



June 2020

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NASEMSO's Information Hub on the global pandemic is available [here](#). We encourage our readers to visit the web site often to obtain the most up-to-date guidance and policy recommendations available. Due to the frequency of updates, COVID-19 information is not being included in Washington Update.

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2020 NASEMSO Annual Meeting Cancelled

In light of the prolonged national emergency, the NASEMSO Board of Directors has cancelled the 2020 Annual Meeting. Options for refunds and credits are currently being established and discussion regarding a modified virtual schedule are underway. Please visit the [annual meeting page](#) for additional details.

Experimental Study Recruitment on EMS Fatigue Now Underway

In a partnership with NASEMSO and the U.S. Department of Transportation, the University of Pittsburgh is leading a research study that seeks to examine the impact of a sleep health and fatigue education and training program tailored to Emergency Medical Services (EMS) clinicians. We are currently seeking EMS agencies to participate in the study intended to help mitigate risks related to EMS fatigue. 10.25 hrs of free CE credit (per individual) is available to participating agencies from NASEMSO. More information to enroll is available on the study flyer available [here](#).

NASEMSO, NAEMSP and ACEP to Develop Pre-Hospital Pain Management Evidence-Based Guideline

NASEMSO, NAEMSP and ACEP will collaborate in a project to develop a prehospital pain management evidence-based guideline (EBG), as well as a model clinical protocol, performance measures and EMS educational materials related to the pain management EBG. The Principal Investigator for the 18-month project is George Lindbeck, MD, from NASEMSO; co-investigators are Sabina Braithwaite, MD, representing ACEP, and Harry Sibold, MD, of NAEMSP. They will lead a Technical Expert Panel composed of experts from a variety of disciplines, including emergency medicine, pediatrics, pain management, pharmacology, trauma care, guideline development methodology, patient advocacy, EMS data, EMS field experience and EMS education. For more information about the project, contact [Mary Hedges](#).

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[For The States](#)

TJC Announces Return of Site Visits

The Joint Commission (TJC) recently announced it will resume regular surveys and reviews in June with procedures in place to maximize participant safety. The survey process will look somewhat different, as organizations will need to employ physical distancing practices to ensure the safety of all parties. Read the full press release [here](#).

In related news, the American College of Surgeons Verification, Review, and Consultation (VRC) is maintaining updated information on regarding site visits [here](#).

NCSL Spotlights Regulatory Efforts to Relieve Healthcare Workforce Issues

As a response to the pandemic, states, many of whom were already facing workforce deficits, are facing an unprecedented demand for health care workers. To respond to current soaring demand, and to get ahead of long-term health workforce needs, states are pursuing a variety of actions. Their efforts include making regulatory changes, filling shortages with nontraditional workers, and modifying telehealth policies to increase access to remote care. The National Conference of State Legislatures (NCSL) discusses these issues in a new issue of [Legisbrief](#).

CMS Issues Guidance on HIPAA Exception Process

The Division of National Standards (DNS) on behalf of the Department of Health and Human Services (HHS) announces the issuance of a guidance letter to clarify the process for requesting and conducting an exception to the Health Insurance Portability and Accountability Act of 1996 (HIPAA) transaction and code set standards. HHS encourages innovation in the development and implementation of standards that promote Administrative Simplification. The criteria for requesting and conducting an exception to the use of adopted standards and testing of modifications are specified at 45 C.F.R. 162.940. This guidance document discusses the five stages of the exception process:

1. Request for the exception;
2. Basis for granting an exception;
3. The Secretary's decision on exception;
4. Organization's report on test results; and
5. Requests to extend the exception.

For more information, read the full [Guidance Letter](#) on the [Administrative Simplification website](#).

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[Health & Medical Preparedness](#)

FEMA Releases Planning Considerations: Disaster Housing

FEMA recently released “Planning Considerations: Disaster Housing”. Housing recovery is the cornerstone of a community’s recovery and ultimate resilience. By helping survivors achieve sustainable housing after a disaster, state and local leaders move their communities toward stability and resiliency for future incidents. The “Planning Considerations: Disaster Housing” document supplements “[Comprehensive Preparedness Guide \(CPG\) 101: Developing and Maintaining Emergency Operations Plans](#)” by providing guidance on national housing priorities, types of housing, key considerations and housing-specific planning recommendations that jurisdictions can apply when developing or improving housing plans. This planning document is a tool for use along with the Six-Step Planning Process described in CPG 101. To view the guide, visit [here](#).

GAO: Actions Needed to Address Gaps in the Nation's Emergency Management Capabilities

In a new report from the US Government Accountability Office (GAO), the agency was asked to examine national preparedness. The report examines the extent to which: (1) FEMA’s National Preparedness System and associated preparedness grants have assisted jurisdictions in preparing for disasters; (2) FEMA has strengthened the National Preparedness System and what steps remain; and (3) FEMA is using after-action reports to identify lessons learned and strengthen future preparedness. GAO evaluated agency guidance, analyzed 2013 to 2017 capability data—the most current available; conducted site visits to five states; and interviewed FEMA, state, and local emergency management officials. Four recommendations are included in the report to strengthen national preparedness. For more information, please go [here](#).

Hurricane Season is Approaching!

The FEMA app is your one-stop-shop with tools/tips to keep you safe before, during and after disasters. Stay updated with weather-related alerts from the U.S. National Weather Service. Upload and share your disaster photos to help emergency managers. Save a custom list of the items in your family’s emergency kit, as well as the places you will meet in case of an emergency. Get tips on what to do before, during, and after over 20 types of disasters. Locate open shelters and where to talk to FEMA in person at Disaster Recovery Centers. For more information, please go [here](#).

E-Verify Available to Confirm Employment Eligibility

E-Verify is a voluntary, web-based system that allows enrolled employers to confirm the eligibility of their employees to work in the United States. E-Verify employers verify the identity and employment eligibility of newly hired employees by electronically matching information provided by employees on the Form I-9, Employment Eligibility Verification, against records available to the Social Security Administration (SSA) and the Department of Homeland Security (DHS). E-Verify, which is available in all 50 states, the District of Columbia, Puerto Rico, Guam, the U.S. Virgin Islands, and Commonwealth of Northern Mariana Islands, is currently the best means available to electronically confirm employment eligibility. More information is available [here](#).

FEMA Releases Resilience Analysis and Planning Tool

In partnership with the National Oceanic and Atmospheric Association (NOAA) National Weather Service, FEMA has added several real-time weather-forecast layers to the Resilience Analysis and Planning Tool (RAPT). RAPT is a geographic information system (GIS) web-map tool with clickable layers of community resilience indicators, infrastructure locations, and hazard data. The new layers will allow real-time five-day Tropical Cyclone/Hurricane Outlook, eight-day Severe Weather Convective Outlook, three-day Excessive Rainfall Outlook, and a Significant River Flooding Outlook. By combining layers in RAPT, users can identify the at-risk populations (e.g. over age 65, disability, lack of access to a vehicle) and infrastructure, such as hospitals, nursing homes, mobile home parks, and public schools, within the area of forecasted severe weather to inform the implementation of emergency plans and public messaging. Jurisdictions at all levels, other federal agencies, the private sector, and nongovernmental organizations can use RAPT to inform strategies for preparedness, response and recovery. Read more [here](#).

FDA Provides New Guidance on Use of NCITI

Measuring a person's temperature can be done in several ways. One method to measure a person's surface temperature is with the use of non-contact infrared thermometers (NCITs). NCITs may be used to reduce cross-contamination risk and minimize the risk of spreading disease. While typically 98.6°F (37.0°C) is considered a "normal" temperature, some studies have shown that "normal" body temperature can be within a wide range, from 97°F (36.1°C) to 99°F (37.2°C). Before NCITs are used, it is important to understand the benefits, limitations, and proper use of these thermometers. Improper use of NCITs may lead to inaccurate measurements of temperature. Read more [here](#).

FEMA: Final Publication for the Revised NIMS Training Program

FEMA's National Integration Center has released the updated National Incident Management System (NIMS) Training Program, which sets forth a structure for national training. FEMA supports the mission of strengthening the security and resilience of the nation by working to improve the ability of all to manage incidents, events and emergencies. The NIMS Training Program sets forth a structure for national training and establishes the roles and responsibilities of FEMA and members of the NIMS stakeholder community. The training program, identifies specific activities for developing, maintaining and sustaining a training program that prepares incident personnel to understand their responsibilities and work together during incidents. The revised NIMS Training Program introduces training Focus Areas based on incident personnel's position and responsibility. These areas include the Incident Command System, Joint Information System, Emergency Operation Center and the Multiagency Coordination Group. The document is available on the FEMA Website at this link: [NIMS Training Program](#).

Guidance Available on Fire and EMS Response to Civil Unrest

Civil unrest may occur as a period of social upheaval, following sporting events or during periods of heightened community tension. Fire and emergency medical services (EMS) personnel will be called to respond to these incidents, placing themselves at higher than anticipated levels of risk. The U.S. Fire Administration (USFA) and the National Highway Transportation Safety Administration (NHTSA) Office of Emergency Medical Services (OEM) worked together to compile a series of best practices to assist EMS agencies and personnel respond to civil unrest incidents in your community. The Informational Bulletin is available for download [here](#).

OSHA Releases New Respirator Materials

The Occupational Safety & Health Administration (OSHA) has just released a new [video](#) and [poster](#) that show employers and workers how to properly wear and remove a respirator. The [video](#) and [poster](#) are also available in Spanish.

New OSHA Video Focuses on Heat Stress

Working in the heat can be dangerous. Operations involving high air temperatures, radiant heat sources, high humidity, direct physical contact with hot objects, or strenuous physical activities have a high potential for inducing heat stress in employees. Outdoor operations conducted in hot weather, such as hazardous waste site activities and emergency response operations, especially those that require workers to wear semi-permeable or impermeable protective clothing, are also likely to cause heat stress among exposed workers. A new video developed by the OSHA Region VI Training Institute Education Centers offers guidance on how to prevent injuries and fatalities from common hazards of working in the heat, and how they can be prevented. The one-hour video focuses on Heat Hazard Recognition, Planning and Supervision, Engineering Controls, Work Practices & Personal Protective Equipment (PPE), Training. And Resources. Register to access this free course [here](#).

In related news, the Centers for Disease Control and Prevention (CDC) reminds us, "Taking steps to protect yourself from the sun is a year-round responsibility. Protect yourself and others from the sun with shade, a shirt, or sunblock (SPF 15+) all year long." You can access more information [here](#).

White House Task Force Projects N95 Supply Could Soon Meet Demand

The White House Supply Chain Task Force projects the nation will have enough N95 masks to meet pandemic demand for July through October, according to a report released to the Senate Homeland Security and Governmental Affairs Committee for a recent hearing on federal efforts to procure and distribute supplies to fight the pandemic. The report also projects that the nation will have enough gowns (including reusable ones), surgical masks, nitrile gloves and face shields in July, but does not include later projections for those supplies. Federal Emergency Management Agency Director Peter Gaynor released the report

at the request of Sen. Maggie Hassan, D-N.H., who said the estimates should have been available sooner and yesterday requested longer-term projections for personal protective equipment and similar projections for testing supplies. Read more [here](#).

NIOSH Highlights Effects of Prolonged PPE Use During Long Shifts

Healthcare workers (HCW) and first responders often work long, physically and mentally exhausting shifts as they provide care for patients, especially during a public health emergency. These long hours can result in fewer adequate breaks for personal care, nutrition, and hydration. During these extended work shifts, many HCWs are also required to wear personal protective equipment (PPE), which may include N95 filtering facepiece respirators (FFRs) elastomeric half-mask respirators, or powered air-supplied respirators (PAPRs). Particular features of PPE can impose a physiological (how the body normally functions) burden on the HCW which can be exacerbated by long work hours without adequate breaks for eating, hydration and self-care. In a new blog post, the National Institute for Occupational Health and Safety (NIOSH) discusses the physiologic burden of PPE on healthcare workers. Read more [here](#).

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[Highway Incidents & Transportation Systems](#)

ITE Talks Transportation Podcast Series

Selected by Feedspot as the #1 transportation podcast to listen to in 2020. A NEW EPISODE EVERY MONTH ITE Talks Transportation is a collaboration between ITE and Bernie Wagenblast, founder and editor of the Transportation Communication Newsletter and host of Transportation Radio. Each month, a new podcast features a thought leader within the transportation industry. In keeping with #transportationtuesday, a new episode will be available the 4th Tuesday of every month. For more information, go [here](#).

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[Medical Direction](#)

FDA MedWatch Warns of Labeling Mishap on NM Blocking Agents

FDA is notifying health care professionals about the temporary absence of the “paralyzing agent” warning statement embossed on the vial caps of two neuromuscular blocking agents, vecuronium bromide for injection, 10 mg and 20 mg per vial and rocuronium bromide injection 50 mg/5 mL and 100 mg/10 mL vials. As a temporary measure, to increase supply of these drugs, FDA is not objecting to the distribution of vecuronium bromide for injection and rocuronium bromide injection, starting June through September 2020 and June through July 2020, respectively, without the embossed “paralyzing agent” warning statement on the vial cap. The FDA recommends careful handling of these neuromuscular blocking agents as it is vital to prevent medication errors that could result in serious harm or death. Read more [here](#).

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[Pediatric Emergency Care](#)

ASPR Announces Establishment of the National Advisory Committee on Children and Disasters

The Office of the Assistant Secretary for Preparedness and Response (ASPR), in the Department of Health and Human Services (HHS) Office of the Secretary announces establishment of the National Advisory Committee on Children and

Disasters (NACCD). The Advisory Committee will provide advice and consultation to the HHS Secretary on pediatric medical disaster planning, preparedness, response, and recovery with respect to the medical and public health needs of children in relation to disasters. The Office of the Secretary is accepting application submissions from qualified individuals who wish to be considered for membership on the NACCD. Up to 13 new voting members with expertise in pediatric medical disaster planning, preparedness, response, or recovery will be selected for the Committee. Please visit the NACCD [website](#) for all application submission information and instructions. Application submissions will be accepted for 30 calendar days from the date of this publication in the Federal Register. Application Period: The application period is from midnight (Eastern Time) May 27th-June 27th. Additional information, and a link to past documents from the NACCD and the application for committee members, is on the ASPR website. You can find more information [here](#).

CHoP Offers New Clinical Pathway for MIS-C

In January 2020, the American Academy of Pediatrics endorsed the following publication: Society of Critical Care Medicine. Initial resuscitation algorithm for children. Available [here](#).

AAP's endorsement of the sepsis algorithm is now available in the May 2020 issue of the journal, *Pediatrics*. The online version of this article, along with updated information and services, is located on the World Wide Web [here](#).

In related news, the issue also provides an update on the American College of Surgeon's (ACS) Children's Surgery Verification Quality Improvement Program, which might be informative to states that are recognizing pediatric specialty centers. Read more [here](#).

New AHRQ Review Highlights SUD Interventions in Adolescents

The Agency for Healthcare Research and Quality (AHRQ) systematic review (SR) synthesizes the literature on behavioral, pharmacologic, and combined interventions for adolescents ages 12 to 20 years with problematic substance use or substance use disorder (SUD.) The agency included interventions designed to achieve abstinence, reduce use quantity and frequency, improve functional outcomes, and reduce substance-related harms. Read more [here](#).

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[Specialty Systems of Care](#)

Performance Measure “Stroke-01” added to the NEMSIS V3 Dashboard

The NEMSIS V3 Public Performance Measure Dashboard visualizes EMS performance measures maintained by the National EMS Quality Alliance (NEMSQA), including measures that were originally developed by the EMS Compass initiative. It also gives the public a way to track the performance of EMS over time and across various EMS agency and incident attributes. Because stroke is such a significant public health problem, and timing of treatment is so important to achieve better patient outcomes, the Technical Expert Panel felt strongly that Stroke-01: Suspected Stroke Receiving Prehospital Stroke has value to the EMS Community. While the direction of published evidence can vary for prehospital stroke scales, it is widely understood that stroke assessments are helpful tools in helping identify patients with stroke and determining which facilities are most appropriate for their transport. The intent of this measure is to determine how many suspected stroke patients are receiving prehospital stroke assessments (and having the assessment documented), on scene during the EMS encounter. For more information, please contact N. Clay Mann clay.mann@utah.edu or Julianne Ehlers Ehlers.julianne.ehlers@hsc.utah.edu.

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[Trauma](#)

NIH Study Identifies Risks for Complications After Mild TBI

Molecules released into the blood following mild traumatic brain injury (TBI) may be indicators of neuronal damage associated with conditions such as post-traumatic stress disorder (PTSD) and depression, researchers from the National Institute of Nursing Research (NINR), part of the National Institutes of Health, have found. This study included military veterans and servicemembers who were enrolled in the Chronic Effects of Neurotrauma Consortium (CENC) multicenter observational study of the long-term effects of mild TBI and is published in *Neurology*. Read more [here](#).

[Federal Partners](#)

CMS Modifies Data Collection Period for Ground Ambulances

CMS is modifying the data collection period and data reporting period, as defined at 42 CFR § 414.626(a), for ground ambulance organizations that were selected by CMS to collect data beginning between January 1, 2020 and December 31, 2020 (year 1) for purposes of complying with the data reporting requirements described at 42 CFR § 414.626. Under this modification, these ground ambulance organizations can select a new continuous 12-month data collection period that begins between January 1, 2021 and December 31, 2021, collect data necessary to complete the Medicare Ground Ambulance Data Collection Instrument during their selected data collection period, and submit a completed Medicare Ground Ambulance Data Collection Instrument during the data reporting period that corresponds to their selected data collection period. CMS is modifying this data collection and reporting period to increase flexibilities for ground ambulance organizations that would otherwise be required to collect data in 2020–2021 so that they can focus on their operations and patient care.

Now Extended: Contribute Feedback on Workplace-Supported Recovery Programs

In February, NIOSH began seeking input on Workplace-Supported Recovery Programs (WSRPs) to prevent and offer treatment for workers with substance use disorders through a Request for Information in the Federal Register. NIOSH has posed a series of questions on WSRPs and is interested in responses from a variety of stakeholders. The comment period has been extended to remain open for input until July 27, 2020. Learn more about WSRPs and submit your feedback [here](#).

New Opioid Pain Management Guide Recommends Telehealth Patient Care

According to the Agency for Healthcare Quality and Research, primary care physicians are providing opioid therapy for their patients through telehealth visits using two-way video such as Skype or FaceTime, or by telephone, according to a new guide issued by the AHRQ-funded Six Building Blocks program. Advantages of telehealth visits include gaining insights into the patient's home setting, making patients more comfortable by being able to receive care outside of a medical setting, and not having to travel to see their physician. The guide says providers should advise patients to check if their health insurance covers video and telephone visits. Providers also should document in each patient's medical record that telehealth was provided to comply with social distancing recommendations and to decrease the risk of infection. Six Building Blocks is an evidence-based quality improvement program designed to help primary care providers improve chronic pain management of patients who use long-term opioid therapy. Access the [guide](#).

CDC Highlights Decline in ED Visits During Pandemic

The Centers for Disease Control and Prevention (CDC) assesses trends in ED visits during the pandemic in the current issue of Morbidity and Mortality Weekly Report (MMWR), now available online. CDC analyzed data from the National Syndromic Surveillance Program (NSSP), a collaborative network developed and maintained by CDC, state and local health departments, and academic and private sector health partners to collect electronic health data in real time. The national data in NSSP includes ED visits from a subset of hospitals in 47 states (all but Hawaii, South Dakota, and Wyoming), capturing approximately 73% of ED visits in the United States able to be analyzed at the national level. NSSP found that emergency department (ED) visits declined 42% during the early COVID-19 pandemic, from a mean of 2.1 million per week (March 31–April 27, 2019) to 1.2 million (March 29–April 25, 2020), with the steepest decreases in persons aged ≤14 years, females, and the Northeast. The proportion of infectious disease–related visits was four times higher during the early pandemic period. Read more [here](#).

AHRQ Invites Input to EPC Programs

What health care decisions are you struggling with? Would a review of the scientific evidence help inform this decision? Share

your ideas with the Agency for Healthcare Research and Quality's (AHRQ) Evidence-based Practice Center (EPC) Program. AHRQ will use these ideas to determine the focus of its evidence reports for next fiscal year (i.e., AHRQ can provide an evidence report at no cost). Your input is important! You can suggest a topic for a future evidence report until July 17, 2020 at: <https://effectivehealthcare.ahrq.gov/get-involved/suggest-topic>.

AHRQ Seeks Comment to PTSD Repository Updates

The Agency for Healthcare Research and Quality (AHRQ) identifies and abstracts data from posttraumatic stress disorder (PTSD) treatment randomized controlled trials (RCTs) to update the PTSD Trials Standardized Data Repository (PTSD-Repository). In consultation with the National Center for PTSD (NCPTSD), the agency expanded inclusion criteria to RCTs targeting comorbid PTSD/substance use disorder (SUD) and added data elements. Researchers identified 36 new RCTs of interventions for PTSD and 22 RCTs for comorbid PTSD/SUD, resulting in 379 studies included in the PTSD-Repository, including 115 pharmacologic and 264 nonpharmacologic studies published from 1988 to 2020. View the findings and provide comments if desired by 7/6/20 [here](#).

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[Industry News](#)

Reminder of Resource: NAEMSP Position Statement on Patient Restraint in EMS

Readers are reminded of the National Association of EMS Physicians' (NAEMSP) 2017 position statement on patient restraint available [here](#). EMS agencies are encouraged to review current policies for conformity with these recommendations and to remind practitioners of proper methods for retaining EMS patients.

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[Interesting Abstracts](#)

The dangers of sleep deprivation published by the American Heart Association [here](#).

'Iso,' a Deadly New Synthetic Opioid, Has Hit American Streets from HealthDay [here](#).

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[UPCOMING Events](#)

AUGUST 2020

[Fire Rescue Med](#) -- IAFC EMS Section Annual Meeting (August 17-18, Phoenix, AZ)

[IAFC Fire-Rescue International](#) (August 19-22, Phoenix, AZ)

SEPTEMBER 2020

[Emergency Nurses Association Annual Meeting](#) Visit the website for more information on the Virtual Meeting.

[EMS World Expo](#) (September 14-18, Las Vegas, NV)

OCTOBER 2020

[American College of Surgeons Clinical Congress](#) (October 4-8, Chicago, IL)

[American College of Emergency Physicians Annual Meeting](#) - Visit the website for information on the Virtual Meeting

NOVEMBER 2020

[Air Medical Transport Conference](#). (November 2-4, Nashville, TN)

[American Ambulance Association Annual Meeting](#) (November 2-4, Las Vegas, NV)

[IAEM EMEX 2020](#) (November 13-18, Long Beach, CA)

If you are interested in other calendar listings, please consult the host/sponsor for additional information.

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

- [NAEMSE Instructor Course Level 1](#)
- [NAEMSE Instructor Course Level 2](#)
- [CAAHEP Accreditation Update & Evaluating Student Competency Workshops](#)

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