

1. SEMSCO lives on, meeting for a third time in 2012 on October 4. SEMAC, not so much. Despite dragging members in from around the state (at no small cost), SEMAC failed to raise a quorum for their October 3rd meeting. Repercussions from NYS bean counters will probably include an RSVP process for future meetings to avoid wasting time and \$\$.
2. Known for their passionate and sometimes heated banter, Medical Standards DID meet prior to the SEMAC meeting that was not meant to be. This meeting proved exciting as always with heated debate and near fistcuffs over ALS protocol approvals. The assault on a consolidated Mid-State, Central NY and North Country protocol set was prolonged and vicious. It was finally approved with extensive changes, the most significant being a perceived provider and patient safety concern resulting from an uncanny design resemblance to the Adirondack Appalachian – Mountain Lakes – REMO – Susquehanna protocols. It was felt that providers crossing the bordering regions might presume the same color/design features implied similar protocols when, in fact, they differ substantially – so much so that a provider could potentially land in a whole lotta hot water, maybe even lose their livelihood, merely from thinking that protocols looking alike are alike. Sooooo, they won't look alike. Also approved, with much less banter, were FDNY Rescue Paramedic Protocol revisions and Suffolk County protocol revisions.
3. In other, less heated business, Med Standards heard a progress report on the intranasal naloxone demonstration project. There have been multiple uses of IN Narcan® by EMTs in the participating regions with preliminary analysis suggesting marked benefits for provider safety. More to come.
4. Here's a hot topic for SEMAC time when they do meet again: a Med Standards proposal would require any EMS service operating at the CC or Paramedic level have a valid Controlled Substances license by January 1, 2014 or forfeit their ALS. OMG, you say? Well, narcotics and benzodiazepines are an ALS staple and have become the standard of care. Any less may no longer meet acceptable minimum standards in New York, if SEMAC and SEMSCO agree in January.
5. As a resident of the only country in the world with ongoing drug shortages, you are no doubt still in short supply of critical EMS meds. The standardized substitution algorithm being finalized by the Bureau has been held up by lorazepam (Ativan®), a drug that needs clearance from BNE (Bureau of Narcotics Enforcement) for EMS use. Hopefully you don't have a seizure while you wait.
6. The narrow banding drop dead date is December 31, 2012. If your radio equipment is not narrow banded by then, you'll face some pretty hefty fines from the FCC. They've recently announced intentions to aggressively enforce compliance. See the FCC site at <http://transition.fcc.gov/pshs/public-safety-spectrum/narrowbanding.html> for details. If you're wondering whether your service is compliant, use the FCC narrowband mapping tool at http://publicsafetytools.info/start_nb_status.php. Try it out; you may be surprised what you learn. Christmas is coming – it's not too late to add new radios to Santa's list.
7. Related to narrow banding, 155.715 MHz is no longer the statewide mobilization or MCI coordination frequency for EMS. The new Statewide EMS frequency is 155.340 (used currently outside of downstate for BLS ambulance to hospital communications).
8. Everything you ever wanted to know about EMS will be at Vital Signs 2012 in Syracuse October 18 – 21; www.vitalsignsconference.com offers on-line registration.
9. Regrettably, one name will be added to the EMS Memorial Tree of Life during EMS Week 2013: FDNY retiree and Staten Island University Hospital Paramedic David

Restuccio, devoted fiancé of Dr. Lorraine Giordano, was killed August 27th, 2012 when an SUV crashed into his ambulance.

10. PIER announced a new award for 2013, “Best Practices in Quality.” Details when the awards application packet is released in January.
11. Misinformation, rumor and innuendo about the new national EMS Educational Standards are bunching up panties across New York State. The December 2012 CFR and EMT exams will be the first to test using the new standards; advanced levels will follow. The greatest confusion centers on the continuing education recertification program. The place to turn for official information is www.health.ny.gov/nysdoh/ems/national_education_standards_transition. Another place for a decent overview of the changes is on-line at an Albany Medical Center CE presentation: http://ems.aanet.org/conf/ems_sep2612.html. Check them out.
12. A couple of pearls for inquiring minds and trepid students poised to take the December exams. Firstly, the revisions to the written exams encompassed mostly terminology, not content. Buff up on the new lingo. Secondly, not all textbooks are created equal. A certain CFR text, for example, eloquently describes application of a traction splint. What, what, what? Buyers beware.
13. Lastly, on the subject of rolling out the new educational standards: participants in the CME recert program also need transition content for their certification renewals.
14. ePCR buyers take heed! Not all electronic PCR’s are NEMSIS compliant. If you purchase a product that is not NEMSIS compliant, you will not be DOH complaint either. See www.nemsis.org/v2/compliantSoftware/index.html for a current listing. Don’t be left out in the dark – its cold out there.
15. Having trouble finding a CIC (Certified Instructor Course)? You’re not alone. Instructor courses at all levels are hard to come by lately. Here’s a kewl option: NAEMSE. The National Association for EMS Educators offers an Instructor I course (www.naemse.org) that DOH is willing to accept in lieu of a NYS CIC course. An internship is still required (running a NYS EMS Course) within 18 months. Additionally, candidates will need to attend a 3 hour DOH class to learn the ins and outs of NYS paperwork. Here’s the best part: if you’re not a CLI (a prerequisite for the DOH CIC course), the NAEMSE Course also counts as a CLI class. Graduates are eligible to complete their CLI internship alongside their CIC internship. Watch for a revised policy statement with all the details.
16. You’ve heard mention of it here before: on-line paramedic courses. Well finally, DOH is putting their foot down on paramedic cards obtained out-of-state through totally on-line courses. No more reciprocity. If you were getting ready to send a money order and two box tops from your favorite breakfast cereal to an out of state medic mill, don’t bother.
17. NFPA 1917 (Standard for Automotive Ambulances) published and is available for download (for a fee) at www.nfpa.org. DOH asked the Systems Committee assemble a TAG to evaluate the impact on NYS services with recommendations on how to move forward. Of note, just completed NHTSA crash testing has caused NFPA to put the Standard right back into a revision cycle with a planned 2015 publication date. The current standard is in effect and ambulances ordered for delivery after January 2013 will likely be manufactured to meet NFPA 1917.
18. The SEMSCO Finance Committee proposed a \$23 million budget for 2013-14 and will accelerate their planning cycle next year in order to get some increases in front of the State Budget folks. As you may know, Program Agencies last saw a budget increase in

- 2007 and training monies are now maxed out leaving no room for increases to cover additional hours required by the new Educational Standards.
19. The Safety Committee is developing a model job description for an EMS Health and Safety Officer.
 20. The QI Committee developed a draft REMAC Patient Care Restriction Guidance Document. This is headed for the DLA (Division of Legal Affairs) review. If and when it resurfaces, it may be issued as a Bureau Policy Statement. Stay tuned.
 21. Flu season is upon us and you might be wondering what DLA had to say about paramedics providing routine immunizations (as discussed in previous SEMSCO meetings). They said no. EMS scope of practice is restricted to prehospital emergency situations. Nice try.
 22. Looking for Christmas stocking stuffers or a nice Hanukkah gift? Check out these talking epi-pen auto injectors: www.auvi-q.com. You can't make this stuff up.
 23. SEMSCO elected their officers for 2013. Congratulations to Chair – Mark Zeek (Adirondack-Appalachian REMSCO), 1st Vice Chair– Dan Blum (Westchester REMSCO), and 2nd Vice Chair– Steve Kroll (Healthcare Association of NY).
 24. SEMAC and SEMSCO will meet again on January 29th and 30th of 2013. Ping www.health.state.ny.us/nysdoh/ems/meetings_and_events.htm, the Bureau meeting page for an agenda a week or two before.

These notes respectfully prepared by Mike McEvoy who previously represented the NYS Association of Fire Chiefs on SEMSCO before (finally) being replaced by Mike Murphy. Contact Mike at McEvoyMike@aol.com or visit www.mikemcevoy.com. If you want a personal copy of these "unofficial" SEMSCO minutes delivered directly to your email account, go to <http://eepurl.com/iaXHY> to put yourself on the list (or adjust your delivery settings) or go to the Saratoga County EMS Council NYS EMS News page at www.saratogaems.org/NYS_EMS_Council.htm. There, you'll find a link to the list server dedicated exclusively to circulating these notes and all the past copies of NYS EMS News parked at the bottom of the page. Feel free to download any notes you missed.