

1. If you thought the video iPod was the cat's pajamas, you probably weren't at Vital Signs 2005 in Rochester. Attendees numbered 1715 and with over 100 vendors, there was plenty to see. The Annual Awards Banquet held some surprises, including presentation of the Commissioner of Health's Award for Excellence in EMS Activities to Bureau of EMS Director Ed Wronski in recognition of his exceptional contributions to the Emergency Medical Services System of New York State, his commitment to excellence, tireless energy, and level of service that goes far and above the call of duty. Quite an honor that, by the way, is not presented often. Valerie Ozga, also of the EMS Bureau, was honored by Council Chair Mike McEvoy for her continued administrative support of the Council. Long deserved for continued willingness to pick up the ball and run with any task the Council needs accomplished, Debbie Fults-Jones was awarded as the unsung hero of SEMSCO. Feel badly for missing out on all the excitement? Surf to www.vitalsignsconference.com for the 411 on next year's conference in Syracuse. FYI, Vital Signs 2007 will be in Syracuse as well.
2. CPR Guidelines 2005 rolled out November 28th, 2005 and the word from SEMAC on how these will affect NYS Protocols is, uhmm, wait a second...no one had a chance to read them yet. Scout out the summary yourself in the December issue of the AHA publication Currents at www.americanheart.org/presenter.jhtml?identifier=3035517 or use the same link to see the full versions published in Circulation. To be continued.
3. If you must know exactly when you'll be able to get your new CPR on, the inside scoop from the Heart Association says teaching materials will roll out by the end of March 2006 for BLS Healthcare Providers, end of June for Heartsaver, end of September for ACLS, and Christmas 2006 for PALS.
4. PIER Committee Chair Don Faeth is leading his public education committee right outside the box as they set to work on some new EMS educational materials including a skit for school kids and a do's and don'ts poster (for big people).
5. The Finance Committee finished work on the 2007/8 Budget Template and plans to get the document out to Regional Councils and Program Agencies shortly after March 1, 2006. It will be due back on Friday, May 12th in time for a marathon calculating session to kick off at 5 pm Monday eve May 22, 2006 prior to the May SEMSCO meetings.
6. What went from a persistent headache to a migraine is beginning to feel like a full-blown epidural bleed. Can you say spinal immobilization protocol? The educational package presented at the December SEMSCO meeting got bounced back to committee for some fine tuning. Don't hold your breath for a January approval.
7. Hospitals have been put on notice by the State Education Department that certified EMS providers cannot perform ALS skills falling within the scope of practice of a licensed profession unless those skills are carried out as part of an original or refresher EMS certification course. Jeepers! This could spell trouble for ALS provider skill retention programs, air medical hospital contracts, and a boat load of other existing programs. SEMAC and the Bureau plan to meet with State Ed to discuss a remedy. A legislative fix may be required.

8. Since increasing the number of on-site scoring written test centers, the Bureau reports that (with the exception of New York City), few on-site scoring centers are full. If you call DOH, their recorded message will indicate when a site has reached capacity.
9. Education and Training has formed a TAG to outline an actual curriculum for the core component of the Pilot recertification program. This should serve to guide course sponsors and others presently offering the core component without the benefit of any specific content outline. Hopefully, it won't tie the hands of those choosing this non-traditional refresher option for its exceptional flexibility.
10. Speaking of course sponsors, a recent challenge to the DOH revocation of a downstate sponsorship was upheld by the courts. The sponsor argued that DOH must provide a fair hearing process before revoking a sponsorship. No way José, the courts ruled: sponsors are DOH contractors and can be terminated at any time without a hearing.
11. A con-ed program on Child Abuse and Neglect will roll out in 5 locations during late January or early February 2006. Details should appear on your Regional Program agency website any day now.
12. Two appeals upheld by SEMAC appeals committees in September were again appealed (this time, both to the Health Commissioner). One involves a Suffolk County dispatch crew confirmation and mutual aid protocol and the other a New York City REMAC decision to allow reduction of FDNY ALS FR unit staffing from 2 medics to an EMT and single medic. Implementation of both actions is stayed while DOH Division of Legal Affairs reviews the appeals. It will probably be early 2006 before the Commissioner issues her decisions.
13. Bureau Director Ed Wronski revealed that he's asked for monies to fund a statewide electronic PCR system. He hasn't gotten a big fat NO, which bodes well. He also asked the School of Public Health (the people who generate the totally awesome Trauma Registry reports) to ply their art with PCR data. This promises to generate the first ever comprehensive look at just what all this keypunched information means. Stay tuned for news on both fronts, and if you bump into a state legislator, remind 'em you're still handwriting PCRs and sending them on to smAlbany for keypunching by a DOH funded contractor. Hey, you need a Dell, dude.
14. Amidst contentions that care and transport of acute cardiac patients is progressing locally without any guidance from SEMAC, a motion passed urging the State Cardiac Advisory Committee to get off their duffs and implement a trial designating STEMI (ST Elevation Myocardial Infarction) centers. As evidence that things are moving helter skelter on their own, a motion also passed SEMAC that EMT-Basics be trained to acquire 12-lead EKGs (if approved by their Region and Service Medical Director). No need to adjust your glasses, but pinch yourself right now to make sure you're not dreaming. A completely sober SEMSCO tabled the motion until input can be solicited from Education and Training, Systems, and Finance on potential ramifications and implementation issues. Yikes!
15. The Legislature acted with incredible speed to allow a use of the Medical Orders for Life Sustaining Treatment (MOLST) form in Onondaga and Monroe counties. MOLST, you might remember, allows customization of advanced directives beyond the present CPR or not. To learn more about the form, check out www.compassionandsupport.org/.

16. The WREMS protocol allowing umbilical vein cannulation for neonatal resuscitation plucked from their recently approved protocol set came back this month for discussion. WREMAC Chair Dr. Joseph Takats reported the ALS procedure has been used once in the past 10 years. Despite SEMAC feelings that IO (intraosseous) access is preferable to UVC, the protocol was grudgingly reauthorized.
17. Legislation recently signed into law permanizing STAC (State Trauma Advisory Committee) appears also to increase the roles of SEMAC and SEMSCO in big ways. SEMSCO is afforded an advisory role in State Disaster planning and preparedness. SEMAC will have an advisory role in creating Emergency Department trauma standards. Depending on how you read these functions, they both could potentially mean a big boost to the SEMSCO and SEMAC spheres of influence.
18. The Bureau reports a request for clarification from FDNY on certified providers with criminal convictions. When a certified provider is charged or convicted of a crime, it is an administrative decision by the Bureau regarding their continued certification. About 10 to 20 times each year, the Bureau takes action to revoke or limit EMS certifications.
19. SEMAC plans to review protocols for safety issues. Of concern are patient care tasks that require providers release their safety belts and move about the inside of a traveling ambulance. SEMAC hopes to decrease provider injuries and deaths from ambulance crashes by minimizing unrestrained crewmembers during transport.
20. Dr. Michael Dailey, REMAC Chair of the REMO Region reported on his Statewide ALS protocol TAG. Developing such a protocol set promises to be a monumental task but, as one physician noted, if it were possible to produce an evidenced based protocol set, there would be little reason remaining to treat patients so differently from region to region in New York State. No word yet on where the manpower (or docpower, as it were) will come from to tackle this monstrous undertaking.
21. The Evaluations Committee continues work on a revised QI Manual. You might want to stop in at OTB and put some money on their finished product hitting the streets before the spinal immobilization protocol.
22. Forget those atropine auto injector pens the DOH Bioterror folks planned to purchase for every ambulance and first response vehicle in NYS. The kibosh came from some SEMAC and Bureau of EMS types who questioned the appropriateness of such an expense. Hey, you never know when a bunch crazed agricultural lunatics might launch an organophosphate attack; no doubt making their getaway on souped up John Deere tractors. The Bureau plans to reconvene their Biochemical Task Force to discuss future atropine gifts.
23. The EMSC (EMS for Children) program applied for an extension of their federal grant to run from March 2006 through February 2009. If successful, the grant would help make EMSC permanent in NYS and potentially expand the role of the EMSC Advisory committee, increase prehospital pediatric equipment and even designate pediatric receiving facilities. Kewl.
24. A Task Force created by the NYS Legislature has been meeting to consider the impact health insurance coverage might have on improving volunteer fire and EMS recruitment and retention. Their report due December 2005 will likely contain three key recommendations: firstly, a public outreach promotional campaign to inform fire and EMS volunteers about existing state medical insurance programs. Many folks the

- Task Force surveyed appear eligible for existing programs, but were not aware of them. Secondly, create insurance coverage and necessary funding to meet the needs of providers who fall in the “gap” between existing state programs and employer provided insurance. Lastly, extend the life of the Task Force. Obviously, these are suggestions only; legislature action is needed to go anywhere. Stay tuned.
25. In the last SEMSCO minutes, you might remember reading a scintillating piece about your newly required child abuse reporting requirements when encountering kids in meth labs. Now, as a sort of belated gift from Santa, NYS is readying a brochure to help you recognize a clandestine methamphetamine laboratory. On a side note, isn't it odd that they're called “clandestine” labs? Like who really would operate a “public” meth lab anyway?
 26. The State Council bid a fond farewell to 2 key members: Dr. Art Cooper and Bobby Faugh. Both have established themselves as leaders in New York State EMS. Dr. Cooper has played a pivotal role in prehospital medicine contributing his expertise as a pediatric surgeon. A past Chair of SEMSCO, drafter of numerous key documents during his tenure with us, a mover and shaker on many levels from local to national, a colleague, and personal friend of many members, Dr. Cooper will be missed. Mr. Faugh has also offered his guidance and expertise as a retired Trooper and nationally recognized expert in emergency vehicle driving and traffic safety. In his gentle manner, he has often reminded us to practice safe prehospital medicine. Also a colleague and personal friend of many members, Mr. Faugh will be missed. Both gentlemen were commended by SEMSCO for their many years of service.
 27. The Bureau reports that field staff find a surprising number of EMS vehicles unattended, engines running, keys in the ignition, and unlocked in public places. While terrorists might be waiting behind the neighborhood donut shop, recent news stories depict greater risk from neighborhood drunks looking for a joyride. Puhlease, don't loose your ride to an EDP!
 28. For those CON (Certificate of Need) geeks out there, the Bureau and SEMSCO Systems Committee are in final draft stages of a revised policy statement that combines the legendary 93-09 and 93-10. This should hopefully resolve some of the longstanding CON procedural confusion. Once completed, we can all say 10-Q very much.
 29. Congratulations to the 2006 SEMSCO officers: Dr. Tony Billitier, Chair; Henry Ehrhardt, 1st Vice Chair, and Dr. Deb Funk, 2nd Vice Chair. Members were reminded that committees start the new year with a clean slate – membership preferences and requests should be emailed to Executive Secretary Donna Gerard at dag04@health.state.ny.us. Outgoing Chair Mike McEvoy thanked Council members for their support during 2005 and, with 2 years remaining on his SEMSCO term, promised to continue producing these “unofficial minutes” to share the good work of SEMAC and SEMSCO with as many EMS providers as possible. Humor helps, even at State EMS Council!
 30. 2006 SEMAC and SEMSCO meetings are scheduled for January 12 and 13, March 23 and 24, May 23 and 24, September 14 and 15, and December 12 and 13. Note some dates are Thurs/Fri instead of the traditional Tues/Wed routine. The venue will change to the Holiday Inn Turf on Wolf Road in Albany (12205). The March date

might potentially change, so don't pen that one in ink just yet. Vital Signs will be October 20 through 22, and don't forget EMS Week May 14 through 20.

These notes respectfully prepared by Mike McEvoy, PhD, RN, CCRN, REMT-P who is the 2005 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. If you want a personal copy of these "unofficial" SEMSCO minutes delivered directly to your email account, surf to the Saratoga County EMS Council at www.saratogaems.org and click on the "NYS EMS News" tab (at the top of the page). There, you'll find a list server dedicated exclusively to circulating these notes. Past copies of NYS EMS News are posted there as well.