## **MARCH 1-3, 2013**

## Mobile Intensive Care Services, Mary Greeley Medical Center

FRIDAY, March 1, 2013 registration begins at 16:00 in Bessie Myers Foyer
17:05-17:55 Unraveling the Mystery (1.0 CEH) John Hill (Bessie Myers Auditorium)
18:00-18:50 <b>Pediatrics-Big Problems in Small Packages</b> (1.0 CEH) Dr. Jonathan Burns (Bessie Myers Auditorium)
18:55-19:45 <b>Behaving Badly: Our Best for Their Worst</b> (1.0 CEH) Jeff Messerole (Bessie Myers Auditorium)
20:00-20:50 Heart Problems-Getting the Picture (1.0 CEH) Brian Helland (Bessie Myers Auditorium)
20:55-22:20 Getting SMART about Triage (1.5 CEH) Darin Ruud (Bessie Myers Auditorium)
Separate special course:
18:00-22:00* PEARS certification course, part 1 (4 CEH) Dean Rush (conference Room D) limited to 8 people
Saturday March 2, 2013 06:45-0800 Registration open-Bessie Myers foyer area
07:10-08:00 Respiratory Assessment (Early bird Bonus session) (1.0 CEH) Lee Thomas
08:00-08:15 welcome and introductions, all sessions in Bessie Myers Auditorium
08:15-9:55 What's on Our Radar?—Timelines, Trends & Controversies in EMS (2.0 CEH) Jeff J Messerole
09:55-10:15 Break, Vendors
10:15-11:05 Brains-Knowing How & When to Break the Dammed Things (Folks with Strokes) (1.0 CEH) Brian Helland
10:15-11:05 Brains-Knowing How & When to Break the Dammed Things (Folks with Strokes) (1.0 CEH) Brian Helland 11:10-12:00 AccidentlyUnintentional Ingestions (1.0 CEH) Dr. Edward Bottei
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11:10-12:00 AccidentlyUnintentional Ingestions (1.0 CEH) Dr. Edward Bottei  Noon-lunch begins  12:15-12:40 What's New in EMS Support (0.5 CEH) Interview with Vendors
<ul> <li>11:10-12:00 AccidentlyUnintentional Ingestions (1.0 CEH) Dr. Edward Bottei         Noon-lunch begins     </li> <li>12:15-12:40 What's New in EMS Support (0.5 CEH) Interview with Vendors</li> <li>12:15-13:05 ECGs—The Why behind the What We Do (1.0 CEH) Lee Thomas—Advanced topic- lunch West conf. room</li> </ul>
11:10-12:00 AccidentlyUnintentional Ingestions (1.0 CEH) Dr. Edward Bottei  Noon-lunch begins  12:15-12:40 What's New in EMS Support (0.5 CEH) Interview with Vendors  12:15-13:05 ECGs—The Why behind the What We Do (1.0 CEH) Lee Thomas—Advanced topic- lunch West conf. room  13:15-14:05 On PurposeIntentional Exposures (1.0 CEH) Dr. Edward Bottei
11:10-12:00 AccidentlyUnintentional Ingestions (1.0 CEH) Dr. Edward Bottei  Noon-lunch begins  12:15-12:40 What's New in EMS Support (0.5 CEH) Interview with Vendors  12:15-13:05 ECGs—The Why behind the What We Do (1.0 CEH) Lee Thomas—Advanced topic- lunch West conf. room  13:15-14:05 On PurposeIntentional Exposures (1.0 CEH) Dr. Edward Bottei  14:10-15:00 Almost Board to Death? (1.0 CEH) Steve Mercer

18:30-21:30\* EMT Transition course (3.0 CEH) Kern Kemp (separate sign-up on registration form)

Separate special course:

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# Mobile Intensive Care Services, Mary Greeley Medical Center SUNDAY March 3, 2013 07:15-08:15 registration/check-in

08:15-09:05 The Good, the Bad, and the Ugly—Professionalism and Consequences in Medicine (1.0 CEH) David Schultz, IBM, CMBI; NREMT

09:10-10:25 What to Say and Do When the Cavalry Arrives (1.5 CEH) Clark Christensen, Executive Officer 2, IDPH

10:25-11:15 Pediatric Trauma-from Head to Toe (1.0 CEH) Sarah Seehase, ARNP, CPNP-AC

11:15-12:30 You Think That's Dangerous? (1.5 CEH) Jim Graham, Paramedic Specialist, Dallas County Deputy Sheriff

#### Separate special courses

08:15-11:15\* PEARS certification course--part II (must have taken part one on Friday March 1) (3.0 CEH) Darin Ruud

1:00-5:00\* Paramedic Transition Kern Kemp, Paramedic Specialist Bessie Myers Auditorium

#### Session-specific content descriptions:

EMS CEHs available; no nursing CEUs have been approved. We reserve the right to adjust room venues based on attendance; all sessions are held at Mary Greeley Medical Center. Topics and speakers subject to change based on availability (weather); every reasonable effort is made to deliver the programming as stated. Attendees are asked to park in the parking ramp located immediately south of the main Medical Center.

#### **Friday**

#### Unraveling the Mystery by John Hill, Paramedic, CCP

As the American population ages, EMS and other health-care professionals will face a flood of Alzheimer's patients. Deaths attributed to this disease are up 47%, and one in seven Americans over the age of 65 will develop the illness. Assessment and treatment of an Alzheimer's patient can be challenging, because the disease can mimic many other medical conditions. EMS providers will need excellent communication skills and a good understanding of the disease process to successfully interact and treat these patients.

Upon completion of this session, participants will be able to describe Alzheimer's disease, including incidence, pathology, symptoms and progression; describe the appropriate EMS interaction with the Alzheimer's patient, including the approach, assessment and management; and the ability to identify risk factors for development of Alzheimer's disease.

#### Pediatrics-Big Problems in Small Packages by Dr. Jonathan Burns, DO, Emergency Medicine

This session will include cases involving medical emergencies and the unique challenges of the sick child. Upon completion of this session, attendees should be able to indentify some of the differences in assessing and treating the pediatric medical emergency vs. adult.

**Behaving Badly: Our Best for Their Worst** by Jeff Messerole, PS, Clinical Instructor, AHA TC Coordinator, National Faculty, EMSAC representative and Chairperson QASP

Behavioral emergencies are increasing in occurrence and complexity. Resources are fewer; how do we effectively assess and treat behavioral emergencies in the out-of-hospital setting, especially when they may include out of control patients? A look at physical and chemical restraint, emergency committal, excited delirium and more.

### Heart Problems-Getting the Picture by Brian Helland

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Using cardiac case studies, this presentation looks at basic and advanced objectives in capturing key information in the assessment of suspected cardiac patients, and the impact of that information on their subsequent care. Patient medications, history, ECG and treatment goals will be highlighted.

### Getting SMART about Triage by Darin Ruud, Paramedic, EMSI

Upon completion of this interactive presentation, participants will be able to demonstrate and/or explain "

- 1. why triage of patients is important;
- 2. the various parts of SMART triage tag and the SMART triage system;
- 3. how to use the tags in a mass casualty incident;
- 4. special features of the system such as pediatric triage and contamination/decontamination identification.

### **Saturday**

#### **Respiratory Assessment** by Lee Thomas, Paramedic

An up-dated in-depth review of the respiratory system and the mechanics of both respiration itself and the way that we assess and treat it.

What's On Our Radar?--Timelines, Trends and Controversies in EMS by Jeff J Messerole, PS, Clinical Instructor, AHA TC Coordinator, National Faculty, EMSAC representative and Chairperson QASP

As a leader and a representative on state and national EMS-related boards, committees, and advisory groups, Jeff is uniquely positioned to comment on current and pending issues regarding EMS—such as AHA BLS & ACLS changes in 2015, current state protocol work on Sepsis, Shock, Fluids in trauma, Scene times, Lights and sirens, Airways-kings, LMAs, ventilators...and more!

**Brains-Knowing How & When to Break the Dammed Things (Folks with Strokes)** by Brian Helland What is the Coverdell registry and what does it have to do with you as an EMS provider? Field assessment and initial treatment, receiving facilities, and data collection are all key components in the evolving care of stroke patients. This presentation will also peek at the latest in treatment practices for stroke patients.

**Accidently...Unintentional Ingestions** by Dr. Edward Bottei, MD, FCCP, FACMT, Medical Director, Iowa State Poison Control Center

This an overview of many kinds of accidental ingestions that are perceived as emergencies and may result in 911 calls. As they are presented, the participants will get the opportunity to weigh in on whether they think the exposure is serious and what first actions they would take. Also a brief review of how to contact the Poison Control Center as resource and what to provide and what to expect

### What's New in EMS Support by MICS staff

This is an overview of some of the trends in safety, medical research and evolution of equipment designed to improve patient care and provider safety, that will be reviewed by our staff

#### **ECGs—the Why behind the What We Do** by Lee Thomas, Paramedic

This advanced level presentation is aimed at helping us understand what is going on when we obtain an ECG and why that is helpful in assessing the heart-what is the electrical and physiological basis behind each lead and what we are creating as we combine single and multiple lead tracings into electrocardiograms

**On Purpose...Intentional Exposures** by Dr. Edward Bottei, MD, FCCP, FACMT, Medical Director, Iowa State Poison Control Center

This an overview of deliberate ingestions and exposures—intoxicants, recreational substances, and poisons—recognizing them and understanding what the hazards are as well as what how to manage the initial stages of care. Traditional drugs of abuse, bath salts, huffing, "improvised" attempts at substance abuse as well as a look at deliberate poisonings.

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**Almost Board to Death?** By Steve Mercer, Executive Officer for center for Disaster Operations and Response; co-author/reviewer PHTLS

This presentation is a look at the current and evolving practices regarding spinal immobilization in the field. Participants should be able to:

- 1. identify at least three risks that current spinal immobilization practices may incur;
- 2. be able to discuss trends and controversies in standard and selective spinal immobilization

## Penetrating Trauma Clark Anderson, PA

This presentation will provide a review of penetrating trauma including a brief look at the physics, specific tissue and organ injuries, initial recognition and treatment, and special concerns with penetrating trauma.

## **EMS Response: Active Shooter Scene with Multiple Casualties** by Jeffrey Theulen, Nevada Public Safety Director, former Pottawattamie County Emergency Manager

Personal experience/review a real case where a gunman opened fire in a mall with multiple victims. Session participants will discuss the EMS response, challenges and successes, lessons learned and a discussion about responding to similar events

### **Sunday**

## The Good, the Bad, and the Ugly—Professionalism and Consequences in Medicine by David Schultz, IBM, CMBI; NREMT, Ret. Ames Police Dept.

This presentation looks at public safety professionalism and ethical behavior, includes a look at what is involved in the process of an investigation as it may be conducted by the Bureau of EMS and State of Iowa, and includes a look at the use of humor and both positive and negative consequences in medicine.

### What to Say and Do When the Cavalry Arrives by Clark Christensen, Executive Officer 2, IDPH

This topic looks at the practical "boots on the ground" issues of grassroots interaction with disaster response/management assets during a local catastrophic event. These assets may include local Medical Reserve Corps (MRCs) and Community Emergency Response Teams (CERTs), regional HazMat teams, state response teams such as Disaster Medical Assistance Teams (DMATs), Environmental Health Response Team (EHRT), Disaster Behavioral Health Response Team (DBHRT), Urban Search and Rescue Teams (USRT), Incident Management Teams (IMTs), not to mention federal response teams.

Using a scenario-based approach, this topic will look at response pathways and timelines, communications, interactions, scope and responsibilities in the interactions with "locals."

When and what kind of help may be available? Who calls for them? How do they arrive? How do they work in interaction with during the ongoing local response (who is in charge of who)? Documentation, payment, questions to consider.

### Pediatric Trauma-from Head to Toe by Sarah Seehase, ARNP, CPNP-AC

This presentation will look at the unique challenges that face caregivers when called to care for pediatric trauma.

After attending this session, attendees will be able to highlight pediatric trauma statistics, cite common mechanisms of injury, and review the pertinent head to toe assessment points of the pediatric trauma patient. They should also be able to discuss the importance of recognizing when a child has respiratory depression, how to identify shock and the importance of recognizing shock in pediatric patients. This session will also include a review of traumatic head injury and management in the pediatric population, as well as other common injuries.

### You Think That's Dangerous? by Jim Graham, Paramedic Specialist

Video games, Hollywood, television, and the internet have all influenced beliefs and shaped our understandings of dangerous situations and weapons. Real world experiences often are very different. This presentation looks at mistaken beliefs, real hazards, and reminders that participants should consider in avoiding or managing danger in their work. It also includes a look at how we can share those experiences and lessons with new recruits.

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### \*Special courses held during the conference:

**Friday Evening:** 

PEARS course part I (Friday) by Dean Rush, Paramedic

**Sunday Morning:** 

PEARS course part II (Sunday) Darin Ruud, Paramedic

Pediatric Emergency Assessment, Recognition and Stabilization (PEARS)

Must attend both sessions--part I and Part II--for certification

The American Heart Association developed the PEARS Provider Course for healthcare providers who might encounter pediatric patients in their profession but who do not routinely provide care for children with high-acuity illness or injury. This course is NOT intended for those who require credentialing in advanced pediatric skills or who are routinely involved in resuscitation. PEARS providers may include Basic EMTs and Intermediates, as well as healthcare providers who care for children outside critical care areas Objectives

- 1. Assess a seriously ill or injured child using the general and primary assessments
- 2. Describe the "assess-categorize-decide-act" approach to recognition and management of the child in respiratory distress or failure, shock, or cardiac arrest
- 3. Demonstrate appropriate actions to take for stabilizing a critically ill or injured child during the initial minutes of response until the next level of care arrives
- 4. Recognize and take appropriate actions for a child in cardiac arrest

Use elements of effective communication as a team member

### **Saturday Evening:**

**EMT Transition** by Kern Kemp, Paramedic Specialist

Key content necessary for EMT-Bs to transition to the new EMT designation is provided (three consecutive one-hour sessions) Content includes areas defined by Bureau of EMS to be Transition content for Iowa EMT-Bs

#### **Sunday Afternoon:**

Paramedic Transition by Kern Kemp, Paramedic Specialist

Key content necessary for Paramedic Specialists to transition to the new Paramedic designation is provided (attendees need to attend the Friday session-"behaving Badly" or have other documentation of education/experience in recognizing/treating excited delirium, to complete minimum coverage of all required transition topics)

Content includes areas defined by Bureau of EMS to be Transition content for Iowa Paramedic Specialists

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## APPLICATION

Applications are processed on a first come, first served basis. Your registration for Update 2013 will only be confirmed after both registration and payment have been received. If we are unable to accommodate your registration request, we will contact you and ask if you would like to be placed on a waiting list.

Please print clearly to help us provide you the best possible service. Full Name: \_\_\_\_\_\_E-Mail: \_\_\_\_\_ Mailing Address: City and State: Zip: Phone:\_\_\_\_\_\_ Certification(s) and License Number(s): \_\_\_\_\_ EMS Service Affiliation: What form of payment are you submitting with this application? Day-by-day registration fees---do not include cost of special courses-see below Friday \$30 \_\_\_Saturday \$75 Sunday \$30 \_\_\_\_Friday-Saturday \$100 Friday-Saturday-Sunday \$125 **Special courses:** Friday/Sunday PEARS course \$75 Early registration-to receive text-limited to eight people-must attend both Friday evening and Sunday morning sessions for certification. Saturday evening EMT Transition \$25 Sunday afternoon Paramedic transition\* \$45 \*Attendees need to attend Friday's Behaving Badly presentation or already have education/experience in recognizing and treating excited delirium to complete minimumTransition requirements for Paramedic Specialist to Paramedic transition

## Please print this form and fill it out legibly and completely to apply.

Applications must be returned with your check, department purchase order or money order to:

Mobile Intensive Care Services, Update 2013 Committee, Mary Greeley Medical Center, 1111 Duff Avenue, Ames, Iowa 50010

Questions? Beth Frandsen (frandsen@mgmc.com) 515-239-2108 or

Chris Perrin ( perrinc@mgmc.com ) or call 515-956-2875

Vendors contact: Clayton Gregg ( gregg@mgmc.com ) 515-239-2109