



Washington Update

National Association of State EMS Officials - 201 Park Washington Court - Falls Church, VA 22046-4527
Ph: 703-538-1799 - Fx: 703-241-5603 - Email: info@nasemso.org - www.nasemso.org

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In This Issue...

NASEMSO NEWS

1. NASEMSO Offers One-Day Registration for Mid-Year Council Meetings
2. Next NASEMSO Webinar to Discuss Potential Instructor Qualifications Related to Education Standards
3. Two New NASEMSO Position Statements on State EMS Medical Direction Now Available
4. IEMTG Adopts NASEMSO Recommendations for Wildland Fire Incidents
5. NASEMSO Supports Increasing EMSC funding to \$26.250 million for FY2011
6. NASEMSO Joins SCCA and NAEMT in New Resource That Addresses School Sports

FOR THE STATES

7. Federal Bankruptcy Court Upholds State Regulatory Authority in EMS Case

DATA AND COMMUNICATIONS

8. Bill Introduced to Reallocate D Block to Public Safety

DOMESTIC PREPAREDNESS

9. Las Vegas Exercise Cancelled; Future of NLE Remains Undecided
10. At-Risk Populations Focus of New Preparedness Report
11. GAO Report Focuses on Update to NIPP
12. Audit of DHS Grant Program Focus of New OIG Report
13. CDC and ASPR Develop H1N1 Hospital Readiness Review Checklist
14. PHEMCE Releases Workshop Summary on Emergency Medical Countermeasures

HIGHWAY SAFETY (HITS)

15. Washington State Toughens Cell Phone and Texting Ban

PEDIATRIC EMERGENCY CARE

16. Children with Food Allergies Should Carry Two Doses of Epinephrine
17. AAP Provides Revised Resources on Emergency Preparedness
18. CDC Releases Hospital Workbook for Pediatric Care During an Influenza Pandemic
19. FDA Requires Device Manufacturers to Include Information on Pediatric Populations

FEDERAL PARTNERS

- 20. Berwick Nominated to Head CMS
- 21. FDA Announces Public Workshop on Medical Device Use in the Home
- 22. AHRQ Releases 2009 National Healthcare Quality Report
- 23. CDC Releases New Estimates of H1N1 Infections
- 24. HHS Panel Endorses Patient Safety Database
- 25. ECCO Announces Availability of Regionalization Grants

INDUSTRY NEWS

- 26. Senate Resolution Congratulates Colorado Springs as New Home to NEMSMS
- 27. NAEMT Publishes Position Statement on EMS Medical Direction
- 28. EMS Week Fan Page Now on Facebook

INTERESTING ABSTRACTS OR WEBCASTS

- 30. Fatality Management Focus of New Webcast Available at EMForum
- 31. Hydroxocobalamin and Sodium Thiosulfate Versus Sodium Nitrite and Sodium Thiosulfate in the Treatment of Acute Cyanide Toxicity
- 32. Health Care Workers in ED Were Most Affected During the Spring 2009 H1N1 Pandemic
- 33. Practice Parameter update: Evaluation and Management of Driving Risk in Dementia

UPCOMING EVENTS

- **Statewide EMS Conferences**
- **National Conferences and Special Meetings**

1. NASEMSO Offers One-Day Registration for Mid-Year Council Meetings

NASEMSO will offer a one-day registration fee of \$125 for members who wish to attend NASEMSO Council and Committee meetings on Tuesday, May 25, 2010 but who (a) are not able to attend the Joint Conference on May 26-27 –OR– (b) will attend the joint conference as an EMSC grantee. EMSC grantees must register through the EMSC National Resource Center to attend the joint conference and grantee meeting on May 26th and 27th. Registration information, program details, and Council agendas are available on the NASEMSO web site at www.nasemso.org. Questions can be directed to NASEMSO Program Manager, [Kathy Robinson](#).

2. Next NASEMSO Webinar to Discuss Potential Instructor Qualifications Related to Education Standards

Join us for our Webinar entitled "Who Should Teach: Identifying Instructor Qualifications for Using the New Education Standards" set for **May 19, 2010**, 3:00-4:00 p.m. Eastern time. This webinar is the "fifth in a series" of monthly sessions planned to provide information about the Implementation of the EMS Education Agenda. In this session, Dr. Walt Stoy, Center for Emergency Medicine at the University of Pittsburgh and founding member of the National Association of EMS Educators, will reflect on the past, present, and future of EMS education. [Reserve your Webinar seat online today.](#)

3. Two New NASEMSO Position Statements on State EMS Medical Direction Now Available

NASEMSO has updated two position statements on EMS medical direction: “The Role of State Medical Direction in the Comprehensive Emergency Medical Services System: A Resource Document” and “The Role of the State EMS Medical Director: A Joint Statement by the American College of Emergency Physicians (ACEP), the National Association of EMS Physicians (NAEMSP), and the National Association of State EMS Officials (NASEMSO.)” Significant input went into creating and updating these documents. They are now available at <http://www.nasemso.org/Councils/MedicalDirectors/>.

4. IEMTG Adopts NASEMSO Recommendations for Wildland Fire Incidents

After years of hard work and effort put forth by representatives from NWCG member agencies, the National Association of EMS Officials (NASEMSO), the National Association of EMS Physicians (NAEMSP), numerous outside organizations, and from individual medical unit leaders, the “*Interim NWCG Minimum Standards for Medical Units*” have been published. This document reflects a national approach focused on providing a coordinated, uniformed, and comprehensive delivery of emergency medical services (EMS) and occupational health on Federal wild land fires in the United States of America. The *Interim NWCG Minimum Standards for Medical Units* is designed to be utilized as a baseline or minimum expectations for EMS personnel and services associated with Federal wild land fire incidents. **The IEMTG recognizes the *National EMS Scope of Practice Model* as the baseline standard for emergency medical service providers.** A key component of the minimum standards addresses the recognition of local, state, federal, and tribal jurisdictional authorities and the integration of medical services. The minimum standards seek to ensure that incident personnel receive quality, timely medical care on wild land fire incidents, which often occur in remote areas. Download related documents [here](#).

5. NASEMSO Supports Increasing EMSC funding to \$26.250 million for FY2011

NASEMSO has signed onto a letter from the American Academy of Pediatricians requesting increased funding for EMSC. Last year, more than 40 organizations signed on to a letter to House and Senate Labor-HHS-Ed Appropriations Subcommittee Chairs in support of increasing funding for the Emergency Medical Services for Children program to \$25 million. For FY11, we increased our request to \$26.250 million, as authorized under the Wakefield Act, which was recently enacted as part of health care reform legislation. [For more information...](#)

6. NASEMSO Joins SCCA and NAEMT in New Resource That Addresses School Sports

Saving Lives in Schools and Sports is a new publication that encourages school and athletic league administrators to install AEDs and develop SCA emergency plans. See [Saving Lives in Schools and Sports Booklet \(PDF\)](#). You can also order printed booklets by [downloading the official order form](#).

7. Federal Bankruptcy Court Upholds State Regulatory Authority in EMS Case

In bankruptcy proceedings, a federal court upheld the state’s authority to block the sale of an ambulance service related to an expired license. In re Cabrini Medical Center U.S. Bankruptcy Court, Southern District of New York No. 09-14398 (AJG). Decided April 7, 2010. http://www.nysb.uscourts.gov/opinions/ajg/182920_338_opinion.pdf

8. Bill Introduced to Reallocate D Block to Public Safety

In its national broadband plan, the FCC recommended that the D Block be auctioned and that Congress provide \$12 billion to \$16 billion in funding for a public-safety network on the PSST spectrum. Public-safety users would be given priority access when roaming on commercial networks in the 700 MHz band under the plan, but many first-responder representatives have reservations whether that approach will be reliable enough for mission-critical communications. Instead, all major national public-safety organizations have supported D Block reallocation for public safety, noting that having 20 MHz of spectrum would greatly reduce the need for roaming onto commercial

networks and would give first-responder agencies greater flexibility to pursue partnerships with other governmental and critical-infrastructure entities. As a first step to achieve that goal, HR 5081, the [Broadband for First Responders Act of 2010](#), was introduced this week by Rep. Peter King (NY). It has been referred to the House Committee on Energy and Commerce.

9. Las Vegas Exercise Cancelled; Future of NLE Remains Undecided

According to the Washington Post, the planning scenario and exercise involving a mock 10-kiloton nuclear bomb next month on the Las Vegas Strip has been cancelled due to opposition from local businesses and fears that the exercise would harm the local economy. The federal government is also considering whether to scale back next year's National Level Exercise, the annual drill that for the past decade has been a cornerstone of the nation's efforts to prepare for a catastrophic terrorist attack or natural disaster. The 2011 exercise was envisioned by states as a five-day test in the Midwest for a 7.7-magnitude earthquake, but the Federal Emergency Management Agency might instead limit the event to three days and test for a milder earthquake. Since 2005, FEMA has spent \$218 million on national exercises, testing scenarios that include an outbreak of the pneumonic plague, chemical attacks and dirty bombs. After this year's nuclear scenario, next year's would be the first to posit a natural disaster instead of a terrorist attack. [For more information...](#)

10. At-Risk Populations Focus of New Preparedness Report

A new study authored by Booz Allen Hamilton entitled *“Public Health Preparedness and Response for At-Risk Populations: Harnessing the Power of Health Information and Communication Technologies”* was just released. The study describes innovative ways that state governments and local communities can use technologies to reach vulnerable groups. The authors conclude that electronic health records (EHRs), mobile phones, and other technologies can enhance “all-hazards” preparedness and response capabilities for first responders, improve situational awareness during emergencies, and reduce response time for reaching at-risk individuals during disease outbreaks, natural disasters, or other public health emergencies. [Download the report...](#)

11. GAO Report Focuses on Update to NIPP

In accordance with the Homeland Security Act and HSPD-7, DHS issued the National Infrastructure Protection Plan (NIPP) in June 2006 to provide the approach for integrating the nation’s CIKR. GAO was asked to study DHS’s January 2009 revisions to the NIPP in light of a debate over whether DHS has emphasized protection—to deter threats, mitigate vulnerabilities, or minimize the consequences of disasters---rather than resilience---to resist, absorb, or successfully adapt, respond to, or recover from disasters. This report discusses (1) how the 2009 NIPP changed compared to the 2006 NIPP and (2) how DHS and SSAs addressed resiliency as part of their planning efforts. GAO compared the 2006 and 2009 NIPPs, analyzed documents, including NIPP Implementation Guides and sector- specific plans, and interviewed DHS and SSA officials from all 18 sectors about their process to identify potential revisions to the NIPP and address resiliency. See *Critical Infrastructure Protection: Update to National Infrastructure Protection Plan Includes Increased Emphasis on Risk Management and Resilience*. GAO-10-296, <http://www.gao.gov/cgi-bin/getrpt?GAO-10-296> Highlights - <http://www.gao.gov/highlights/d10296high.pdf>

12. Audit of DHS Grant Program Focus of New OIG Report

In FY 2008, FEMA awarded more than \$3 billion to state and local governments; territories; tribal governments; and private, public, profit, and nonprofit organizations through preparedness grants and other financial assistance programs (referred to collectively as grants). DHS preparedness grants are intended to enhance preparedness, protection, response, recovery, and mitigation capabilities throughout the Nation by funding such items as planning, training, exercises, equipment, interoperable communications, and personnel costs. In a new report, the

Office of the Inspector General focused on 13 programs that provide funding for a variety of items, including planning, training, exercises, and equipment. The results of the audit are now available at http://www.dhs.gov/xoig/assets/mgmttrpts/OIG_10-69_Mar10.pdf.

13. CDC and ASPR Develop H1N1 Hospital Readiness Review Checklist

CDC and the Office of the Assistant Secretary for Preparedness and Response (ASPR) at the U.S. Department of Health and Human Services have developed a Hospital Readiness Review Checklist as a supplement to existing hospital emergency management plans. This list focuses on information hospitals can use in response to a surge in H1N1 and seasonal influenza patients rather than the basic planning and regulatory considerations included in earlier checklists. The readiness checklist can be found [here](#).

14. PHEMCE Releases Workshop Summary on Emergency Medical Countermeasures

During public health emergencies such as pandemic influenza outbreaks or terrorist attacks, effective vaccines, drugs, diagnostics, and other medical countermeasures are essential to protecting national security and the public's well-being. The Public Health Emergency Medical Countermeasures Enterprise (PHEMCE--a partnership among federal, state, and local governments; industry; and academia--is at the forefront of the effort to develop and manufacture these countermeasures. However, despite the PHEMCE's many successes, there are still serious challenges to overcome. Government-funded medical research is not always focused on countermeasures for the most serious potential threats, and it is difficult to engage pharmaceutical and biotechnology companies to develop and manufacture medical countermeasures that have a limited commercial market. At the request of the Secretary of the U.S. Department of Health and Human Services and the Assistant Secretary for Preparedness and Response, the IOM held a workshop February 22-24, 2010, to address challenges facing the PHEMCE. Workshop participants discussed federal policies and procedures affecting the research, development, and approval of medical countermeasures and explored opportunities to improve the process and protect Americans' safety and health. [For more information...](#)

15. Washington State Toughens Cell Phone and Texting Ban

U.S. Transportation Secretary Ray LaHood recently commended Governor Christine Gregoire for signing a law that makes talking or texting on a cell-phone without a hands-free device a primary offense. This new law strengthens Washington's 2008 ban which allowed law enforcement officials to ticket drivers caught using their phones if they were pulled over for another offense. According to research by the National Highway Traffic Administration (NHTSA), nearly 6,000 people died in 2008 in crashes involving a distracted or inattentive driver, and more than half a million were injured. In 2009, more than 200 distracted driving bills were considered by state legislatures and legislative activity is expected to remain strong in 2010. On February 22, Secretary LaHood unveiled sample legislation developed by NHTSA to be used as a starting point for crafting new state laws to prohibit texting while behind-the-wheel. The sample state law is patterned on the Executive Order issued by President Obama on October 1, 2009, directing federal employees not to engage in text messaging while driving government-owned vehicles or with government-owned equipment. Federal employees were required to comply with the ban starting on December 30, 2009. [For more information...](#)

16. Children with Food Allergies Should Carry Two Doses of Epinephrine

In a large six-year review of emergency department (ED) data, researchers at Children's Hospital Boston, in collaboration with Massachusetts General Hospital, found that many children with severe food-related allergic reactions need a second dose of epinephrine, suggesting that patients carrying EpiPens should carry two doses

instead of one. Rudders et al. Multicenter Study of Repeat Epinephrine Treatments for Food-Related Anaphylaxis. PEDIATRICS Vol. 125 No. 4 April 2010, pp. e711-e718. [Download the abstract and article for free...](#)

17. AAP Provides Revised Resources on Emergency Preparedness

Children with chronic medical conditions rely on complex management plans for problems that cause them to be at increased risk for suboptimal outcomes in emergency situations. The emergency information form (EIF) is a medical summary that describes medical condition(s), medications, and special health care needs to inform health care providers of a child's special health conditions and needs so that optimal emergency medical care can be provided. This American Academy of Pediatrics (AAP) statement describes updates to EIFs, including computerization of the EIF, expanding the potential benefits of the EIF, quality-improvement programs using the EIF, the EIF as a central repository, and facilitating emergency preparedness in disaster management and drills by using the EIF. The AAP has combined and revised resources. Read [Emergency Information Forms and Emergency Preparedness for Children With Special Health Care Needs](#).

18. CDC Releases Hospital Workbook for Pediatric Care During an Influenza Pandemic

In September, 2009, the Centers for Disease Control and Prevention's (CDC's) Division of Healthcare Quality Promotion (DHQP) convened a Pediatric Healthcare Response to Pandemic H1N1 Influenza Stakeholder Meeting in Atlanta, Georgia. Participants in the meeting divided into working groups to address pediatric related topics and issues. One group was tasked with identifying and prioritizing hospital issues related to pediatric care during the 2009 H1N1 influenza pandemic. The efforts of this group serve as the basis for a new hospital workbook, *Coordinating Pediatric Medical Care During an Influenza Pandemic*, that is now available from the CDC. The workbook is intended to assist hospitals with coordinating medical care for pediatric influenza-like illness (ILI) across their community. Although many of the suggestions were based on experiences with the 2009 H1N1 pandemic, this tool can be adapted for use during pandemic spread of a novel influenza virus. This tool is presented in two sections, identified by type of hospital focus: Children's Hospital Focus and General Hospital Focus. [For more information...](#)

19. FDA Requires Device Manufacturers to Include Information on Pediatric Populations

The U.S. Food and Drug Administration recently announced that will begin implementing a requirement that device manufacturers provide readily available information in certain premarket applications on pediatric patients who suffer from the disease or condition that the device is intended to treat, diagnose, or cure, even if the device is intended for adult use. Very few devices are developed or assessed specifically for use in pediatric patients, those 21 or younger at the time of treatment or diagnosis. This effort will provide a better understanding of which devices developed for use in adults should be assessed or modified for use in pediatric populations. The requirements, contained in the Food and Drug Administration Amendments Act of 2007, will also improve the agency's ability to track the number of approved devices for which there is a pediatric subpopulation who could benefit and the number of approved devices labeled for use in pediatric patients. [For more information...](#)

20. Berwick Nominated to Head CMS

President Obama has nominated Dr. Donald Berwick to be Administrator of the Centers for Medicare and Medicaid Services, Department of Health and Human Services (CMS). Dr. Berwick currently serves as President and CEO of the Institute for Healthcare Improvement, and is a professor at Harvard Medical School and the Harvard School of

Public Health. He has served as Chair of the National Advisory Council of the Agency for Healthcare Research and Quality, and as an elected member of the Institute of Medicine (IOM). [For more information...](#)

21. FDA Announces Public Workshop on Medical Device Use in the Home

The Food and Drug Administration (FDA) is announcing a public workshop entitled Medical Device Use in the Home Environment: Implications for the Safe and Effective Use of Medical Device Technology Migrating into the Home. The purpose of the workshop is to solicit information from healthcare providers, academics, human factors experts, medical device manufacturers and distributors, professional societies, patient advocacy groups, patients, and caregivers, on the challenges surrounding medical device technology in the home environment. FDA seeks input and comments on a number of identified topics related to medical device home use. The public workshop will be held on May 24, 2010, from 7:30 a.m. to 5 p.m. Persons interested in attending and/or participating in the workshop must register by 5 p.m. on May 17, 2010. Submit written or electronic comments by June 30, 2010. [For more information...](#)

22. AHRQ Releases 2009 National Healthcare Quality Report

The potential of health IT to improve patients' outcomes is undermined by information systems that "are not designed to collect data to support quality improvement as the primary purpose," says a report released this week by the Agency for Healthcare Research and Quality. Improving outcomes requires the ability to discern and examine patterns of care across large groups of patients; a function ideally suited to health IT. Too often, though, applications focus on unit records data and fail to connect the dots across populations. "Retrofitting legacy health information systems to capture data on quality measures is often labor intensive," says the 2009 National Health Quality Report. [For more information...](#)

23. CDC Releases New Estimates of H1N1 Infections

As of the middle of March, at least 60 million Americans had been infected with the pandemic H1N1 influenza virus, about 270,000 had been hospitalized and about 12,270 had died, according to the latest estimates from the Centers for Disease Control and Prevention. The new estimates represent an increase of about 1 million infections, 5,000 hospitalizations and 270 fatalities since the last estimates a month ago. The small increase reflects the CDC's recent reports indicating that swine flu activity has lessened in most areas of the country. The virus has struck primarily in younger people. The CDC estimates that 19 million infections occurred in children 17 and younger -- about a quarter of this population. There were 86,000 hospitalizations and 1,270 deaths in this group. Among young adults ages 18 through 64, there were 35 million infections, 158,000 hospitalizations and 9,420 deaths. The infection total amounts to about 18.5% of this age group. In normal seasonal flu, the elderly are the most seriously affected, but that has not been the case with swine flu. The number of cases among those over 65 was 6 million. That represents 15.8% of the population, up from 13% a month earlier. There were 26,000 hospitalizations and 1,580 deaths. [For more information...](#)

24. HHS Panel Endorses Patient Safety Database

The Health IT Policy Committee endorsed recommendations for the creation of a national database to which healthcare providers can confidentially report patient data errors and unsafe conditions they encounter using electronic health records. Reporting of safety issues would become part of Stage 2 of meaningful use requirements. A patient safety organization will also be established to analyze the reports and will emphasize tracking and sharing information from the database to make healthcare a learning system, according to the Health and Human Services Department advisory panel at its meeting April 21. [For more information...](#)

25. IOM Releases Workshop Summary on Regionalizing Emergency Care

In 2006, the IOM recommended that the federal government implement a regionalized emergency care system to improve cooperation and overcome these challenges. In a regionalized system, local hospitals and EMS providers would coordinate their efforts so that patients would be brought to hospitals based on the hospitals' capacity and expertise to best meet patients' needs. In September 2009, three years after making these recommendations, the IOM held a workshop sponsored by the federal Emergency Care Coordination Center to assess the nation's progress toward regionalizing emergency care. The workshop brought together policymakers and stakeholders, including nurses, EMS personnel, hospital administrators, and others involved in emergency care. Participants identified successes and shortcomings in previous regionalization efforts; examined the many factors involved in successfully implementing regionalization; and discussed future challenges to regionalizing emergency care. This document summarizes the workshop. [For more information...](#)

26. ECCC Announces Availability of Regionalization Grants

The Emergency Care Coordination Center (ECCC) is promoting Federal efforts to implement the Institute of Medicine's Future of Emergency Care in the United State Health System (2006) recommendation to develop regionalized, accountable systems of emergency care. The ECCC now seeks to fund four projects to acquire more detailed information, data to support best practices about regionalization of emergency care in four component areas that were identified through the IOM workshop and national stakeholders meeting which helped to identify major issues, trends, and areas where additional information would be constructive. The deadline for applications is May 11, 2010. The four component areas are:

- A. Current Practices for Delivery of Regionalized Emergency Care in Time-Sensitive Clinical Conditions
- B. Regionalized Emergency Care Information Management
- C. Patient Mobility
- D. Comparative Effectiveness of Regionalized Emergency Medical Care Models

Download the RFP: [Comparative Effectiveness of Regionalized Emergency Care](#). Solicitation Number: 10-100-SOL-00015

27. Senate Resolution Congratulates Colorado Springs as New Home to NEMSMS

U.S. Senators Michael Bennet and Mark Udall announced that the Senate has passed a concurrent resolution that they sponsored to recognize Colorado Springs as the new home of a yearly National Emergency Medical Services (EMS) Memorial Service. The resolution congratulates Colorado Springs for being named the home of the annual ceremony to honor fallen first responders. The National EMS Board of Directors elected to move the yearly ceremony from Roanoke, Va., and selected Colorado Springs from a number of competing cities. This year's 18th Annual National EMS Memorial Service will take place on June 26, 2010, at the First Presbyterian Church in Colorado Springs. (A similar resolution has been introduced in the House.) The National EMS Memorial Service has been honoring the men and women of America's EMS systems who have made the ultimate sacrifice and laid down their lives in the line of duty since 1993. [For more information....](#)

28. NAEMT Publishes Position Statement on EMS Medical Direction

In a new position statement, the National Association of Emergency Medical Technicians (NAEMT) states that medical direction is an essential component of an effective EMS system in order to ensure that patient care is administered with appropriate clinical oversight using medically accepted standards. All EMS systems, regardless of their delivery model, should operate with medical direction and oversight from an EMS physician. To view the full position statement, please go to the NAEMT Positions page in the Advocacy section of www.naemt.org.

29. EMS Week Fan Page Now on Facebook

Become a Fan!! The American College of Emergency Physicians now has a Facebook page for National EMS Week 2010. You can add your community events, heroes, photos, and articles right on the page to be considered for inclusion in next year's (May 15-21, 2011) EMS Week Planning Guide!

- **2010 National EMS Week Facebook Page:** <http://tinyurl.com/y9v3lir>
- **AND Follow us on Twitter:** www.twitter.com/emswweek2010

30. Fatality Management Focus of New Webcast Available at EMForum

"Mass Fatalities Incident Response Planning" is the title of a new educational offering at EMForum. Dennis McGowan, Fatalities Management Program Manager at the University of Tennessee provides a broad overview of the evolution of the Fatality Management and related considerations for local authorities. This educational opportunity is provided by the Emergency Information Infrastructure Project (EIIP). [For more information...](#)

31. Hydroxocobalamin and Sodium Thiosulfate Versus Sodium Nitrite and Sodium Thiosulfate in the Treatment of Acute Cyanide Toxicity in a Swine (*Sus scrofa*) Model. Vikhyat S. Bebarta, David A. Tanen, Julio Lairet, Patricia S.

Dixon, Sandra Valtier, Anneke Bush *Annals of Emergency Medicine* - April 2010 (Vol. 55, Issue 4, Pages 345-351, DOI: 10.1016/j.annemergmed.2009.09.020). **Study objective:** Cyanide can cause severe hypotension with acute toxicity. To our knowledge, no study has directly compared hydroxocobalamin and sodium nitrite with sodium thiosulfate in an acute cyanide toxicity model. Our objective is to compare the return to baseline of mean arterial blood pressure between 2 groups of swine with acute cyanide toxicity and treated with hydroxocobalamin with sodium thiosulfate or sodium nitrite with sodium thiosulfate. **Conclusion:** Hydroxocobalamin with sodium thiosulfate led to a faster return to baseline mean arterial pressure compared with sodium nitrite with sodium thiosulfate; however, there was no difference between the antidote combinations in mortality, serum acidosis, or serum lactate. [Free abstract](#). Subscription required for article.

32. Health Care Workers in ED Were Most Affected During the Spring 2009 H1N1 Pandemic

During the H1N1 pandemic almost half of the reported H1N1 cases in hospital health care workers occurred in emergency medicine, pediatrics, ambulatory care and anesthesiology, with emergency medicine workers having the highest infection rate. Records of 123 confirmed reports of laboratory-confirmed influenza A or novel H1N1 infections in hospital employees were also analyzed. Two thirds of the H1N1 cases occurred during June (infection rates in parentheses): 34 in physicians and medical personnel (6.7%), 36 in nurses and clinical technicians (2.2%), 39 in Administrative & Support Personnel (infection rate = 1.2%), 3 in Social Workers & Counselors (infection rate = 1.0%), 8 in Housekeeping & Food Services (infection rate = 2.7%), and 3 in Security & Transportation (infection rate=3.9%). When analyzed according to department, the adult emergency department (infection rate = 28.8%) and the pediatric emergency department (infection rate = 25.0%) had the highest infection rates per department. Santos et al. "Which Health Care Workers Were Most Affected During the Spring 2009 H1N1 Pandemic?" *Disaster Medicine and Public Health Preparedness*. 2010; 4: 47-54. [Free abstract](#). Subscription required.

33. Practice Parameter update: Evaluation and Management of Driving Risk in Dementia. Report of the Quality Standards Subcommittee of the American Academy of Neurology. Iverson DJ et al. Published Ahead of Print on April 12, 2010. *Neurology*® 2010;74:1316-1324. Objective: To review the evidence regarding the usefulness of patient demographic characteristics, driving history, and cognitive testing in predicting driving capability among patients with dementia and to determine the efficacy of driving risk reduction strategies. Conclusions: For patients with dementia, consider the following characteristics useful for identifying patients at increased risk for unsafe

driving: the Clinical Dementia Rating scale (Level A), a caregiver's rating of a patient's driving ability as marginal or unsafe (Level B), a history of crashes or traffic citations (Level C), reduced driving mileage or self-reported situational avoidance (Level C), Mini-Mental State Examination scores of 24 or less (Level C), and aggressive or impulsive personality characteristics (Level C). Consider the following characteristics not useful for identifying patients at increased risk for unsafe driving: a patient's self-rating of safe driving ability (Level A) and lack of situational avoidance (Level C). There is insufficient evidence to support or refute the benefit of neuropsychological testing, after controlling for the presence and severity of dementia, or interventional strategies for drivers with dementia (Level U). [Download the article...](#)

UPCOMING EVENTS

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

TN EMSC: 2nd Annual EMS Star of Life Awards Dinner & Ceremony. May 11, 2010, 6 to 9 pm. Sheraton Nashville Downtown Hotel, Nashville, Tennessee Sponsor the Star of Life! – Nominations are due April 9, 2010. For sponsorship packets & more info go to: www.tnemsc.org

Symposium by the Sea 2010. Sponsored by EMLRC and FCEP. July 29 - August 1, 2010 Boca Raton, FL The Boca Raton Resort & Club. Go to <http://www.emlrc.org/sbs2010.htm> for more information.

Pennsylvania State EMS Conference. September 17-18 (with preconference sessions on September 15-16), 2010 at the Lancaster County Convention Center in Lancaster, PA. More information can be found at www.pehsc.org.

TN 9th Annual Update in Acute & Emergency Care Pediatrics Conference. October 1-2, 2010. Wilderness At the Smokies Resort, Sevierville, Tennessee For more info go to: www.tnemsc.org

PULSE CHECK 2010, the 55th Annual Educational Conference & Trade Show of the NYS Volunteer Ambulance & Rescue Association, will be held Thursday evening September 30, 2010 to Sunday morning October 3, 2010 at the Holiday Inn Albany on Wolf Road. Information is posted on the Association's web site at www.nysvara.org.

New Jersey Statewide Conference on EMS, Atlantic City November 11th - 13th 2010. For more information visit: www.njemsconference.com

New Jersey METI Games. November 11th - 12th, 2010. For more information visit www.njemsconference.com.

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

IAFC's Fire Rescue Med Conference. May 1-5, 2010. Orleans Hotel, Las Vegas, NV. For more information, go to <http://www.iafc.org/displaycommon.cfm?an=1&subarticlenbr=6>.

EMS ON THE HILL DAY, May 3-4, 2010, Washington, D.C. Updates and more information on the event will be posted on the NAEMT web site, www.naemt.org.

ITS America Annual Meeting and Exposition. May 3-5, 2010. Houston, TX. For more information go to <http://www.itsa.org/annualmeeting.html>.

2010 Integrated Medical, Public Health, Preparedness and Response Training Summit. May 12-16, 2010. Opryland Hotel, Nashville, TN. For more information—go to <http://guest.cvent.com/EVENTS/Info/Summary.aspx?i=3d37b6ef-7182-487c-a0d9-87287aaa50ef>.

EMS Education Implementation Webinar. May 19, 2010 @ 3 pm. “**Who Should Teach: Identifying Instructor Qualifications for Using the New Education Standards**” More info including registration link at www.nasemso.org as speakers and topics are confirmed.

National EMS Week 2010. May 16 thru May 22 with May 19 set aside as Emergency Medical Services for Children (EMSC) Day. [Order Your 2010 EMS Week Planner \(Kit\) Here.](#)

ACEP 2010 Leadership and Advocacy Conference. May 16-19, 2010. Washington, DC. Go to www.acep.org for more information.

NAEMSE EMS Instructor Course. May 21-23, 2010 . Plainfield, New Jersey. This course addresses foundations of the EMS classroom and is designed to help instructors become more effective and efficient educators. For more information, or to register for the May course, visit: <http://www.naemse.org/instructor-course/>

Joint NASEMSO Mid-Year/EMSC Grantee Meeting. May 25-27, 2010. Doubletree Hotel, Bethesda, MD. More info at www.nasemso.org.

Institute of Medicine Forum on Medical and Public Health Preparedness for Catastrophic Events. June 9-10, 2010. Washington, DC. See <http://www.iom.edu/en/Activities/PublicHealth/MedPrep.aspx> for more information.

EMS Education Implementation Webinar. June 23, 2010 @ 3 pm. “**Developing Standards Based Instruction**” More info including registration link at www.nasemso.org as speakers and topics are confirmed.

NAEMSE EMS Instructor Course. June 25 - 27, 2010, Sweetwater, TX. This course addresses foundations of the EMS classroom and is designed to help instructors become more effective and efficient educators. For more information, or to register for the May course, visit: <http://www.naemse.org/instructor-course/>

EMSC Town Hall Conference Calls 3:30 pm to 5:00 pm (eastern) July 14, 2010. The local number is (202) 476-6338 or call toll-free dial (877) 355-6338 and enter EMSC (3672) for the meeting ID#.

EMS Education Implementation Webinar. July 21, 2010 @ 3 pm. “**How Does Program Accreditation Improve the Quality of EMS Education?**” More info including registration link at www.nasemso.org as speakers and topics are confirmed.

Pinnacle 2010. July 26-30, 2010. Sheraton San Diego Hotel and Marina. San Diego, CA For more information, go to www.pinnacle-ems.com.

6th International Roundtable on Community Paramedicine. August 9-13, 2010, Vail CO. For more information, go to <http://www.ircp.info/>.

*Rural and Frontier EMS and Trauma Summit at the Divide. August 11-13, 2010. Vail, Colorado. Join us for the fourth installment in the Summit Series. This Summit will have something for everyone, from federal and state policy makers to local EMS managers and hospital administrators to individual EMTs. This year’s theme will be

Beyond Old Boundaries – Exploring New Frontiers. With the co-location of the Summit at the Divide with the International Roundtable on Community Paramedicine (www.ircp.info), we will have the opportunity to stretch our imaginations about what could be for rural EMS and trauma systems. Building on last years' discussions of lessons learned from the theaters of conflict, regionalization and the use of telemedicine to overcome barriers of distance, we will explore additional options for improving access to emergency care in rural and frontier areas. A strong roster of speakers from the U.S. will be augmented by international experts both at the podium and in the audience. Attendees of the International Roundtable on Community Paramedicine will receive a \$50 discount on their Summit at the Divide registration. Registration for the Summit at the Divide includes complimentary attendance at the International Roundtable on Community Paramedicine morning sessions on Wednesday, August 11. Register at <http://eu.montana.edu/summit>

EMS Education Implementation Webinar. August 25, 2010 @ 3 pm. **“Identifying Methods to Measure Cognitive, Psychomotor, and Affective Competency”** More info including registration link at www.nasemso.org as speakers and topics are confirmed.

15th Annual NAEMSE Symposium. September 7-12, 2010. Renaissance Hotel & Convention Center in Schaumburg, IL. For more information, go to <http://www.naemse.org/symposium>.

EMS Education Implementation Webinar. September 15, 2010 @ 3 pm. **“Progression/Regression Strategies: Models of Success.”** More info including registration link at www.nasemso.org as speakers and topics are confirmed.

ENA Annual Meeting. San Antonio Convention Center, San Antonio, TX. General Assembly September 22-34, Scientific Assembly September 23-25, 2010. Go to www.ena.org for more information.

NAEMT Annual Meeting at EMS EXPO 2010 - Sept. 27 – Oct. 1, 2010. Dallas Convention Center, Dallas, TX. For more information, go to <http://www.firehouseevents.com/>.

ACEP Scientific Assembly 2010. September 28 - October 1, 2010. Mandalay Bay, Las Vegas, NV. For more information, go to www.acep.org.

Institute of Medicine Forum on Medical and Public Health Preparedness for Catastrophic Events. October 6-7, 2010. Washington, DC. See <http://www.iom.edu/en/Activities/PublicHealth/MedPrep.aspx> for more information.

NASEMSO Annual Meeting. October 10-15, 2010, Norfolk Marriott Waterside/Waterside Convention Center Norfolk, Virginia. More info available at www.nasemso.org. Sponsorship and exhibitor information [now available](#).

2010 Air Medical Transport Conference October 11-13, 2010. Ft. Lauderdale, FL. For more information, go to www.aams.org.

EMS Education Implementation Webinar. October 20, 2010 @ 3 pm. **“System Update: 2010 NASEMSO Survey Results.”** More info including registration link at www.nasemso.org as speakers and topics are confirmed.

EMS Education Implementation Webinar. November 22, 2010 @ 3 pm. **“The Role of National Certification in Implementing the EMS Education Agenda.”** More info including registration link at www.nasemso.org as speakers and topics are confirmed.

ECCU 2010. Emergency Cardiac Care Update, December 8-11, 2010. San Diego, CA. Sponsored by the Citizen CPR Foundation. For more information, go to <http://eccu2010.com/>.

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

NASEMSO Staff Contacts

Elizabeth B. Armstrong, CAE, MAM / Executive Director
(703) 538-1799 ext. 7 - armstrong@nasemso.org

Sharon Kelly / Executive Assistant
(703) 538-1799 ext. 2 - kelly@nasemso.org

Leslee Stein-Spencer/Program Manager
Email: Stein-Spencer@nasemso.org

Kathy Robinson / Program Manager
(703) 538-1799 ext. 4 - robinson@nasemso.org

Mary Hedges/Program Manager
Hedges@nasemso.org

Kevin McGinnis/Program Manager
(571) 749-7217 -- mcginnis@nasemso.org

Karen Thompson / Web Site Content Manager
(828) 693-5045 - thompson@nasemso.org

National Association of State EMS Officials
201 Park Washington Court
Falls Church VA 22046
Phone: (703) 538-1799
Fax: (703) 241-5603
Website: www.nasemso.org

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