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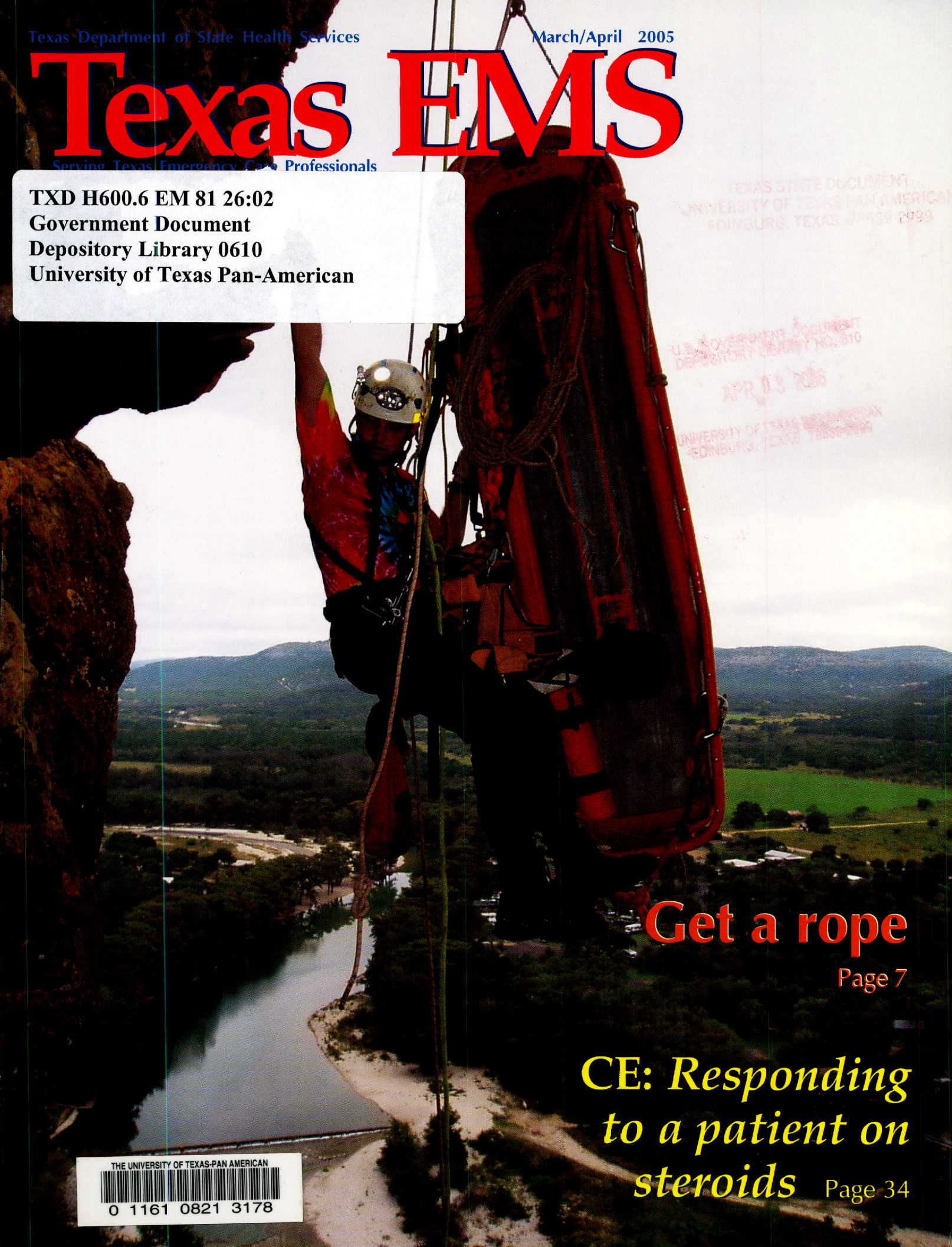
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Get a rope

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CE: Responding to a patient on steroids

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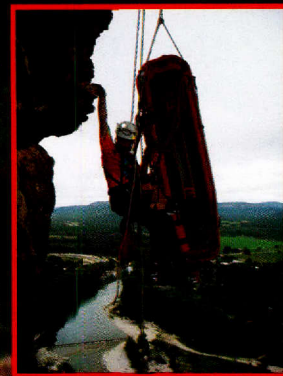
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COVER PHOTO: A photo taken at the Texas Rope Competition in Garner State Park. Photo by Greg Higgins.



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What's a Queen Bee doing hanging around with a bunch of Llamas? Texas Rescue Competition draws teams from around the state each October. By JENNIFER GUILLEN

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The November rains brought floods and devastation—and the need for helicopter rescues. Here's a couple of perspectives. By CASEY PING AND JEFF BRICKMAN

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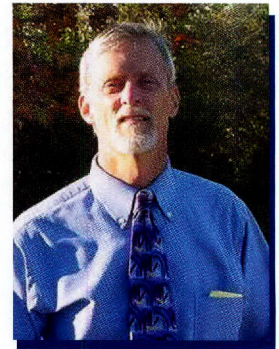
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Office tracking EMS/Trauma bill through Legislature



Steve Janda
Office of EMS/Trauma
Systems Coordination

March is the beginning of the busy season for many of you, and it's busy for the Office of EMS/Trauma Systems, too, as the Texas Legislature shifts into high gear. March 11 will be the last day for filing bills other than local bills, appropriations and bills that have been declared an emergency by the governor. Nearly 5,000 bills are introduced each session, and obviously most do not become law, nor do they even make it to the floor of either chamber. We're carefully following EMS/trauma system-related bills through our DSHS legislative offices. You can search and track bills through the process yourself by going to www.capitol.state.tx.us. That site also carries live debates from committee hearings and the House and Senate floors.

We should have more information soon about the Computerized Adapted Testing (CAT) as NREMT moves forward with its plans. See page 6 for more details. And speaking of NREMT, exam statistics will soon be posted on our website: www.tdh.state.tx.us/hcqs/ems. By the way, our website addresses will be changing eventually, but we are waiting to hear back from our IT folks as to exactly when that will occur. When it does happen, we'll send out notices through the usual stakeholder grouplists.

There have been a fair number of personnel changes at DSHS and at GETAC recently. First of all, our manager for the EMS South Zone, Fernando Posada, was deployed to Iraq in January to serve as a medic. We are keeping him in our thoughts while he is overseas. Brett Hart has agreed to step into the breach for Fern in the EMS South Zone while maintaining his usual duties and responsibilities as the group manager for EMS Compliance and Quality Assurance in the central office. Brett recently hired five new people on his team and that should help expedite the centralization of provider licensing. Some of the new folks will be performing criminal background checks, which, as you recall, are done on all new applicants.

The governor recently appointed one new member to the Governor's EMS and Trauma Advisory Council. Chris Maravilla from Round Rock joins GETAC as General Public member, replacing David Jiminez of El Paso, who resigned. John Simms, the Rural Trauma Facility member from Brenham, also resigned but his replacement has not yet been announced. Don't forget that the dates for the August GETAC meetings in Austin are changing to August 31-September 2.

EMS Week is coming up May 15-21. Please make sure that you order brochures, coloring books and stickers early from DSHS. You can find the order form on the inside cover of this magazine, or on the Office of EMS/Trauma Systems Coordination's website at www.tdh.state.tx.us/hcqs/ems/publications.htm. You may copy the magazine form or download the form and fax it to us at (512) 834-6736. If you would like to order an EMS Week planner from the American College of Emergency Physicians online, go to www.acep.org/emswweek. To save money, DSHS will not be sending out packets to each provider this year. Instead, we will post all of our documents on the website. See page 19 for details.

Stay safe and we'll see you at the next GETAC meetings on May 25-27 in Austin.

Computer-adaptive testing for EMS moves forward



The National Registry of EMTs (NREMT) announced in February that computer-adaptive testing (CAT) would begin for EMS professionals on January 1, 2007. After that date, paper-based testing will no longer be available. Many other professions, including nursing, now use this type of testing. EMS students will travel to testing centers located around Texas to take the computerized tests.

After looking at several options for testing available nationally, NREMT has chosen Pearson VUE as its testing vendor and has negotiated the best price possible for each level of EMS. The **additional** cost for using a testing center may be around \$50; however, actual costs will not be known until the contract is signed. Please watch our website and this magazine for information. NREMT is currently negotiating with the company to ensure that all areas of Texas and the nation have reasonable access to testing centers. The state EMS directors, including our own Terry Bavousett, will be providing input on this issue and others when they meet with NREMT in March to discuss the transition to CAT.

As part of the transition to CAT, NREMT will also work closely with education programs, providing them with secure logins on its website so that educators can better manage the education and testing process.

CAT has several advantages to the current method, including the ability to schedule a test anytime a test center is open; much faster results as the tests are scored electronically; and greater security as each test will be tailored to that individual and less likely to be compromised. Again, as we get more information on this, we will post it to our website.

Texas EMS Magazine ran an article that explains CAT in the March/April 2004 issue. To access an updated article online, go to www.tdh.state.tx.us/hcqs/ems. —*Kelly Harrell*

EMS Obituaries

Forrest Ray Stewart, 43, of Sulphur Springs, died December 10. An EMT-P, Stewart was a shift commander with Hopkins County EMS and had been employed there since 1995. Prior to that, he was a paramedic/dispatcher for Lubbock EMS and Titus County EMS.

Award honors fallen responders

In 2003, the 78th Texas Legislature passed House Bill 9, creating Texas First Responders Day and House Bill 1937, which created the Star of Texas Awards to honor and commemorate first responders who were seriously injured or gave their lives while performing duties as peace officers, firefighters and emergency medical first responders.

Every year, the Governor's Star of Texas Awards advisory committees review nominations for this prestigious award and make recommendations for the governor's approval. Three individuals will be chosen to represent the sacrifices of each area: peace officers, firefighters and emergency medical first responders. Awards will be presented during a ceremony around September 11th.

Nominations must be in writing and submitted to the Star of Texas advisory committees by completing the online form located on the governor's website at www.governor.state.tx.us/divisions/cjd/awards/TexasStarAward. The submission deadline is June 30, 2005.



In 2004, Governor Rick Perry presented the Star of Texas Award to the family of Paul Lujan, EMT-P, who died in a helicopter crash while responding to a child in respiratory distress.



Get a rope

Annual competition draws top rescue teams

By Jennifer Guillen

climbing and rappelling skills, hone their medical care and perfect their team work.

Teams may compete in any of three categories: basic, advanced and vertical. The basic site competition takes place on a steep slope,

while the advanced site is on the face of a 250-foot cliff. The vertical site is located in one of the many caves in the park. The day before competition begins, a team of judges ascends the mountain, affectionately called Ol' Baldy, to scout new sites, thus ensuring variation and fairness every year. Judges must find a site that simulates a realistic scenario, challenges the rescue teams, and yet is safe for the teams, patients and judges.

In order for a team to compete, they must have a "patient." On the morning of the competition, the patients must first undergo an extreme makeover. Under the capable hands of Jennifer Nottingham, Barbara Story and Jack Hawley, the moulage experts for TRC, these volunteers are transformed into victims of hiking, climbing and caving accidents. Sporting their new looks, the patients head up the mountain to the sites where their teams will compete. A typical scenario at the basic site could be a patient lying up against a tree trunk or a large

Where would you find llamas and mules working together on a mountain as a queen bee watches over a team of ROPE? Where else but the Texas Rescue Competition (TRC)? On Columbus Day weekend each October, rescue teams from across Texas gather to compete in the annual competition at beautiful Garner State Park. With its majestic crests, unforgiving slopes and formidable trails, Garner State Park offers exactly what chief judge Stan Irwin looks for: reality. Irwin who has been the chief judge for the TRC for 23 years, believes that every community should have a team trained in search and rope rescue. Greg Higgins, president of TRC, Inc., says the competition fills a need. "Time and financial constraints often restrict a community's ability to provide this training," he says. "TRC was formed with this in mind and attempts to fill a need in special rescue operations." TRC's goal is to provide rescue teams the opportunity to practice their

The vertical competition at Texas Rescue Competition offers challenging scenarios inside one of the many caves at Garner State Park. The contest takes place each October.

boulder, or perhaps in a gulley, partially covered with leaves and pebbles. At the advanced and vertical sites, the patients must rappel to their designated places. This may be on a very small outcropping of rock or in a shallow crevice in the cliff face at the advanced site, or a cave or a deeper crevice at the vertical site. This poses a particular challenge to the team, as they must first locate the appropriate cave, then rappel to the patient and attempt to extricate them with only minimal working space.

Once the patient is in place, staff members, acting as witnesses to the incident, go to the team's campsite and tell them of the need for a rescue. Using witnesses greatly increases the realism of the competition. Team members must work to calm the witnesses enough to glean the necessary information about the scenario, such as the patient's condition and the exact location. Witnesses may also be moulaged to simulate multiple patients. This introduces yet another challenge for the team: they must now delegate care for the witnesses while working to gather the information needed from them.

After they have obtained as much information as possible from the witnesses, the team assembles their equipment and begins the hike up the mountain, where they attempt to locate, extricate and evacuate the patient. The team relies on scouts to determine which trail will be most expeditious without compromising the safety of the team or patient. When the team finds the patient, the team's lead rigger will determine the most appropriate rigging system for the lead medic to reach the patient. In addition, he or she is responsible for the rigging system used to extricate the patient once the lead medic has determined that it is safe to do so. The medics are responsible for all patient care rendered throughout the extrication and evacuation process. Once the medics have determined that it is safe to move the patient, runners go ahead of the team and set up belay systems every 100 to 150 feet along the trail to ensure the safe evacuation. The team's time begins when they start up the mountain and ends when they arrive back at base camp. Using safety, technical, category, trail and medical judges, the teams are





evaluated based on their time, their rope and rigging skills, their communication skills both with base camp and among each other, the medical care they provide and, of course, safety.

The competition begins Friday morning and ends Saturday night with an awards ceremony. Along with 1st and 2nd place awards for each category is the High Point Award, or Traveling Trophy. The Traveling Trophy is awarded to the team with the highest points overall. Being a Traveling Trophy, the team must return with the trophy the following year, when it will then go to that year's High Point team. However, if the same team wins the trophy for three consecutive years, it becomes theirs to keep. Also given are several fun awards, such as an award for the best dressed team, the Queen Bee Award, given to a judge who was stung by bees, and the Beacon in the Night Award, given to a team who finishes late and has to descend the mountain in the dark. The most coveted award, however, is the Stan Irwin Sportsmanship Award, given to the individual who displays exceptional sportsmanship and compassion toward others.

This year the team competition was close, with the Irving Fire Department Mule team winning on the advanced site and the Llama Mountain Rescue team winning on the vertical site. With only a two-point difference between 1st and 2nd place, the High Point Traveling trophy was awarded to the Irving Fire Department Mule team. This year's winner of the coveted Stan Irwin Sportsmanship Award was the Llama Mountain Rescue team, the first time an entire team has been nominated in the history of the award. One of the "fun" awards was the Band-Aid Award presented to D.J. Walker and Richard Kruse of the Llama Mountain Rescue team for letting a couple of falling rocks hit them instead of the "patient."

The competition is held every year, rain or shine, on Columbus Day weekend in Garner State Park. Although most of the teams are from fire and EMS, the competition is open to any team wishing to perfect their search and rope rescue skills. For more information on the Texas Rescue Competition, the only one of its kind in the state of Texas, please visit our web site at: www.texasrescue.net.

AROUND THE STATE AND NATION EMS NEWS AND RESOURCES

By Kelly Harrell

Survey shows medics rely on medical IDs during calls



A survey conducted at Texas EMS Conference by a medical device manufacturer found that more than 95 percent of the respondents look for a medical ID during emergencies and more than 75 percent look for a medical ID immediately upon assessing patients. The survey also found that 95 percent of responders look at the patient's wrist to find an ID, while 68 percent look for an ID on the patient's neck. Asked to rank the effectiveness of the different styles of medical ID styles such as bracelets, necklaces, wallet cards, shoe tags and key chains, 59 percent responded that bracelets were the most effective style and 17 percent chose necklaces as the second most effective. The sponsors of the survey, American Medical ID, is one of the two approved vendors Texas has for OOHDR bracelets and necklaces. The company also makes medical IDs for other medical information such as allergies, prescribed medicines and diseases.



Medical Rangers looking for volunteers

Looking for a way to serve your community even more? The Texas Medical Rangers, an all-volunteer Medical Reserve Corps organized under the Governor's Office, respond to major public health disasters or emergencies across Texas at the governor's call. The Rangers volunteer only within Texas. All health professionals and individuals interested in health-related training or service are welcome to join. For more information, please call (866) 835-8936 or contact by email at TexMedRangers@uthscsa.edu. Also available is a website that includes more than 1000 disaster-related links and emergency phrase translations for 27 languages: www.texasmedicalrangers.com/training.html.

Stabbed boy calls 9-1-1 for himself

A seriously wounded 8-year-old boy was able to dial 9-1-1 and calmly tell the telecommunicator that his father had stabbed him during a rampage. The Tacoma, Washington, boy asked the dispatcher to send Army men or an ambulance, and then hung up after giving the wrong address. Dispatchers managed to call him back and keep him on the line while a search was underway. Emergency responders found the home a few minutes later when the boy's father flagged down a fire truck. He has been charged with the murder of the boy's mother and attempted murder of the 8-year-old.



Correction: The grand prize photo in the 2004 Texas EMS Photo contest was taken by Gary Lawson of Wichita Falls (not Greg Lawson).

Medtronic issues advisory

Do you have a LifePak 12 defibrillator/monitor with Adaptiv™ biphasic technology? Devices that have undergone an operating software re-installation or upgrade may have a manual default defibrillation setting reset to 125 joules instead of the energy settings you originally selected. The result is inappropriate energy delivery and failure of the device to escalate energy when set to do so.

The LifePak 12 defibrillator/monitors series stores many user selectable operating characteristics in software setup options. Medtronic has received two reports, one which involved a death, where it was observed that one of these settings, the default energy setting for manual modes (called PADS DEFAULT in the operating instructions), was set to a selection (i.e., 125 joules) other than the one selected. This condition may not be readily apparent to the user until the time of use when the unit displays the energy being delivered.

Medtronic recommendations:

- Check your bisphasic LifePak 12 user settings by printing the current user setup defaults (reference PRINT DEFAULTS in Section 9 of the operating instructions). The standard factory defaults are also highlighted in this same section.
- Compare the printed defaults to either the factory settings or any alternate selections you choose to support your protocols, e.g., 200J, 300J, Energy Protocol, etc.
- If the values are not in accordance with your protocol or are different than previously selected, correct them in accordance with the operating instructions in Section 9. In the event you have to update the manual default defibrillation energy setting, please call (877) 873-7630. Please have available your contact information, the device serial number and the change that was made.
- If you need assistance with any other LifePak 12 issue, please call the number above.

For more information, go to www.medtronic-ers.com.

BB guns can be deadly

BB guns and other non-powder guns kill an average of four people a year and injure nearly 22,000, according to a new report in the November issue of *Pediatrics*. The report was published on the heels of an incident in North Carolina in which a 13-year-old fatally shot an 8-year-old in the heart. Of the estimated 21,840 people injured each year, most of the victims were children between the ages of 5 and 14.

Asthma calls on rise

Seeing more asthma patients? Between 1980 and 1994, the prevalence of asthma in the U.S. increased 75 percent overall and 74 percent among children 5 to 14. Twelve million people reported having an asthma attack in the past year. Asthma accounts for more than 10 million outpatient clinic visits, and nearly two million emergency department visits each year.

— *Centers for Disease Control and Prevention*

Washington study shows appropriate use of epinephrine

A University of Washington study has confirmed that basic EMTs appropriately used epinephrine injections. Of the 66 cases, 22 patients received the drug while 44 did not. Of the 22 who received the epinephrine, physicians agreed with the treatment in 19 out of 22 cases. Of the 44 who did not, physicians agreed with that decision 38 out of 44 times.



Emergency funding available to providers, hospitals and FROs for emergencies

The EMS/Trauma System Account for Extraordinary Emergency Funding is available to assist licensed EMS providers, hospitals and registered first responder organizations if an unforeseeable event causes a degradation of service to the communities they serve. Situations that may severely reduce or incapacitate emergency response capability are considered extraordinary emergencies. The following organizations were awarded extraordinary emergency funding thus far in FY05:

- Pilot Point Fire Department received \$10,000 to assist in the replacement of a new engine for their ambulance.
- Olney-Hamilton Hospital EMS received \$12,580 for the replacement of their radio communication system.
- LaMarque Fire/Rescue received \$4,100 to assist in the purchase of AEDs.
- Brazos Point/Eulogy VFD received \$1,600 to assist in the purchase of communication equipment.

If you believe you may qualify for extraordinary emergency funding, contact your EMS Zone office or call (512) 834-6700, or email Henry Eke at henry.eke@dshs.state.tx.us or Ed Loomis at ed.loomis@dshs.state.tx.us.

CPR often inadequate

CPR during cardiac arrest is often performed inadequately by doctors, paramedics and nurses, according to two studies published in the *Journal of the American Medical Association*. Researchers found that the guidelines for administering CPR were frequently not followed, including these commonly cited problems: rescuers did not push hard or frequently enough on the victim's chest to restart the heart and breathed into the lungs too often, either through mouth-to-mouth or a breathing tube. Researchers noted that skills practiced during a real-life emergencies are much more stressful an environment than those practiced in a classroom. Also, successful real-life CPR can involve compressions that break ribs, and cause rescuers to tire quickly. The study was sponsored by Laerdal Medical Corporation and Philips Medical Systems, which jointly developed a medical device that evaluates the accuracy CPR compressions and other aspects of CPR.



EMS may see malaria in returning soldiers

EMS personnel treating soldiers who have returned from deployment in Iraq, Afghanistan, or India should be alert for symptoms of malaria, which can have a delayed clinical presentation. Patients may report fever, chills, headache, nausea and myalgia. Doctors at the Naval Operational Medicine Institute suggest asking questions about deployment and malaria medication history.

Access CardioSystems recalls AEDs

On November 10, the U.S. Food and Drug Administration (FDA) posted a voluntary recall notice for all Automated External Defibrillators (AEDs) manufactured by Access CardioSystems, Inc. Additionally, Access CardioSystems has gone out of business and will no longer be providing service, repair or technical support for any AEDs currently in the field, nor is it selling consumable products, such as battery packs and electrode sets, for those AEDs.

Recall Details

Defibrillators that have the serial numbers listed below should immediately be pulled from service:

Access AED, Access ALS, Catalog Number: 9100-0100, Affected Serial Numbers: 075690 - 077140, Defect: Failure to Deliver Shock

Access AED, Access ALS, Catalog Number: 9100-0100, Affected Serial Numbers: 075180 - 084760, Defect: Turn on Unexpectedly

The company has identified two problems with the AEDs listed above. The defibrillators with serial numbers 075690 - 077140 may experience a catastrophic failure of the shock delivery circuit. To date, the company has received 11 complaints of this occurrence in devices containing the component shown to be associated with this failure mode (representing a 0.8 complaint rate within the affected units). When this potential problem occurs, it is not possible to deliver additional defibrillation shocks.

The second problem, for AEDs with serial numbers 075180 - 084760, involves the "ON/OFF" button. In some cases, the "ON/OFF" button of the device may become inoperative after the device turns on unexpectedly. The company's investigation indicates to date that this failure mode is related to a specific manufacturer of a specific device component. To date, the company has received 33 complaints of this occurrence in devices containing the component (representing a 0.3 complaint rate within the affected units), none of which have involved patient treatment. If this potential problem occurs, the device may not defibrillate.

Because Access CardioSystems is no longer providing support or disposable parts for its products, the company recommends that those AEDs not covered under the recall should be pulled from service when the department runs out of supplies.

On Duty

Initial apps now on TexasOnline

You know that you can renew your application for certification or licensure on web. Now you can also apply for initial certification and licensure online. State law requires DSHS to charge a fee for TexasOnline for every applicant, *whether or not the applicant uses TexasOnline*. Please download your application the day you send it in to make sure that you are sending the correct fees. The TexasOnline contractor is presently reviewing the EMS provider licensing and that should be available soon. Check our website for the latest information.



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Trauma Systems Committee makes change in ATLS

At the November GETAC meeting, the Trauma System Committee discussed and now recommends that course-completion of the current Trauma Refresher Course For Surgeons at Wilford Hall Medical Center, San Antonio, be accepted as an equivalent of the requirement of ATLS for physicians in Rule 157.125.

Emergency Care Attendant Training funding available

In 2001, the 77th Texas Legislature enacted HB 2446 to facilitate or provide initial training of Emergency Care Attendants (ECAs) in the rural or underserved areas of the state. Funds have been allocated for the purpose of providing training grants to Emergency Medical Services training programs, registered First Responder Organizations, coordinators and/or instructors to conduct ECA courses in or near communities that lack local EMS training resources. Applications are accepted from September 1 through May 31 each year. Grant funds will cover the cost of instruction and textbooks, as well as approved course costs such as instructor mileage, printing costs and supplies.

Courses that have received funding this year include:

Archer City Ambulance	Olden VFD
Comanche Co. Hosp. Dist.	Princeton VFD
EMS of Nueces Canyon	Rankin EMS
Harper VFD	Raton FD
N. Lake Brownwood VFD/EMS	Rural Hill EMS
Post-Garza County EMS	Snyder FD

Eligibility requirements for these grants: (1) a minimum of three students, (2) students must agree to perform emergency care attendant services for at least one year with a local EMS provider or first responder organization and (3) service must be provided in a designated rural or underserved area of Texas, as determined by zip code and/or county.

For more information, go to www.tdh.state.tx.us/hcqs/ems/ECATForm.PDF or contact Patricia Ellis, at (512) 834-6700 ext. 6684, or via email at patricia.ellis@dshs.state.tx.us

AAA release draft position paper on drug storage

The American Ambulance Association has released a draft position paper on the storage of medications on ambulances. To access the position paper, go to www.the-aaa.org and click on Position Papers. DSHS covers medications storage in 25 TAC 157.11(d)(1), as the part of the rule that covers EMS Providers, 9-1-1 and non-9-1-1 services, and first responder organizations alike: ... *EMS vehicles must allow the proper and safe storage and use of all required equipment, supplies and medications and must allow all required procedures to be carried out in a safe and effective manner.* In addition, DSHS issued "EMS Pharmaceutical Storage and Maintenance" policy on March 11, 1999: *The EMS provider licensure or relicensure applicant shall provide evidence of an operation policy which shall list the parenteral pharmaceuticals authorized by the medical director and which shall define the storage and maintenance procedures for each in accordance with the manufacturers and/or FDA recommendations. Compliance with the policy shall be incorporated in the provider's Quality Management process and shall be documented on the daily unit readiness reports.* For information on DSHS regulations, contact your DSHS EMS Zone Office.

Weslaco firefighter-state rep files bill to aid EMS

State Representative Armando "Mando" Martinez, D-Weslaco, has filed HB 233, which would allow municipal police to go into the county to secure a possible crime scene when medical personnel are also sent there. Sheriff's deputies can't always get to the scene quickly, leaving EMS personnel waiting outside the scene while someone inside may need medical attention. Martinez is on leave from his job as a firefighter/paramedic with the City of Weslaco. He has filed a petition asking for a legal opinion on whether or not he can keep his job with the city while he serves as a state legislator. In 1990, an Attorney General opinion ruled in a similar situation that a Houston firefighter could not serve simultaneously as a firefighter and in the House.

Van Halen singer training as medic

David Lee Roth, former lead singer for the rock band Van Halen, has been training to become a paramedic. In December he rode out with New York City ambulance crews for several weeks. He claims that in 200 calls no one recognized him and he avoids publicity so that it does not 'diminish' what he is trying to do. Roth's father was a surgeon and Roth himself worked as a surgical orderly in the early 1970s.

Doctors find sky-high BAC

Doctors in Bulgaria made five tests on a drunken man to confirm a blood-alcohol content of 0.914—while he was still alive. The man was hospitalized in December when a car knocked him over and a breath test showed an incredibly high alcohol content. The police believed the test to be inaccurate because the man was conscious and talking. He was reported in stable condition after treatment for head injuries.

GETAC Recap

GETAC addresses upcoming legislative issues

The Governor's EMS and Trauma Advisory Council (GETAC) met on February 11, 2005, in Austin. A review of the November 22, 2004, meeting minutes elicited the following: request by Ed Racht, MD, that the date of the November meeting be added to the top of the document; a request by Mario Segura that corrections be made to note that the Injury Prevention Committee had recommended use of national data sets by the Texas EMS/Trauma Registry during its committee report to GETAC; and a request by Marti VanRavenswaay that the spelling of her name be corrected under the section entitled "Discussion of Reports/Public Comment on Action Items" on page 3 of the document.

With these corrections to be included, GETAC unanimously approved the minutes from its November 22, 2004, meeting on a motion made by Mr. Segura and seconded by Joan Shook, MD, and then heard reports from the chair, committee/task force chairs and Department of State Health Services (DSHS) staff.

Chair Dr. Racht announced the resignation of John Simms, Rural Trauma Facility representative, and the appointment to GETAC of Christopher Maravilla, who replaces David Jimenez as a General Public representative. He also announced

the new committee member selections, with the exception of those for the Medical Directors Committee, which are still under discussion. Complete lists of committee members will be posted on the Office of EMS/Trauma Systems Coordination (OEMS/TS) website at www.tdh.state.tx.us/hcqs/ems.

Dr. Racht reported that GETAC had provided written input to the National Association of EMS Directors regarding the draft National Scope of Practice Model. A copy of the letter will be forwarded to the OEMS/TS for posting on its website.

Staff, committee, task force and workgroup reports

DSHS Staff: Issues addressed included details about the new governor-appointed DSHS advisory council and the new department rule review process; ongoing changes in regulatory and administrative processes; the FY05 project regarding automated external defibrillators (AEDs) in state buildings; status of current rule reviews/revisions; key EMS/trauma systems-related legislation; legislative budget board recommendations about cuts to state agencies; centralized testing for EMS providers; extraordinary emergency fund monies currently available; challenges of the HB 3588 EMS/

Trauma System funding program; the steadily increasing participation of providers in the EMS/Trauma Registry; the Public Use Data File proposal; and a Memorandum of Understanding regarding data submission with the National EMS Information System.

Committee members were challenged by Assistant Commissioner for Regulatory Services Richard Bays to consider providing input to DSHS regarding EMS licensure being tied to abiding by patient triage guidelines of a provider's regional trauma system plan; monetary incentives from HB 3588 monies for designated trauma facilities willing to provide medical care capabilities beyond their current designation levels; financial consequences for designated trauma facilities lacking on-call trauma physician compensation plans; and whether DSHS or the Texas Department of Insurance would better address concerns about EMS subscription plans. On behalf of DSHS, Mr. Bays expressed his gratitude to GETAC and committee members for volunteering their time to serve and provide their valuable input.

Questions about staff reports may be directed to the OEMS/TS (512/834-6700) or the EMS/Trauma Registry (512/458-7266).

Combined EMS, Education and

Medical Directors Committees: EMS Committee Chair Pete Wolf reported that the combined committees heard a presentation by Phil Dickison, National Registry for Emergency Medical Technicians (NREMT), regarding computer adaptive testing; Texas/national statistics for NREMT exams; and the Longitudinal EMT Attribute & Demographic Study (LEADS) Project. He also reported that the combined committees were presented with recommendations from Pediatric Committee representative Muriel Lanford regarding pediatric-specific equipment for EMS providers, pediatric-specific education requirements for DSHS-credentialed trauma designation surveyors, and the addition of pediatric specific continuing education (CE) requirements for EMS personnel. The group recommended that the EMS Committee review the GETAC-approved draft Rule 157.11 to consider adding additional pediatric equipment to the supply list and that the Education Committee review the GETAC-approved draft Rule 157.38 to consider revising the general content areas to include a pediatric area, which is currently found within special considerations.

Trauma Systems Committee: Chair Ronny Stewart, MD, reported the committee reviewed the revised draft Rule 157.125 *Designation of Trauma Facilities*, and will be finalizing its recommendations at the committee's May meeting. He also reported that committee vice chair Jorie Klein, RN, has collaborated with stakeholders to develop hospital performance measures related to

the Designated Trauma Facility and EMS Account (HB 3588) disbursements, and that the Texas Hospital Association representative (THA) Dinah Welsh gave a status update of a legislative proposal that will significantly reduce the current hospital allocation portion of the account.

Pediatric Committee: Committee member Sally Snow, RN, reported that recommendations for pediatric-specific continuing education for EMS providers and guidelines for pediatric-specific equipment for ambulances were presented at the combined EMS, Education and Medical Directors committee meeting and that the recommendations were well received with minor suggestions. She also reported that pediatric patient guidelines for trauma regional advisory councils were presented at the RAC Chairs meeting, and requested that there be a standing agenda item at the quarterly RAC Chairs meeting to solicit feedback on the implementation of its recommended guidelines. Ms. Snow also stated that still pending is the status of the request for legal opinion sent to the Texas Health and Human Services Commission (HHSC) asking for clarification of the current exemption of children's hospitals from meeting trauma designation requirements to receive disproportionate share monies in view of a now-established state designation process for these pediatric facilities.

Injury Prevention Committee: Chair Mario Segura, RN, reported that the committee met jointly with the Data, Informatics and Research Task Force. The group discussed

plans for Texas EMS Conference 2005, where it plans to work with the EMS Trauma Registry on a shared booth in the exhibit hall. Committee member Molly Wilkins is also going to submit a preconference proposal for a two-hour suicide prevention workshop, and a proposal for a one-hour suicide prevention workshop during the conference. The committee heard a presentation from John Posey of Mothers Against Drunk Driving, who outlined that group's legislative agenda for sobriety checkpoints. Mr. Segura reported that after months of technical problems, the Injury Prevention Manual will soon be on the OEMS/TS website. And lastly, the committee voted to support the idea of the Texas Foundation for EMS and Trauma Care.

Medical Directors Committee: Dr. Racht reported that the committee discussed the Comprehensive Clinical Management Plan (CCMP) Strike Force Team and implementation of two or three pilot sites in the next several months, and anticipates endorsement of a rule proposal within about a year. The committee discussed the bill filed for stroke centers, and the American Heart Association's Steve Brown addressed members about proposed stroke designation center legislation. Legislation pertaining to field phlebotomy services by EMS providers on behalf of law enforcement was discussed and the committee discussed several concerns it has with the impact the legislation could have on providers and personnel.

Air Medical Task Force: GETAC liaison Shirley Scholtz discussed the

committee's January 18, 2005, meeting in San Antonio; recent FAA recommendations regarding air medical providers; and its updated recommendations to GETAC regarding a proposed state-accreditation process for air medical providers, formation of RAC air medical transportation committees, and changes to trauma facility designation rules. THA representative Dinah Welsh presented a letter of support for the Air Medical Task Force's recommendations with several amendments.

Data, Informatics and Research Task Force: Chair Bob Folden, reported that the task force met with the Injury Prevention Committee and discussed support for the EMS Trauma Registry's public use data file and that it needed to include the CODES data; and the fact that there are a number of items in the Healthy People 2010 that Texas does not collect and that we need to expand our data set to include those items. He also reported that the February 3 Federal Register reported that the Centers for Disease Control and Prevention released a Draft Acute Injury Care Research Agenda for public comment and recommendations. It is found on page 5685.

Rural Task Force: Chair Pete Wolf, EMT-P, reported that the task force advocates the expansion of National Registry tests sites to better serve ru-

ral and frontier areas, and requests that DSHS to address the issue with NR staff. He announced that the Texas Elected Officials' Guidebook to rural EMS was completed and a limited number had been printed. It will be located on the OEMS/TS website; anyone wishing to have some printed can do so.

Discussion of reports

GETAC heard public comment on the reports and other general issues.

Action items

A motion was made by Dr. Stewart and seconded by Dr. Shook to endorse the Texas Hospital Association amendments to the recommendations of the Air Medical Task Force as written in the letter presented to the council. The motion passed unanimously.

A motion was made by Dr. Stewart and seconded by Dr. Shook that the Air Medical Task Force become a standing committee. The motion passed unanimously.

A motion was made by Dr. Stewart and seconded by Mr. Segura to revise Rule 157.12 *Rotor-wing Air Ambulance Operations* and Rule 157.13 *Fixed-wing Air Ambulance Operations* to adopt CAMTS standards into the rules as a minimum with following provisions:

a. At the time the rule goes into effect, non-CAMTS-accredited air ambulance EMS providers would be given two years to come into compliance; and

b. New air ambulance providers seeking Texas licensure could apply for a 12-month provisional license from DSHS before CAMTS-accreditation would be required.

The motion passed unanimously.

A motion was made by Mr. Segura and seconded by Dr. Stewart for the council to endorse the National EMS Data Set. The motion passed unanimously.

A motion was made by Mr. Wolf and seconded by Ms. Van Ravenswaay to approve Rule 157.14 *Requirements For First Responder Organization Registration* with the minor changes that were made. The motion passed unanimously.

A motion was made by Dr. Stewart and seconded by Maxie Bishop that the council endorse the Medical Directors Committee's position on field phlebotomy services by EMS providers on behalf of law enforcement in HB 14 and HB 80. The motion passed unanimously.

A motion was made by Mr. Segura and seconded by Dr. Stewart to endorse DSHS Texas EMS/Trauma Registry establishing a Memorandum of Understanding regarding data submission with the National EMS Information System. The motion passed unanimously.

General Public Comment

Public comment was heard on a number of issues.

The next meeting date for GETAC is May 27, 2005, in Austin. Standing committees and task forces will meet on May 25 and 26. Please note: NEW GETAC and committee meeting dates in August are August 31, September 1 and 2, in Austin. GETAC and committee meeting dates in November will be held on the 19 -21, and in conjunction with the 2005 Texas EMS Conference.

Adjournment: The meeting adjourned at 3:15 p.m. —*Steve Janda*

GETAC Meetings 2005

May 25-27

NEW DATE!

August 31-September 2

November 19-21



Ready Teddy, aka Ed Loomis, and his god friend, James Thomason, get ready for EMS Week.

List of Resources

- National Highway Traffic Safety Administration's Safe and Sober campaign
www.SafeandSober.com
www.nhtsa.dot.gov/toc.html
- American Trauma Society
www.amtrauma.org
- National Safety Council
www.NSC.org
- American College of Emergency Physicians
www.acep.org

EMS Week

May 15-21, 2005
Texas Trauma Awareness
Month
May 2005

Start planning now for the week and month that honor emergency responders

Have you started planning for National/Texas EMS Week, May 15-21? What about Trauma Awareness Month in May? Texas EMS Week honors all who work as part of the EMS and Texas Trauma Network. These two events are the perfect time to tell people in your community about the important role you play in the health of your community. And that's a message that you can't emphasize too much as your workload increases and government budgets shrink. It's also a perfect opportunity to bring the message of safety to your community. If you have questions or comments about EMS Week or Trauma Month, or simply want some help in planning some activities, call us at (512) 834-6700. You'll find some ideas for EMS Week activities at www.tdh.state.tx.us/hcqs/ems.

Here are a few things that might help you plan:

The American College of Emergency Physicians once again has produced complimentary planning packets to help communities promote EMS Week activities. The theme of this year is: *EMS: Ready, Responsive, Reliable*, and focuses on the commitment and dedication of the EMS providers who provide an essential community service every day nationwide. ACEP's packet can be ordered online at www.acep.org. Packets can also be ordered directly from ACEP by calling (800) 798-1822, then pressing 6 for publications when prompted by automated voice mail.

DSHS will also have complimentary EMS Week materials available online at www.tdh.state.tx.us/hcqs/ems. This information will be more Texas-specific and will include press releases, radio spots, sample resolutions and ideas for EMS Week activities. In Texas, we'll focus on what to do before help arrives—bystander first aid and CPR—and child passenger vehicle safety. And of course, we'll add general information about EMS.

Injury prevention brochures and Ready Teddy coloring books and stickers are still available. Please use the order form on page 2 of this issue to order coloring books and other materials you'll need for EMS Week activities. And remember, order early!

For more information, call us at (512) 834-6700.



November 20-23, 2005

Texas EMS Conference 2005 Austin, Texas

We're back in Austin for 2005 at the Austin Convention Center. And we're planning some of the best EMS education possible.

As always we expect to have state-of-the-art EMS exhibits. The exhibit hall fills 132,000 square feet. You can't see this much EMS-related equipment under one roof anywhere else in Texas. If you love to look at EMS equipment, then you'll be in the right place.

The low conference rates are the same price as last year. That means that for the price of one registration, you'll get the always-popular conference bag, access to 15 hours of first-class continuing education, coffee breaks and two full lunches (including the famous chicken-fried steak lunch).

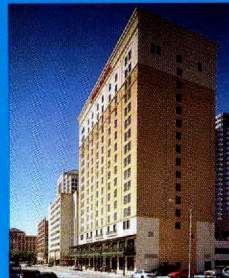
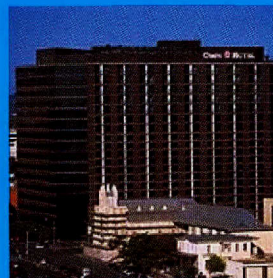
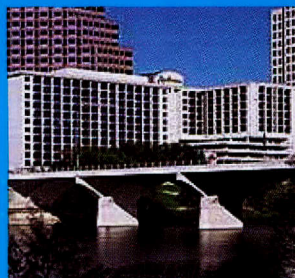
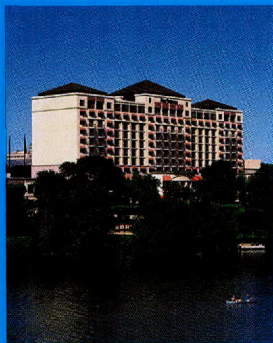
We have special conference rates at five downtown hotels—all within walking distance of the convention center. Make your hotel reservations early—space at the conference hotels goes fast, especially at the host hotel, the Hilton. See you in November!

HOTELS

Texas EMS Conference has contracts for special conference rates with five downtown Austin hotels.

Top row, from left, the host hotel, the Hilton-Austin, the largest of all the downtown Austin hotels. And right, the Four Seasons Hotel.

Bottom row, from left, the Radisson, the Omni, and the Hampton Inn.



Hilton-Austin
\$80/\$100/\$120/\$140
500 East 4th Street
Austin, TX 78701
(512) 482-8000

Omni-Downtown
\$80/\$80/\$110/\$110
700 San Jacinto
Austin, TX 78701
(512) 476-3700
(800) THE-OMNI

Four Seasons Hotel
\$125/\$165
98 San Jacinto Blvd.
Austin, TX 78701-4039
(512) 685-8100

**Hampton Inn & Suites –
Downtown Austin**
\$80/\$80
200 San Jacinto Blvd.
Austin, TX 78701
(512) 472-1500 or
(800) HAMPTON

Radisson-Town Lake
\$80/\$90/\$100/\$110
111 East Cesar Chavez
Austin, TX 78701
(512) 478-9611 or
(800) 333-3333

Schedule

Conference At-A-Glance

Sunday, November 20

1:00 pm - 7:00 pm Registration in Convention Center
Inside Exhibit Hall 4
3:00 pm - 7:00 pm Exhibit Hall Opens
with Welcome Reception

Monday, November 21

7:00 am - 6:00 pm Registration in the Convention Center
Inside Exhibit Hall 4
8:15 am - 9:30 am Opening Session in Ballroom D
9:45 am - 10:45 am Workshop Breakouts
10:00 am - 6:00 pm Exhibit Hall Open
11:00 am - 12 noon Workshop Breakouts
12 noon - 1:00 pm Lunch in Exhibit Hall
2:00 pm - 3:00 pm Workshop Breakouts
3:15 pm - 4:15 pm Workshop Breakouts
4:30 pm - 5:30 pm Workshop Breakouts
*Workshop Breakouts in Ballroom D-G,
Rooms 11-19*

Tuesday, November 22

7:00 am - 3:00 pm Registration in the Convention Center
Inside Exhibit Hall 4
7:30 am - 8:30 am Early Bird Workshop Breakouts
8:45 am - 9:45 am Workshop Breakouts
9:00 am - 11:45 am Exhibit Hall Open
(closed during Awards Luncheon)
10:00 am - 11:00 am Workshop Breakouts
11:45 am - 1:15 pm Awards Luncheon-Exhibit Hall 3
(Exhibit Hall open immediately after
Awards Luncheon)
1:15 pm - 3:00 pm Exhibit Hall Open
2:00 pm - 3:00 pm Workshop Breakouts
3:00 pm Exhibit Hall Closes
3:15 pm - 4:15 pm Workshop Breakouts
4:30 pm - 5:30 pm Workshop Breakouts
*Workshop Breakouts in Ballroom D-G,
Room 11-19*

Wednesday, November 23

8:30 am - 9:30 am Workshop Breakouts
9:45 am - 10:45 am Workshop Breakouts
11:00 am - 12 noon Workshop Breakouts
*Workshop Breakouts in Ballroom D-G
Room 19*
Conference Adjourns

GRAND PRIZE - \$250; FIRST PLACE - \$175; SECOND PLACE - \$100; THIRD PLACE - \$75 AND HONORABLE MENTION - \$50

2005 Texas EMS Photography Contest entry form

Photographer's Name _____

Employed by _____

Address _____

City _____ State _____ Zip _____

Phone (HM) _____ / _____ (WK) _____ / _____

E-mail Address _____

Mail to: Texas Department of State Health Services/EMS
1100 W. 49th Street, Austin, TX 78756-3199.

Deadline for entering: November 10, 2005

Tape this form to the back of the photo.

Brief explanation of scene: _____

Photo Contest Rules

- **Winning categories and prizes:**
One Grand Prize winner (either color or black and white)—wins \$250 and a plaque.
One First place—wins \$175
One Second place—\$100 and a ribbon.
One Third place—\$75 and a ribbon
One Honorable mention—\$50 and a ribbon
- **Deadline:** Entries must be received no later than **November 10, 2005**. All photos will be displayed at Texas EMS Conference and winners will be printed in the January/February issue of *Texas EMS Magazine*.
- **Photos:** Send unmatted prints, in color or black and white (5 X 7 to 9 X 12 is best). Fill out the entry form, tape it to the back of your photograph, and mail your entry to: Texas Department of State Health Services/EMS, 1100 West 49th, Austin, TX 78756-3199.
- **For digital photos:** Please print out a copy and mail a printed copy with the entry form attached. You may also e-mail the photo in a .jpg format, use CMYK colors and e-mail to Dawn.Whitfield@dshs.state.tx.us.
- The photographer's name will be printed along with the photo.
- Anyone is eligible; no entry fee is required.
- Photographs should show good patient care.
- The ownership of the negative will remain with the photographer.

Local & Regional EMS News

Is your EMS service mentioned in Local and Regional EMS News?

It needs to be! Are you planning a fundraiser? A training class? A public education program? Do you have new people on board? Have you elected new officers?

Send your news to:
Texas EMS Magazine
Kelly Harrell, Editor
1100 West 49th Street
Austin, Texas 78756-3199
(512) 834-6700
Fax (512) 834-6736

We welcome letters to the editor on EMS issues, magazine articles or other topics of interest. We print letters to the editor as we have space.

EPFD adds to its fleet

The El Paso Fire Department recently added ten medical units and a new fire battalion to its fleet. The new medical units will be stationed throughout the city. Five of the units will operate during the peak hours in the afternoon and the other five units will operate during the evening hours.

Waco responders learn medical-specific Spanish

Approximately 40 Waco-area emergency responders recently took a 40-hour course in Spanish. The course is specifically for emergency responders and teaches Spanish phrases specific to law enforcement, fire and

medical emergencies. The course also introduced the responders to some of the differences in Hispanic culture.

Merkel EMS honors personnel

In December, Merkel EMS held its annual Christmas banquet. The service's EMS Personnel of the Year were honored at this banquet. Winners this year were Cathy Knight, EMT-I; Tamera King, EMT; and Pam Orsborn, EMT.

Wise County gets local air medical service

In February, Wise Regional Health System, in Wise County, announced that Southwest Heli-

Merkel EMS honored, from left, Cathy Knight, EMT-I; Tamera King, EMT; and Pam Orsborn, EMT, as its EMS Personnel of the Year during the service's Christmas banquet.



Local & Regional EMS News



From left, Randy Crowe, EMT-P, presents the 2004 Volunteer Award to Edward Jaworsky, EMT-I, Hillsboro Fire Department. Texas 4 DMAT honored Jaworsky for his deployment to Florida to assist with the recovery efforts after several hurricanes struck the Florida coast during the 2004 hurricane season.

copters Inc. recently began using Decatur as a base for emergency care helicopter service. The helicopter is used to transfer seriously injured and ill patients into Dallas/Fort Worth Metroplex hospitals more quickly. WRHS had been calling CareFlite, which has helicopters based in Dallas, Fort Worth and Denton, when air medical transportation was needed. By having a helicopter stationed in Decatur, 20 minutes can be cut off the response time into the Wise County area.

TX 4 DMAT honors 2004 Volunteer of the Year

In December, members of Texas 4 Disaster Medical Assistance Team, based in the Dallas/Fort Worth area, attended a

Christmas party sponsored by Denton Regional Medical Center. During the party, Edward Jaworsky, EMT-I, Hillsboro Fire Department, was honored as TX 4 DMAT's 2004 Volunteer of the Year. In 2004, Jaworsky was deployed to Florida to assist with the recovery efforts following several hurricanes.

SEMS receives grant

Stinnett EMS recently received grant monies totaling more than \$4,000 from the Office of Rural Community Affairs, Emergency Medical Services Enhancement Program. The grant funding will help two individuals finish paramedic courses and fund a basic EMT course. SEMS, located in the Texas Panhandle, was one of 794 grant recipients

who received grant funding from ORCA between September 2003 and August 2004.

PEMS receives new ambulance

Paris EMS recently purchased a 2005 Ford F350 Type I ambulance. The new ambulance replaced PEMS' oldest ambulance, a 1999 Ford F350 Type I ambulance with more than 200,000 miles on it. PEMS has seven ambulances in its fleet.

Angel Flight SC adds Houston base

Angel Flight South Central recently opened a Houston satellite office at Hobby Airport. AFSC decided to create an office

Local & Regional EMS News

in the Houston area because approximately 70 percent of its flights involve moving patients in and out of Houston hospitals, such as The University of Texas M.D. Anderson Cancer Center and Texas Children's Hospital. AFSC has 450 active volunteer pilots, with 132 of them based out of Houston. AFSC also has "ground angels," volunteers who move patients from airports to health care facilities and back. AFSC has run approximately 2,200 flights annually for the last two years, up from 925 in 2001 and 1,614 in 2002. AFSC is completely supported by donations from corporate sponsors and individual donors. Using volunteer pilots, Angel Flight SC provides free non-emergency air transportation to specialized health facilities for patients in Texas, Arkansas, Louisiana, Oklahoma, New Mexico, Mississippi

and Tennessee. AFSC is one of six volunteer pilot organizations that make up Angel Flight America.

Emergency mobile command trailer coming to Piney Woods area

In February, government officials in Nacogdoches, San Augustine and Shelby counties agreed to use nearly \$200,000 in Department of Homeland Security funds to purchase a new emergency mobile command trailer for the tri-county area. The Piney Woods region received first-hand knowledge of how useful mobile command centers can be when the region became the area of the largest search and recovery mission in United States history following the February 2003 explosion of the space shuttle Columbia. The trailer is

expected to be delivered in June.

STAR Flight to add bigger helicopters to its fleet

STAR Flight in Austin recently announced plans to add two larger helicopters within the next year. By adding these larger helicopters, STAR Flight will be able to expand its service area and capabilities because the larger helicopters can carry more fuel, equipment and people. Carrying more fuel allows the service to reach outlying hospitals, and being able to carry more equipment and people will allow the service to transport patients with conditions that require more equipment, such as intensive-care-bound newborns. The helicopters will also help on calls that require more people, such as high-risk pregnancies that may require medical staff for both the

From left, CCEMS staff members Greg Wolf, LP, clinical manager, and Kevin Traynor, LP, clinical supervisor, were both instrumental in increasing the number of community and EMS educational courses being offered through the Charles R. Hooks Education Center in Spring.



Local & Regional EMS News

mother and the baby if the baby is born in mid-air. Having the ability to carry more people also allows the service to transport parents with an injured or ill child or to transport specialty medical teams to patients. Currently if a parent rides in the helicopter with a child, one of the staff members stays behind. The helicopters will also be used in firefighting and search-and-rescue missions.

CCEMS expands EMS training, community education

Cypress Creek EMS, in Spring, recently began receiving financial support from the ESD 11 in the Houston area. The increased financial support now allows CCEMS to offer not only CPR, first aid and babysitter's training courses, but to offer more EMS classes for the community and more CE classes for EMS personnel. The courses are offered through the Charles R. Hooks Education Center, also located in Spring.

Rosehill VFD honors personnel

Rosehill Volunteer FD announced the award winners for its honors positions. RVFD's honors positions are given to members who show outstanding service and are voted on by the entire membership. Firefighter of the Year was awarded to Tyler Cronin, EMT. EMT of the Year

was awarded to Sylvia Gomez, EMT-P, and Chris Reyes received Rookie of the Year award. Lee Sulecki, EMT, was awarded the Officer of the Year award. A special Chief's Award went to Donna Lowe for her dedication to RVFD and its members.

Bystander CPR, easily accessible AED save high school student

In January, a 17-year-old McKinney High School junior collapsed from cardiac arrest during a Lions Club annual alumni soccer game on the school property. While MHS trainers and bystanders performed CPR on the student, the AED in the school gymnasium was brought out to the field. After the AED delivered a shock, the trainers and bystanders continued with CPR until he regained spontaneous respirations. He was transported to North Central Medical Center in McKinney and then on to Medical City Hospital in Dallas for further treatment. The McKinney Independent School District had purchased the AED prior to the beginning of the school year with a donation from the McKinney Lions Club.

Lubbock FD honors personnel

In January, Lubbock FD presented medals of valor to several personnel in recognition of their

TEXAS EMS CERTIFICATIONS AS OF FEBRUARY 20, 2005

ECA	4,525
EMT	27,154
EMT-I	3,719
EMT-P	10,238
LP	5,479
TOTAL	51,115
COORDINATOR	352
INSTRUCTOR	1,878

actions at a trench rescue and entrapment scene last March. The medals were presented to Chris Addington, Engine 4 firefighter/LP; Brent Smith, Engine 4 firefighter/EMT; and James Mills, Truck 4 firefighter/EMT. The entire B-shift crews of Engine 4 and Truck 4 also received citations for their actions at the same incident.

November
rains pull
STAR Flight
into quick
service

To the rescue

The STAR Flight crew just *thought* that they were going to spend a fun week at Texas EMS Conference. During mid-November 2004 a low-pressure system positioned over west and central Texas combined with warm moist air moving up from the Gulf of Mexico, creating a catalyst for a major rain event and severe flooding. The system meant continuing

rain over much of central and south Texas and after several days of rain the soil was saturated, resulting in significant runoff.

The week of November 14 continued with the soaking rains that had plagued central

Texas. As the week progressed, it became apparent that the continued rain had the potential to be a factor in the upcoming Texas EMS Conference. STAR Flight considered whether it would move forward with plans to place an aircraft in the exhibit hall. There were several water rescues throughout the week, but the sun finally broke through on the 18th and things looked like they may clear up.

The pre-conference helicopter packaging class was able to go as planned and all the participants got the aviation and flight orientation sessions

done before the rain began. By then most of the helicopters had moved into the exhibit hall, although some aircraft were stuck at the Travis County hangar waiting for the weather to clear. By 1600 hours we had all of the helicopters in the hall. And the rain kept falling throughout the day and into the night.

On Sunday the exhibit hall opened and our booth had plenty of traffic from attendees looking at the aircraft and visiting with Austin-Travis County EMS and STAR Flight personnel. That day the on-duty STAR Flight aircraft responded to several weather-related events.

By early Monday morning, it was clear that the bad weather was going to continue. With the on-duty STAR Flight aircraft actively involved in rescues, management made the decision that the STAR Flight aircraft in the exhibit hall needed to be placed in-service. An aircraft had never had to be pulled out mid-show and we were unsure exactly how we would get it done. But the Austin Convention Center and DSHS staff dropped what they were doing and we developed a plan. Luckily we were near the back door. As exhibitors began to show up, they all lent a hand and in no time the aircraft was out the door and down the ramp. STAR Flight mechanics unfolded the blades, and the aircraft lifted off and headed to the STAR Flight Hangar where it met up with the rest of the crew. Then we took off to respond to request for assistance. Just like business as usual. — Casey Ping and Jeff Brockman



Above, top, Mike Self, STAR Flight mechanic, and Willy Culberson, director of aviation operations and pilot for STAR Flight, work to ready their aircraft for takeoff during Texas EMS Conference. Below, STAR Flight is taking off from the conference exhibit hall.





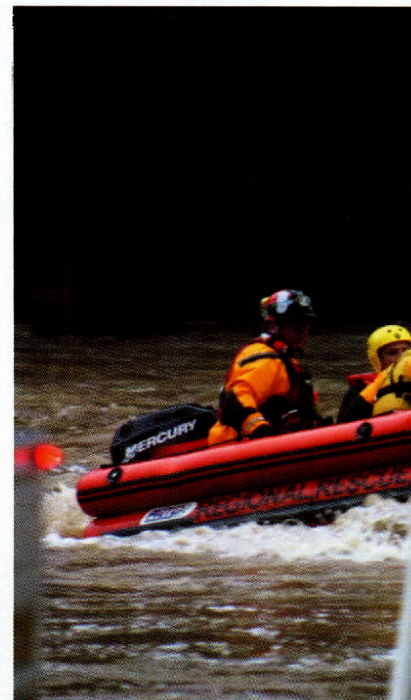
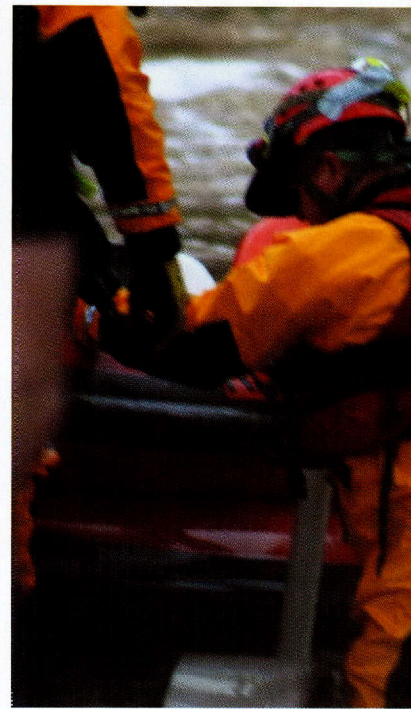
Above, River Rentals wasn't getting much voluntary business during the November rains that flooded creeks and rivers around New Braunfels. Photos above and below by Alex C'Rourke, STRAC.

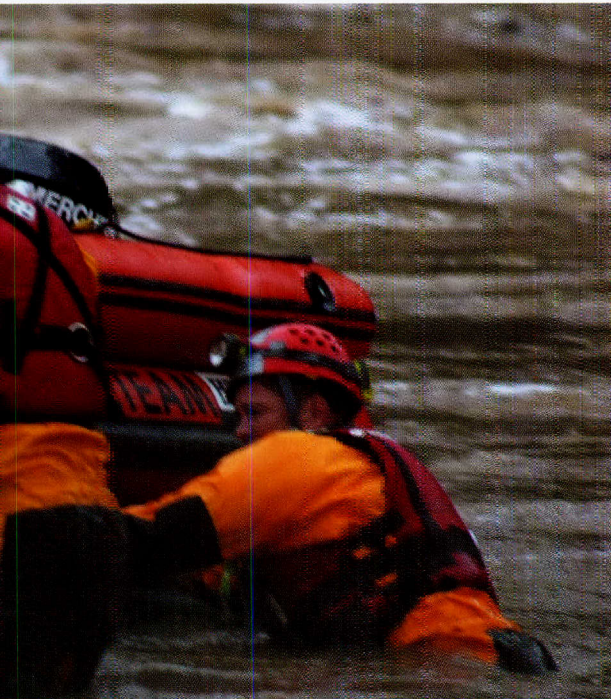
The STRAC regional rescue team brought in resources to help local emergency systems that were under siege from a combination of flooding, fires and injuries.





Above, the STRAC team was able to help two emergency responders whose boat had gotten wrapped around a tree in the raging water. Below, at one point, the water came up so quickly that several vehicles were in danger of being trapped. Photos above and below by Alex O'Rourke, STRAC.





System works for November flood rescues

Do regional rescue teams, like the one in the Southwest Texas Regional Advisory Council, improve emergency response? Just ask a couple of emergency responders who were rescued from a boat overturned by Class 3 rapids during the November 2004 floods. Two rescue personnel entered the creek around 9 a.m. on Monday, November 22, to pull out a woman who had driven into a low-water crossing and was clinging to tree branches. As rescuers tried to navigate the creek, the churning water slammed their boat into a tree, wrapping and partially submerging the boat. Both men pulled themselves up into the tree, climbing higher as the water rose.

Luckily, STRAC was able to send in its regional rescue team. That boat launched and was able to get the two stranded men to safety. Another rescue team was able to rescue the woman. The STRAC team is part of the RAC's Emergency Operations Division, which formed in 1999. The division has two components: the Rescue Team and the Emergency Response Unit, which uses the command communications trailer you might have seen at Texas EMS Conference.

STRAC team members come from sponsoring agencies that sign agreements to participate with STRAC. Team members are chosen on a competitive basis and all are highly-experience rescuers. Team members must be at least an EMT swiftwater technicians and must pass a swim test to be considered.

STRAC's Emergency Operations Division is one of the agencies that participates in Texas Task Force-1 USAR Water Strike Team program, and has responded to numerous state missions, including Tropical Storm Allison, Hurricane Claudette and the weeklong flood event in the Hill Country in July of 2002.

Most people don't know – or care – if they are being rescued by one organization or a group of several organizations. But those who are building an EMS/Trauma system in Texas know this: having a system in place can make a big difference. Ask anyone who's been there.

The STRAC regional rescue team was able to launch into the swollen creek and bring two responders to safety. The helicopter was not able to launch during that rescue due to low clouds and heavy rain. Both photos above were taken by Jason Meredith, STRAC.

Agencies responding to the 2004 floods included:

San Antonio FD/EMS	Austin-Travis County EMS
St Hedwig Vol FD	STAR Flight
Cibolo Vol FD	Marion Vol FD
Seguin FD/EMS	New Braunfels FD/EMS
Schertz FD	Austin FD
Bexar/Balverde VFD	STRAC

By Linda Reyes

FAQ *EMS Standards*

Q: Why are you asking for my social security number on my EMS application form?

A: Disclosure of your social security number is required on all EMS application forms for certification or licensure (electronic or paper). This is mandated under Texas Family Code, Section 231.302. The statute requires DSHS to assist in the administration of laws relating to child support enforcement. As always, social security numbers are kept confidential and will be used for identification and reporting purposes only. You can read the Family Code at: www.capitol.state.tx.us/statutes/fa.toc.htm. Also see Social Security Online at <http://ssa-custhelp.ssa.gov>. Enter the following search text: "When am I legally required to provide my Social Security number?"

Q: I just completed my EMT course. Can I submit my application electronically, even though I have not taken the National Registry (NR) exam?

A: Yes. The TexasOnline system was designed to allow students to submit an initial application electronically, either before or after taking the NR exam. If you have passed the NR exam, the electronic application will prompt you to list your NR number and expiration date. If you have not passed the NR exam, your application will remain "Pending" on the Certification Query site until we receive your exam information from NR, provided you have no other deficiencies.

Q: I have submitted my EMT initial application through TexasOnline. Can I schedule my exam date now?

A: Even though you submitted your state application and fee, you will not be allowed to schedule the ECA or EMT exam until we receive your course com-

pletion roster from your course coordinator. Check the Certification Query site for your application status. If your application status reads "Pending," you cannot schedule your exam. When your application status reads "Eligible for testing" or "Eligible for National Registry exam," you may schedule your exam through our web site at: www.tdh.state.tx.us/hcqs/emsEMSExamintroduction.htm.

Q: I just completed my paramedic course. Can I submit my application electronically, even though I have not taken the National Registry (NR) exam?

A: Yes. If you have not passed the NR exam, your application will remain "Pending" on the Certification Query site until we receive the NR number and expiration date from you and/or you clear any other deficiencies. This process is different from ECA and EMT-basic exams, in which we download exam grades from NR. If you have passed the NR exam, the application will prompt you to list your NR number and expiration date.

Q: I sent my EMT application through the TexasOnline site. How will I know you received the application?

A: You can keep up with your application status on our Certification Query website. Expect to wait about 5-7 business days for a change in your application status if you submit an electronic application. If you submit a paper application, expect to wait between 10-15 business days before you see a change in your application status. The website is a direct, live link to our state database. The Certification Query site reflects your updated status immediately when the new data is entered.

Web address:

www.tdh.state.tx.us/hcqs/ems

EMS Standards

home page: www.tdh.state.tx.us/hcqs/ems/stndhome.htm

Internet certification verification now on website

Certification verification phone line: 512-834-6769

Fax number: 512-834-6714

Email address: emscert@dshs.state.tx.us

By Michael Hay, BA, LP, NREMT-P

FAQ *EMS Education*

Q. I understand that exam scheduling is now handled on-line. Why did DSHS switch to online test registration?

A. Online test scheduling allows applicants to look up all current and projected exam dates and schedule accordingly. This may be accessed at any time, day or night. Additionally, applicants will receive a written confirmation of the test date chosen to minimize confusion.

Q. What is the process to schedule an online exam?

A. It's easy!

1. Visit the web site
www.tdh.state.tx.us/hcqs/ems
2. View the left side of the web page and click on this link: Schedule an Exam. Go to the Exam Schedule page and read the instructions carefully.
3. Scroll down to the exam location sites until you see a list of the months highlighted in blue. Click on the month when you would like to test and jot down the site number for that test date and location. Pick a primary and alternate test date.
4. With your test site numbers (primary and alternate) chosen and written down, hit the 'back' button to return you to the Exam Schedule page.
5. Underneath the listing of the months, you will find a link to EMS Exam Request Form.
6. Fill out all information and make sure that you include a

correct, working e-mail address.

7. An exam confirmation will be sent to the email address indicated within the next three business days. **If your email address is not correct on the form, you may not receive any confirmation.**
8. If you do not receive a confirmation within three business days please contact the appropriate field office.
9. Did we mention how important it is to make sure your email address is correct on the form?

Q. How do I schedule an exam if I do not have a computer?

A. Visit a local library or other public entity that provides internet access. If you can't do that, visit your course instructor or coordinator for assistance—this will ensure that you receive a confirmation if you do not have an email address. The confirmation can be emailed to your instructor who in turn can provide you a copy of this document.

*Texas
EMS Week*

May 15-21, 2005





RACs distribute more than 110,000 red ribbons

With the plea to tie one on for safety, Mothers Against Drunk Driving (MADD) and GETAC members asked Texas motorists to tie a red MADD ribbon on their vehicles during the holiday season. The ribbons serve as a symbol of the motorist's pledge to drive safe, sober and buckled up, and it reminds others to do the same. Supporting MADD's Tie One On For Safety campaign was our first statewide injury prevention project and it was a huge success! Thanks to the hard work of our participating Trauma Service Areas, we were able to distribute more than 110,000 red ribbons during the holiday season.

RAC participants were encouraged to partner with their local MADD chapters and Mazda dealerships to distribute the drive safe and sober message. Each RAC was provided a Tie One On For Safety campaign How To Guide, which included ideas for ribbon distribution, current statistics, a sample media advisory and a press release.

Highlights from our 2004 efforts include:

Trauma Service Area – B BRAC distributed 5,000 ribbons throughout their 22-county service area.

Trauma Service Area – C Hardeman County EMS distributed ribbons, and educated the public through radio, television and newspaper.

Trauma Service Area – E Harris Methodist Hospital in Fort Worth distributed 2,000 ribbons to hospital visitors and

staff. They partnered with Hiley Mazda in Hurst and held a press conference that received both print and television coverage. Harris Methodist Hospital also educated visitors and staff by distributing the MADD Safe Party Guides, which includes non-alcoholic beverage recipes, myths and facts on drinking and driving, and information on how to spot a drunk driver.

To announce their participation in the Tie One On For Safety campaign, Parkland Health and Hospital System placed a huge red ribbon on top of the ambulance dock. Also, they held a press conference in front of their emergency department on December 21st. Featured speakers included area MADD Executive Director Mary Kardell, Parkland Trauma Medical Director Dr. Joseph Minei, Parkland Director of Trauma and Emergency Management Jorie Klein, and the mother of a drunk driving victim. The Dallas fire and police departments also demonstrated their support for the campaign at the press conference, which received both television and radio coverage throughout the day.

Trauma Service Area – K Concho County Hospital and Eden EMS distributed ribbons in their communities.

Trauma Service Area – L The Central Texas Trauma Council distributed 6,000 ribbons and fact sheets. A campaign kick-off event was held in Waco on November 16th. Ribbons were tied to city, EMS and other agency vehicles.

Scott and White Trauma Center staff and administrators also participated in

the campaign and 'tied one on' to their personal vehicles. During the holidays, trauma administration staff personally distributed ribbons and spoke with visitors and employees in the dining area about the dangers of drinking and driving.

Hamilton EMS distributed approximately 4,000 ribbons and fact sheets throughout Hamilton county.

Trauma Service Area – N The Brazos Valley Regional Advisory Council for Trauma distributed approximately 5,000 ribbons throughout its service area.

Trauma Service Area – P With the help of more than 50 agencies and organizations, the Southwest Texas Regional Advisory Council for Trauma (STRAC) was able to distribute more than 67,000 red ribbons throughout its 22-county service area. A press conference held on November 18th featured STRAC Chair Dr. Ronald Stewart; Bexar County District Attorney Susan Reed; San Antonio Police Department Deputy Chief Rudy Ortiz; Texas Alcoholic Beverage Commission Lieutenant Christina Guerra; and Bill Waechter of San Antonio AirLife.

Brooke Army Medical Center distributed 6,500 ribbons to employees and visitors.

Crystal City EMS distributed 500 ribbons in its community, as well as prevention information through the local newspaper.

Dimmit County Memorial Hospital and Dimmit County EMS partnered together to distribute 2,500 ribbons throughout the county.

Guadalupe Valley Hospital, Schertz EMS and Seguin EMS partnered together to distribute 3,000 ribbons to area businesses.

Lackland Air Force Base distributed approximately 2,500 ribbons to military personnel and civil service employees. Participation in Tie One On For Safety

enhanced its holiday Celebrate Sober campaign, which included special briefings to all employees on the dangers of drinking and driving. At one briefing, the group heard renowned motivational speaker retired Mississippi State Trooper Captain Pete Collins deliver the keynote speaker. Information related to the campaign was also publicized through the base television station.

Methodist Healthcare in San Antonio distributed 8,500 ribbons to employees.

Southwest General Hospital distributed 2,000 ribbons to employees, visitors, and area businesses.

Uvalde Memorial Hospital distributed 1,500 ribbons in the community.

Wilford Hall Medical Center distributed approximately 10,000 ribbons to employees and visitors.

Wilson Memorial Hospital distributed ribbons in Floresville and the surrounding area and on November 18th, held a press conference at the hospital to announce their efforts. Information on the campaign and the importance of driving sober was also printed in the local newspaper.

Trauma Service Area – Q The student organization Future Representatives of Environment, Safety and Health at San Jacinto College in Pasadena distributed 250 ribbons to students on campus.

Trauma Service Area – R The Danbury Volunteer Fire Department and EMS distributed 800 ribbons throughout the community. Volunteer firefighters and EMTs set up a booth in front of the Danbury Food Market to distribute ribbons and information to patrons. Students from Danbury High School also joined the efforts to provide this important message to adults in the community.

A heartfelt thanks to all of the agencies and organizations that worked to make our Tie One On For Safety campaign efforts successful!

— *The GETAC Injury Prevention Committee*

2004 Tie One On For Safety Partners

TSA – A
TSA – B
TSA – C
TSA – E
TSA – F
TSA – G
TSA – J
TSA – K
TSA – L
TSA – M
TSA – N
TSA – O
TSA – P
TSA – Q
TSA – R
TSA – V

More than 110,000 ribbons were distributed throughout Texas during the holiday season.





By Christopher Suprun Jr., NREMT-P, CCEMT-P

PHOTO FOR ILLUSTRATION ONLY.

Pumped up

Watching for signs of steroid use

It's a quiet Saturday morning as your crew considers the possibility of catching some of the upcoming baseball games when your dispatcher drops your alert tones.

"Medic 111, Engine 111...respond to 123 Main Street for an unconscious male. Time out 1108."

As you arrive at the scene, you do a quick scene survey and find no obvious scene safety issues. The dispatched address is a typical single family house sitting across the street from a recreation park where children are playing. As you walk to the door, a male in shorts and a gym shirt meets you at the door. He leads you to the kitchen where his friend is on the floor, drooling from the left side of his mouth. His eyes are open but he is not verbally responsive.

While your partners begin care by starting oxygen therapy, getting a set of vitals and attaching electrodes from the cardiac monitor, you talk to the man who met you at the door. He says his friend is 29 and has been in perfect health until this morning, when he woke up with a severe headache. He also says that his friend, who appears muscular and healthy, has been training for a weightlifting competition, but about fifteen minutes ago the patient started slurring his words and then slumped to the floor. This friend says he doesn't know of any medical problems the man on the floor might have and he knows that he doesn't take any medications and denies knowledge of allergies of any kind. However, several opened syringes and a few brown bottles

that appear to be prescription bottles are noted on the kitchen counter. One has "Clomid" written on it in black magic marker, but the friend does not know to whom it belongs.

Your partners come back with their assessment that no trauma is obvious, and that the patient is breathing 24 times per minute with clear lung sounds, a heart rate of 110 and blood pressure of 170/116. The patient is in a sinus tachycardia and his blood sugar reading is 98 by glucometer.

As your team prepares to transport the patient, two intravenous lines are established since he has an altered level of consciousness. Fifty percent dextrose is not considered because the

patient has a normal blood sugar. A brief trial of Narcan is administered following your Altered Level of Conscious protocol, but you are not sure your patient needs this either. Two mg of IV Narcan does nothing for the patient's ability to speak and his repeat vitals are relatively the same.

Outside the window the real cause of your patient's problem can be found. On one side of a baseball diamond chain link fence children are throwing baseballs, oiling the leather of their gloves, and laughing as they play. In the distance, the crack of the bat signals spring has arrived and the fresh blades of grass serve as confirmation of this. Beyond this pristine view of blue skies and green grass is

something more sinister...something hard to detect and something that brings a black cloud to this child's game...an illegal drug. Not the ones that bring to mind thoughts of gang warfare and street crime. Something much more subtle has pervaded our playgrounds and gyms—steroids.

Steroids have found their way into our public consciousness again recently after the *San Francisco Chronicle* published leaked federal grand jury testimony that some of baseball's biggest stars had knowingly, or unknowingly, used steroids during their careers. Allegations have been made that as many as 40-50 percent of professional baseball players use steroids¹. What is the implication to local emergency medical response?

One problem is that most statistics come from case studies rather than epidemiologic studies² and there exists a significant possibility that serious adverse side effects are under-recognized and under-reported.³ In fact, the side effects of anabolic steroids can be significant and emergency medical personnel should prepare themselves for the possible consequences of anabolic steroid use in their community. Abuse of anabolic steroids has increased approximately 50 percent among eighth and tenth grade students according to the Monitoring the Future Study,⁴ with the most notable rise among female users.

Steroids are illegal without a prescription and are Schedule II drugs under the Controlled Substances Act. Simple possession of illicitly obtained anabolic steroids carries a one-year prison term and \$1,000 fine for first offenses in the federal system. Additional convictions can double the penalty. Many states also have penal-

Objectives:

1. The student shall understand the prevalence of anabolic steroid use in the community.
2. The student shall understand the significance of anabolic steroids to normal cardiovascular function.
3. The student shall be able to recognize the disease processes that may be linked to anabolic steroid use.

ties in addition to the federal standards.⁵

Many websites exist that talk about relatively minor side effects including acne, baldness and sexual dysfunction^{6 7}. While these symptoms may seem minor at first, anabolic steroids can have much more significant side effects, such as stunted growth for adolescent steroid users, behavioral changes and significant cardiovascular and hepatic illness^{8 9} which are not only serious, but can be deadly.

Cardiovascular Disease

With steroid use, the heart is often the first organ that is mentioned because steroids may cause increases in bad cholesterol levels^{10 11 12}. High levels of cholesterol can cause the thickening of arterial walls that makes them atherosclerotic, or inelastic. However, some researchers contend that cholesterol changes may be determined by the type of activity the athlete is involved in, noting that some competitors involved with primarily aerobic sports do not have the same increases in cholesterol as those involved with less aerobic workouts.¹³

While the lack of long-term studies has made it difficult to fully determine whether or not the use of steroids has a negative effect on the heart, some data exists to suggest that anabolic steroid use in higher doses can cause hypertrophy of the left ventricle, which results in a decreased diastolic filling.¹⁴ With less fill, there is less flow and subsequently lower cardiac output. This lower cardiac output secondary to steroid use may be responsible for heart attacks and strokes in athletes less than 30 years old¹⁵.

While most EMS providers feel

comfortable treating chest pain or stroke, most EMS responders are not going to associate a patient with an altered level of consciousness and under age 30 as possibly having a cerebrovascular attack (CVA) or transient ischemic attack (TIA). A 30-year-old athlete who is otherwise healthy and without medical history probably would not be expected to have CVA or TIA. EMS providers should keep anabolic steroids in the back of their minds as a possibility.

Liver Disease

Another area of concern is proper liver function. Whereas cardiac complications are less studied, there is a greater knowledge base on liver function because of drug studies that occurred with patients who were hospitalized with other conditions such as anemia, kidney failure and pituitary gland dysfunction.

One report showed that patients treated with anabolic steroids had decreased hepatic function and increased risk for liver cancer and portal hypertension. Additionally, a condition called hepatic peliosis can occur. Hepatic peliosis is a deterioration of the liver marked by the development of hemorrhagic cysts. Hepatic peliosis often involves multiple blood-filled spaces, or cysts, on the liver, which may vary in size from millimeters to centimeters in diameter. There are two types of cysts that develop and either can rupture, leading to severe intra-abdominal bleeds or the release of a thrombus.¹ Rupture of these cysts can be fatal². Often this condition is not diagnosed until the liver is in failure status, or a severe abdominal hemorrhage has occurred.³ Hepatic peliosis can occur

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secondary to tuberculosis, but the medical community now believes that it is currently best associated with anabolic steroid use^{4 5}.

Hormone Issues

Hormone issues should not be a surprise to medical providers as anabolic steroids are derivatives of testosterone and affect the reproductive system.

Steroids first lower the overall production and release of luteinizing hormone (LH) and follicle stimulation hormone (FSH). This decrease in hormone level and the duration, dosage and structure of the steroids are important to normal levels of gonadotropins. When these levels fall off in male athletes, testicular atrophy occurs.²¹

The addition of anabolic steroids to the body can also result in increased estrogen levels causing gynecomastia. This well-known steroid side effect is the development of breasts on male athletes using steroids. Further, gynecomastia is generally irreversible.

In males, sexual appetite is increased, as sexual desire is androgen dependent, but erectile dysfunction (ED) is also increased. As will be discussed in more detail later, steroids can cause various psychological aggression issues, but the combination of an increased sexual appetite and aggressiveness, combined with sexual performance issues, can also increase the possible occurrence of sexual assaults²². The actual steroid use may in fact be related to previous sexual abuse. In one set of interviews, 25 percent of male athletes who abused steroids reported memory of physical or sexual abuse²³.

In female athletes, the relatively small amount of testosterone the body produces is vastly increased by the use of steroids. Again, this is dependent to some degree on the dosage and duration of drug use, but will impact follicle formation, ovulation and menstrual irregularities.²⁴

Psychological Issues

Competitors who use anabolic steroids may suffer several different behavioral issues known as "roid rage." The increases in circulating testosterone that steroids cause can cause aggressiveness, the previously noted sexual appetite and assertiveness. Some athletes consider this a positive side effect as it makes them better able to be competitive during their sporting events. Since many athletes also use steroids as part of a training regimen for a specific competition, they take the drug in any number of dosing intervals.

Some intervals combine different steroids and anti-side effect drugs called "stacking." This method is designed to produce a synergistic effect from the drugs, purportedly increasing muscle size above and beyond what the individual drugs produce. Another method is "pyramiding" where athletes will start with low dose steroids and steadily increase the dosing during training. On the second half of the cycle, the drugs are decreased. This method is used to allow the body time to recover from the hormonal imbalances caused by the steroid use.

In either case, withdrawal symptoms can occur in users of these drugs. Mood changes, depression, violent behaviors and acute psychosis can all occur. In these situations,

EMS responders must follow departmental rules and common sense, and remember scene safety at all times.

Other Issues

Other issues related to steroid use can include the closure of epiphyseal plates, stopping growth, due to testosterone levels reaching certain levels^{25 26}. This can cause some adolescents to have stunted growth instead of reaching their full height.

Renal problems may occur too as the renal system is one of the body's two main buffer/filter systems. Electrolyte imbalances and kidney problems may be seen in peripheral edema, lower back pain and swelling in the lower back.

Summary

Now, return to your Saturday morning call. As you transport your patient to the hospital, you perform a detailed survey to try to locate any possible injury. Assessing the patient further, you notice his left hand grip strength is weaker and the drooling from his mouth is caused by facial droop. Suspecting a possible stroke in your patient, you complete a thrombolytic eligibility checklist and pre-alert your medical direction team and receiving hospital of your latest findings.

You are able to transfer care successfully and the hospital neurologist is able to assist the emergency department team in treating this patient, who later admits to anabolic steroid use.

In treating patients, it is important to remember that calls are not always what we expect. We may all get "pumped up" about making another call, but let's not forget that some of

our patients are getting "pumped up" with the wrong fuel. Whether it is the kid next door or the high-profile super-star athlete, both are at risk for seriously "pumping up" the wrong side effects.

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CE questions—Medical

Steroid Use

1. Few studies exist that look at anabolic steroids from a medical perspective and their medical benefits and negative side effects.
 - A. True
 - B. False
2. Anabolic steroid side effects can cause:
 - A. Hypertension.
 - B. Liver disease.
 - C. Loss of growth plates.
 - D. All of the above
3. It appears that athletes involved with aerobic competition and training may not have the same increases in cholesterol levels as other, less aerobic trained athletes.
 - A. True
 - B. False
4. What percentage of male athletes who admit to using steroids indicated a past history of physical or sexual abuse?
 - A. Five percent
 - B. Ten percent
 - C. 25 percent
 - D. 40 percent
5. Cardiac hypertrophy occurs from steroid use and affects cardiac output because of:
 - A. Decreased systolic filling.
 - B. Increased systolic filling.
 - C. Decreased diastolic filling.
 - D. Increased diastolic filling.
6. Heart attacks and strokes have occurred in athletes using steroids. This usually affects patients under:
 - A. 25 years old.
 - B. 30 years old.
 - C. 40 years old.
 - D. 50 years old.
7. Liver diseases and problems from anabolic steroid use can include all of the following except:
 - A. Cancer.
 - B. Grave's disease.
 - C. Hepatis peliosis.
 - D. Portal hypertension.
8. Some steroid users will take steroids in cycles called "stacking" or "pyramiding" to develop their musculature more effectively. The benefit of steroid use in this manner is that there is no withdrawal like with other drugs.
 - A. True
 - B. False
9. Most of the public outcry about steroids are that they change the competition but anabolic steroids are legal and have few side effects.
 - A. True
 - B. False
10. "Roid rage" is a term that relates to:
 - A. A type of steroid.
 - B. The popularity of steroids among teenage youth.
 - C. Aggressive tendencies, secondary to steroid use.
 - D. A strong, conditioning work out after an athlete stops using steroids.

This answer sheet must be postmarked by April 20, 2005.

CE Answer Sheet *Texas EMS Magazine*

Name _____ SSN _____

Certification Level _____ Expiration Date _____

Organization _____ Work Phone _____
areacode

Address _____ City _____
street

State _____ Zip _____ Home Phone _____
areacode

Note: Due to the cost of processing CE, each answer sheet must be accompanied by a check or money order for \$5, made out to UT Southwestern.

For DSHS CE credit, mail your completed answer sheet with a **check or money order for \$5 made out to UT Southwestern to:**

Debra Cason, RN, MS
EMS Training Coordinator
The University of Texas
Southwestern Medical Center
5323 Harry Hines Boulevard
Dallas, Texas 75390-8890

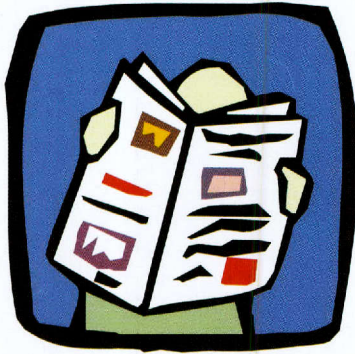
You will receive your certificate for 1.5 hours of CE about six weeks after the closing date. A grade of 70 percent is required to receive CE credit.

Answer Form

Check the appropriate box for each question. All questions must be answered.

- | | | | | | | | |
|--------------------------------|-----------------------------|-----------------------------|-----------------------------|---------------------------------|-----------------------------|-----------------------------|-----------------------------|
| 1. A. <input type="checkbox"/> | B. <input type="checkbox"/> | | | 6. A. <input type="checkbox"/> | B. <input type="checkbox"/> | C. <input type="checkbox"/> | D. <input type="checkbox"/> |
| 2. A. <input type="checkbox"/> | B. <input type="checkbox"/> | C. <input type="checkbox"/> | D. <input type="checkbox"/> | 7. A. <input type="checkbox"/> | B. <input type="checkbox"/> | C. <input type="checkbox"/> | D. <input type="checkbox"/> |
| 3. A. <input type="checkbox"/> | B. <input type="checkbox"/> | | | 8. A. <input type="checkbox"/> | B. <input type="checkbox"/> | | |
| 4. A. <input type="checkbox"/> | B. <input type="checkbox"/> | C. <input type="checkbox"/> | D. <input type="checkbox"/> | 9. A. <input type="checkbox"/> | B. <input type="checkbox"/> | | |
| 5. A. <input type="checkbox"/> | B. <input type="checkbox"/> | C. <input type="checkbox"/> | D. <input type="checkbox"/> | 10. A. <input type="checkbox"/> | B. <input type="checkbox"/> | C. <input type="checkbox"/> | D. <input type="checkbox"/> |

Did you enclose your \$5 check or money order?



Did you read?

Feeling blue? Exercise might be the answer. A recent study found that people with mild to moderate depression significantly reduced their symptoms when they performed aerobic exercises. The researchers compared groups doing different levels of exercises, from flexibility exercises to working out on a treadmill or exercise bike. None of the individuals in the study were taking medications for depression. They found that, after 12 weeks, the patients who worked out for a minimum of 30 minutes three to five times a week reported half the depression symptoms as they had prior to beginning the program, and the ones who worked out more reported fewer depressions, while the individuals who simply did stretching exercises or less aerobic activities had less relief from their symptoms. The exercises were done in groups, so the social support might have helped relieve some of the depression symptoms. The benefits found in this study were comparable to the benefits achieved by using medications or therapy. From *The New York Times*, "Mental health: sweating depression away," by Eric Nagourney, February 1, 2005.

Two recent studies encouraged doctors to test a patient's C-reactive protein (CRP) blood level, as well as testing cholesterol levels, to watch for cardiovascular disease. For years, researchers had believed that high LDL, or the bad cholesterol, levels were the main cause of heart disease. However, researchers recently found that using medications to reduce both LDL and CRP levels reduced the risk of recurrent heart attacks or of dying from a heart attack or a stroke by 50 percent when compared with using medications to lower LDL levels only.

From *USA TODAY*, "New heart villain seen," by Steve Sternberg, January 6, 2005.

A recent study found that having extra copies of a certain gene may help individuals be more resistant to HIV infection. This might explain why some individuals may be more or less susceptible to HIV infection than others of similar ancestry. The gene encodes CCL3L1, a protein that blocks the HIV virus. Researchers found that individuals with fewer than the average number of copies for their ethnic grouping were more susceptible to HIV infection. From *USA TODAY*, "Extra copies of gene protect against AIDS," January 6, 2005.

Hearthbreak can literally break your heart. Researchers recently found evidence that emotional shock can unleash very large amounts of stress hormones that can cause life-threatening heart malfunctions. These

Researchers recently found evidence that emotional shock can unleash very large amounts of stress hormones that can cause life-threatening heart malfunctions.

individuals appear to be having heart attacks but usually are found to have healthy arteries and abnormally high levels of stress hormones in their blood. The stressor for the heart attack can range from a car wreck, being present during a robbery, news of a loved one's death and the shock from a surprise party. Individuals experiencing "a broken heart" can be at risk for severe complications and

possibly even death, but with proper care, permanent heart damage can be avoided. The phenomenon appears more frequently in older women, but has been documented in a 27-year-old. Researchers theorized that this phenomenon suggests more potential links between the mind and the body. From *Houston Chronicle*, "Mend that broken heart—before it kills you," by Rob Stein, February 15, 2005.

Physicians are recommending that parents limit their children's consumption of fruit juice to help curb the current trend of pediatric obesity in the U.S. Many studies have linked both juice and soda to child health concerns such as obesity and tooth decay. While most parents believe that giving their children fruit juice instead of sugar-filled soda is better for them, juice and soda are both largely 100 percent sugar. Many times, bottles of juice will have even more calories than bottled sodas. The extra calories from juices can cause children to consume too many calories and teach them to prefer the sweeter drink instead of water, formula or milk. From *Houston Chronicle*, "For children, effects of juice can be sour," by J.M. Hirsch, February 15, 2005.

The recent discovery of the protein enzyme Lyz's ability to change shape and trick cell membranes may help researchers create better treatments for viral and bacterial-based illnesses. Somehow, Lyz tricks a cell's cellular membrane into allowing it to pass through the membrane and after passing through the membrane, it changes its shape and begins to break away the tougher outer cell membrane. This enzyme is one of the mechanisms used by a virus to get copies of itself out of a cell, after the virus has overtaken the cell's

reproductive functions and forced it to churn out multiple copies of the virus. Scientists are researching potential ways to stop the protein from moving in and out of cells, and this could potentially stop some viral infections such as HIV. Scientists are also looking to see if this protein could also be used to destroy illness-causing bacteria within the body. From *Bryan-College Station Eagle*, "Aggies discover protein 'trick,'" by Greg Okuhara, January 10, 2005.

Scientists recently discovered one of the tactics that the hepatitis C virus uses to defeat the body's disease-fighting mechanisms. They have known that an enzyme called protease breaks up viral proteins and assembles

While most parents believe that giving their children fruit juice instead of sugar-filled soda is better for them, juice and soda are both largely 100 percent sugar.

them into new viral particles. However, scientists recently found that protease also destroys key components of the liver cell's defenses, disarming the body's natural resistances. When viral protease was blocked, the cells' defenses could repel the virus. Scientists are hoping that these findings might assist and even motivate drug companies in developing more successful treatments. Approximately four million Americans are infected with hepatitis C, and current drug treatments cause remission in only about half of infected patients. From *Dallas Morning News*, "Texas

Did you read?

Did you read?

researchers learn how hepatitis C attacks cells," by Sue Goetinck Ambrose, February 15, 2005.

Prenatal exposure to air-borne pollution might cause increased genetic changes and possibly increased risks of cancer, according to a recently published study. The study had non-

A new, more virulent strain of HIV concerns public health officials because it is resistant to most antiviral drugs and can progress to full-blown AIDS very quickly.

smoking mothers in low-income neighborhoods wear backpack air-quality monitors during their third trimesters of pregnancy to measure their exposures to pollution from combustion fuels, mainly caused by vehicles. Genetic alterations were measured after the babies were born. A 50 percent increase in persistent genetic abnormalities was found in the infants who had higher levels of exposure to air pollution. The study can't estimate the exact increase in cancer risks among the children, but other studies have linked these kinds of genetic changes to increased risks of cancer. From *USA TODAY*, "Study: Pollution may affect babies' genes," by Karen Matthews, February 15, 2005.

Mad cow disease might infect more of the animal than just its nervous system, as was previously thought. In studies using mice, researchers recently found that the infectious mad cow disease proteins

called prions follow lymphocytes, or immune system cells, throughout the body. When the mice were given chronic health problems, such as liver disease or kidney disease, researchers found the prions in the diseased organs. So researchers now theorize that animals might be able to harbor the disease in any inflamed organ. Many scientists didn't believe that these findings would affect food production in the U.S and many other countries because these countries do not allow animals with signs of systemic infection, such as fever, into the food supply and most countries slaughter cattle while they're younger and at less risk of infection. From *The New York Times*, "Study Finds Broader Reach for Mad Cow Proteins," by Sandra Blakeslee, January 21, 2005.

A new, more virulent strain of HIV was recently identified in a New York patient, which concerns public health officials. This strain is resistant to most antiviral drugs and progresses from HIV infection to full-blown AIDS within three months. It usually takes years for resistance to other drugs to develop in the individual. The New York patient was infected with an HIV strain that was resistant to three different classes of antiviral drugs from the start, and he is believed to have developed AIDS with two to three months. Some doctors believe he might have been infected for as long as 20 months. Before drug treatments, it usually took ten years for an HIV infection to develop into full-blown AIDS and with the development of antiviral drugs, many HIV-positive individuals are living even longer. From *Houston Chronicle*, "New, more powerful HIV strain found," by Leigh Hopper, February 15, 2005.

Send in your EMS Awards nominations

The award nomination form is on our website at www.tdh.state.tx.us/hcqs/ems/Awards2005.doc

You want to know what all the award winners had in common? — Someone nominated them.

Send us your best in EMS and trauma! We've posted the award nomination form on our website at www.tdh.state.tx.us/hcqs/ems/Awards2005.doc. Save this Microsoft Word document to your computer and fill it out by clicking in the gray areas beside each question. When you finish, save the file and email it back to Kelly.Harrell@dshs.state.tx.us.

Each category honors a person or organization that exemplifies the best EMS/Trauma System has to offer. It's quite an honor to be nominated and to win. The categories and the explanations are listed on the nomination form on the following page. Once you've chosen the correct category, the rest is pretty easy.

· Fill out the information requested on the form. Include written examples of why this person or organization should win. Please be specific, using examples when possible. Keep in mind that the people who review the nominations most likely won't be as familiar with your nominee as you are.

· Send the file to us by email no later than September 15, 2005. The packets are then distributed to the OEMS/TS and sent to each EMS zone office. Each program and zone ranks the nominations for each category and returns the information to the OEMS/TS, where scores are tallied. Scores are kept confidential from all except those who tally the scores. Winners are announced at the Awards Luncheon at Texas EMS Conference, November 22, 2005, in Austin.

Award Categories 2005

EMS Educator Award honors a state-certified EMS Instructor or Course Coordinator who has advanced EMS education in Texas.

EMS Medical Director Award honors a physician who has served as a medical director, on-line or off-line, for an EMS organization.

EMS Administrator Award honors an administrator, researcher, or manager on the local, city, county, regional, or state level who has made a positive contribution to EMS.

Public Information/Injury Prevention Award honors an EMS group or individual for outstanding achievement in public education or injury prevention.

Citizen Award honors a private citizen for heroic lifesaving act or unique advocacy of EMS.

Private/Public Provider Award honors a ground organization that took a leadership role in EMS by achievement in areas of patient care, public access, medical control, disaster preparedness, public education, and training.

Volunteer Provider Award honors an organization staffed by volunteers that assumed a leadership role in EMS by achievement in areas of patient care, public access, medical control, disaster preparedness, public education, and training.

First Responder Award honors a first responder organization that assumed a leadership role in EMS by achievement in areas of patient care, public access, medical control, disaster preparedness, public education, and training.

Air Medical Service Award honors a public or private air medical service in Texas, a leader in the field, who has demonstrated the highest standards in providing patient care to the citizens of Texas.

Outstanding EMS Person of the Year honors an EMS certified person who has demonstrated uncommon leadership and courage in providing emergency medical service to the citizens of Texas.

Telecommunicator of the Year honors a person or team who handles a call or system event with a professionalism and efficiency that allowed the first responders on the scene to give the patients the best patient care possible. An individual or a team is eligible for the award.

Disciplinary Actions

THE INFORMATION IN THIS SECTION IS INTENDED TO PROVIDE PUBLIC NOTICE OF DISCIPLINARY ACTION BY THE TEXAS DEPARTMENT OF HEALTH AND THE BUREAU OF EMERGENCY MANAGEMENT AND IS NOT INTENDED TO REFLECT THE SPECIFIC FINDINGS OF EITHER ENTITY.

THIS INFORMATION MAY NOT REFLECT ANY NUMBER OF FACTORS INCLUDING, BUT NOT LIMITED TO, THE SEVERITY OF HARM TO A PATIENT, ANY MITIGATING FACTORS, OR A CERTIFICANT'S DISCIPLINARY HISTORY. THIS LISTING IS NOT INTENDED AS A GUIDE TO THE LEVEL OF SANCTIONS APPROPRIATE FOR A PARTICULAR ACT OF MISCONDUCT.

TO FILE A COMPLAINT REGARDING AN EMS SERVICE OR PERSONNEL, CALL (800) 452-6086.

The Texas Health and Safety Code can be found at www.capitol.state.tx.us/statutes/hstoc.html

All of the Texas Administrative Code can be found at lamb.sos.state.tx.us/tac/

To find EMS-specific information in the Texas Administrative Code, go to www.texas.gov, click on Laws and Criminal Justice, click on Laws, Codes and Statutes, click on Texas Administrative Code, click on TAC Viewer, click on Title 25 Health Services, Part I Texas Department of Health, Chapter 157 Emergency Medical Care.

TDH Index of EMS/Trauma Systems Policies can be found at www.tdh.state.tx.us/ems/spolicy.htm

Addington, Dorothy, Arlington, TX. 24 month probated suspension of EMS certification through September 19, 2005, misdemeanor conviction, felony conviction and a felony deferred adjudication probation. EMS Rules 157.37, 157.36(b) and/or, (c).

Alaniz, Rene, Mission, TX. 48 months probated suspension of ECA certification through August 29, 2006, a misdemeanor conviction. EMS Rules 157.37, 157.36(b) and/or (c).

Alexander, Eric, Dalhart, Texas. Twenty-four mo. probated suspension of EMS certification through June 29, 2005, for two felony deferred adjudication probations. EMS Rules 157.37 and/or, 157.36(b) and/or, (c).

Anguiano, Frank, Arlington, TX. 24 month probated suspension of EMS certification through September 26, 2005 for a misdemeanor conviction. EMS Rules 157.37, 157.36(b), and/or (c).

Armijo, Michael, Corpus Christi, Texas. Twenty-four (24) month probated suspen-

sion of EMS certification through July 21, 2006 for one (1) felony conviction and four (4) misdemeanor convictions. EMS Rules 157.37 and/or, 157.36(b) and/or, (c).

Atascocita V.F.D., Atascocita, TX. \$5,000 administrative penalty, 36 month suspension against the EMS provider license all of which is probated through October 2006. EMS Rules 157.16(d)(1), (8), (10), (12), (14), (16), (19); 157.11(d)(1); 157.11(i)(1), (3); 157.11(e)(1); 157.11(l)(1), (13).

Bagby, David, Perryton, TX. 12 month probated suspension of EMS certification through March 4, 2005, for misdemeanor conviction. EMS Rules 157.37, 157.36(b) and/or, (c).

Baileys, Anson, Arlington, Texas. Forty-eight (48) month probated suspension of EMS certification through July 21, 2008, for one (1) misdemeanor conviction, and two (2) felony convictions. EMS Rules 157.37 and/or, 157.36(b) and/or, (c).

Bailey, Elizabeth, Dublin, TX. Probated suspension of EMT-P certification through May 2005. EMS Rules 157.36(b)(1); (2); (7); (13); (26); (28); and (29).

Bandera County EMS, Bandera, TX. \$1,000 administrative penalty probated through September 2005. EMS Rules 157.16(d)(1); (14); (19); 157.11(l)(1); (2); (13).

Barash, Richard, Richardson, TX. Decertification of the EMT-P certification effective March 5, 2004. EMS Rules 157.36(b)(1); (2); (6); (26); (28); and (29).

Barnes, Joseph, Houston, TX. 12 month probated suspension of the EMT-P certification through March 2005. EMS Rules 157.36(b)(1); (2); (4); (10); (26); (28); and (29).

Bean, Shawn, Dripping Springs, TX. 24 month probated suspension of EMT certification through December 6, 2005, felony conviction. EMS Rules 157.37, 157.36(b) and/or (c).

Binkowski, Casey, Houston, Texas. Twelve (12) month probated suspension of EMS certification through October 6, 2005, for one (1) misdemeanor deferred adjudication probation. EMS Rules 157.37 and/or, 157.36(b) and/or, (c).

Body, Christopher, Lewisville, TX. 12 month probated suspension of EMS certification through March 9, 2005, for misdemeanor conviction. EMS Rules 157.37, 157.36(b) and/or, (c).

Boldra, Michael, San Antonio, TX. 1 month suspension, followed by 48-month probated suspension through February 2008 of the EMT certification. EMS Rules 157.36(b)(1), (2), (17) and (28).

Bomer, Robert, Humble, TX. Denial of EMT-P recertification application for certification effective March 5, 2004. EMS Rules 157.36(b)(1); (2); (13); (26) and (28).

Bonilla, David, Mission, Texas. Thirty-six (36) month probated suspension of EMS certification through November 4, 2007, for one (1) felony deferred adjudication, and one (1) misdemeanor conviction. EMS

Rules 157.37 and/or, 157.36(b) and/or, (c). **Brakefield, Leah**, Palestine, TX. 36 month probated suspension of EMS certification through May 5, 2006 for felony deferred adjudication probation. EMS Rules 157.37, 157.36(b) and/or, (c).

Brewer, Benjamin, Lubbock, TX. 36 month probated suspension of EMS certification through July 11, 2006, misdemeanor conviction. EMS Rules 157.37, 157.36(b) and/or, (c).

Brown, Texanne, Hamilton, TX. 12 month probated suspension of EMT-I certification through March 6, 2005. EMS Rules 157.36(b)(1), (2), (3), (4), (7), (9), (13), (21), (26) and (28).

Bryan, Travis, Pasadena, TX. 24 months probated suspension of EMT certification through March 31, 2005, felony deferred adjudication probation and misdemeanor convictions. EMS Rules 157.37, 157.36(b), and/or (c).

Bullard, Chris, Mesquite, Texas. Twelve (12) month probated suspension of EMS certification through October 6, 2005, for one (1) misdemeanor conviction. EMS Rules 157.37 and/or, 157.36(b) and/or, (c).

Burge, Traci, Emory, TX. 1 month suspension, followed by 24 month probated suspension through December 2005 of EMT-P certification. EMS Rules 157.36(b)(1), (2), (3), (6), (9), (26) and (28).

Butera, Jeffrey, Sugar Land, TX. 24 month probated suspension of EMS certification through September 25, 2005 for misdemeanor convictions. EMS Rules 157.37, 157.36(b), and/or (c).

Byers, Danny, Earth, TX. 60 month probated suspension of EMT-P certification through March 2007. EMS Rules 157.36(b)(1), (2), (23), (25), (26), (28) and (29); 157.37(a)-(c); and Occupations Code Chap 53.

Caldwell, Kenneth, San Antonio, TX. 48 months probated suspension of EMT certification through August 2006, felony deferred adjudication. EMS Rules 157.37, 157.36(b) and/or, (c).

Campbell, Connan, Hardin, TX. 24 month probated suspension of licensed paramedic thru November 2005. EMS Rules 157.36(b)(1), (2), (7), (26) and (28).

City of Cleveland EMS, Cleveland, TX. \$13,700 administrative penalty probated through April 2005. EMS Rules 157.16(d)(1), (14) and (19); 157.11(l)(1) and (13); 157.11(e)(1).

Coffman, David, Normangee, TX. 3 months suspension and 45 months probated suspension of EMT certification through June 30, 2005, felony conviction. EMS Rules 157.37, 157.36(b) and/or (c).

Cordona, Elizabeth, Only, TX. 24 month probated suspension of EMS certification through December 31, 2005 for misdemeanor convictions. EMS Rules 157.37 and/or, 157.36(b) and/or, (c).

Cox, Michael, Texhoma, Oklahoma.

Disciplinary Actions

Twelve month probated suspension of EMS certification through September 3, 2005, for one (1) misdemeanor conviction. EMS Rules 157.37 and/or, 157.36(b) and/or, (c).

Creech, John, Lake Jackson, TX. 18 month probated suspension of the EMSC certification through May 2005. EMS Rules 157.43(m)(1); 157.43(m)(3)(B), (E) and (F).

Crowe, Gary, Dale, TX. 48 months probated suspension of EMT certification through November 5, 2005. EMS Rules 157.37(c)(2)(3)(G).

Dandois, Pace, Waco, TX. 36 month probated suspension of EMS certification through June 2006, misdemeanor deferred adjudication probation, misdemeanor convictions, felony convictions. EMS Rules 157.37, 157.36(b) and/or, (c).

Decesare, Edward, Schertz, TX. Probated suspension of the EMT-I certification through July 2006. EMS Rules 157.36(b)(1); (2); (6); (8); (9); (26); (28); (29).

DeLeon Jr., Carlos Hector, LaJoya, TX. Decertification of ECA certification, effective March 2004. EMS Rules 157.36(b)(1), (2), (15), (21) and (28).

Dickey, Shane, Azle, TX. 48 months probated suspension of EMT-P certification through October 2006, felony or deferred adjudication. EMS Rules 157.37, 157.36(b) and/or, (c).

Dowell, Alina, Temple, TX. 36 month probated suspension of EMT certification through November 2005, felony deferred adjudication and misdemeanor conviction. EMS Rules 157.37, 157.36(b) and/or (c).

Dozier, Jerry, Andrews, TX. 48 months probated suspension of EMT-P certification through April 2007, felony convictions. EMS Rules 157.37, 157.36(b) and/or, (c).

Elizalde, Edovigen, El Paso, TX. 24 month probated suspension of EMS certification through October 2005, misdemeanor conviction. EMS Rules 157.37, 157.36(b) and/or, (c).

Erwin, James, Fort Worth, TX. 12 month probated suspension of EMS certification through March 2005, misdemeanor convictions. EMS Rules 157.37, 157.36(b) and/or, (c).

Escamilla, Daniel, Corpus Christi, TX. 48 month probated suspension of EMS certification through September 2007, misdemeanor convictions and misdemeanor deferred adjudication probation. EMS Rules 157.37, 157.36(b) and/or, (c).

Etheredge, John, Fort Worth, TX. 24 month probated suspension of EMS certification through November 20, 2005, misdemeanor convictions and misdemeanor deferred adjudication probation. EMS Rules 157.37, 157.36(b) and/or, (c).

Evans, Art, Trenton, Texas. Twelve (12) month probated suspension of EMS certification through September 1, 2005, for one (1) misdemeanor conviction. EMS Rules 157.37 and/or, 157.36(b) and/or, (c).

Falcon, Joe, Austin, TX. 24 month probated suspension of EMS certification through December 31, 2005, misdemeanor convictions. EMS Rules 157.37, 157.36(b),

and/or (c).

Feemster, Bobby Daniel, Dublin, TX. 24 month probated suspension of ECA certification through March 2006. EMS Rules 157.36(b)(1); (2); (3); (4); (7); (13); (21); (26); and (28).

Ferguson, Daniel, Gilmer, TX. Decertification of EMT-P certification effective August 12, 2005. EMS Rules 157.36(b)(1), (2), (19), (26), (27), (28) and (29).

Fleener, James, Galveston, TX. 12 month probated suspension of EMS certification through March 24, 2005, felony deferred adjudication probation and felony conviction. EMS Rules 157.37, 157.36(b) and/or, (c).

Ford, Jerald, Hillsboro, TX. 24 month probated suspension of EMS certification through June 30, 2005, misdemeanor conviction. EMS Rules 157.37, 157.36(b) and/or, (c).

Garcia, Joseph, San Antonio, Texas. Twelve (12) month probated suspension of EMS certification through September 3, 2005, for one (1) misdemeanor conviction. EMS Rules 157.37 and/or, 157.36(b) and/or, (c).

Garner, John, Bursleson, TX. 12 month suspension followed by 36 month probated suspension of EMS certification through June 3, 2007 for misdemeanor convictions. EMS Rules 157.37, 157.36(b) and/or, (c).

Gengo, Rodney, Montgomery, TX. 12 month probated suspension of EMS certification through March 1, 2005, misdemeanor conviction. EMS Rules 157.37, 157.36(b) and/or, (c).

Gilbert, Kerry, Harlingen, TX. 24 month probated suspension of EMS certification through August 18, 2005, felony deferred adjudication probation/misdemeanor conviction. EMS Rules 157.37, 157.36(b) and/or, (c).

Gonzalez, David, Laredo, Texas. Twelve (12) month probated suspension of EMS certification through September 17, 2005, for one (1) misdemeanor conviction. EMS Rules 157.37 and/or, 157.36(b) and/or, (c).

Gonzalez, Donna, Princeton, TX. 48 months probated suspension of EMT-P license through July 2007. EMS Rules 157.36(b)(1), (2), (26), (27) and (28).

Gonzalez, Norberto, Laredo, TX. 12 months probated suspension of EMT-P certification through September 2005. EMS Rules 157.36(b)(1), (17), (26), and (28).

Grabs, Teresa, Valley Mills, TX. 108 months probated suspension of LP through September 26, 2010. EMS Rules 157.37(c)(2)(3)(G).

Grafrod Volunteer EMS, Grafrod, TX. \$1,700 administrative penalty effective August 10, 2004. EMS Rules 157.16(d)(1); (19); 157.11(l)(13).

Grant, Jason, Amarillo, TX. 24 month probated suspension of EMS certification through December 31, 2005, misdemeanor convictions. EMS Rules 157.37, 157.36(b),

and/or (c).

Gray, Javiya, Houston, TX. 60 month probated suspension of EMT certification through December 17, 2007, felony deferred adjudication. EMS Rules 157.37, 157.36(b) and/or (c).

Griggs, Clayton, Bagwell, Texas. Forty-eight (48) month probated suspension of EMS certification through November 1, 2008, for three (3) misdemeanor convictions. EMS Rules 157.37 and/or, 157.36(b) and/or, (c).

Groves, Brent, Lake Dallas, TX. 48 month probated suspension of EMS certification through May 5, 2007, felony deferred adjudication probation. EMS Rules 157.37, 157.36(b), and/or (c).

Gutierrez, Robert, Converse, Texas. Twenty-four (24) month probated suspension of EMS certification through November 1 2006, for one (1) felony deferred adjudication. EMS Rules 157.37 and/or, 157.36(b) and/or, (c).

Hall, Lee, Victoria, Texas. Forty-eight (48) month probated suspension of EMS certification through June 29, 2008, for six (6) misdemeanor convictions. EMS Rules 157.37 and/or, 157.36(b) and/or, (c).

Hamlyn, William, Houston, TX. 12 month probated suspension of EMS certification through March 9, 2005, felony deferred adjudication probation. EMS Rules 157.37, 157.36(b) and/or, (c).

Harris, Darrell, Houston, TX. Probated suspension of the EMT certification through July 2006. EMS Rules 157.36(b)(1), (2), (18), (21) and (28).

Hartley, Sherman, Bay City, TX. 56 months probated suspension of EMT certification through July 5, 2006. EMS Rules 157.37(c)(2)(3)(G).

Headley, Darrell, Belton, TX. 12 months suspension through August 2005 followed by 36 months probated suspension of EMT certification through August 2008. EMS Rules 157.36(b)(1), (2), (3), (4), (7), (9), (26), (28) and (29).

Heaton, David, Austin, TX. 12 month probated suspension of EMS certification through March 24, 2005, misdemeanor conviction. EMS Rules 157.37, 157.36(b) and/or, (c).

Herbert, Robert, Waco, Texas. Twelve (12) month probated suspension of EMS certification through September 3, 2005, for one (1) misdemeanor conviction. EMS Rules 157.37 and/or, 157.36(b) and/or, (c).

Hernandez, Rogerio, Brownsville, Texas. Thirty-six (36) month probated suspension of EMS certification through November 1, 2007, for one (1) felony deferred adjudication probation. EMS Rules 157.37 and/or, 157.36(b) and/or, (c).

Hiltbrunner, Lois, Shamrock, TX. 48 month probated suspension of EMS certification through September 30, 2007, felony deferred adjudication probation. EMS Rules 157.37, 157.36(b) and/or, (c).

Hobbs, Charles, Pottsboro, Texas. Twelve (12) month probated suspension of EMS certification through September 3, 2005, for two (2) misdemeanor convictions. EMS Rules 157.37 and/or, 157.36(b) and/or, (c).

Holt, John, Talco, TX. 24 month probated suspension of EMS certification through April 29, 2005, misdemeanor deferred adjudication probation, a felony deferred adjudication probation. EMS Rules 157.37, 157.36(b) and/or, (c).

Horton, Lindsey, The Woodlands, TX. 12 month probated suspension of EMS certification through March 9, 2005, misdemeanor conviction. EMS Rules 157.37, 157.36(b) and/or, (c).

Hunt, Gailyn, Lipan, TX. 60 day suspension, followed by 22 month probated suspension of EMT certification through February 2006. EMS Rules 157.36(b)(1), (2), (14), (19), (26), (27), (28) and (29).

Jackson, Michael, Houston, TX. 48 months probated suspension of EMT certification through March 7, 2006, a felony conviction. EMS Rules 157.37, 157.36(b) and/or (c).

Johnson, Lee Ann, Fort Worth, TX. 24 month probated suspension of EMS certification through March 9, 2006, misdemeanor conviction. EMS Rules 157.37, 157.36(b) and/or, (c).

Jones, Andrew, College Station, TX. Written reprimand against EMT-P certification effective July 29, 2004. EMS Rules 157.36(b)(1), (2), (4), (5), (7), (26) and (28).

Jordan, Colby, Combine, TX. 48 month probated suspension of EMT-P certification through December 2005. EMS Rules 157.36(b)(1), (2), (19), (26), (27), (28) and (29).

King, Michael, Grand Praire, Texas. Twenty-four (24) month probated suspension of EMS certification through July 19, 2006, for one (1) felony deferred adjudication probation. EMS Rules 157.37 and/or, 157.36(b) and/or, (c).

Kline, Kyle, San Leon, Texas. Forty-Eight (48) month probated suspension of EMS certification through June 29, 2008, for three (3) misdemeanor convictions. EMS Rules 157.37 and/or, 157.36(b) and/or, (c).

Lawrence, Allen, Huntsville, Texas. Twelve (12) month probated suspension of EMS certification through October 6, 2005, for one (1) misdemeanor conviction. EMS Rules 157.37 and/or, 157.36(b) and/or, (c).

Layton IV, Charles, Troy, TX. 24 month probated suspension of EMT certification through September 2005. EMS Rules 157.36(b)(1), (2), (6), (7), (26), (28) and (29).

Lingo, Lynne, Bertram, TX. 12 month probated suspension of EMS certification through March 1, 2005, felony offense. EMS Rules 157.37, 157.36(b) and/or, (c).

MacDonald, Daniel, Jacksboro, TX. 24 month probated suspension of EMS certification through September 02, 2005, misdemeanor convictions and misdemeanor probation revocation. EMS Rules 157.37,

157.36(b) and/or, (c).

Martin, Barbara, Laporte, Texas. Twelve (12) month probated suspension of EMS certification through November 1, 2005, for one (1) misdemeanor deferred adjudication probation. EMS Rules 157.37 and/or, 157.36(b) and/or, (c).

Martin, Cindy, Pipe Creek, TX. 12 months probated suspension of EMT-P certification thru August 2005. EMS Rules 157.36(b)(1), (26) and (28); 157.11(d)(1); 157.11(i)(1).

Martinez, Manuel, Sugar Land, Texas. Twelve (12) month probated suspension of EMS certification through October 6, 2005, for one (1) misdemeanor conviction. EMS Rules 157.37 and/or, 157.36(b) and/or, (c).

Martinez, Oscar, Lindale, TX. 48-month probated suspension of EMT-P certification through September 2007. EMS Rules 157.36(b)(1), (2), (19), (26), (27), (28) and (29).

Maurer, Garrison, Canyon Lake, TX. 48 months probated suspension of EMT certification through January 3, 2006. EMS Rules 157.37(c)(2)(3)(G).

Maxwell, David, Fort Worth, Texas. Twenty-four (24) month probated suspension of EMS certification through September 17, 2006, for one (1) misdemeanor conviction. EMS Rules 157.37 and/or, 157.36(b) and/or, (c).

May, Scott, Lewisville, TX. 24 month probated suspension of EMS certification through December 31, 2005, misdemeanor conviction. EMS Rules 157.37, 157.36(b), and/or (c).

McKinney, Jody, Albernathy, TX. 24 month probated suspension of EMS certification through July 11, 2005, felony deferred adjudication probation. EMS Rules 157.37, 157.36(b) and/or, (c).

McLeod, James, Burleson, TX. 43 months probated suspension of EMT certification through January 10, 2006, misdemeanor conviction. EMS Rules 157.37, 157.36(b) and/or, (c).

McNeil, Katherine, Cleveland, TX. 12 months probated suspension of EMT certification through April 2005. EMS Rules 157.36(b)(1), (2), (13), (26) and (28).

Mercado, Mark, Edinburg, Texas. Twenty-four (24) month probated suspension of EMS certification through November 1, 2006, for one (1) misdemeanor deferred adjudication and one (1) misdemeanor conviction. EMS Rules 157.37 and/or, 157.36(b) and/or, (c).

Mitchell, Zane, Alvarado, TX. 6 months suspension followed by 49 months probated suspension of EMT-P certification through September 8, 2006, misdemeanor/felony or conviction. EMS Rules 157.37, 157.36(b) and/or, (c).

Moeller, Dawn, Moulton, TX. 12 month probated suspension of EMS certification through March 24, 2005, misdemeanor conviction. EMS Rules 157.37, 157.36(b) and/or, (c).

Moreno, Roger, Austin, TX. 24-month probated suspension of EMT certification through September 2005. EMS Rules 157.37, 157.36(b) and/or, (c).

Needham, Christopher, Troup, Texas. Twelve (12) month suspension followed by a thirty-six (36) month probated suspension of EMS certification through November 4, 2008, for EMS rule violations. EMS Rules 157.37 and/or, 157.36(b) (1), (2), (26), (27), (28), and/or (29).

Ochoa, Alfonso, Weslaco, TX. 24 mo. probated suspension of EMS certification through July 10, 2005, misdemeanor conviction. EMS Rules 157.37, 157.36(b), and/or (c).

Owens, Chante, Corpus Christi, Texas. Twelve (12) month probated suspension of EMS certification through August, 10 2005, for one (1) felony deferred adjudication probation. EMS Rules 157.37 and/or, 157.36(b) and/or, (c).

Parker, Michael, Waco, TX. Suspension of EMT certification thru September 2005. EMS Rules 157.36(b)(1), (2), (10), (21), (28).

Paul, Jon, Rowlett, TX. 48 month probated suspension of EMS certification through September 2, 2007, felony convictions. EMS Rules 157.37, 157.36(b), and/or (c).

Phillips, Earl, Manchaca, TX. 36 mo. probated suspension of EMT certification through April 9, 2005, felony deferred adjudication. EMS Rules 157.37, 157.36(b) and/or, (c).

Piedra, Carlos, Houston, TX. Twenty-Four (24) month probated suspension of EMS certification through September 9, 2006, for two (2) misdemeanor convictions. EMS Rules 157.37 and/or, 157.36(b) and/or, (c).

Pinedo, Marisela, Los Fresnos, NM. Probated suspension of EMT-I certification through June 1, 2006. EMS Rules 157.44, 157.51(b)(16) and (c).

Pippin, Brian, Lipan, TX. 48 months probated suspension of EMT certification through April 9, 2005. EMS Rules 157.37(c)(2)(3)(G).

Prescott, Michael, Itasca, TX. Decertification of EMT certification effective July 14, 2004. EMS Rules 157.36(b)(1), (2), (6), (26), (28) and (29); and 157.37(a).

Ramirez, David, San Juan, Texas. Twenty-four (24) month probated suspension of EMS certification through June 29, 2006, for one (1) felony deferred adjudication probation. EMS Rules 157.37 and/or, 157.36(b) and/or, (c).

Reed, Carroll, Houston, TX. 48-month probated suspension of EMS certification through August 22, 2007, felony deferred adjudication probation. EMS Rules 157.37, 157.36(b) and/or, (c).

Reyes, Maria, Stafford, TX. 12 month probated suspension of EMS certification through March 24, 2005, misdemeanor conviction. EMS Rules 157.37, 157.36(b) and/or, (c).

Rhodes, Linda, Wimberly, TX. 48 months probated suspension of ECA certification

Disciplinary Actions

through June 24, 2006, misdemeanor and felony deferred adjudication. EMS Rules 157.37, 157.36(b) and/or, (c).

Ricker, John, Allen, Texas. Twelve (12) month probated suspension of EMS certification through September 17, 2005, for one (1) misdemeanor conviction. EMS Rules 157.37 and/or, 157.36(b) and/or, (c).

Riggs, Casey, Grand Prairie, TX. 18 month probated suspension of EMS certification through May 5, 2005, felony deferred adjudication probation. EMS Rules 157.37, 157.36(b) and/or, (c).

Riley, Stephen, Humble, TX. 47 months probated suspension of EMT certification through December 10, 2005. EMS Rules 157.37(c)(2)(3)(G).

Roquemore, Joseph, Atlanta, TX. 48 months probated suspension of EMT certification through August 9, 2005. EMS Rules 157.37(c)(2)(3)(G).

Ruffcorn, Derek, Stockdale, Texas. Twenty-four month probated suspension of EMS certification through October 6, 2006, for one (1) felony deferred adjudication. EMS Rules 157.37 and/or, 157.36(b) and/or, (c).

Ruffner, Ryland, Pittsburg, Texas. Twenty-four (24) month probated suspension of EMS certification through May 24, 2006, for one (1) felony conviction. EMS Rules 157.37 and/or, 157.36(b) and/or, (c).

Russell, James, Azle, TX. Decertification of EMT certification effective March 5, 2004. EMS Rules 157.36(b)(1); (2); (6); (26); (28); and (29).

Salinas, Rene, McAllen, TX. 51 months probated suspension of EMT certification through April 25, 2006, felony conviction. EMS Rules 157.37; 157.36(b), (c).

Shaw, Tanja San Antonio, Texas. Twelve (12) month probated suspension of EMS certification through August, 10 2005, for one (1) misdemeanor deferred adjudication probation. EMS Rules 157.37 and/or, 157.36(b) and/or, (c).

Shelton, Tommy, Crosby, Texas. Thirty-Six (36) month probated suspension of EMS certification through May 24, 2007, for one (1) felony misdemeanor. EMS Rules 157.37 and/or, 157.36(b) and/or, (c).

Sierra, Ismael, Mesquite, Texas. Twelve (12) month probated suspension of EMS certification through August 10, 2005, for one (1) misdemeanor conviction. EMS Rules 157.37 and/or, 157.36(b) and/or, (c).

Simmons, Lynn, Fort Worth. Twenty-four (24) month probated suspension of EMS certification through July 29, 2006, for two (2) misdemeanor convictions. EMS Rules 157.37 and/or, 157.36(b) and/or, (c).

Singer, James, Winona, Texas. Twenty-four (24) month probated suspension of EMS certification through April 15, 2006, for one (1) misdemeanor conviction, one (1) felony conviction, and one (1) felony deferred adjudication probation. EMS Rules 157.37 and/or, 157.36(b) and/or, (c).

Slagle, William, Humble, TX. Probated suspension of EMT-P certification through May 2005. EMS Rules 157.36(b)(1); (2); (7); (9); (26); (28); and (29).

Smith, Lloyd, Houston, TX. 24 mo. probated suspension of EMT certification through March 20, 2005, misdemeanor convictions. EMS Rules 157.37, 157.36(b) and/or, (c).

Smith Jr, Roosevelt, Houston, TX. 48 months probated suspension of EMT certification through November 5, 2005. EMS Rules 157.37(c)(2)(3)(G).

Smith Tracy, Marble Falls, TX. Decertification of EMT certification effective August 10, 2005. EMS Rules 157.36(b)(1), (2), (8), (21), (26) and (28).

Sparks, Jason, Irving, Texas. Twelve (12) month probated suspension of EMS certification through August, 10 2005, for one (1) misdemeanor conviction. EMS Rules 157.37 and/or, 157.36(b) and/or, (c).

Sterling County EMS, Sterling City, TX. 12 months probated suspension of EMS provider license through August 2005. EMS Rules 157.16(d)(1), (14) and (19).

Stevenson, Doug, Katy, TX. 24 month probated suspension of EMS Coordinator certification thru July 2005. EMS Rules 157.43(m)(3)(b), (E) and (F).

Stroud, Barry, Austin, Texas. Twelve (12) month probated suspension of EMS certification through September 3, 2005, for one (1) misdemeanor conviction. EMS Rules 157.37 and/or, 157.36(b) and/or, (c).

Sullivent, Doyle, Rosanky, TX. 24 month probated suspension of EMS certification through June 27, 2005, felony deferred adjudication probation, felony conviction. EMS Rules 157.37, 157.36(b) and/or, (c).

Swinford, Richard, Plantersville, TX. 24 months probated suspension of EMT certification through April 29, 2005, felony deferred adjudication probations. EMS Rules 157.37, 157.36(b), and/or (c).

Thornton, Odis C., College Station, TX. 48 months probated suspension of EMT certification through June 18, 2005. EMS Rules 157.37(c)(2)(3)(G).

Ultimate EMS Ambulance, Houston, TX. \$6,000 administrative penalty against EMS provider license effective March 5, 2004. EMS Rules 157.16(d)(1); (10); (19); and 157.11(l)(13).

Walker, Mark, League City, TX. 24 month probated suspension of EMS certification through January 27, 2006, misdemeanor convictions. EMS Rules 157.37, 157.36(b) and/or, (c).

Walker, Mary, Medina, TX. 6 months probated suspension of the EMT certification through March 2005. EMS Rules 25 157.36(b)(1), (3), (7), (26), and (28).

Whitehurst, Ashley, Albay, TX. 1 mo. suspension through January 31 followed by 24 mo. probated suspension through Dec. 2005 of EMT certification. EMS Rules 157.36(b)(1), (2), (3), (6), (9), (26) and (28).

Texas EMS Week May 15-21, 2005

Start making plans now to celebrate EMS Week, May 15-21, 2005. You can order your packets from www.acep.org (do a search on EMS Week 2005). We'll also be making available press releases and other Texas-related EMS material.

For ideas on what to do for EMS Week, go to www.tdh.state.tx.us/hcqs/EMSWEEKIdeas.htm



Texas EMS Conference 2005

November 20-24, 2005
Austin, Texas

Meetings & Notices

Calendar

March 31-April 2, 2005. **TAA Annual Conference.** Radisson Resort, South Padre Island. Medicaid and Medicare billing representatives and speakers David Werfel, OIG/FIB and Brian Farrington. For registration & membership info call 972/417-2878 or online at www.txamb.com.

April 14, 2005. **Shampoos, Tattoos, and Barbeques – What's New in the World of Infectious Diseases.** One-day seminar provides an overview and update on current issues in infectious diseases. Contact Kathy Jordan, Texarkana College, Continuing Education Division, 903/838-4541, ext. 3384.

April 29-30, 2005. **Scott & White/Texas A&M Trauma & Critical Care Symposium.** CMEs, CNEs, and EMS CE available. \$325 for physicians, \$225 for all other healthcare professionals.

Deadlines and information for meetings and advertisements

Deadline: Meetings and notices must be sent in six weeks in advance. Timeline: After the pages of this magazine have completely gone through editorial, design and layout, the magazine goes to the printshop to get printed (*a 15-working-day process*), then on to our mailing service (*a 4-day process*), and then to the post office to get mailed out.

Cost: Calendar items are run at no charge. Calendar items run in the meeting and notices section until just prior to the meeting or class. Classified ads run for two issues unless we are notified to cancel the ad.

Fax or mail: Calendar items can be faxed to 512/834-6736 or mailed to *Texas EMS Magazine*, Texas Department of State Health Services, 1100 West 49th Street, Austin, TX 78756-3199. Call 512/834-6700 if you have a question about the meetings and notices section.

For information contact 254/724-4798. October 7-8, 2005. **27th Annual Texas Rescue Competition.** Held at Garner State Park. Additional information and applications are available at www.texasrescue.net.

Jobs

Paramedic/EMT-I/EMT-B: Marble Falls Area EMS is accepting applications for full/part-time positions. Progressive protocols and equipment. Competitive wages and benefits. Application available at www.marblefallsareaems.org, 830/693-7277. +

Clinical Practices Supervisor: Marble Falls Area EMS is seeking paramedics to fill this management level position. See full job posting and download application at www.marblefallsareaems.org, 830/693-7277. +

EMT-P: ACE Ambulance, Inc is accepting applications to fill part/full time EMT-P positions, night dispatcher position, Director of Operations position (paramedic level, leadership skills, experience a plus). For information contact Monica Stahl, 832/298-8645 or send resume to: Office Manager, 7100 Regency Square, Suite 104, Houston, TX 77036. +

Paramedics: Harris County Hospital District, is seeking candidates with certification or licensure as a Paramedic by the DSHS and/or the NREMT. Requires 2 years work experience as a licensed or certified paramedic (certification preferred in PALS, BTLS, or PHTLS, ACLS, EVOC and Basic Life Support). Must have the ability to operate basic and advanced life support equipment including cardiac monitor defibrillators. Interested candidates should call 1-800-996-HCHD or apply online at: www.hchdonline.com. +

EMTs/EMT-I/EMT-P/LP: City of Marfa is currently seeking applications

for basic, intermediate, and paramedic level positions. Resumes, along with copies of the appropriate certification, should be mailed to Henry Moon, City of Marfa, P.O. Box 787, Marfa, TX 79843 or e-mail to marfaadm@christophers.net. *

EMS Instructors: San Jacinto College Central EMT Department is accepting applications for part-time EMS Instructors. Must be EMT-P and EMS-Instructor minimum (prefer LP). Please call 281/476-1862 for application information. *

EMS Instructor: Laredo Community College has an immediate opening for full-time EMS instructor. For more information go to www.laredo.edu or email pstemmer@laredo.edu, 956/721-5261. *

EMTs/Paramedics: MedStar, operating in Fort Worth's 9-1-1 system, serves more than 400 square miles and 14 cities, responding to approximately 80,000 calls annually. Progressive protocols, on-site education, hands-on medical director. For information, contact Lisa Bennett 817/632-0519 or email Lisa_Bennett@medstar911.com. *

EMS Faculty: Position#020410064. Duties include teaching associate degree and certificate EMS program courses, advising students, course/curriculum development and activities and administrative duties. Must be flexible, working with program demands. Associate in science degree with 5 years paramedic experience; or associate in nursing with 5 years of critical care, emergency or EMS experience; or bachelor's degree with 4 years of related EMS experience; or Master's degree with 3 years related EMS experience. Must have current certifications and hold licenses for Texas. Criminal background check. Call Brookhaven College 972/860-4813. *

EMS Faculty: Positions available. associate's degree required; bachelor's or masters degree preferred. Minimum of 3 years experience with busy EMS system. Must be certified or licensed

Meetings & Notices

EMT, EMT-I or EMT-P and Instructor in Texas. NREMT certification is a plus. Additional qualifications could include ACLS, PALS, BTLs, instructor certification. Teaching at all levels primarily toward large, urban fire-based EMS system members. Salary commensurate with experience. Contact Dr. George Hatch, EMS Dept., Houston Community College at 713/718-7692 or email george.hatch@hccs.edu for more details. Applicants can visit www.hccs.edu for details or contact 713/718-8565. *

EMTs/EMT-I/EMT-P/LP: Calhoun Co. EMS has 3 openings. Residency requirement. County service with county retirement and benefits. Call for salary information and benefit questions. Additional salary for EMT-I/EMT-P/LP. For information contact Henry Barber or Carl King, 361/552-1140. Send resume to: Carl Lee King, 216 E. Mahan Street, Port Lavaca, TX 77979. *

EMT/Paramedic/Firefighter: Emergency Services Supply is looking for people who are interested in selling a quality line of ambulances in Texas. Territory is south of I-20, can be done part-time. Training and demo provided. For more information contact jjkehoe@yahoo.com. *

Miscellaneous

Provider Billing Service: Electronic claims submission/collections experience for ambulance services. Local or long distance. Professionals. Let PBS benefit your service with our experience. Call 800-617-1213.+

Dmitriy Shilnikov Insurance: Specializing in EMS Insurance. Business 281/578-3263, cell 832/212-1767, Fax 832/201-9590.+

Code Red EMS Software: Reduces rejected billing claims and is user friendly for field medics. Download our free demo at macrologic.cc or call 800-683-9454 to speak with us.+

EmCert.com: Offers online CE

courses, approved by DSHS and CECBEMS, for EMS/Fire professionals. Cost-effective subscription pricing for individuals or groups. Visit online for free 1-hour CE or call toll-free 1-877-367-4376 for more info.+

CPR manikins, new and used: CPR supplies, airways, manikin face shields, face pieces, parts. Manikin maintenance cleaning and repairs. Rental manikins available. Contact Ron Zaring, Manikin Repair Center, Houston, 281/484-8382, fax 281/922-4429.+

Bachelor's degree: St. Edwards University, Austin. Degree in public safety mgmt designed for working adult students. Credits for prior learning through portfolio. Some courses offered online. Visit the website address at www.stedwards.edu/newc/pacepsm.htm or call 512/428-1050.*

Billing Solution by MediGain: Specialized EMS billing. 5 percent rate for life of contract. No set up fees. Run sheet scanning, daily processing and web reports. Call 214/952-6602 or www.medigain.com.*

CE Solutions: EMS Continuing Education. Accepted in more than 40 states. Go to www.ems-ce.com for 2 free CE hours or call toll free 1-888-447-1993.*

Health Claims Plus: EMS & Fire department billing and free run report

software available. Excellent rates and services! Electronic billing, weekly and monthly reports and educational workshops. Contact 1-888-483-9893 or visit www.healthclaimsplus.com.*

New CE Course: Verbal First Aid is the power of words to promote healing. Learn how your words can help patients control pain, bleeding, immune response and recover faster. Fully CECBEMS approved! Call 512/340-9907 or 570/620-9950.*

Join TAA: Texas Ambulance Association, the oldest (22 years) and only EMS Association representing any EMS ambulance services licensed in Texas. To join go to the website www.txamb.com for application as a member, sponsor, and vendor or email AMBBIS@aol.com.*

For Sale

For Sale: 1997 Ford diesel 1-ton van chassis with box. Includes stretcher. Newly painted, runs great, low miles. Contact Clay Burleson at 817/306-5920 (weekdays) 940/664-5520 (nights & weekends) email burlec@wpi.com +

+ This listing is new to this issue.

* Last issue to run (If you want your ad to run again please call 512/834-6748.)

Placing an ad? Moving? Renewing your subscription?

Placing an ad? To place an ad or list a meeting date in this section, write the ad (keep the words to a minimum, please) and fax to: *Texas EMS Magazine*, 512/834-6736 or send to *Texas EMS Magazine*, 1100 West 49th, Austin, TX 78756-3199. Ads will run in two issues and then be removed. *Texas EMS Magazine* reserves the right to refuse any ad.

Moving? Let us know your new address—the post office may not forward this magazine to your new address. Use the subscription form in this magazine to change your address, just mark the change of address box and mail it to us or fax your new address to 512/834-6736. We don't want you to miss an issue!

Renewing your subscription? Use the subscription form in this magazine to renew your subscription and mark the renewal box.

EMS Profile: Marble Falls Area EMS



Front row from left; Ginger Floyd, LP; Stephanie Branco, EMT-I; Jeffrey Isbell, LP; Stephanie King, EMT-P; David Fernandez, LP. Back row from left; Lynn Hanson, EMT-B; Marilyn Hollingsworth, EMT-I; Robyn Richter, LP; Pamela Moore, LP; Valerie Delancey, EMT-I; Carissa Esparza, EMT-P; John Moore, EMT-P; Stephane Holland, EMT-B; Gerda McQueen, EMT-I; Clifton Grant, EMT-B; Christopher Holland, EMT-B; Ashley Dean, EMT-P; Bucky Brady, board member; Lindsay Graybill, EMT-I; Ken Smathers, EMT-I; Johnny Campbell, EMT-P; Loren Stagner, EMT-P; Andrew Branco, LP, Roger Dean, EMT-I; Christopher Gay, EMT-B.

Number of personnel: Marble Falls Area EMS (MFAEMS) is made up of 40 members including full-time, part-time and volunteer staff. Emergency medical service is provided by field staff of five EMTs, ten EMT-I's, 11 paramedics and three paramedic supervisors. Administrative functions are provided by a board of management consisting of seven community volunteers; these valuable individuals work in conjunction with two operations directors and two office staff personnel. Medical direction is provided by Dr. Juliette Madrigal-Dersch, M. D.

How many years of service: MFAEMS was established as a BLS service in 1976. Our first full-time paid member, Johnny Campbell, EMT-P, director of operations, was hired in 1996 to initiate the transition from a volunteer to paid service. In 2002, due to enormous growth, Loren Stagner, EMT-P, was hired to carry out daily operations. Today we are proud to serve southern Burnet County and southeast Llano County, which is populated by approximately 27,000 people spanning nearly 300 square miles.

Number of Units and capabilities: The department operates as many as five Frazer ambulances, one of which is a reserve unit that is put into service as needed. Each ambulance is licensed BLS with MICU capabilities. A paramedic and EMT-I usually staff each unit. All primary units are equipped with a 12-lead ECG monitor upgraded with capnography. MFAEMS operates under progressive protocols that include RSI, adult IO access and airway adjuncts such as laryngeal masks and combitubes.

Number of calls: In 2003, MFAEMS ran nearly 3,000 calls; 874 were trauma-oriented and 1566 were associated with medical emergencies. 'No transports' and interfacility transfers comprised the remainder of the calls.

Current projects: MFAEMS is actively engaged in a number of projects throughout the year in an effort to establish a comprehensive injury prevention program. To increase public awareness about child safety seats, MFAEMS established safety seat program. MFAEMS also seeks grants to initiate a public access defibrillation program in conjunction with CPR instruction. We are also very active in teaching the public about local emergency services during EMS Week. In 2003, we participated in "Shots Across Texas" campaign, providing flu and pneumonia shots to the elderly.

Texas Department of State Health Services
1100 West 49th Street
Austin, Texas 78756-3199

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At Austin, Texas