



Emergency Medical Services
108 Cherry Street, P.O. Box 70
Burlington, Vermont 05402-0070

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2009 EMS CONFERENCE

NEW ENGLAND'S PREMIER EMS CONFERENCE



FOR
FRECAs
EMTs
Trainers
Squad Officers
Physicians
Nurses
Firefighters

MARCH 25 - 29, 2009
Sheraton Burlington Hotel and Conference Center
Burlington, Vermont

GENERAL INFORMATION

WELCOME

The Vermont EMS Office proudly extends a special invitation to you to join us at Vermont's 21st annual conference. It is our distinct pleasure to present this year's line-up to you. We hope that you will join us.

NEW & IMPROVED REGISTRATION OPTIONS

- On-line registration is being offered using UVM Conference & Event Services
- Now accepting VISA, MasterCard and debit cards
- One-day weekend tuition fee offered
- Pilcher lecture series now has 6 topics to choose from!

DATES

PRECONFERENCE: March 25-27, 2009
WEEKEND CONFERENCE: March 28-29, 2009

LOCATION

Sheraton Burlington Hotel & Conference Center,
870 Williston Road, Burlington, VT
www.sheratonburlington.com

HOTEL ACCOMMODATIONS

FEES: A discounted rate of \$125 inclusive of tax (up to 4 persons allowed in the room). Identify yourself as a Vermont EMS Conference attendee in order to receive the conference rate.

METHOD: By phone: 802-865-6600 or 800-677-6576
By web: <http://www.starwoodmeeting.com/Book/VTEMS2009>

COT POLICY: A cot must be requested; however, they are not guaranteed.

DEADLINE: March 10, 2009.

DIRECTIONS: Exit 14W off I-89

CONFERENCE MEALS

To support our ranking as the healthiest state in the nation, the Vermont EMS Conference is doing its part with healthier menus and reducing waste.

FEES

PRECONFERENCE: Preconference workshop fees vary. See registration form for details. These sessions sometimes fill prior to the deadline of **Wednesday, February 25**, so register early! Workshops are subject to cancellation if minimum numbers are not met. Preconference slots are guaranteed (*see cancellation/refund policy*).

WEEKEND CONFERENCE: See registration form for details. All conference fees include continental breakfast, lunch and afternoon breaks. **New this year:** We are offering a weekend one-day registration fee option. (*Two individuals may **not** split a weekend registration.*)

POSTMARK REGISTRATION DEADLINES

- Preconference deadline 2/25/09
- Weekend conference early bird savings deadline 2/25/09
- Hotel reservation deadline 3/10/09
- Weekend conference final deadline 3/16/09

REGISTRATION ESSENTIALS

REGISTRATION METHODS:

On-line:

www.regonline.com/VTEMS2009
You must have a valid e-mail address to register on-line.

By Mail:

Donna O'Brien
UVM Conference & Event Service
Marsh Hall, Room 009
31 Spear Street
Burlington, VT 05405-0344

Use one registration form per person; photocopy as needed. (Two individuals may not split a weekend registration.)

Fax or over the phone:

Call UVM at 802-656-5665 or
Fax # 802-656-8034

PAYMENT METHODS: Visa, MasterCard, debit cards and purchase orders may be used for on-line registration. If you wish to pay by check (payable to UVM), mail it with your registration form. Payment must be included with registration form(s).

PURCHASE ORDERS: Purchase orders from organizations are accepted but must be paid within 30 days or by conference registration deadlines.

EMAIL CONFIRMATIONS: All participants providing an email address will receive email confirmations; otherwise, confirmations will be sent by mail.

REGISTRATION QUESTIONS: Call Donna O'Brien at UVM at 802-656-5665 (donna.obrien@uvm.edu)

GENERAL CONFERENCE/CONTENT QUESTIONS:

Call Jo-Anne Conant, VT EMS at 802-863-7260, or 800-244-0911 (VT) (jconant@vdh.state.vt.us)



GENERAL INFORMATION

CONFERENCE TIDBITS

CHECK YOUR MATH FACTS: Is your squad registering multiple attendees? Please carefully check the registration forms for completeness and accuracy, to ensure the correct amount of funds is being sent. Better yet, book on-line!

NO ON-SITE REGISTRATION: All attendees must pre-register for the conference.

ALL ARE WELCOME: Conference attendees do not need to be certified to attend the EMS Conference. Both students and the general public are always welcome to register and attend.

ADULTS ONLY: Please be respectful of other attendees: only adult attendees for conference events. Thank you in advance for your cooperation. Check with the Sheraton for child care services if necessary.

CANCELLATION & REFUND POLICIES

PRECONFERENCE: For preconference workshops, a 50% refund will apply for cancellations prior to February 25; after that date, there is no refund.

WEEKEND CONFERENCE: A full refund MINUS a \$25 administrative fee will apply if you cancel on or before March 10; after that date, there is no refund.

CONTINUING EDUCATION CREDIT

PRECONFERENCE: EMT-I credit can be claimed for sessions covering EMT-I material. Additional credit will be awarded for preconference workshops as appropriate.

WEEKEND CONFERENCE: Up to eight (8) credits for EMT recertification will be awarded by the Vermont Department of Health if both Saturday and Sunday sessions are attended. An EMT can claim elective credit on the continuing education form for topics included in the EMT-B curriculum.

2009 CONFERENCE T-SHIRT

This year's conference t-shirt is a stonewashed blue color, with a tasteful lapel silkscreen on the front. Early orders will be sold at a discounted price of \$12. A limited quantity of shirts will be available for sale during the conference for a higher fee. Order early and save!

EXHIBITORS

Exhibitors are a valuable asset to our conference. An array of their latest products, EMS equipment and vehicles will be available for viewing and purchase.

DISPLAY HOURS:

Saturday, 8:00 a.m. - 6:00 p.m. and

Sunday, 9:00 a.m. - 2:00 p.m.

DOOR PRIZES: Vendor-sponsored door prizes will be awarded after the closing session on Sunday afternoon. You must be present to win!

★ FRIDAY GAME NIGHT

The tradition of Friday Game Night will continue! Which game will be announced later! Plan to attend this fun event from 8:30 - 10:30 p.m. Friday, March 27.

Details and a schedule of events will be available on www.vermontems.org.

ANNUAL EMS AWARD NOMINATIONS

Award categories and criteria is available on our web page www.vermontems.org and will also be sent to EMS agencies, EMS district officials, hospitals, and additional organizations throughout the state. Please start thinking about the people and organizations in your area that you might consider nominating; these awards are driven by nominations by folks just like you.

AWARDS CEREMONY & BANQUET SATURDAY, MARCH 28

The EMS awards ceremony will be presented after the dinner buffet. Please consider purchasing a ticket for \$37.00; enjoy camaraderie, dancing and a delicious 4-station buffet offering Roast Prime Rib, a Pasta Bar, Baked Scrod and Boneless Chicken Breast, accompaniments and dessert.

SOCIAL HOUR 6:00 - 7:00 p.m.

BANQUET 7:00 - 8:00 p.m.

AWARDS 8:00 - 9:00 p.m.

DANCING WITH SUPERSOUNDS DJ 9:00 p.m.- Midnight

NOT ATTENDING THE CONFERENCE? THAT'S OKAY:

If you are NOT registered to attend the conference, but wish to attend the banquet only, contact VT EMS directly at 802-863-7260, or 1-800-244-0911 (VT), to purchase a ticket.



SCHEDULE OF EVENTS

Wednesday, March 25 - Friday, March 27, 2009

Shaded boxes indicate sessions which are to be taken as a pair.

0730 WEDNESDAY - FRIDAY			
REGISTRATION - Diamond Foyer (Top of the Stairs)			
WEDNESDAY 0800 - 1700 (lunch at noon)	01 Prehospital Trauma Life Support (Day 1 of 2)	02 PEPP ALS: Pediatric Education for Prehospital Profs (Day 1 of 2)	03 GEMS: Geriatric Education for EMS 1800-2100 hrs only
THURSDAY 0800 - 1700 (lunch at noon)	01 Prehospital Trauma Life Support (Day 2 of 2)	02 PEPP ALS: Pediatric Education for Prehospital Profs (Day 2 of 2)	03 GEMS: Geriatric Education for EMS Thursday all day
FRIDAY 0800 - 1700 (lunch at noon)	09 Sharpen Your Skills: EMT-103	10 NECEMS Managers' Program: Module 3	11 EMS Instructor-Coordinator Workshop
FRIDAY GAME NIGHT 8:30 - 10:30 pm			



Saturday, March 28, 2009

REGISTRATION - Diamond Foyer (Top of the Stairs)			
Keynote Presentation: Vermont - How Healthy Are We? Wendy Davis, MD			
0800			
0900 - 1010			
1030 - 1200	20 Communication Needs for the Deaf and Hard of Hearing Keri Darling BLS/ALS	21 EMS Considerations for Today's Vehicle Technology Kevin O'Brien OPS	22 Understanding Diabetic Emergencies Joseph Mistovich BLS/ALS
1200	LUNCH		
1315 - 1430	30 Sudden Death in Young Athletes Kenneth Navarro PED/BLS	31 Will an Aspirin a Day Keep the Ambulance Away? Peter Lazzara BLS/ALS	32 Lightning Strike Injuries Joseph Mistovich BLS
1445 - 1615	40 Impedance Threshold Device: Improving Cardiac Arrest Survival Kenneth Navarro ALS	41 Hemorrhage Control: A Hands-On Update Patrick Malone BLS	42 Anaphylactic Reactions Joseph Mistovich BLS/ALS
			23 Close Encounters of the Alcohol Kind Peter Lee, Dr. Todd Mandell BLS
			24 Headaches in EMS: Not Yours! Your Patient's! Gary Wiemokly BLS/ALS
			25 Congestive Heart Failure: A Plum Tuckered Out Ticker Peter Lazzara BLS/ALS
			33 Non-Invasive Ventilation Dr. Laurel Plante ALS
			34 Ocular Trauma Dr. Jim Courtney BLS
			35 They're Just So Sweet! Children with Diabetes Gary Wiemokly PED/BLS/ALS
			43 Patient Interviewing Techniques That Work! Steve Salengo & Capt. Kevin Anderson BLS
			44 Pelvic Trauma Dr. Jim Courtney BLS
			45 CQI Again? Moving from Clinical to Organizational Excellence Jeffrey Stewart ADMIN

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Sunday, March 29, 2009

REGISTRATION - Diamond Foyer (Top of the Stairs)			
0800			
0900 - 1015	50 Special Needs in Your Backyard George Henry PED/BLS	51 Strangulation in Domestic Violence Lauri L'Ecuyer & Dr. Elizabeth Blundock BLS	52 DR MAA: Opiates, Alcohol and Methamphetamines Jeffrey Stewart BLS
1030 - 1200	60 Prehospital Pain Management: From Ice Packs to Narcotics Dr. Stephen Lefler BLS/ALS	61 "Trauma Talk" Lauri L'Ecuyer BLS	62 The Medical Marijuana Debate Jeffrey Stewart ADMIN
1200	LUNCH		
1315 - 1415	70 The Emergency Care of the Dialysis Patient Dr. Wolfgang Weise ALS	71 ACL Injury: From the Field to the Bench Dr. James Slauterbeck BLS	72 STEMI: The Vermont Experience Dr. Harold Dauerman ALS
1435 - 1615			73 Effects of Sleep Deprivation on EMS Personnel Dr. Garrick Applebee OPS
			74 Prehospital Care of the Newborn Dr. Keith Robinson PED/BLS/ALS
			75 Stroke Update Dr. Mark Gorman BLS/ALS
			53 Hypertonic Saline: The Perfect IV Fluid? Kenneth Navarro ALS
			54 EMS Response to a Radiological Emergency Bill Irwin OPS
			55 Ice/Cold Water Rescue Awareness Michael Cannon OPS
			63 Current Controversies in Prehospital Airway Management Dr. Ian Black BLS/ALS
			64 Always Something: Pediatric Cases from ED Dr. Peter Weimersheimer PED/BLS/ALS
			65 Scared In Air or Safe on the Ground: Controversies in Air Transport Peter Lazzara OPS
			Endnote Presentation: Resuscitation of the Rich & Famous Peter Lazzara

2009 VT EMS CONFERENCE REGISTRATION FORM

Registration Guidelines:

PLEASE CONSIDER REGISTERING ONLINE AT: www.regonline.com/VTEMS2009

OR Fill out this form and mail or fax in (802) 656-8034.

- Please use **one registration form per person**.
- **Print** your information neatly.
- Photocopy this blank form for others as needed.
- **Clearly** indicate 1st and 2nd choices.
- Payment **must** be included with your registration form.

Make check payable to: UVM

Mail to:

Donna O'Brien
UVM Conference & Event Services
Marsh Hall, Room 009
31 Spear Street
Burlington, VT 05405-0344

Fax: 802-656-8034

Attn: Donna O'Brien

Online registration questions? Call Donna O'Brien (802) 656-5665

Name*: _____ Affiliation**: _____

*List your name as it should appear on your nametag. We suggest not using initials. **Please list only **one** affiliation.

Address: _____ City/State/Zip: _____

Daytime Email: _____ Daytime Number: () _____

Evening Number: () _____ Cell or Pager: () _____

Please Circle: Attending Preconference: **YES** or **NO** Attending Weekend: **YES** or **NO**; **Both Days** or **One Day**?

LIST SESSION #'s in the space provided - Refer to master schedule or descriptions for session #'s (page 4).

Preconference Workshops: (Sessions 1-14)

Wed. 1 st choice	2 nd choice	Thurs. 1 st choice	2 nd choice	Fri. 1 st choice	2 nd choice
SATURDAY: 10:30 am - 12 noon	(Sessions 20-25)	1 st choice	2 nd choice	(X) If Not Attending	_____
1:15 pm - 2:30 pm	(Sessions 30-35)	1 st choice	2 nd choice	(X) If Not Attending	_____
2:45 pm - 4:15 pm	(Sessions 40-45)	1 st choice	2 nd choice	(X) If Not Attending	_____
SUNDAY: 9:00 am - 10:15 am	(Sessions 50-55)	1 st choice	2 nd choice	(X) If Not Attending	_____
10:30 am - 12:00 pm	(Sessions 60-65)	1 st choice	2 nd choice	(X) If Not Attending	_____
1:15 pm - 2:15 pm	(Sessions 70-75)	1 st choice	2 nd choice	(X) If Not Attending	_____

Early Bird Registration Fees:
Postmarked by 2/25/09

Late Registration Fees:
Postmarked by 3/16/09

Section A: Pre-conference Workshops – Wed.- Fri. 3/25-27, 2009

Check the boxes for your first choice preconferences.

	By 2/25	By 3/16 (if space available)
<input type="checkbox"/> 01 - Prehospital Trauma Life Support - PHTLS (2 days)	\$295	\$310
<input type="checkbox"/> 02 - Pediatric Education for Prehospital Professionals - PEPP (2 days).....	\$295	\$310
<input type="checkbox"/> 03 - Geriatric Education for EMS – GEMS (1.5 days)	\$195	\$210
<input type="checkbox"/> 04 - NECEMS EMS Managers' Module 1	\$150	\$165
<input type="checkbox"/> 05 - Back to Basics: Medical Emergencies	\$65	\$80
<input type="checkbox"/> 06 - EMS 101 (non-EMS personnel).....	\$50	\$65
<input type="checkbox"/> 07 - NECEMS EMS Managers' Module 2	\$150	\$165
<input type="checkbox"/> 08 - Back to Basics: Trauma Emergencies	\$65	\$80
<input type="checkbox"/> 09 - Sharpen Your Skills: EMT-I03 One-day Review Program	\$150	\$165
<input type="checkbox"/> 10 - NECEMS EMS Managers' Module 3	\$150	\$165
<input type="checkbox"/> 11 - EMS Instructor-Coordinator Workshop	\$65	\$80
<input type="checkbox"/> 12 - Rescue: Vehicle Extrication	\$125	\$140
<input type="checkbox"/> 13 - Introduction to 12-Lead EKGs	\$75	\$90
<input type="checkbox"/> 14 - Trauma Update	\$75	\$90

Section B: Main Conference Weekend Sessions: Sat.- Sun. 3/28-29, 2009

Check the boxes of applicable session fees.

	By 2/25	By 3/16
<input type="checkbox"/> VT-affiliated personnel (Saturday & Sunday sessions)	\$110	\$125
<input type="checkbox"/> NEW OPTION: VT-affiliated personnel One Day Fee	\$75	\$90
<input type="checkbox"/> Out-of-state personnel (Saturday & Sunday sessions)	\$125	\$140
<input type="checkbox"/> Out-of-state personnel (One Day Fee)	\$90	\$105

Pre-Conference Cost (List applicable fee; Section A above) = _____

Conference Cost (List applicable fee; Section B above) = _____

Saturday Buffet Dinner & Entertainment # of people _____ x \$37.00 each = _____

T-shirt Order - **Circle Size:** M L XL 2XL 3XL \$12.00 x _____ = _____

Processing Fee applicable for each person **+ \$15.00**

GRAND TOTAL = _____

IF PAYING BY CREDIT CARD: Check one. VISA MASTERCARD

Card: # _____ Expiration Date: _____

Name of Cardholder (Print): _____ Signature: _____

CONFERENCE 2009 DESCRIPTIONS

PRECONFERENCE WORKSHOPS

Wednesday - Friday, March 25 - 27

The preconference workshops are sponsored and coordinated by the Initiative for Rural Emergency Medical Services, Department of Surgery at the University of Vermont College of Medicine.

01 Prehospital Trauma Life Support (PHTLS)

2-Day Provider Course

This 16-hour program offers prehospital clinicians the opportunity to learn, understand and practice many of the most up-to-date EMS procedures in the nation. The course combines lectures, discussions, case scenarios, and practical sessions to improve the participant's abilities to manage the multi-trauma patient. This program is tailored to meet the needs of basic and advanced providers who wish to expand their understanding and abilities in the arena of trauma management. The course fee includes textbook, materials and certification fee.

02 Pediatric Education for Prehospital Providers (PEPP ALS)

2-Day Course

This two-day ALS course is geared toward Paramedics and other advanced prehospital EMS providers. The course is scenario based with content that will teach prehospital professionals how to better assess and manage ill or injured children. Please Note: Cost includes textbook and certification. This course is limited to EMT-Intermediates and Paramedics.

03 Geriatric Education for Emergency Medical Services (GEMS)

1.5-Day ALS Course

The proportion of the aged in society today is greater than ever before and growing faster than any other segment of the population. Approximately 34% of calls for emergency medical services involve patients over the age of 60. This new national continuing educational curriculum is designed to address all of the special needs of the older population. The one-and-a-half-day advanced life support (ALS) course is designed for EMT-Intermediates and Paramedics. The course includes case-based lectures, live action video, hands-on skills stations and small group scenarios. Course fee includes the Geriatric Education for Emergency Medical Services textbook. **Please Note:** *This program begins Wednesday evening from 1800-2100 and continues from 0800-1700 Thursday.*

04 NECEMS EMS Managers' Program Module 1: An Introduction to EMS Management

This 8-hour module is designed to increase awareness of the issues involved in the management of EMS organizations. It is designed for those individuals who are leaders and managers of these organizations, or those who aspire to such positions. Topics include an introduction to the EMS system, legislation, regulation and leadership. This is the first of 8 modules that compose the New England Council for EMS Managers' Program.

05 BACK TO BASICS: Medical Emergencies

In most emergency medical service organizations, medical emergencies account for the majority of the call volume. This one-day seminar will provide a review of a variety of medical conditions using a case-based approach. Participants will move through a number of stations that will include a review of the pathophysiology, assessment and management of medical emergencies. Topics include cardiac emergencies, respiratory emergencies and altered mental status. This session will focus on the basics, but providers from all certification levels will benefit from participation.

06 EMS 101 (for Non-EMS Personnel)

Emergency medical services cover every corner of every city, town and village in Vermont. Elected and appointed officials are well aware of the functions of fire departments and law enforcement, but what about the "forgotten" emergency service? This course is designed as an introduction to Vermont's emergency medical service system and to help increase the awareness and understanding of EMS for non-EMS personnel.

07 NECEMS EMS Managers' Program Module 2: Human Resources

One of the most common concerns related to EMS management is personnel management, especially the recruitment and retention of personnel. Topics include personnel policies and procedures, compensation/benefits, job descriptions and development of personnel. **Please Note:** *Participants are encouraged but not required to complete Module 1 prior to taking Module 2.*

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08 BACK TO BASICS: Trauma Emergencies

This one-day seminar will provide a review of a variety of trauma topics, including head injuries, shock, chest/abdomen injuries and extremity injuries. It will include lectures, small group discussions and skills stations. This session will focus on the basics, but providers from all certification levels will benefit from participation.

09 Sharpen Your Skills: EMT-103

EMT-Intermediates will earn 8 hours of continuing education through this program covering airway management, fluids/electrolytes & shock, pharmacology, respiratory emergencies and cardiac emergencies. Material will be presented through lectures, case studies and small group sessions.

10 NECEMS EMS Managers' Program Module 3: System Finance

This module will focus on all of the aspects of the financial management of an EMS organization. This course, taught by members of the New England Council for EMS, will include the following topics: budgeting, financial management, financial reporting systems, billing/accounts receivable, Medicare, Medicaid and third party reimbursement, subsidies, grants & contracts and fundraising. Participants are encouraged, but not required, to attend Module 1 & Module 2 prior to attending Module 3.

11 EMS Instructor-Coordinator Workshop:

Lead Instructors - **Mike O'Keefe, NREMT-P**, and **Greg Thweatt, EMT-I** and Associated Members of Vermont's EMS System and IREMS

The tradition of mixing participatory sessions with focused presentations on timely topics of interest will continue this year with discussions on a number of subjects selected by instructor-coordinators (ICs). Agenda items are likely to include such topics as the revised instructor-coordinator course, the National EMS Education Standards and updates on recent changes in EMS.

12 Rescue: Vehicle Extrication

Participants will review the basic concepts of safety, motor vehicle design and rescue operations in the morning. The afternoon will be spent off-site on the training ground, learning and practicing a variety of vehicle extrication techniques using hand tools. Full protective gear (bunker coat/pants, helmet, eye protection, boots and gloves) is required for all participants.

13 Introduction to 12-Lead EKGs

In this all-day workshop, participants will learn the basics of 12-lead EKGs, including proper lead placement, ST-elevation myocardial infarction (STEMI) recognition, bundle branch block identification and differentiation of wide complex tachycardias. Participants will have the opportunity to apply this information and practice their new skills in class.

14 Trauma Update

IREMS, in conjunction with the Level I Trauma Service at Fletcher Allen Health Care, will provide an update on a variety of trauma topics using lectures, small group discussions and case studies.

CONFERENCE WORKSHOPS

Saturday - Sunday, March 28 - 29

KEYNOTE PRESENTATION:

Vermont - How Healthy Are We?

Wendy Davis, MD, Commissioner,
Vermont Dept. of Health, Burlington, VT

Vermont has recently been recognized for the health status of our population and for our preparedness to respond to a wide range of public health emergencies. What do these recognitions mean and how were we judged? EMS is a vital part of the health care system in Vermont. What role does EMS play in keeping our state healthy and safe? What else can EMS agencies and personnel be doing to make Vermont an even healthier place? Commissioner Davis will give a state-of-the-state presentation with her impressions of our health care capabilities and opportunities for improvement.

20 Communication Needs for the Deaf and Hard of Hearing in EMS Emergencies

Keri Darling, Director/Trainer,
Deaf Vermonters Advocacy Services

This innovative workshop will lead you through an informative and often humorous program. Participants will gain knowledge about different kinds of deaf and hard of hearing people, along with developing skills for interacting and communicating with these communities. Information specifically includes medical situations, what to do and how to do it. There will be

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hands-on activities and communication cards directly related to medical terms used in the field. The goal is for participants to walk away knowing more about deaf culture and its people and developing a comfort zone in future interactions.

21 EMS Considerations for Today's Vehicle Technology

Kevin O'Brien, FF/EMT-I,
Burlington Fire Department

This session is designed to give EMS providers an understanding of changing vehicle technology and how it will affect them at crash scenes. Topics will include hybrid vehicles and vehicle safety systems, including air bags. This session will include a static display of vehicles available for viewing, as well as questions and answers. Display vehicles will include hybrid as well as compressed natural gas and hydrogen-powered vehicles, vehicles with multiple safety systems, and other vehicles traveling our highways on a daily basis. Participants will come away with a heightened sense of awareness of today's vehicle technology.

22 Understanding Diabetic Emergencies

Joseph J. Mistovich, MEd, NREMT-P,
Chair and Professor, Dept. of Health Professions,
Youngstown State University, Youngstown, OH

This session will provide a basic approach to understanding the pathophysiology, signs and symptoms, and emergency management of acute diabetic emergencies. The session is primarily focused on "understanding" and not just reviewing signs and symptoms or conditions.

23 Close Encounters of the Alcohol Kind

Peter Lee, Chief of Treatment Services,
Division of Alcohol and Drug Abuse Programs,
Vermont Dept. of Health, and
Todd Mandell, MD, AAAP, ASAM

If you've been in EMS more than a week, you probably have encountered an emergency involving a patient who has consumed alcohol. While you may be familiar with the emergency medical care these patients require, how much do you really know about the system these patients enter beyond the emergency department? How successful are the treatment pathways for this chronic disease? How likely is it that a person who abuses alcohol will become an EMS "frequent flyer"? Peter Lee and Todd Mandell lead the Alcohol and Drug Abuse Program for the VT Department of Health. Both have years of experience that will provide you with information about an often encountered disease you might find a bit surprising.

24 Headaches in EMS: Not Yours! Your Patient's!

Gary E. Wiemokly, MPH, EMT-P, RN,
EMS Chief, State of Connecticut

Your patient experiencing a headache may not have had it induced from the all-night EMS bash, but then again he may. The complaint of headache to the EMS care provider oftentimes may be vague. "My head just hurts!" "Help me!" Other times it may be very specific and precise. Does age play a factor in headache type? What about prehospital management for headache? Join Gary as he presents an animated and informative discussion on headaches in EMS including headache types, assessment tips and patient approach. He will also cover special questions to ask, pathophysiological factors, and what you can do to make your patient feel better in the prehospital setting.

25 Congestive Heart Failure: A Plum Tuckered-Out Ticker

Peter Lazzara, BS, EMT-P,
Paramedic in Charge, Chicago Fire Department

I hear rales and wheezing! Could it be congestive heart failure, pulmonary edema or even COPD? This presentation will look at the pathophysiology of congestive failure and the current trends in treatment of the CHF patient. It will give assessment tips to help the prehospital provider determine which disease process they are dealing with and how to better manage it.

30 Sudden Death in Young Athletes

Kenneth Navarro, MEd, CE Coordinator,
University of Texas Southwestern Medical Center at
Dallas Emergency Medicine Education, Hurst, TX

The possibility that young physically fit athletes may be susceptible to sudden cardiac death seems counterintuitive. Nevertheless, such catastrophes occur, usually in the absence of prior symptoms and have considerable emotional and social impact. This presentation will examine the magnitude and causes of this problem.

31 Will an Aspirin a Day Keep the Ambulance Away?

Peter Lazzara, EMT-P, BS,
Paramedic in Charge, Chicago Fire Department

We all know when and how to give aspirin, but are we sure we know why? Where did it come from, and where is it going in EMS? This presentation takes a historical look at the story of aspirin and how it got where it got in EMS. We will unlock the true powers of the aspirin and look at how it might be used in the future. Take two and see ya there.

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32 Lightning Strike Injuries

Joseph J. Mistovich, MEd, NREMT-P,
Chair and Professor, Dept. of Health Professions,
Youngstown State University, Youngstown, OH

A lightning strike injury can be categorized as a serious medical and blunt traumatic event. This session will provide an understanding of the epidemiology, pathophysiology, signs and symptoms, and emergency management of lightning strike injuries.

33 Non-Invasive Ventilation

Laurel Plante, MD,
Vermont EMS District #10 Medical Advisor

The prehospital use of non-invasive ventilation, specifically continuous positive airway pressure (CPAP), for respiratory emergencies is increasing nationwide. Dr. Plante will review the pathophysiology of respiratory compromise and discuss prehospital CPAP indications, how it works, and how it benefits patients before they arrive in the emergency department.

34 Ocular Trauma

Jim Courtney, DO, Clinical Instructor,
University of Massachusetts Medical School,
Worcester, MA

While ocular trauma is not a common EMS call, it is truly a medical emergency! Join us for a look at some of the most common causes of ocular trauma and the care that you can provide the patient. *Beware - this lecture WILL contain graphic images.*

35 They're Just So Sweet!

Children with Diabetes
Gary E. Wiemokly, MPH, EMT-P, RN,
EMS Chief, State of Connecticut

The number of children with diabetes seems to be on the rise, which increases the chances EMS will be responding to those pediatric patients. This class reviews pathophysiological factors, diet, activity levels, current medications, interventions and assessment tips. Participants will gain insight into the importance of a complete assessment of the diabetic child and leave with a better understanding of emergency treatment choices.

40 Impedance Threshold Device: Improving Survival from Cardiac Arrest

Kenneth Navarro, MEd, CE Coordinator,
University of Texas Southwestern Medical Center at
Dallas Emergency Medicine Education, Hurst, TX

Animal studies have shown that use of an inspiratory impedance threshold device (ITD) within the respiratory circuit during both conventional CPR and active compression-decompression (ACD) CPR increases

blood flow to the heart and brain, increases 24-hour survival and improves neurological recovery. This presentation will evaluate all relevant research on the device and its implications for EMS systems.

41 Hemorrhage Control: A Hands-On Update

Patrick T. Malone and Staff,
Initiative for Rural Emergency Medical Services
(IREMS), UVM College of Medicine, Burlington, VT

This session will include a brief update on hemorrhage control followed by a hands-on skills session covering all aspects of prehospital hemorrhage control.

42 Understanding Anaphylactic Reactions

Joseph J. Mistovich, MEd, NREMT-P,
Chair and Professor, Dept. of Health Professions,
Youngstown State University, Youngstown, OH

This session will focus on a basic understanding of the pathophysiology, etiology of signs and symptoms, and prehospital management of an anaphylactic reaction.

43 Patient Interviewing Techniques That Work!

Steve Salengo, NREMT-P, State Operations
Coordinator, Emergency Medical Services,
Vermont Dept. of Health, Burlington, VT and
Kevin J. Anderson, Retired Captain,
Vermont State Police, Forensic Interview and
Interrogation Instructor, Vermont Police Academy

One of the most important aspects of emergency care is effective communication between the provider and patient. Steve and Kevin, both experienced interviewers, will teach you patient interviewing techniques that can help reduce patient anxiety and increase the amount of information being obtained by the provider. Key points of discussion will include body language, voice tone, and memory enhancing techniques, event recall, and ways to interview reluctant and hostile patients.

44 Pelvic Trauma

Jim Courtney, DO, Clinical Instructor,
University of Massachusetts Medical School,
Worcester, MA

The pelvis is an incredibly complex package of bones, nerves, blood vessels and muscle, and a lot can go wrong in this small area. Join us for a review of the anatomy of the pelvis, the pathophysiology of trauma to the pelvis and the lifesaving treatment you can perform on these critically ill patients.

CONFERENCE 2009 DESCRIPTIONS

45 CQI Again? Moving from Clinical Excellence to Organizational Excellence

Jeff Stewart, BS, NREMT-P,
Director of Clinical Services & Education,
Cataldo Ambulance Service, Inc., Somerville, MA

This class will cover the various linguistic applications to performance measures, describe the basics of a continuous quality improvement (CQI) process applied to an entire organization, identify key areas that impact performance and discuss the pros and cons of disseminating performance measures. Time will be included for questions and answers.

50 Special Medical Needs in Your Backyard

George Henry, RN, EMT-B,
Fletcher Allen Critical Transport Team,
Burlington, VT

As the health care system evolves, there are increasing numbers of patients who live in community settings with the support of complex and sophisticated technologies. An EMS crew encountering a patient with unfamiliar life sustaining appliances presents a challenge. What is OK to do? What might harm the patient? What is within my scope of practice? With his years of emergency and critical care experience, George Henry will take a subject that worries many EMS providers and give you a perspective that can guide rational and appropriate decisions in the field.

51 Strangulation in Domestic Violence

Lauri L'Ecuyer, D-ABMDI,
Assistant Medical Examiner Coordinator, and
Elizabeth A. Bundock, MD, PhD,
Deputy Medical Examiner, Office of the
Chief Medical Examiner, Burlington, VT

"He choked me" - but there are no marks. Strangulation has only recently been identified as one of the most lethal forms of domestic violence. Historically, "choking" was rarely prosecuted as a serious offense because victims minimize the level of violence and police and medical personnel fail to recognize it. Investigation starts when the 9-1-1 call is received. Dispatchers and EMS can be trained to recognize signs and symptoms of strangulation; raspy voice, "red face," scratches about the neck, etc. Often these victims will make statements to EMS or will use specific words that may prompt directed questioning or examination. The injuries associated with strangulation can be life threatening and need to be recognized early. Recognition and treatment can save a life.

52 OH MAA: Opiates, Alcohol and Methamphetamines

Jeff Stewart, BS, NREMT-P,
Director of Clinical Services & Education,
Cataldo Ambulance Service, Inc., Somerville, MA

This program will describe the basic epidemiology of opiate, alcohol and methamphetamine use and the impact these substances have on the EMS system. Primary signs and symptoms of overdose and toxicity will be reviewed, as well as myths associated with the 3 substances. Current prehospital treatment modalities will also be addressed.

53 Hypertonic Saline: The Perfect IV Fluid?

Kenneth Navarro, MEd, CE Coordinator,
University of Texas Southwestern Medical Center at
Dallas Emergency Medicine Education, Hurst, TX

Despite major advances in the management of trauma victims, traumatic injury remains one of the leading causes of death during the first decades of life. Moreover, effective treatment of critically-injured patients with hemorrhagic shock continues to be a formidable challenge. Conventional resuscitation of these patients involves the intravenous administration of a large volume of isotonic or slightly hypotonic solution beginning in the pre-hospital environment. Previous and recent studies have suggested that an alternative resuscitation fluid may reduce mortality in these patients. This presentation will examine the available research on the use of hypertonic saline in the pre-hospital environment.

54 EMS Response to a Radiological Emergency

William E. Irwin, ScD, CHP,
Radiological Health Chief,
Vermont Dept. of Health, Burlington, VT

It is the ultimate HAZMAT event. You have patients with significant injuries who are contaminated with radioactive materials that you cannot see, smell or feel. How plausible is this scenario? What steps can and should you take to protect yourself, the patients, the destination hospital and the community? Who can get you help and what will they bring? Dr. Irwin is a volunteer firefighter on the Vermont Hazardous Materials Response Team and familiar with the challenges EMS faces in a radiological encounter.

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55 Ice/Cold Water Rescue Awareness

Michael Cannon, Team Leader,
Colchester Technical Rescue, Colchester, VT

This session will help EMS providers to approach and evaluate water rescue situations with a greater awareness of the dangers that these sometimes complex rescues create. This presentation will educate the first responder in training, equipment and resources needed to identify and deal with water rescues.

60 Prehospital Pain Management: From Ice Packs to Narcotics

Peter Weimersheimer, MD, FACEP,
Medical Director, Initiative for Rural Emergency Medical Services, Division of Emergency Medicine, Dept. of Surgery, UVM College of Medicine

One of the most important things that EMS and any health care provider can do for a patient is to help them feel less pain. EMS brings a wider array of tools to achieve that purpose than many providers realize. This session will review the interventions EMS has at its disposal to help manage pain in the pre-hospital environment. There will be discussion on when it is appropriate to use each of them and some of the hazards when pain management is applied improperly.

61 "Trauma Talk"

Lauri L'Ecuyer, D-ABMDI,
Assistant Medical Examiner Coordinator,
Office of the Chief Medical Examiner, Burlington, VT

What is the language of trauma? EMS providers have sometimes incorrectly reported incised wounds as lacerations, ecchymosis as contusions, etc. This talk reviews some of the basic terms we use when we are describing traumatic injuries. It covers blunt force trauma, sharp force injury, firearm injuries and a variety of other trauma that we will likely encounter as EMS providers.

62 The Medical Marijuana Debate

Jeff Stewart, BS, NREMT-P,
Director of Clinical Services & Education,
Cataldo Ambulance Service, Inc., Somerville, MA

This session will discuss the history of marijuana in the US, differentiate legalization from decriminalization, and sort through the current fact vs. fiction as it applies to the medical usage and current legalization process. Are we as healthcare providers comfortable with the use of our profession to legalize marijuana?

63 Current Concepts and Controversies in Prehospital Airway Management

Ian Black, MD, Associate Professor,
Dept. of Anesthesiology,
UVM College of Medicine

We always start our EMS assessment and patient care by managing the patient's airway. The concept of a clear passageway to allow the movement of air between the outside environment and the lungs seems simple. The reality of achieving a clear airway that is protected and well controlled for many patients is a much more complex proposition. Dr. Black will present some new devices, techniques and ideas for how EMS may be able to better manage patients with an at risk airway in the pre-hospital environment.

64 It's Always Something: Interesting Pediatric Cases from the ED

Stephen Leffler, MD, FACEP, Director,
Division of Emergency Medicine, Dept. of Surgery,
UVM College of Medicine and Director,
Emergency Dept., FAHC

Kids really aren't just little adults. They come to the emergency department with complaints that sound serious and turn out to be benign or problems that seem minor and turn out to be disasters. This session will present some of the more interesting and challenging pediatric cases that have important messages for EMS.

65 Scared in the Air or Safe and Sound on the Ground: Controversies in Air Medical Transport

Peter Lazzara, NREMT-P, BS,
Paramedic in Charge, Chicago Fire Department

With the drastically increasing number of air medical helicopter crashes and the high loss of life, is air medical transport still a viable means of transport for EMS today? This presentation will take a look at this hotly debated topic and weigh the pros and cons of air medical transport. Buckle up!



CONFERENCE 2009 DESCRIPTIONS

THE PILCHER LECTURE SERIES:

The lectures in this series are endowed by the University of Vermont College of Medicine Department of Surgery in honor of David Pilcher, MD for his contributions to the Emergency Medical Service's system in Vermont. This year there will be six lectures, given simultaneously, on areas of current interest by members of the faculty of the College of Medicine.

70 The Emergency Care of the Dialysis Patient

Wolfgang J. Weise, MD, FACP
Associate Professor, Department of Medicine

71 ACL Injury: From the Field to the Bench

James R. Slauterbeck, MD
Associate Professor,
Department of Orthopedics & Rehabilitation

72 STEMI: The Vermont Experience

Harold Dauerman, MD, FACC
Professor, Department of Medicine
Director, Cardiac Catheterization Lab, FAHC

73 The Effects of Sleep Deprivation on Emergency Service Personnel

Garrick Applebee, MD
Department of Neurology

74 Prehospital Care of the Newborn

Keith Robinson, MD (former EMT-I)
Resident, Department of Pediatrics

75 Stroke Update

Mark Gorman, MD
Associate Professor, Department of Neurology
Director, Stroke Program FAHC

ENDNOTE PRESENTATION:

Resuscitation of the Rich and Famous Peter K. Lazzara, BS, EMT-P, Paramedic in Charge, Chicago Fire Department

This case study presentation looks at famous traumatic deaths and how they might be different if today's EMS provider happened on the scene. Case studies include Abraham Lincoln, Princess Diana, Julius Caesar and Jimmy Hendrix. The participant will enjoy investigating that age old question... What if?

