

## Strategy for Measuring Out-of-Hospital Cardiac Arrest Survival

### *MIEMSS to Integrate eMEDS® with CARES Data*

The Centers for Disease Control and Prevention (CDC) in collaboration with Emory University and American Heart Association initiated the Cardiac Arrest Registry to Enhance Survival (CARES), a program of data collection, in an effort to increase survival from out-of-hospital cardiac arrests (OHCA). CARES is a secure, web-based data management system in which participating EMS and hospital programs can enter local data and generate their own OHCA reports. EMS Operational Programs and hospitals will be able to assess their performance and outcomes for response and treatment of OHCA with aggregate statistics at the local, state, or national level and discover practices that could improve emergency and cardiac care.

According to the CARES website (<https://mycares.net>), approximately 300,000 people in the United States experience an OHCA or sudden death each year; approximately 92% of people who experience an OHCA die. Median reported rates of survival to hospital discharge are 7.8%, which has remained virtually unchanged for the past 30 years.

Without a uniform and reliable method of data collection, communities cannot measure the effectiveness of their response systems, nor can they assess the impact of interventions designed to improve OHCA survival. Participation in an OHCA registry enables communities to compare patient populations, interventions, and outcomes with the goal of identifying opportunities to improve quality of care and ascertain whether resuscitation is provided according to evidence based guidelines. (Source: <https://mycares.net/sitepages/overview.jsp>).

MIEMSS is in the process of modifying the eMEDS® data set to align with the CARES data set for EMS data collection. MIEMSS will be establishing validation rules that will assure completion of these essential data points. Implementation is anticipated in the spring of 2014. This data will automatically be submitted to the national CARES database from the eMEDS® record, after which hospitals will receive notification to complete the remaining six data points regarding discharge outcomes on all OHCA patients. The CARES data collection process is patient-centric and is in compliance with HIPAA requirements. The submitted data will link the hospital outcome to the individual EMS patient care record, thus assuring an accurate survival rate for all out of hospital cardiac arrests. The Statewide EMS Plan, which provides short and long

term EMS System guidance, includes action steps that enhance focus on evaluating patient outcomes for time-critical injury or illness.

With the implementation of high-performance uninterrupted CPR, EMS programs in Howard and Anne Arundel Counties have reported more than double the number of post cardiac arrests that result in a return of spontaneous circulation. Howard County is currently looking at survival to discharge and Cerebral Performance Category (CPC) data, and has demonstrated improvement in both areas. MIEMSS would like to be able to provide every EMS Operational Program with similar measures allowing them to compare against statewide averages and improve survival from OHCA.

## Pyramid 2013 Conference



Tactical Emergency Medical Services, High Performance CPR, Crime Scene Preservation, Patient Tracking and Triage, the new MSP AW-139 Helicopters, Trauma Case Studies, and Trauma Jeopardy! What is all this? These are just a few of the topics that will be presented at Pyramid 2013 at the Bowie Conference Center.

The Conference is nearly here, but not to fear...if you haven't yet registered you may do so at the Conference as long as spaces are still available. For more information, contact Katie Allen ([allenkl@co.cal.md.us](mailto:allenkl@co.cal.md.us)) or Kim Jones ([jonesks@co.cal.md.us](mailto:jonesks@co.cal.md.us)) or call 410-535-1600, ext. 2668 or 2304.

Full Conference: November 2 & 3, 2013

Preconference: October 31 & November 1, 2013

Location: Comfort Inn & Conference Center, Bowie, MD

To register online: [www.regonline.com/pyramid](http://www.regonline.com/pyramid)

## The Maryland Ambulance Safety 2nd Annual Summit Update

The Maryland Ambulance Safety Task Force and its subcommittees have been working hard over the past two years. MIEMSS, in collaboration with the Maryland Fire & Rescue Institute (MFRDI), Maryland State Firemen's Association (MSFA), Maryland EMS-C Office, and jurisdictional and commercial ambulance companies is hosting an informative Educational Summit to promote a culture of ambulance safety. Risk factors exist in ambulance safety; however, it is Maryland's goal to reduce ambulance crashes and injuries to zero by creating a culture of safety through the adoption of best practices. Attendees will hear presentations on ambulance safety in Maryland and national best practices.

This summit will provide updated information on crashes in Maryland, national vehicle standards, model programs for ambulance design, and restraint use. The day will be dedicated to continuing to build the Culture of Safety for public safety professionals. It will be held on November 5, 2013, from 9:00 am to 4:00 pm at the Howard County Public Safety Training Facility, James N. Robey Public Safety Training Center, 2200 Scott Wheeler Drive, Marriottsville, MD 21104. Please see pages 3 & 4 for the agenda and registration form.

### Dr. Kevin Pearl Named Assistant Region IV Medical Director



MIEMSS welcomes Dr. Kevin Pearl as the new Assistant Region IV Medical Director. Photo courtesy of Dr. Kevin Pearl.

The Region IV Council is excited to announce the appointment of Dr. Kevin Pearl as the Assistant Region IV Medical Director. Dr. Pearl, a Frederick County native, is a Rural EMS Fellow at the University of Maryland. His roles as Assistant Region IV Medical Director will be primarily educational in nature. Providers and officials can expect to see him out and about in the community, attending meetings, and assisting Region IV Medical Director Dr. Thomas Chiccone in the day-to-day requirements of the medical director. Dr. Pearl comes to Region IV from Drexel University College of Medicine where he completed his residency in Emergency Medicine. He is currently an attending physician at three of the University of Maryland Shore Regional Health System locations (Easton, Dorchester, and Queen Anne's). Dr. Pearl has also been appointed the Associate Medical Director of Talbot County EMS. Region IV welcomes Dr. Pearl to Maryland's Eastern Shore and looks forward to providing a number of educational opportunities for him during his two-year fellowship.

## New Commercial Ambulance Company Licensed in Maryland

The State Office of Commercial Ambulance Licensing and Regulation is pleased to welcome GEM Ambulance, LLC (License # 137) as a newly-licensed Basic Life Support (BLS) service. GEM Ambulance, LLC joins the Maryland commercial services industry as our 41st licensed commercial ambulance service. Their main office is based out of Lakewood, New Jersey, and they have opened a satellite office in Newark, Delaware, for their Maryland operations.

### Save the Date!

#### Winterfest EMS Conference



##### Preconference:

January 23 – 24, 2014

##### Full conference:

January 25 – 26, 2014

**More info coming soon!**

## Licensure and Certification TIDBIT

**Q.** I am about to be deployed out of the country with my military unit, but I don't want to lose my Maryland provider certification. What can I do?

**A.** Thank you for your service to our country! MIEMSS has a policy for service members called to active duty. This policy allows us to place your provider certification in a Military inactive status during the timeframe of your deployment. To be placed on Military inactive status, simply make the request in writing to MIEMSS. Upon your return to the United States, we will need a copy of your orders either releasing you from active duty or continuing your active duty within the state of Maryland. A temporary card will be issued for up to one year from the date of your return allowing you the time to catch up on any required continuing education. The requirements for each provider level can be found at

<http://www.miemss.org/home/EMSProviders/LicensureCertifications/MilitaryPolicy/tabid/96/Default.aspx>.



## ***Maryland Ambulance Safety Summit November 5, 2013***

**LOCATION: Howard County James N. Robey Public Safety Training Center  
2200 Scott Wheeler Drive, Marriottsville, Maryland 21104**

### **PROGRAM AGENDA**

- 9:00 AM**      **Registration with coffee & tea**
- 9:30 AM**      **Welcome & Program Overview**  
**Chief William Goddard & Dr. Richard Alcorta**
- 9:45 AM**      **Maryland's EMS Culture of Safety – Moving Forward**  
**Dr. Richard Alcorta, MIEMSS State EMS Medical Director**
- 10:30 AM**      **Break**
- 10:45 AM**      **Ambulance Design: Update on Standards & Guidelines**  
**Jennifer Marshall, National Institute of Standards & Technology (NIST)**
- 11:30 AM**      **Designing an Ambulance for Safety and Comfort**  
**Bill Dousa, BSE, NREMT-I, President**  
**Harford County Volunteer Fire & EMS Association**
- 12:15 PM**      **Networking Lunch with Tours available**  
**Mobile Driver Simulator from Anne Arundel County**  
**New Ambulance Technology for Safety**
- 1:15 PM**      **Best Practice Break Out Sessions (Repeated)**  
**Please select two sessions**
- 1. Restraint Use Implementation and Enforcement**  
**Baltimore City – Alex Perricone, NRP and Dr. Ben Lawner**
  - 2. Driver Recommendations: Screening, Training, Monitoring**  
**Allen Williams, MFRI**
  - 3. Lights and Sirens: Recommendations for Policy and Practices**  
**Bill Dousa, BSE, NREMT-I and Dr. Richard Alcorta**
- 2:15 – 3:00 PM Repeated Sessions - Best Practice Break Out Sessions**
- 3:00 PM**      **Summary of Best Practice Sessions & Wrap Up**
- 3:30 PM**      **Adjourn & Safely Travel Home**

*This Summit is supported by the Maryland Ambulance Safety Task force partners: MIEMSS, MFRI, MSFA, local jurisdictional and commercial ambulance companies*

# Maryland Ambulance Safety Summit

**November 5, 2013**

**9:00 am to 3:30 pm**

**Location: James N. Robey Public Safety Training Center  
2200 Scott Wheeler Drive Marriottsville, MD 21104**

Please join MIEMSS, MSFA, MFRI and EMS, Fire and Rescue jurisdictional at the Second Maryland Ambulance Safety Summit. This Educational Summit will include updated information on crash data, national standards, and best practice that promote a culture of safety.

**Please Print:**

Name: \_\_\_\_\_

Organization: \_\_\_\_\_

Title: \_\_\_\_\_

Prov. ID: \_\_\_\_\_

Primary Affiliation: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email Address: \_\_\_\_\_

There will be three repeated breakout sessions in the afternoon. Please select one session for each of the two time frames. Final feedback and wrap up general session will follow.

1:15pm – 2:00pm

\_\_\_\_\_  
Restraint Use Implementation  
and Enforcement

\_\_\_\_\_  
Driver Recommendations:  
Screening, Training, Monitoring

\_\_\_\_\_  
Lights and Sirens: Recommendations  
for Policy and Practices

2:15pm – 3:00pm

\_\_\_\_\_  
Restraint Use Implementation  
and Enforcement

\_\_\_\_\_  
Driver Recommendations:  
Screening, Training, Monitoring

\_\_\_\_\_  
Lights and Sirens: Recommendations  
for Policy and Practices

***Registration is on a first come basis and seating is limited.***

***You must register in order to attend.***

Please return completed form to Barbara Goff at [bgoff@miemss.org](mailto:bgoff@miemss.org) or by fax: 410 706-4768



## Hazardous Materials Drill Conducted in Easton

The University of Maryland Shore Medical Center (UMSMC) at Easton conducted a full-scale hazardous materials drill on the evening of Thursday, September 19, 2013. While the medical center staff was aware there would be a drill that evening, hospital planners made the scenario involving an overturned tanker with toxic chemicals during an Easton High School football game a surprise. Simultaneously, the hospital conducted a tabletop exercise with non-emergency department staff in order to review emergency procedures for other hospital units.

MIEMSS Region IV was invited to observe both the full-scale and tabletop exercises. Talbot County Department of Emergency Services also participated and was able to conduct the first full-scale drill with their new ambulance bus, which was placed in service this past August. Region IV Medical Director Dr. Thomas Chiccone, Talbot County EMS Chief Brian LeCates, and a number of Talbot County EMS providers corralled approximately 20 volunteers and encouraged them to make the drill realistic for hospital personnel by being noisy, speaking in different languages, and coughing throughout the



*University of Maryland Shore Medical Center at Easton conducted a full-scale hazardous materials drill this past September. Representatives from MIEMSS Region IV were invited to observe both the full-scale drill and tabletop exercises. Photo courtesy of Anna Sierra.*

exercise. The Hospital Emergency Response Team (HERT) responded quickly, set up their mobile decontamination equipment, and successfully decontaminated the volunteer victims outside of the hospital. From there,

Emergency Department (ED) staff triaged patients and followed medical surge emergency operations procedures.

The hospital staff was enthusiastic and responsive to the exercise despite scenario curveballs such as a simulated bomb threat and subsequent ED lockdown. MIEMSS Region IV thoroughly enjoyed the opportunity to see both Talbot DES and UMSMC at Easton in action and look forward to being included in future drills.

## Safe Kids Baltimore Promotes Safe Walking on International Walk to School Day

On October 9, 2013, Safe Kids Baltimore—with assistance from the University of Maryland Children's Hospital, Baltimore City Safe Routes to School, and local FedEx volunteers—led an educational walk with children, parents, grandparents, and teachers near Highlandtown Elementary School in Baltimore City to advocate for safer walking for school children. According to the World Health Organization, road traffic injuries are the second leading cause of death among children ages 5 to 14 worldwide. More than 61 children are injured every day severely enough to seek medical attention and almost 500 children are killed every year. Safe Kids Baltimore, Baltimore City Safe Routes to School, and FedEx are work together to raise awareness, promote pedestrian safety, create safer routes for walking, and emphasize the importance of increasing physical activity among children.



*On October 9, children, parents, grandparents, and teachers practiced safer walking in Baltimore City with the assistance of local advocacy groups.*



# Halloween Safety Tips

Witches, werewolves, ghosts and goblins, as well as many other mythical and magical creatures, are making an appearance at a neighborhood near you. How can we keep them safe?

Halloween presents some unique environmental and social situations, even for children that have been following safe walking rules. The dusk and darkness of the evening hours, the number of children on the sidewalks and roads, and the variety of costumes and masks place children at a higher risk to become victims of pedestrian-motor vehicle crashes. Even older children who normally practice safety rules can be caught up in the excitement of trick-or-treating and dart in front of traffic.

Most Halloween injuries involve environmental hazards, such as uneven pavements, high steps, or unseen obstacles. The risk for falls while walking and climbing stairs is increased due to the combination of costumes, the dusk, excitement, and sometimes fallen and wet leaves on the ground. Motorists and children are both at particular risk for crashes due to the difficulty of seeing young children and anyone in dark costumes.

Many parents are also concerned about the contents of the treats that children bring home and about strangers in the neighborhood. As an alternative to walking door to door, some communities have organized Halloween parties.

Following is a list of safety recommendations from the American Academy of Pediatrics ([www.aap.org](http://www.aap.org)) so children and adults alike can have a fun and safe Halloween.

## ALL DRESSED UP:

- ★ Plan costumes that are bright and reflective. Make sure that shoes fit well and that costumes are short enough to prevent tripping, entanglement, or contact with flame.
- ★ Consider adding reflective tape or striping to costumes and trick-or-treat bags for greater visibility.
- ★ Because masks can limit or block eyesight, consider non-toxic makeup and decorative hats as safer alternatives. Hats should fit properly to prevent them from sliding over eyes.
- ★ When shopping for costumes, wigs, and accessories look for and purchase those with a label clearly indicating they are flame resistant.
- ★ If a sword, cane, or stick is a part of your child's costume, make sure it is not sharp or too long. A child may be easily hurt by these accessories if he or she stumbles or trips.
- ★ Obtain flashlights with fresh batteries for all children and their chaperons.
- ★ Do not use decorative contact lenses without an eye examination and a prescription from an eye care professional. While the packaging on decorative lenses will often make claims such as "one size fits all," or "no need to see an eye specialist," obtaining decorative contact lenses without a prescription is both dangerous and illegal. This can cause pain, inflammation, and serious eye disorders and infections, which may lead to permanent vision loss.
- ★ Teach children how to call 9-1-1 (or their local emergency number) if they have an emergency or become lost.

## CARVING A NICHE:

- ★ Small children should never carve pumpkins. Children can draw a face with markers. Then parents can do the cutting.
- ★ Consider using a flashlight or glow stick instead of a candle to light your pumpkin. If you do use a candle, a votive candle is safest.
- ★ Candlelit pumpkins should be placed on a sturdy table, away from curtains and other flammable objects, and should never be left unattended.

## HOME SAFE HOME:

- ★ To keep homes safe for visiting trick-or-treaters, parents should remove from the porch and front yard anything a child could trip over such as garden hoses, toys, bikes, and lawn decorations.
- ★ Parents should check outdoor lights and replace burned-out bulbs.
- ★ Wet leaves or snow should be swept from sidewalks and steps.
- ★ Restrain pets so they do not inadvertently jump on or bite a trick-or-treater.

## ON THE TRICK-OR-TREAT TRAIL:

- ★ A parent or responsible adult should always accompany young children on their neighborhood rounds.
- ★ If your older children are going alone, plan and review the route that is acceptable to you. Agree on a specific time when they should return home.
- ★ Only go to homes with a porch light on and never enter a home or car for a treat.
- ★ Because pedestrian injuries are the most common injuries to children on Halloween, remind Trick-or-Treaters to:
  - ★ Stay in a group and communicate where they will be going.
  - ★ Remember reflective tape for costumes and trick-or-treat bags.
  - ★ Carry a cellphone for quick communication.
  - ★ Remain on well-lit streets and always use the sidewalk.
  - ★ If no sidewalk is available, walk at the far edge of the roadway facing traffic.
  - ★ Never cut across yards or use alleys.
  - ★ Only cross the street as a group in established crosswalks (as recognized by local custom). Never cross between parked cars or out driveways.
- ★ Don't assume the right of way. Motorists may have trouble seeing Trick-or-Treaters. Just because one car stops, doesn't mean others will!
- ★ Law enforcement authorities should be notified immediately of any suspicious or unlawful activity.

## HEALTHY HALLOWEEN:

- ★ A good meal prior to parties and trick-or-treating will discourage youngsters from filling up on Halloween treats.
- ★ Consider purchasing non-food treats for those who visit your home, such as coloring books or pens and pencils.
- ★ Wait until children are home to sort and check treats. Though tampering is rare, a responsible adult should closely examine all treats and throw away any spoiled, unwrapped, or suspicious items.
- ★ Try to ration treats for the days following Halloween.

# Ocean City Walk Smart Safety Campaign Reduces Pedestrian Incidents

Ocean City is an iconic Maryland summer vacation spot, attracting travelers from all over to enjoy the beach, boardwalk, restaurants and night life. In 2012 Ocean City experienced a string of pedestrian accidents and deaths during the tourist season that threatened the town's appeal to families. According to local news agency WBOC, there were 44 pedestrian incidents, including 13 injuries and 2 fatalities. In order to combat the significant increase in incidents, the Town of Ocean City, Ocean City Police Department, Maryland State Highway Administration (SHA), and other local businesses and agencies developed the "Walk Smart!" campaign. The campaign relies on certain principles of safety to improve the overall transportation environment of Ocean City for pedestrians, cyclists, and drivers alike (<http://oceancitymd.gov/WalkSmart/>).

Through engineering, Ocean City and Maryland SHA worked to improve safety on the roadways, particularly at intersections. The Ocean City Police Department undertook the enforcement challenge, addressing both drivers and pedestrians who are not following the rules of the road. Crab the Lifeguard educated residents and visitors alike on using crosswalks, following signals, and being aware of your environment through banners, billboards, and media advertisements. The campaign also targeted high school seniors and the night life crowd, educating likely late-night walkers and drivers on how to stay alert and watch for hazards.

Preliminarily, Walk Smart! efforts are showing results. In comparison to January through June 2012, in the first six months of 2013 there was a 52% reduction in total pedestrian crashes and a 73% reduction in pedestrian crashes on State roads. Ocean City Police Department indicated that pedestrian incidents along MD Route 528 (Coastal Highway) and MD Route 378 (Baltimore Avenue) were down 56% between January 1 and June 30, 2013. Pedestrian incidents in the special targeted area of Coastal Highway between 52nd and 59th Street have dropped 100% during the same period.



*A very successful Walk Smart! Campaign was launched this summer in Ocean City, Maryland, that helped reduce pedestrian injuries in the seaside town.*

**MIEMSS, Maryland EMS News**  
**653 W. Pratt St., Baltimore, MD 21201-1536**



**Governor Martin O'Malley**  
**Lt. Governor Anthony Brown**

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