certification examinations do not need to complete transitions previously outlined by the NREMT. The proper post nominal notations for the Scope of Practice Model provider levels are:

- NREMR - Emergency Medical Responder
- NREMT - Emergency Medical Technician
- NRAEMT - Advanced Emergency Medical Technician
- NRP - Paramedic

The recommended placement is following an educational notation: John Q. Smith, BS, NREMT. US Trademark applications were filed by the National Registry for each of these notations and they can be used by Nationally Certified EMS providers as long as they hold a current, valid certification.

36. Totally Drug Resistant TB Emerges in India

According to the scientific journal, *Nature*, physicians in India have identified a form of incurable tuberculosis there, raising further concerns over increasing drug resistance to the disease. Although reports call this latest form a “new entity”, researchers suggest that it is instead another development in a long-standing problem. The discovery makes India the third country in which a completely drug-resistant form of the disease has emerged, following cases documented in Italy in 2007 and Iran in 2009. Data on the disease, dubbed totally drug-resistant tuberculosis (TDR-TB), are sparse, and official accounts may not provide an adequate indication of its prevalence. [For more information...](#)

37. CDC Clinical Reminder: Insulin Pens Must Never Be Used for More than One Person

The Centers for Disease Control and Prevention (CDC) has become increasingly aware of reports of improper use of insulin pens, which places individuals at risk of infection with pathogens including hepatitis viruses and human immunodeficiency virus (HIV). This notice serves as a reminder that insulin pens must never be used on more than one person. Anyone using insulin pens should review the following recommendations to ensure that they are not placing persons in their care at risk for infection.

- Insulin pens containing multiple doses of insulin are meant for use on a single person only, and should never be used for more than one person, even when the needle is changed.
- Insulin pens should be clearly labeled with the person’s name or other identifying information to ensure that the correct pen is used only on the correct individual.
- Hospitals and other facilities should review their policies and educate their staff regarding safe use of insulin pens and similar devices.
- If reuse is identified, exposed persons should be promptly notified and offered appropriate follow-up including bloodborne pathogen testing.

These recommendations apply to any setting where insulin pens are used; including assisted living or residential care facilities, skilled nursing facilities, clinics, health fairs, shelters, detention facilities, senior centers, schools, and camps as well as licensed healthcare facilities. Protection from infections, including bloodborne pathogens, is a basic expectation anywhere healthcare is provided. Use of insulin pens for more than one person, like other forms of syringe reuse, imposes unacceptable risks and should be considered a 'never event'.

38. GAO Issues Report on Prescription Drug Abuse

The Centers for Disease Control and Prevention (CDC) has declared that the United States is in the midst of an epidemic of prescription drug overdose deaths, with deaths associated with prescription pain relievers of particular concern. To address this issue, federal agencies are raising awareness by educating prescribers and the general public. In response to a request by Congress, GAO (1) described recent national trends in prescription pain reliever abuse and misuse, (2) described how federal agencies are educating prescribers, (3) assessed the extent to which federal agencies follow key practices for developing public education efforts, and (4) identified educational efforts that use similar strategies and assessed how agencies coordinate those efforts. GAO interviewed officials and reviewed documents and websites from seven agencies involved in federal drug control efforts and analyzed the most recent data from several data sources related to prescription pain reliever abuse and misuse. GAO also assessed the development of public education efforts and federal coordination efforts against key practices from

prior GAO work. *Prescription Pain Reliever Abuse: Agencies Have Begun Coordinating Education Efforts, but Need to Assess Effectiveness*, click to read [GAO-12-115](#).

39. NEMSMS Announces 2012 Honorees

The National EMS Memorial Service has released the names of the 20 individuals from 13 states to be honored at the 2012 National EMS Memorial Service to be held Saturday, June 23 in Colorado Springs. The National EMS Memorial Service has, since 1992, been honoring America's EMS providers who have given their lives in the line of duty. The 20 individuals being honored this year join 581 others previously honored by the National EMS Memorial Service. Each year, at a service held in Colorado Springs, members of the honoree's families are presented with a medallion, symbolizing eternal memory; a U.S. Flag which has flown over the Nation's Capital, symbolizing service to the country; and a white rose, symbolizing their undying love. The 2012 National EMS Memorial Service will be conducted at the Pikes Peak Center in Colorado Springs. In addition to the presentations made during the Service, each honoree's name is engraved on a bronze oak leaf which is added to the "Tree of Life," the National EMS Memorial. Additional information on the National EMS Memorial Service is available from its web site at <http://nemsms.org> As February is American Heart Month, it occurs to us that 60% of the honorees were lost to on duty cardiac events. (Thoughtful pause...) 20% were lost in medical aviation incidents, another 10% were MVA related, 5% rescue related, and 5% other. Our prayers go out to all honorees, crew members, families, and friends.

In related news, the National EMS Memorial Service also announced plans for the Fifteenth Annual National Moment of Silence, to be observed at 1930 hrs (MDT) on Saturday, June 23, 2012. This coinciding with the National EMS Memorial Service to be conducted in Colorado Springs. The National Moment of Silence offers EMS providers and agencies around the nation the opportunity to join with those in attendance at the National EMS Memorial Service in honoring and remembering those members of our nation's Emergency Medical Services who have made the ultimate sacrifice and given their lives in the line of duty. The National EMS Memorial Service has prepared a "Suggested Script" which is available from the NEMSMS website at <http://nemsms.org/silence.htm>.

40. Bridging the Historic Divide Between Nurses and Paramedics

Anne Robinson, RN who has been the public health nursing and nursing leadership and liaison for the Eagle County EMS Community Paramedic program, was interviewed by the American Journal of Nursing about community paramedicine. [Please read the article](#) and see what a great job she has done to bridge the historic divide between nursing and paramedics and to lead nurses to begin to accept the concept of Community Paramedic as an opportunity to be more effective and not a place to compete for territory.

41. New IOM Service on Health Care Trends Now Available

The Institute of Medicine (IOM) is pleased to announce the launch of our new [Perspectives](#) section on iom.edu. This new category of IOM products provides leading experts the opportunity to offer their observations and opinions on innovations and challenges in health and health care. Perspectives are not reports of the IOM or the National Research Council, and therefore are not subjected to their review processes. You can already find the following discussion papers on our website:

- [Patient-Clinician Communication: Basic Principles and Expectations](#)
- [The Common Rule and Continuous Improvement in Health Care: A Learning Health System Perspective](#)
- [Attributes of a Health Literate Organization](#)
- [Deadly Sins and Living Virtues of Public Health](#)

If you'd like to be notified when a new Perspective is posted, please sign up on the IOM's [email update page](#). Enter your name, email, organization type, and check New Perspectives under News Alerts. This will not affect previous alerts for which you have signed up; it will simply add New Perspectives to your list.

42. Corticosteroid after etomidate in critically ill patients: a randomized controlled trial.

Payen JF et al. [Crit Care Med](#). 2012 Jan;40(1):29-35.

OBJECTIVE: To investigate the effects of moderate-dose hydrocortisone on hemodynamic status in critically ill patients throughout the period of etomidate-related adrenal insufficiency. INTERVENTIONS: After single-dose etomidate (H0) for facilitating endotracheal intubation, patients without septic shock were randomly allocated at H6 to receive a 42-hr continuous infusion of either hydrocortisone at 200 mg/day (HC group; n = 49) or saline serum (control group; n = 50). CONCLUSION: These findings suggest that critically ill patients without septic shock do not benefit from moderate-dose hydrocortisone administered to overcome etomidate-related adrenal insufficiency.

UPCOMING EVENTS

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

ITLS Ohio Emergency Care Conference. February 23 - 26, 2012 Crowne Plaza Columbus North Columbus, Ohio. [For more information...](#)

2012 Arizona Pediatric Symposium. February 27, 2012 Prescott, Arizona. www.azpedsems.com. [For more information...](#)

42nd Annual Wyoming Trauma Conference. August 16-19, 2012 Little America Hotel and Resort Cheyenne, Wyoming Sponsored by the Wyoming Office of EMS contact Beth Hollingworth at: beth.hollingworth@wyo.gov or 307-777-7955 [For more information...](#)

Pennsylvania's 35th Annual Statewide EMS Conference and 2nd Annual Pediatric Emergency Care Symposium will be held August 16-17, 2011 at the Lancaster County Convention Center & Marriott in Lancaster, PA. More information, including a call for speakers and exhibitor information, will be posted as it becomes available to www.pehsc.org,

New York State EMS Conference-Vital Signs. October 18-21, 2012 in Syracuse NY. [For more information...](#)

New Jersey Statewide Conference on EMS. November 1 -4 2012 Sheraton, Atlantic City, NJ. For more information, please visit www.NJEMSConference.com

*27th annual Texas EMS Conference, November 17-21, 2012, Austin, Texas. For more information, go to www.texasemsconference.com.

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

AAEM 18th Annual Scientific Assembly. February 8-10, 2012 Hotel del Coronado. San Diego, California. [For more information...](#)

*CoAEMSP Webinar on Letter of Review Process February 16, 2012 2:00p Eastern/1:00p Central - [register now](#)

2012 National Health Policy Conference. February 13-14, 2012. JW Marriott, Washington, DC. This conference provides clarity on the critical health care issues and priorities for the upcoming year. In its twelfth year, the NHPC continues to deliver a program with insider perspectives from health policy leaders to an audience that includes researchers, policy experts, and advocates. Plenary sessions feature perspective from the current administration, Congress, the states and the business community while breakout sessions delve into the details of specific challenges by convening experts with varied, and sometimes conflicting, views. [Featured topics](#) include state perspectives on ACA implementation, redefining the public health sector, and challenges specific to the military health care system. [Register](#) today to take advantage of networking opportunities, ask direct questions, and find out what's in store for health policy in 2012.

*Public Health Preparedness Summit 2012 (NACCHO) February 21 – 24, 2012. Anaheim, CA. Federal funding and lessons learned after the events of September 11, 2001 and Hurricane Katrina have been responsible for accomplishments in domestic preparedness. As funds decrease, the public health community is faced with challenges. Regroup, Refocus, Refresh: Sustaining Preparedness in an Economic Crisis is the theme of this year's summit that focuses on commitment to the public health mission. <http://www.phprep.org/2012/>

Emergency Nurses Association Leadership Conference. February 22-26, 2012. New Orleans Convention Center. New Orleans, LA. [For more information...](#)

*NAEMSE EMS Instructor Course February 24-26, 2012: Fresno, CA. [For more information...](#)

EMS Today. JEMS Conference and Exposition. February 28-March 3, 2012. Baltimore Convention Center, Baltimore MD. [For more information...](#)

*NAEMSE EMS Instructor Course February 28-29, 2012: Baltimore, MD in conjunction with EMS Today. [For more information...](#)

Emergency Medical Services Systems, Safety Strategies and Solutions Summit. February 29, 2012, Institute of Medicine's Keck Center, Washington, D.C. As with past TRB EMS Summits, participation will be both onsite and via a virtual live Webinar. [For more information...](#)

12th Annual John M. Templeton, Jr. Pediatric Trauma Symposium. March 2-3, 2012. Union League of Philadelphia. [For more information...](#)

Fire Rescue Med. May 5-8, 2012. The Orleans, Las Vegas, NV. [For more information...](#)

*NAEMSE EMS Instructor Course March 30-April 1, 2012: Elmhurst, IL. [For more information...](#)

NASEMSO Mid-Year Meeting. May 6-8, 2012, Bethesda, MD. [For more information...](#)

EMSC Grantee Meeting. May 8-11, 2012, at the Hyatt Regency Bethesda in Bethesda, MD. [For more information...](#)

ACEP's Leadership & Advocacy Conference. May 20-23, 2012 Omni Shoreham - Washington, DC. [For more information...](#)

*CoAEMSP Accreditation Workshop. June 28-29, 2012, Hyatt Regency Pittsburgh Int'l Airport
Pittsburgh, PA. Space is available--[REGISTER NOW!](#)

Pinnacle 2012. July 16-20, 2012. Cheyenne Mountain Hotel, Colorado Springs, CO. [For more information...](#)

NAEMSE Annual Symposium and Trade Show. August 6-11, 2012. Coronado Springs Resort, Orlando, FL. [For more information...](#)

ENA Annual Meeting. September 11-15, 2012. San Diego Convention Center, San Diego, CA. [For more information...](#)

Emergency Cardiovascular Care Update. September 11-15, 2012. Rosen Shingle Creek, Orlando, FL. [For more information...](#)

NASEMSO Annual Meeting. September 24-28, 2012, The Grove Hotel, Boise, ID. [For more information...](#)

ACEP Scientific Assembly. October 8-11, 2012. Denver, CO. [For more information...](#)

Air Medical Transport Conference. October 22-24, 2012. Seattle, WA. [For more information...](#)

EMSWorld Expo. October 29-November 2, 2012. New Orleans, LA. [For more information...](#)

1st Annual World Trauma Symposium. November 1, 2012. New Orleans, LA. [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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