

1. Rumors abound about possible cancellation of the January 2009 NYS EMS written exams. Not true. On December 4th, the Office of the State Comptroller (OSC) approved a Bureau request for a 3-month extension of the examination contract that allows testing to continue through March 2009. Here's what happened: the testing contract that expires December 31st had to go back out for bid; responses are due back December 5th, 2008. It looked like the Bureau was going to be high and dry with no testing contractor as of January 1, 2009, hence the request for an extension. The Bureau and Health Commissioner made OSC aware that facilitating administration of EMS exams is essential to public health. Hopefully, a new contract will be effected promptly to allow testing to continue past March. Otherwise, DOH may need to send some season's beatings to their financial colleagues in OSC. If you're scheduled to test in January, better drag the books out from under the bed and crack 'em open while you spread holiday cheer.
2. Well, it appears that not every responder working the roadways has to dress like a glow-in-the-dark banana. Moments before the November 24th 2008 deadline requiring all workers operating on or near roadways to don high visibility safety vests, the feds backpedaled on the rule for certain firefighters. The "Interim Final Rule" revises the definition of "worker" to exclude firefighters when they are exposed to flame, fire, high heat or hazardous materials. It also exempts firefighters from the requirement to use hi-vis safety apparel when they are exposed to hazardous conditions where the use of such apparel may increase the risk of injury to firefighter personnel. Get the skinny at <http://edocket.access.gpo.gov/2008/E8-27671.htm>. This should resolve the burning issue (pardon the pun) of hi-res vests melting during firefighting activities, resulting in thermal injuries or exposure to noxious gases. DOH has published a Policy Statement (#08-06) on Hi-Vis vests which can be had at www.health.state.ny.us/nysdoh/ems/policy/policy.htm. Bottom line (from the Safety TAG: "If your feet are on the street, a vest should be on your chest").
3. Questions about MOLST? Surf to www.compassionandsupport.org for EMS training (click on bottom right "MOLST Training Center" then go to "EMS MOLST Training") on the Medical Orders for Life Sustaining Treatment. A kewl on-line training program with a CE certificate is available at this site. Also, the Bureau just released a spanking new Policy Statement explaining implications for and use of the MOLST form by EMS. Get your very own copy of Policy Statement #08-07 at www.health.state.ny.us/nysdoh/ems/policy/policy.htm.
4. New LDSS-2221A Report of Suspected Child Abuse or Maltreatment form came out in October 2008 with little fanfare. www.ocfs.state.ny.us/main/forms/cps/ is the place to go for downloads and to order paper copies. Check your supply of the forms to make sure you have the newest version. On the same topic, the mandated reporting requirements change on January 17th, 2009 to add additional protections for children in residential care facilities (such as group homes). While the new requirements don't directly impact EMS, you should be aware that abuse and neglect definitions expand for residents of these facilities to include withholding food or hydration as punishment, displaying a weapon, using corporal punishment, withholding services or education, intentional administration of drugs that have not been prescribed and a host of other actions. The gist of these changes shift the definitions of abuse and

neglect from the degree of harm suffered (current requirement) to the actual actions of staff in the residential facilities.

5. Attendees at this year's Vital Signs conference in Buffalo (October 2-5) were surveyed on their Quality Improvement/Quality Assurance activities. 268 surveys were returned representing all levels of providers from throughout the state. Most respondents were EMTs, 30% were ALS providers, and there was one CFR respondent. At respondent home agency or department level, 94% reported having a QI program, 94% have an agency medical director, 70% have a QI Committee, 76% have a QI plan, 87% have some form of call review, 74% receive QI feedback, and 71% have received education in QI. The three most often mentioned barriers to agency level QI were time constraints, staffing, and leadership.
6. Bookmark www.vitalsignsconference.com for the skinny on Vital Signs 2009 in Rochester, to be held October 15 – 18.
7. Another date for your little black book, iPhone, or calendar: May 17 – 23, 2009 has been designated as EMS week. Tentatively, that Wednesday (May 20th) will be the NYS EMS Memorial Service at the Empire State Plaza in Albany.
8. 2008 Annual NYS EMS Council Awards were presented during the Saturday evening banquet at Vital Signs in Buffalo. Those recognized included BLS Provider of the Year - Falene 'Fox' Grass (Finger Lakes REMSCO), ALS Provider of the Year – Daniel R. Parr (Southwestern REMSCO), EMS Agency of the Year – Thousand Island Emergency Rescue Service (North Country REMSCO), Harriet C. Weber Leadership Award - Douglas Baker (Wyoming Erie REMSCO), EMS Educator of Excellence – William J. Liddle (Finger Lakes REMSCO), EMS Communications Specialist Award - Anthony Noce (Central New York REMSCO), Registered Professional Nurse of Excellence – Cheryl Manasier, RN (Hudson Valley REMSCO), Physician of Excellence – Dr. Martin C. Masarech (Susquehanna REMSCO). Congrats to all and many thanks from the folks back home who took the time to nominate their colleagues for some well deserved recognition!
9. Speaking of contributions, SEMSCO and SEMAC learned that Marjorie Geiger, Assistant Director of the Bureau of EMS has been named Director of the Office of Patient Safety by Governor Paterson. SEMSCO and SEMAC recognized Marjorie for her many years of service to the Bureau and EMS community. Congratulations on this prestigious appointment!
10. Med Standards and SEMAC approved several protocols: a Western NY post cardiac arrest induced hypothermia protocol, Susquehanna ALS protocols, Westchester ALS protocols, and a NYC major burn disaster protocol. Approvals involved considerable discussion that resulted in some minor changes. Phew!
11. SEMSCO and SEMAC would be distraught without discussing waveform capnography. This month's meetings provided plenty of opportunity to re-energize the fire. Here's a progress report on this grueling ordeal. The draft SEMAC Advisory went to DOH legal eagles and came back recommending a few wording changes and advising that SEMAC cannot mandate services buy or use specific equipment. The attorneys aptly pointed out that an “advisory” is advisory, not mandatory (go figure, it took a lawyer to point this out). SEMAC can, however, set a statewide “Standard of Care” which, if you remember the legal lecture from your EMT class, is incredibly compelling when you have the misfortune of landing in

court. Next step: send the Advisory to the Health Commissioner for issuance. The Bureau will do this with a recommended implementation date of June 2009. It is, of course, the Commissioners prerogative to change the advisory or set some other implementation date. Nothing is cast in stone quite yet. But wait...that's not all. In another twist on this tortuous issue, authors of the SEMAC advisory revealed that the requirement (for all patients intubated with an endotracheal tube to have continuous waveform capnography in place) also includes a caveat for the capnography waveform to be printed. That may preclude use of some of the smaller, stand-alone capnography devices. Time to buy a new piggy bank.

12. You may recall a five alarm fire breaking out at the September State Council meetings after a motion requiring an AED in every ambulance was tabled pending data on fiscal impact. Director Wronski proposed this month that the Council consider drafting a change in Part 800 regulations making defibrillation capability required equipment for ambulances. SEMSCO will take this up next February, probably with a big huge sigh of relief...
13. Budget cuts have affected all of New York State government. This is not just a little trimming here and there; it's more like taking a chainsaw to every budget. No news yet on implications for EMS. A January meeting of representatives from all State Councils has been called to discuss changes, cuts, and consequences of the current fiscal crisis: stay tuned. The good news for EMS may be that the State Councils are statutory. The bad news is the whole chainsaw thing. Thus far, SEMSCO travel has been limited and prior approval is now required for travel expenses exceeding \$500.
14. The 45-day period given M/A-Com to remedy deficiencies in their initial build out of the SWN (Statewide Wireless Network) ran out. The Office for Technology will re-examine the system during the first week of December (2008). The bucks and special interests involved suggest a final decision won't be left under a Christmas tree, but if you're incredibly curious, www.oft.state.ny.us/oft/swnindex.htm is the place to go.
15. Elections of officers for the NYS EMS Council in 2009 were held. Congratulations and condolences to Chairperson Donald Faeth (representing the Uniformed EMTs and Paramedics of the FDNY), First Vice Chair Robert Delagi (representing Suffolk County REMSCO), and Second Vice Chair Timothy Czapranski (representing Monroe-Livingston REMSCO).
16. Several Training and Education Committee TAGs continue work on marrying the new EMS National Educational Standards to the existing NYS curriculums at each certification level. No bum rush needed here: the national material won't hit textbooks for quite some time. Just a reminder (in case you just crawled out of hibernation): the EMT-CC level will remain in NYS despite it's non-existence in the National Scope of Practice.
17. The Evaluation Committee released results of a HEMS (Helicopter Emergency Medical Services) scene response utilization review. The study examined HEMS requests occurring from March 1 through May 31, 2008 for consistency with DOH Policy Statement # 05-05, *Guidelines for Helicopter Utilization Criteria for Scene Response*. 513 flights were reported. Only 5% did not meet HEMS criteria specified in 05-05. Not bad. Hard to draw many other conclusions from the study.
18. The Finance Committee will discuss Course Funding levels at their February meeting. The Budget templates for 2010-2011 will be mailed out to Regional Councils and

- Program Agencies in March. The only change to the template, given the current State fiscal predicament, will be a need to justify any requested increases.
19. The EMSC (EMS for Children) folks presented results from their survey of NYS hospitals. 23% of the 8 million annual ED visits in NYS were children (i.e.: < 18 years old). There is significant lack of both pediatric equipment and transfer agreements in New York State Emergency Departments, mirroring national data. EMSC will work to improve this. If you can't live without more info, try www.mchb.hrsa.gov/emsc.
 20. It's almost the end of 2008, and Christmas is coming. Here's a little stocking stuffer for the HazMat geek in all of us: the 2008 Emergency Response Guidebook (ERG) in PDF form can be downloaded at www.thecompliancecenter.com/publications/erg.htm. Or, an electronic version (program) can be downloaded at <http://phmsa.dot.gov/hazmat/library/erg>. For educators, an ERG PowerPoint is available at <http://faculty.sunydutchess.edu/walsh/POWERPOINT/TRAINING,%20SAFETY/safety.htm>. If you just can't get enough, short little video on using the ERG is available at www.2008erg.com/. Ho ho ho.
 21. A few unfinished items remain out there: STAC is reviewing medical literature so they can provide SEMAC with commentary on eliminating extremity elevation and pressure points from external hemorrhage control protocols. The National Registry now recommends application of a tourniquet when direct pressure fails to control external extremity bleeding. There's some question as to whether this was a knee jerk reaction to political influence at the National Registry (heavens, don't say it's so...). Medical Standards is still reviewing a grid of skills and procedures done in the back of a moving ambulance by unbelted EMS providers. At the February meetings, they should have a categorization of what should, should not, and what could be done with caution.
 22. One last little ditty to fill your heart with holiday cheer. Provided your heart is still beating, that is. A study published in the September 24, 2008 issue of JAMA (Journal of the American Medical Association) of over 5,505 patients involving 19 EMS agencies and 111 hospitals in eight cities found transporting patients in cardiac arrest is futile when they meet either a three-part BLS rule or five-part ALS rule. The BLS rule calls for stopping resuscitation efforts on scene when (1) cardiac arrest occurred prior to EMS arrival, (2) no defibrillator was used or no shock advised, and (3) EMS could not restore a pulse. The ALS rule adds two more caveats: (4) no witnesses to the arrest, and (5) no bystander attempts at CPR. Using the more conservative (ALS) rule, there were no survivors to hospital discharge among the 1,192 arrests transported. Under the less conservative (BLS) rule, 5 (0.2%) of the 2,592 patients transported survived to hospital discharge (4 were in relatively good shape). Bottom line: using either rule would have eliminated half of all cardiac arrest transports. Talk about safety! It's high time we start facing the fact that by the time EMS arrives on scene of most cardiac arrests, the patient is already dead.
 23. 2009 SEMAC and SEMSCO meetings are scheduled for February 17 and 18, June 9 and 10, September 8 and 9, and December 1 and 2, to be held at the Crowne Plaza Hotel, State & Lodge Streets, Albany, NY 12207. No word yet on whether members will need to bring their own coffee and brown bag lunch.

These notes respectfully prepared by Mike McEvoy who represents the NYS Association of Fire Chiefs on SEMSCO. Contact Mike at McEvoyMike@aol.com or visit www.mikemcevoy.com – you can scope out photos of his recent climb to the top of Mt. Kilimanjaro (Ann Curry, eat your heart out...). 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 – or you can simply click here to be taken directly to the source: www.saratogaems.org/NYS_EMS_Council.htm). There, you’ll find a list server dedicated exclusively to circulating these notes. Past copies of NYS EMS News are parked there as well.