



# Washington Update

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**November 30, 2011**

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**1. NASEMSO Congratulates Terry Mullins on Appointment to NEMSAC**

Secretary of Transportation Ray LaHood has appointed Mr. Terry Mullins, Chief of the Arizona Bureau of Emergency Medical Services, to the National EMS Advisory Council (NEMSAC). Mr. Mullins, who will represent State EMS Directors on the Council, has experience working with EMS policy issues on the national, state, and local levels and has served as a technical advisor to NHTSA on a number of projects. The Council, first chartered in 2007,

provides expert EMS advice to the Department of Transportation and the Federal Interagency Committee on EMS (FICEMS). It makes recommendations on key issues in emergency medical services, including recruitment and retention of EMS personnel, patient and provider safety, research and EMS system improvement and sustainability. Secretary LaHood re-charted the Council for another two years in April of this year. The next NEMSAC meeting will be December 13-14, 2011, in Arlington, VA. Location and registration information can be found [here](#).

**2. NASEMSO (STILL) Accepting Calendar Items for 2012**

NASEMSO welcomes calendar items for EMS oriented conferences in 2012, particularly state and national venues. Information should include the name of the event, date, location, web site and/or contact person. Please send information to NASEMSO Program Manager [Kathy Robinson](#) and/or Webmaster [Karen Thompson](#).

**3. EMSC State Partnership Regionalization of Care (SPROC) Grant Released**

The Health Resources and Services Administration (HRSA) has [released](#) the new funding opportunity for the EMSC State Partnership Regionalization of Care (SPROC) Demonstration Grant Program. This funding opportunity seeks grant proposals for the development of model programs to improve the transfer of pediatric patients to specialty medical centers through the process of a regionalized system of care. The populations of focus for this grant program are children and families in tribal, U.S. territorial, insular, or rural areas that are in geographically isolated areas with limited access to pediatric specialty resources that are needed to treat severely ill and injured children. To apply for this funding opportunity, visit [Grants.gov](#). Applications are due February 3, 2012, by 8:00 pm ET. A conference call will be held to answer technical questions related to the Grant Guidance. Specific details and call-in information will be included in the Guidance. For additional information, please contact [Theresa Morrison-Quinata](#).

**4. SAMHSA Awards \$1.1 Million to the National Association of State Alcohol and Drug Abuse Directors**

The Substance Abuse and Mental Health Services Administration (SAMHSA) awarded a \$1.1 million grant to the National Association of State Alcohol and Drug Abuse Directors (NASADAD) to provide support for states as they navigate the challenges and opportunities presented in the changing health and human services environment. The grant will provide assistance to substance abuse Single State Agencies to increase service capacity, including recovery support services, develop integrated systems of care, and improve behavioral health outcomes – all key elements of effectively administering SAMHSA’s Substance Abuse Block Grant. The grant will also assist states in their response to emerging issues, such as health reform (focusing on improving quality, offering individuals opportunities to be partners in their health care decisions), parity, information technology innovations, and implementation of evidence-based practices. SAMHSA recently moved to help states use block grant funding to address their communities’ behavioral health challenges. SAMHSA is streamlining application and funding procedures for all block grants by establishing uniform applications, and reporting dates and by offering states and territories the option to submit one, coordinated plan for both the Mental Health and Substance Abuse block grants.

**5. The Power of Policy--Educating, Advocating, Lobbying: ...What Role Can Health Department Staff Play?**

This American Public Health Association (APHA) webinar, the second in a series focused on policy as a tool for population health improvement, will discuss the legal distinctions between policymaker education, advocacy, and lobbying, and clarify what policy activities health department staff can legally engage in. The webinar will feature the former chief legal advisor to the CDC discussing the importance of health departments engaging elected officials on public health matters and providing guidance for related policy activities, an expert on lobbying laws from the Alliance for Justice discussing the various legal definitions of lobbying, and a former state health

department bureau director sharing lessons learned from the field about how to effectively and legally engage in policy work. [Click here to register](#). If you are unable to participate in the webinar, a recording will be posted on [APHA's Web site](#)

**6. NEDSS Assesses State Disease Surveillance Capacity**

The National Electronic Disease Surveillance System (NEDSS) is a web-based infrastructure for public health surveillance data exchange between CDC and the 50 states. In 2007, the Council of State and Territorial Epidemiologists (CSTE) conducted an assessment to evaluate states' electronic disease surveillance capacity. In 2010, CSTE conducted a follow-up assessment to evaluate the operational status and progress of integration, interoperability, and capacity of state electronic disease surveillance systems. This report summarizes the results of that assessment, which indicated a 17.5% increase from 40 states in 2007 to 47 states in 2010 with fully operational general communicable disease (GCD) electronic surveillance systems, a 211.5% increase from 13 to 39 states in the number of systems that were interoperable, a 22.4% increase from 23 to 34 states in the number with integrated systems, and a 20.0% increase to 42 states with the capacity to receive electronic laboratory reports (ELRs). New Centers for Medicare and Medicaid Services rules for meaningful use of health information technology encourage data exchange between electronic health record systems and public health agencies, including submission of ELRs. To meet national goals for health information exchange to improve population health, variation in disease surveillance systems should decrease, and functionality should increase. View the [complete report...](#)

**7. FCC Reissues Notice on Deadline for Narrowband Transition and Waivers**

The Federal Communications Commission (FCC) has reissued a Public Notice to remind licensees, frequency coordinators, equipment vendors, and other interested parties of the FCC January 1, 2013 deadline for private land mobile radio services in the 150-174 MHz and 421-512 MHz (VHF/UHF) bands to migrate to narrowband (12.5 kHz or narrower) technology. The Notice also provides guidance for licensees that intend to submit requests for waiver of the deadline and sets forth additional information regarding the transition to narrowband technology. [For more information...](#)

**8. NEMSIS Version 3.1.0 Now Available**

The revision process of the Version 3 dataset has been conducted in concert with the acquisition of an American National Standards Institute (ANSI) Approval of the NEMSIS Dataset. ANSI approval requires the use of a Standards Development Organization (SDO) to help harmonize the NEMSIS standard with other national standards in the pre-hospital and emergency department settings. Health Level 7 (HL7) is a recognized health care SDO, and NEMSIS has chosen this organization to accomplish this task. The Version 3 revision has included input from EMS stakeholder across the nation include EMS agencies users and vendors of software products. Vendors create products that are used to send and receive EMS data in the proper XML format from agencies to states, then on to the National EMS Database. Users and vendors have extensive knowledge of EMS electronic patient care record documentation and data collection. These individuals and organizations have played a key role in the development and finalization of the NEMSIS Version 3.1.0 dataset. [For more information...](#)

**9. National Disaster Recovery Framework Available from FEMA**

The Federal Emergency Management Agency (FEMA) recently released the *National Disaster Recovery Framework* (NDRF.) The NDRF provides guidance that enables effective recovery support to disaster-impacted States, Tribes and local jurisdictions. It provides a flexible structure that enables disaster recovery managers to operate in a unified and collaborative manner and focuses on how best to restore, redevelop and revitalize the health, social,

economic, natural and environmental fabric of the community and build a more resilient Nation. Fundamentally, it aligns with the National Response Framework and is a construct to optimally engage existing Federal resources and authorities, and to incorporate the full capabilities of all sectors in support of community recovery. The NDRF captures resources, capabilities and best practices for recovering from a disaster. [Download the NDRF...](#)

**10. First Deliverable Arrives Under Presidential Policy Directive (PPD) 8**

The Department of Homeland Security announced the release of the country's first-ever National Preparedness Goal. The goal is the first deliverable required under Presidential Policy Directive (PPD) 8: National Preparedness, which was released in April 2011. The goal sets the vision for nationwide preparedness and identifies the core capabilities and targets necessary to achieve preparedness across five mission areas laid out under PPD 8: prevention, protection, mitigation, response and recovery. The [full goal](#) can be found online at [www.fema.gov/ppd8](http://www.fema.gov/ppd8).

**11. Study Identifies Possible Therapy for Radiation Sickness**

A combination of two drugs may alleviate radiation sickness in people who have been exposed to high levels of radiation, even when the therapy is given a day after the exposure occurred, according to a study led by scientists from Dana-Farber Cancer Institute and Children's Hospital Boston. Mouse studies of other potential therapies suggest they would be effective in humans only if administered within a few minutes or hours of radiation exposure, making them impractical for use in response to events involving mass casualties. In contrast, the larger time window for administering the two-drug regimen raises the prospect that it could become a mainstay of the response to public health threats such as a nuclear power plant accident or nuclear terror attack. In a paper published online by the journal *Science Translational Medicine*, the scientists report the beneficial effects, in mice, of a combination of a fluoroquinolone antibiotic (similar to the commonly used human antibiotic ciprofloxacin, or "Cipro") and a synthetic version of the natural human infection-fighting protein BPI. [For more information...](#)

**12. DHS Roundtable Highlights Active Shooter Awareness**

The 2011 Critical Infrastructure Learning Series provides one-hour Web-based seminars conducted by senior critical infrastructure protection experts on the tools, trends, issues, and best practices for infrastructure protection and resilience. On Sept. 27, 2011, DHS hosted a 90-minute interactive virtual roundtable designed to help the private and public sector understand the importance of developing an emergency response plan and the need to train employees on how to respond if confronted with an active shooter. Participants learned about the three types of active shooters—workplace/school, criminal, ideological—and how their planning cycles and behaviors differ. The recording of this interesting roundtable is now available on the [DHS web site](#).

**13. FEMA to Engage Stakeholders in New “Think Tank”**

FEMA recognizes that the best solutions to the challenges we face are generated by the people and the communities who are closest to these challenges. It is essential that these partners are invited to the table to actively participate in thought-provoking discussions. That is why we are reaching out to state, local, and tribal governments, and to all members of the public, including the private sector, the disability community, and volunteer community, to seek their input on how to improve the emergency management system. FEMA wants to hear your ideas and suggestions, to both explore best practices and generate new ideas. The FEMA Think Tank will help facilitate these conversations and encourage further discussion. Two ways to participate include an online forum and monthly conference calls with Deputy Administrator Rich Serino. [For more information...](#)

**14. GAO Letter Report Highlights Nonfederal Capabilities for National Biosurveillance**

The Implementing Recommendations of the 9/11 Commission Act directed the Government Accounting Office (GAO) to report on biosurveillance at multiple jurisdictional levels. In June 2010, GAO recommended that the National Security Staff lead the development of a national biosurveillance strategy, which is now under development. A new GAO report focuses on nonfederal jurisdictions, which own many of the resources that support a national capability. To conduct this work, GAO interviewed select federal-agency, jurisdiction, and association officials and reviewed relevant documents. To collect information on federal efforts and challenges, the GAO also sent standardized questionnaires to seven states and two cities. In its recommendation to the Homeland Security Council (HSC) in the Executive Office of the President, the GAO suggests that the HSC should direct the National Security Staff to ensure that the national biosurveillance strategy (1) incorporates a means to leverage existing efforts that support nonfederal biosurveillance capabilities, (2) considers challenges that nonfederal jurisdictions face in building and maintaining biosurveillance capabilities, and (3) includes a framework to develop a baseline and gap assessment of nonfederal jurisdictions' biosurveillance capabilities as part of its implementation of GAO's previous recommendation for a national biosurveillance strategy. [For more information...](#)

In related news, President Obama has issued an Executive Order directing the FDA and Department of Justice to take action to help further reduce and prevent drug shortages, protect consumers, and prevent price gouging. These additional steps for early notification will help achieve some of the goals of bipartisan legislation in Congress, which the President supports, that will strengthen the FDA's ability to prevent prescription drug shortages in the future. [For more information...](#)

**15. ACIP Reissues Immunization Recommendations for HCP and EMS**

A new report updates the previously published summary of recommendations of the Advisory Committee on Immunization Practices (ACIP) and the Hospital Infection Control Practices Advisory Committee (HICPAC) for vaccinating health-care personnel (HCP) in the United States. This report summarizes all current ACIP recommendations for vaccination of HCP and does not contain any new recommendations or policies. The recommendations provided in this report apply, but are not limited, to HCP in acute-care hospitals; long-term-care facilities (e.g., nursing homes and skilled nursing facilities); physician's offices; rehabilitation centers; urgent care centers, and outpatient clinics as well as to persons who provide home health care and emergency medical services. [For more information...](#)

**16. New OSHA Guide Provides Wealth of PPE Compliance Information**

The Occupational Safety and Health Administration (OSHA) recently posted a new PPE compliance guide that might be useful for EMS managers. Titled "*Small Entity Compliance Guide for the Respiratory Protection Standard*," this Guide is intended to help small businesses comply with OSHA's Respiratory Protection standard (63 FR 1152; January 8, 1998). OSHA's goal for this document is to provide small entities with a comprehensive step-by-step guide complete with checklists and commonly asked questions that will aid both employees and employers in small businesses with a better understanding of OSHA's respiratory protection standard. [For more information...](#)

**17. New NIOSH Report Highlights Workplace Falls**

To advance global knowledge of occupational fall injuries, the International Conference on Fall Prevention and Protection (ICFPP) was convened to provide a forum for researchers from NIOSH, its stakeholders, and the community of fall-prevention specialists and experts to present research findings, recommendations and expert advice on the latest tools and methods to reduce the incidence of injury from falls. At the conference, a wide variety of research approaches and methods were presented, and these approaches reflected the multidisciplinary

orientation of the different stakeholders in attendance, as well as the individual interests and expertise of participating researchers. NIOSH is pleased to present the findings from this conference in these proceedings. This document represents a wealth of knowledge from experts and informed stakeholders on the best way to understand, prevent, and control fall-related risk exposures. Click to download-- [Research and Practice for Fall Injury Control in the Workplace: Proceedings of International Conference on Fall Prevention and Protection](#)

**18. NIST and Partners Seek Input on Safer Ambulance Designs**

The National Institute of Standards and Technology (NIST) is seeking input from paramedics, emergency medical technicians (EMTs) and other interested parties on the development of new design guidelines for ambulances to reduce the crash risk to emergency workers. Emergency medical service (EMS) workers riding in the back of ambulances are at high risk of suffering injuries during a crash or a maneuver to avoid a crash if they're not using restraints. However, restraints make it difficult to access and treat patients while in route to a hospital. To meet the challenge of finding a balance between these two demands, NIST, the Department of Homeland Security's Human Factors and Behavioral Sciences Division (DHS HFD) and the National Institute of Occupational Safety and Health (NIOSH) are developing design guidelines for ambulance patient compartments that maximize safety without compromising effectiveness. These guidelines will be used to update current, and enhance emerging, ambulance design criteria, such as National Fire Protection Association (NFPA) 1917, the "Standard for Automotive Ambulances." To gather input for the guidelines from a broad cross-section of the key stakeholders, EMTs and paramedics, the three agencies are conducting an anonymous web survey from Nov. 28, 2011, to Dec. 28, 2011. Insight and opinions from this survey will supplement data previously gathered from focus groups, interviews with individual EMS workers, visits to equipment manufacturers and EMS stations, and "ride-along" experiences aboard on-duty ambulances. The web survey can be found at either the NIST Office of Law Enforcement Standards site, [www.nist.gov/oles](http://www.nist.gov/oles), or the DHS Responder Knowledge Database site, [www.rkb.us](http://www.rkb.us).

**19. USFA, Justice Department Initiate Public Safety Emergency Vehicle Safety Study**

The U.S. Fire Administration (USFA), in partnership with the U.S. Department of Justice (DOJ)/National Institute of Justice (NIJ), has begun a study of emergent topics in emergency vehicle and roadway operations safety to assist in the development and demonstration of best practices for the emergency services. The International Fire Service Training Association (IFSTA) will conduct the study. [View the USFA press release with contact info...](#) Further information on USFA's vehicle and roadway operations safety initiatives may be found on the [USFA website](#).

**20. NFPA Foundation Releases Ambulance Crash Data Report**

Crashes involving ambulances with specific attention on the collection of ambulance crash data and the methods used to collect this data are the central focus of a new study published by the Fire Protection Research Foundation (FPRF), the research arm of the National Fire Protection Association (NFPA). Data collection for ambulance crashes are typically reported on a local or statewide basis, and a need exists to compile and coordinate this data on a national basis. The goal of this project is to provide information that will improve the safety of EMS crews and their patients. Objectives to achieve this goal include identifying available data sources, providing limited analysis of the data, recommending optimum data formats, and providing summary data if available. [For more information...](#)

**21. UPMC Study Highlights EMS Workplace Safety**

Poor perceptions about workplace safety culture among emergency medical services (EMS) workers is associated with negative patient and provider safety outcomes -- the first time such a link has been shown in the pre-hospital setting, according to a study by University of Pittsburgh researchers that now appears online in [Prehospital Emergency Care](#) and is scheduled to be published in the January-March print edition. The investigators measured EMS safety culture by surveying emergency medical technicians and paramedics at 21 EMS agencies across the

U.S. They used a scientifically validated survey that collects EMS worker opinions regarding six key areas: safety climate, teamwork climate, perceptions of management, working conditions, stress recognition and job satisfaction. Safety outcomes were measured through a survey designed by EMS physician medical directors and investigators to identify provider injuries, patient care errors and safety-compromising behavior.

The analysis of 412 surveys showed that individual EMS worker perceptions of workplace safety culture are associated with composite measures of patient and provider safety outcomes. Notably, the researchers found that 16 percent of all respondents reported experiencing an injury in the past three months; four of every 10 reported an error or adverse event; and 89 percent reported safety-compromising behavior. [For more information...](#)

**22. DOD: Use of Neurocognitive Assessment Tools in Post-Deployment Identification of Mild TBI**

Identification of mild traumatic brain injury (mTBI) in service members who served in Afghanistan and Iraq has been the subject of recent media attention, with particular attention focused on the proper use of neurocognitive assessment tools to screen all service members post-deployment for deficits or symptoms related to mTBI. In this context and in response to a request by Congress, a new report from the Government Accounting Office (GAO) describes (1) the Department of Defense’s (DOD) post-deployment policy on the use of neurocognitive assessment tools as a stand-alone initial screen to identify service members who may have sustained an mTBI during deployment; (2) what informed DOD’s decisions to establish this post-deployment policy; and (3) mTBI experts’ views on the science related to DOD’s policy decision. (DOD anticipates issuing 2012 additional policy on post-deployment neurocognitive assessment tools in the first quarter of calendar year, according to the report. The DOD policy will specify the use of a particular tool that clinicians should use if they choose to use a neurocognitive assessment tool during the clinical evaluation of a service member referred post-deployment through the post-deployment health assessment [PDHA] process.) Read the GAO Report Department of Defense: *Use of Neurocognitive Assessment Tools in Post-Deployment Identification of Mild Traumatic Brain Injury*: <http://www.gao.gov/new.items/d1227r.pdf>.

In related news, the DOD asked the Institute of Medicine (IOM) to conduct a study to determine the effectiveness of Cognitive Rehabilitation Therapy (CRT) for treatment of TBI. There is some evidence about the potential value of cognitive rehabilitation therapy for TBI, but overall it is not sufficient to develop definitive guidelines on how to apply these therapies and to determine which type of CRT will work best for a particular patient, says the IOM report. Given that methodological shortcomings in the evidence do not rule out potential meaningful benefits for patients, the committee supported the ongoing use of CRT for people suffering from TBI while improvements are made in the standardization, design, and conduct of studies. To read the IOM’s “Cognitive Rehabilitation Therapy for Traumatic Brain Injury: Evaluating the Evidence” report, please click [here](#).

**23. New Report: A Review of FDA's Approach to Medical Product Shortages**

Drug and other medical product shortages have the potential to adversely affect patient care by delaying treatment or forcing the use of second-choice products. Some recent shortages have involved drugs for life-threatening conditions and, in some cases; the product in shortage has been the only product for the patient’s condition. The Food and Drug Administration (FDA) conducted a review of medical product shortage activities in four medical product Centers in the FDA and talked to external stakeholders in the drug arena to understand their perspectives on the problem. A new report is based on these conversations which includes a review of published and unpublished information on drug shortages, and analyses of databases either already available or created for this report. The report has identified a number of respects in which FDA’s internal processes might be improved, so that FDA is maximizing its contribution to the prevention and mitigation of shortages. [For more information...](#)

**24. IPAL Project Highlights Integration of Emergency Medicine and Palliative Care**

The IPAL Project, an initiative of the Center to Advance Palliative Care (CAPC), is designed to provide a central venue for sharing expertise, evidence, tools and resources essential to the integration and improvement of palliative care in specific health care system venues. CAPC’s first project was IPAL-ICU (Improving Palliative Care in the ICU), launched in June 2010, led by Judith Nelson, MD, JD with support from the National Institutes of Health. CAPC’s second initiative is IPAL-EM (Improving Palliative Care in Emergency Medicine), led by Tammie Quest, MD with support from the Olive Branch Foundation. Several new resources have recently been added to the IPAL-EM Portfolio that might be useful for EMS Medical Directors in developing palliative care policies. [For more information...](#)

**25. CDC Reports Epidemic of Opioid Pain Relievers**

Overdose deaths involving opioid pain relievers (OPR), also known as opioid analgesics, have increased and now exceed deaths involving heroin and cocaine combined. A new report from the Centers for Disease Control and Prevention (CDC) report describes the use and abuse of OPR by state. *Vital Signs: Overdoses of Prescription Opioid Pain Relievers --- United States, 1999—2008* was posted in Morbidity and Mortality Report as an early release on November 1. [For more information...](#)

In related news, the Substance Abuse and Mental Health Services Administration (SAMHSA) has released a new report on emergency department treatment visits due to intentional poisoning from abuse of alcohol, illicit drugs, and prescription drugs. Presents findings based on 2009 data according to gender, age, and selected drugs and drug combinations involved. [For more information...](#)

**26. New PSA Focuses on Teen Drivers**

The U.S. Department of Transportation today unveiled “OMG,” a new public service announcement (PSA) to warn teenagers against the dangers of distracted driving. The PSA is available on the newly redesigned [Distraction.gov](#) website, along with new materials designed especially for young drivers. The PSA will air nationwide on Regal Cinema theater screens this week and on gas station pump-top screens owned by Outcast’s PumpTop TV throughout the month of December. With the holiday driving season under way and young drivers preparing to take to the roadways during their winter vacations, the new PSA is designed to reach teenagers using imagery that relates to popular shorthand text messages such as “L8R” for “later” or “LOL” for “laugh out loud.” Currently 35 states, the District of Columbia, and Guam have banned text messaging by all drivers. Nine states, the District of Columbia, and the Virgin Islands have prohibited all hand-held cell phone use while driving. To view the new ads [click here](#).

In related news, programs that grant privileges to new drivers in phases — known as graduated licensing programs — dramatically reduce the rate of teen driver fatal crashes, according to three studies funded by the National Institutes of Health. Such graduated licensing laws were adopted by all 50 states and the District of Columbia between 1996 and 2011. The NIH-supported research effort shows that such programs reduced the rate of fatal crashes among 16- 17-year-olds by 8 to 14 percent. Reductions in fatal crashes were greatest in states that had enacted other restrictions on young drivers. The greatest reductions in young driver crashes were seen in states that had adopted graduated driver licensing laws in combination with mandatory seat belt laws or laws requiring a loss of the driver’s license as a penalty for possession or use of alcohol by youth aged 20 or younger. In addition, limiting driving at night or with teenaged passengers, in combination with graduated licensing laws, had greater reductions in overall crash rates involving teen drivers than graduated licensing laws alone. [For more information...](#)

**27. IOM Consensus Report Reflects Health IT and Patient Safety Concerns**

The Institute of Medicine’s (IOM) 1999 landmark study *To Err is Human* estimated that between 44,000 and 98,000 lives are lost every year due to medical errors. This call to action has led to a number of efforts to reduce errors and provide safe and effective health care. Information technology (IT) has been identified as a way to enhance the safety and effectiveness of care. In the wake of more widespread use of health IT, the Department of Health and Human Services asked the IOM to evaluate health IT safety concerns and to recommend ways that both government and the private sector can make patient care safer using health IT. The IOM finds that safe use of health IT relies on several factors, clinicians and patients among them. Safety analyses should not look for a single cause of problems but should consider the system as a whole when looking for ways to make a safer system. Vendors, users, government, and the private sector all have roles to play. The IOM’s recommendations include improving transparency in the reporting of health IT safety incidents and enhancing monitoring of health IT products. [For more information...](#)

**28. EMS Week 2012 Planning Guides Available from ACEP**

National EMS Week 2012 will be celebrated May 20-26, 2012, with May 23 set aside for Emergency Medical Services for Children Day. The slogan for 2012 is EMS: Not a Job, a CALLING and listed below.



Please go to <http://www.acep.org/emsweek> to order your planning guide (kit) online. You can order only 1 kit online this year.. Return the order form to Denise Fechner at [dfechner@acep.org](mailto:dfechner@acep.org) no later than December 15, 2011. We plan to distribute the 2012 kits earlier this year so your cooperation is greatly appreciated in meeting this deadline.

**29. IAB Issues Position Statement in Support of Lead Federal Agency for EMS**

The InterAgency Board (IAB) Health, Medical, and Responder Safety (HMRS) SubGroup has published a new position paper: *“Position Statement in Support of a Single National EMS Administrative Body.”* The IAB is a voluntary collaborative panel of emergency preparedness and response practitioners from a wide array of professional disciplines that represent all levels of government and the voluntary sector. The IAB provides a structured forum for the exchange of ideas among organizations to improve national preparedness and promote interoperability and compatibility among response communities. Based on direct field experience, IAB members advocate for and assist the development and implementation of performance criteria, standards, test protocols, and technical, operating, and training requirements for all-hazards incident response equipment with a special emphasis on Chemical, Biological, Radiological, Nuclear, and Explosive (CBRNE) issues. The IAB also reviews and comments on broader emergency preparedness and response policy, doctrine, and practices. While advocating for a lead federal agency for EMS, the position falls short of a recommendation. [For more information...](#)

**30. JEMS Seeks Nominations of 2011 EMS Innovators**

EMS has changed drastically over the years, with those changes driven by innovations from individuals looking to improve clinical or operational practice. No area has escaped their creativity as they worked to bring EMS care to a higher level. As a result the service now provides better care to more people in more ways than ever imagined. This process of innovation continues today, in agencies large and small, public and private, from basic EMTs to medical directors. As the leader in spreading the best knowledge in EMS practice, the Journal for Emergency Services (JEMS), with support from Physio-Control, Inc., is proud to recognize the top 10 innovators in EMS who drove the EMS practice forward in 2011. This award is open to an individual who has contributed to EMS in an exceptional way in 2011. Each innovator will be recognized as one of the EMS 10: Innovators in EMS 2011. [For more information...](#)

**31. NPSTC Invites Readers to Fall Issue of Newsletter**

The National Public Safety Telecommunications Council (NPSTC) cordially invites the EMS community to visit its quarterly newsletter. While each issue is posted on the NASEMSO website, the direct link is <http://www.npstc.org/newsletter.jsp>

**32. Physio-Control Acquired by Private Investment Firm**

Bain Capital, a leading global private investment firm, has signed an agreement to acquire Physio-Control, Inc. from Medtronic, Inc. Physio-Control's main product line includes the Lifepak line of external defibrillators, which have been plagued with performance issues resulting in delayed shipment of some products into 2010. Bain Capital, whose founders included presidential hopeful Mitt Romney, manages \$66 billion in assets. It has a long history of investing in health care companies, including HCA Holdings Inc. and Air Medical Group Holdings Inc. The transaction is expected to close in the first quarter of calendar 2012 and is subject to certain regulatory and customary closing conditions. [For more information...](#)

**33. "The Dirty Hand in the Latex Glove": A Study of Hand Hygiene Compliance When Gloves Are Worn**

Fuller et al in Infection Control and Hospital Epidemiology , Vol. 32, No. 12 (December 2011), pp. 1194-1199. Healthcare workers who wear gloves while treating patients are much less likely to clean their hands before and after patient contact, according to a study published in the December issue of Infection Control and Hospital Epidemiology, the journal of the Society for Healthcare Epidemiology of America. This failure of basic hand hygiene could be contributing to the spread of infection in healthcare settings, the researchers say. Glove use is appropriate for situations when contact with body fluids is anticipated or when patients are to be managed with contact precautions. However, use of gloves should not be considered a substitute for effective hand hygiene practices taking place before and after patient contact. Although gloves can reduce the number of germs transmitted to the hands, germs can sometimes still get through latex. Hands can also be contaminated by "back spray" when gloves are removed after contact with body fluids. The Society for Healthcare Epidemiology of America is providing complimentary access to this article at <http://www.jstor.org/stable/10.1086/662619>.

**34. Dynamics and Association of Different Acute Stress Markers with Performance during a Simulated Resuscitation** Hunziker et al. Resuscitation - 23 November 2011. In press.

Methods: This prospective, observational study was conducted at the simulator center of the University Hospital Basel, Switzerland. Self-reported (feeling stressed and overwhelmed [stress/overload]), biochemical (plasma cortisol) and physiological (heart rate, heart rate variability) stress measures were assessed in 28 residents (teams of 2) before, during and after resuscitation. Team performance was defined as time to start CPR and hands-on time during the first 180 sec. [Abstract](#). (Subscription required for article.)

**35. Long-term cognitive outcomes following out-of-hospital cardiac arrest: A population-based study**

Mateen et al. Neurology October 11, 2011 77:1438-1445.

Results: Of 332 OHCA VF arrests, 140 people (42.2%,95%confidence interval 36.9%–47.5%) survived to discharge. No patient entered a minimally conscious or permanent vegetative state. Long-term survivors (n = 47, median survival 7.8 years postarrest) had lower scores on measures of long-term memory and learning efficiency (p = 0.001) but higher than average scores on verbal IQ (p = 0.001). Nearly all survivors were functionally independent and scored high on the Mini-Mental State Examination (MMSE) (median Barthel Index 100/100, median MMSE 29/30). [For more information...](#)

**36. Fatal and nonfatal injuries among emergency medical technicians and paramedics**

Reichard A, Marsh S, Moore S. Prehosp Emerg Care. 2011;15(4):511–517.

RESULTS: Authors identified 99,400 (95% confidence interval [CI], 71,700, 127,100) nonfatal injuries treated in emergency departments and 65 fatal injuries from the period 2003-2007. Most fatalities were related to motor vehicle incidents (45%) and aircraft crashes (31%). Among compensated EMTs and paramedics, the rate of fatal injuries was 6.3 per 100,000 full-time equivalents. Nonfatal injuries were primarily associated with stress on some part of the body from motion or overexertion (33%). Among all nonfatal injuries, the most common diagnosis was sprains and strains (38%). CONCLUSIONS: Emergency medical technicians and paramedics have higher fatal injury rates when compared with all workers. To reduce fatalities, targeted efforts should be made to prevent ground and air transportation incidents. Reducing nonfatal injuries may be accomplished by developing and evaluating interventions to prevent bodily stress and overexertion injuries. [For more information...](#) (Subscription required.)

**37. Does Mechanism of Injury Predict Trauma Center Need?**

Lerner B et al. Prehospital Emergency Care 2011 15:4, 518-525

Objective. To determine the predictive value of the mechanism-of-injury step of the American College of Surgeons Field Triage Decision Scheme for determining trauma center need. Conclusion. Death of another occupant, fall distance, and extrication time were good predictors of trauma center need when a patient did not meet the anatomic or physiologic conditions. Intrusion, ejection, and vehicle deformity were moderate predictors. [For more information...](#) (Subscription required.)

**UPCOMING EVENTS**

**\*\*\*STATEWIDE EMS CONFERENCES\*\*\***

\*New York State EMS Conference-Vital Signs. October 18-21, 2012 in Syracuse NY. [For more information...](#)

New Jersey Statewide Conference on EMS. November 1 -4 2012 Sheraton, Atlantic City, NJ. For more information, please visit [www.NJEMSConference.com](http://www.NJEMSConference.com)

**\*\*\*National Conferences and Special Meetings\*\*\***

\*CoAEMSP Accreditation Workshop: STEPS TO SUCCESS. January 9-10, 2012. Dallas, TX. [For more information...](#)

NAEMSP Annual Meeting. January 12-14, 2012. JW Starr Pass Resort, Tucson, AZ. [For more information...](#)

AAEM 18th Annual Scientific Assembly. February 8-10, 2012 Hotel del Coronado. San Diego, California. [For more information...](#)

\*2012 National Health Policy Conference. February 13-14, 2012. JW Marriott, Washington, DC. This conference provides clarity on the critical health care issues and priorities for the upcoming year. In its twelfth year, the NHPC continues to deliver a program with insider perspectives from health policy leaders to an audience that includes researchers, policy experts, and advocates. Plenary sessions feature perspective from the current administration, Congress, the states and the business community while breakout sessions delve into the details of specific challenges by convening experts with varied, and sometimes conflicting, views. [Featured topics](#) include state perspectives on ACA implementation, redefining the public health sector, and challenges specific to the military health care system. [Register](#) today to take advantage of networking opportunities, ask direct questions, and find out what's in store for health policy in 2012.

Emergency Nurses Association Leadership Conference. February 22-26, 2012. New Orleans Convention Center. New Orleans, LA. [For more information...](#)

EMS Today. JEMS Conference and Exposition. February 28-March 3, 2012. Baltimore Convention Center, Baltimore MD. [For more information...](#)

Emergency Medical Services Systems, Safety Strategies and Solutions Summit. February 29, 2012, Institute of Medicine's Keck Center, Washington, D.C. As with past TRB EMS Summits, participation will be both onsite and via a virtual live Webinar. [For more information...](#)

\*12<sup>th</sup> Annual John M. Templeton, Jr. Pediatric Trauma Symposium. March 2-3, 2012. Union League of Philadelphia. [For more information...](#)

Fire Rescue Med. May 5-8, 2012. The Orleans, Las Vegas, NV. [For more information...](#)

NASEMSO Mid-Year Meeting. May 6-8, 2012, Bethesda, MD. [For more information...](#)

EMSC Grantee Meeting. May 8-11, 2012, at the Hyatt Regency Bethesda in Bethesda, MD. [For more information...](#)

ACEP's Leadership & Advocacy Conference. May 20-23, 2012 Omni Shoreham - Washington, DC. [For more information...](#)

Pinnacle 2012. July 16-20, 2012. Cheyenne Mountain Hotel, Colorado Springs, CO. [For more information...](#)

NAEMSE Annual Symposium and Trade Show. August 6-11, 2012. Coronado Springs Resort, Orlando, FL. [For more information...](#)

ENA Annual Meeting. September 11-15, 2012. San Diego Convention Center, San Diego, CA. [For more information...](#)

Emergency Cardiovascular Care Update. September 11-15, 2012. Rosen Shingle Creek, Orlando, FL. [For more information...](#)

NASEMSO Annual Meeting. September 24-28, 2012, The Grove Hotel, Boise, ID. [For more information...](#)

ACEP Scientific Assembly. October 8-11, 2012. Denver, CO. [For more information...](#)

Air Medical Transport Conference. October 22-24, 2012. Seattle, WA. [For more information...](#)

EMSWorld Expo. October 29-November 2, 2012. New Orleans, LA. [For more information...](#)

1<sup>st</sup> Annual World Trauma Symposium. November 1, 2012. New Orleans, LA. [For more information...](#)

See more EMS Events on NASEMSO's web site at <http://www.nasemso.org/Resources/Calendar/index.asp>

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