

## News from the State EMS Council (SEMSCO) – December 2004

1. In case Santa didn't leave you everything you wanted, help yourself to one additional gift courtesy of the Bureau of EMS. It seems word may not have gotten out advertising the Adult Major Trauma Protocol revisions this past summer. The Bureau web site sports not only copies of the revised protocol but a PowerPoint presentation to use in updating your people on the changes. Link to <http://www.health.state.ny.us/nysdoh/ems/protocolsnew.htm> for the goods.
2. Halloween weekend proved a fine time for Vital Signs 2004 at the Buffalo Convention Center. The show turned out the third highest attendance in its 21-year history with over 1,900 participants and 120 vendors. Mark your calendars for Vital Signs 2005 scheduled this October 14 – 16, 2005 in Rochester.
3. If the stiff neck you had last week is feeling better, it might be due to progress being made on development of a selective cervical spinal immobilization protocol. The group working on this project delivered a draft document for consideration and potential approval in February 2005. Stay tuned.
4. It was indeed wishful thinking that the Fire and Volunteer Ambulance providers in Suffolk County were going to reach agreement on a Response Time Protocol issued by the Suffolk County REMAC and REMSCO. The local fisticuffs spilled over onto the floors of SEMAC and SEMSCO when the protocol was presented for State approval. At issue is the authority of a REMSCO to mandate response time standards. After considerable, often heated debate, both SEMAC and SEMSCO approved the Suffolk County Protocol. As expected, appeals were immediately filed, and will now be heard by a SEMAC appeals group working with counsel from DOH. To be continued...
5. A revised stroke protocol earned the SEMAC and SEMSCO stamps of approval recommending transport of patients with suspected strokes to the closest NYS DOH designated Stroke Center (if the time from symptom onset to ED arrival is less than 2 hours). Nineteen stroke centers are already designated in New York City and DOH is furiously reviewing requests from hospitals throughout the State for additional stroke center designations. Expect to see a mailing from the Bureau on this protocol change shortly. One potential area of confusion presently would be how you know which hospitals have been designated as Stroke Centers (not that a hospital would ever try to confuse or mislead us); DOH expects to have a listing of these posted somewhere soon.
6. The Bureau announced that they plan to issue a policy allowing use of fentanyl in aeromedical programs.
7. PSI, a California based testing company ([www.psonline.com](http://www.psonline.com)) was the successful bidder for the EMS written exam testing contract. Expect some changes starting with the January 2005 exams such as a smaller answer sheet, and a decrease in the on-site scoring fee from \$35 back to the old \$25. Although plans haven't been finalized, there might be an increase in on-site scoring locations announced later this year.
8. If you didn't take a peek at the draft national EMS scope of practice document, ([www.emsscopeofpractice.org](http://www.emsscopeofpractice.org)), you missed an opportunity to let the authors hear how the proposals would decimate EMS in New York State. Bureau of EMS Director Ed Wronski wrote a strongly worded letter criticizing the additional hours of

training needed at each level, elimination of the EMT-CC and EMT-I levels, and unnecessary addition of an advanced practice paramedic level, amongst other concerns. Numerous other organizations including the NYS Association of Fire Chiefs also sent similarly harshly worded letters of comment.

9. The "Help Is Here" EMS history exhibit formally opened on November 20, 2004 at the NYS Museum in Albany. It will remain open through September 11, 2005 and its close proximity to the EMS Memorial at Empire State Plaza makes it an ideal field trip for you, some friends, and the family! The State Museum is open everyday except Thanksgiving, Christmas, and New Years Day from 9:30 AM to 5 PM. For further information, call 518-474-5877 or check their web site at: [www.nysm.nysed.gov](http://www.nysm.nysed.gov).
10. In May 2004, you might recall Finger Lakes and Monroe/Livingston Regional EMS Councils asking the State Council to consider a revised prehospital DNR form called the Medical Orders for Life Sustaining Treatment form (MOLST). Well, the issue has remains alive. Widespread acceptance of the form by physicians and health care facilities in these Regions are causing EMS interface conflicts. Agreeing that change is needed, SEMAC, SEMSCO, and DOH approved a pilot EMS test of the MOLST form(s) in the Monroe/Livingston and Finger Lakes Regions. You can take a peek at the MOLST forms on [www.compassionandsupport.org](http://www.compassionandsupport.org).
11. Albany Fire Department presented the results of their BLS Glucometer demonstration project. The six-month trial involved 111 Basic EMTs who (after training) used a glucometer to test the blood glucose of 778 patients. They were able to treat 61 of 185 hypoglycemic patients with glucose paste as well as free up ALS providers to attend to other patient care tasks with the remaining patients (who required ALS). There were no blood exposures or sharps injuries. Albany Fire requested and got approval from SEMAC for BLS providers in their (REMO) region to utilize glucometers.
12. New Year's Day 2005 rung in the long heralded 45-day rule for delivering pilot recertification paperwork to DOH. Pilot recert candidates who fail to submit their paperwork to DOH 45 days prior to their card expiring will need to get into a refresher course since their late paperwork will bounce back like a bad check.
13. Visions of Health Care Finances are dancing around with the sugarplums in our heads. 2005 will see the renegotiation of New York State's Health Care Reform Act, affectionately known as HCRA. The State Trauma Advisory Committee (STAC) is asking for restoration of \$3.7 million to support the NYS Trauma Registry, and all of us would be wise to mention this when we remind our elected officials to support continuation of the EMS dedicated fund in HCRA that annually provides some \$23 million to cover EMS Training, Regional Councils, Program Agencies, and the Bureau of EMS.
14. Two DOH appeals rulings issued in a recent disciplinary proceeding against a paramedic could significantly affect how certified providers are disciplined. In the first ruling, DOH adopted a "preponderant evidence" standard of proof for all disciplinary proceedings. This effectively brings EMS providers in line with nearly every other certified profession in NY. Previously, "substantial evidence" alone would have carried a Bureau of EMS disciplinary case. In the second ruling, DOH defined incompetence as "the lack of the skill or knowledge necessary to practice the profession." During the hearings, the Bureau of EMS argued that mere failure to

comply with applicable protocols should be sufficient to establish incompetence. This second ruling also brings EMS in line with the prevailing standard in other medical professional disciplinary matters. As a result of these two rulings, the Bureau must now be more certain about its proof before leveling incompetence charges against certified providers. The appeals ruling in this particular proceeding (In re Tebano) was complete exoneration. Attorney Daniel Seidberg of Syracuse represented Ms. Tebano and attorney Paul Gillan of Albany represented her employer, Clifton Park & Halfmoon Emergency Corps.

15. SEMSCO Chair Warren Darby (who goes by the pen name YFUS) presided over elections for next year's officers. The results are Chair Mike McEvoy (NYS Association of Fire Chiefs), First Vice Chair Henry Ehrhardt (NYS Volunteer Ambulance and Rescue Association), and Second Vice Chair Anthony Billittier (Wyoming-Erie REMSCO). All SEMSCO Committee members are urged to contact the incoming chair with their requests for reappointment to committees to avoid any disappointment (Mikes email is listed below).
16. For you weekend worriers all in a tizzy over having to collect social security numbers on your PCRs, take a close look at the Statewide Planning and Research Cooperative System (SPARCS) website. Beginning in 2005 (that's now), the SPARCS hospital data set can be matched to PCRs using an identifier generated from data including the first 2 characters of their first name, the first two and last two characters of their last name, the last 4 digits of their social security number, their sex, and date of birth. Data left off the PCR will screw up the potential for matching records and discombobulate prehospital research efforts. For more information on SPARCS, visit <http://www.health.state.ny.us/nysdoh/sparcs/sparcs.htm>. If you're worried about identify theft, find a better place to lock up your completed PCRs.
17. For you political thinkers out there, keep an eye on the State Health Department as both Wayne Olsten, Director of Office of Health Systems Management (OHSM) and Fred Heigel, Director Bureau of Hospital and Primary Care Services make their respective exits. No news yet on their replacements, but both gentlemen had significant impact and influence on EMS in New York State from the senior level positions they held.
18. An MCI is coming to your county. Over the next year, Bureau staff will conduct rollouts on a county-by-county basis attempting to reach the training coordinators from every certified ambulance agency. Your county EMS Coordinator should be able to give you the 411 on when and where. In case you missed it, DOH has about a million smackaroos worth of SMART kits based on the START triage. They're headed out to every ambulance agency in the State, courtesy of WMD monies.
19. An interesting little QI study done right here in the author's home county of Saratoga by the Fire First Response QI Group sought to identify reasons behind a horrifically low completion rate of the extrication box on PCRs. Curiously, scientific and statistical analysis of the data revealed that placement of the box tends to obscure a PCR writers attention, contributing to the low completion rate. This system related issue was mentioned to the Region and State Evaluation Committees for consideration in future revisions of the PCR form.
20. If you lay awake at night trying to calculate the number of continuing education hours by category for alphabet courses, you might be able to get back to counting sheep

sometime soon. A subgroup of the SEMSCO Education and Training Committee is putting finishing touches on recommended breakdown of core content hours for the various ACLS, PALS, PHTLS, and other “alphabet” courses often taken by EMS providers to meet con-ed requirements.

21. Last, but not least, NEMSIS which stands for the National EMS Information System ([www.nemsis.org](http://www.nemsis.org)) took a hit from NHTSA when it was partially funded at \$250,000 for the upcoming year. This will probably be wholly insufficient to launch a planned National EMS dataset in development for several years now. Interesting that the fire equivalent, NFIRS ([www.nfirs.fema.gov](http://www.nfirs.fema.gov)) doesn't seem to be hurting for funding.

These notes respectfully prepared by Mike McEvoy, PhD, RN, CCRN, REMT-P who was just elected Chair of the State EMS Council where he represents the NYS Association of Fire Chiefs. Mike is EMS Coordinator for Saratoga County, a paramedic for Clifton Park-Halfmoon Ambulance Corps, a firefighter and chief medical officer for West Crescent Fire Department. At Albany Medical Center, Mike works as a clinical specialist in the Cardiac Surgical ICUs, Chairs the Resuscitation Committee, and teaches pulmonary and critical care medicine at Albany Medical College. Contact Mike at [McEvoyMike@aol.com](mailto:McEvoyMike@aol.com).