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	"Ready Teddy" coloring book. 16 pages of injury prevention and EMS awareness tips by the Texas EMS mascot. English-(4-61)		
	"When Minutes Count—A Citizen's Guide to Medical Emergencies" brochure. A foldout first aid guide. Can be personalized by the EMS service. (EMS-014)		
	(Updated) "EMS Questions and Answers About Citizen Participation" brochure. Answers questions about how to call, what to do and how the community can help EMS. (EMS-008)	•	
	(Updated) "EMS—A System to Save a Life" brochure. A 1970s title with a 1990s text, it has public health region office info and "For more information, call" box. Explains BLS and ALS. (EMS-012)		
	(<i>Updated</i>) "I'm an EMS Friend" sticker. Ready Teddy in a 2-1/2 inch, 3-color sticker.		
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FEATURES

Texas EMS Conference
A list of outstanding instructors paves the way for one of the best educational conferences in the nation. Look here for information on speakers, preconference classes and hotel rates. But hurry if you want to take a preconference class—they are filling fast.

DiversionA hot topic these days. So what can EMS do? The Bureau will ligathering information about diversion in the coming months. Here are a few answers about diversion as it relates specifically to trauma and treamal facilities.

By Star and RN FA

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you know of an organization ndividual who deserves recition? It's time again to nome the best for Texas EMS ands, presented each that at conference.

Preventable death buicide kills more Texa nomicide, yet it's a prohat doesn't get much a recent workshop in A recent workshop it a kind built probable to talk about protate to take Marrin, MEd

Continuing Education

Understanding hepatitis
The biggest threat to emergency responders may be invisible — bloodborne pathogens. Find out how to protect yourself and what you need to do if you think you might have come in contact with hepatitis or HIV.

SW. CAROL LAWRENCE, RN, ESN

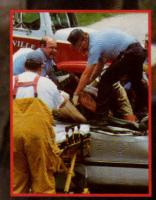
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Texas EMS

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BUREAU OF EMERGENCY MANAGEMENT MISSION

To facilitate statewide, regional, and community systems that provide emergency and health care for all individuals.

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Editor's office: (512) 834-6700, 1100 W. 49th Street, Austin, Texas 78756-

3199 or FAX (512) 834-6736.

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Texas EMS

Magazine

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Many share credit for year's accomplishments

 $oldsymbol{\mathsf{H}}$ as it really been a year? Since I took this position a year ago, we've accomplished so much, and it's been through the hard work of so many within the Bureau and outside the Bureau. One of my first major goals was to create a more open environment between the Bureau and our stakeholders. Many individuals and groups had expressed concern about being excluded from the regulation development process and, in general, not knowing what was going on. I tried to address that in a number of ways: expanding our stakeholder groups mailout/email lists; publishing regular updates/recaps in this magazine, on our webpage and on the e-lists; responding to inquiries in an expeditious manner; and updating our website more frequently. Working with the GETAC chair, Dr. Ed Racht, we have tried to assure that meeting notifications are mailed six to eight weeks in advance, stakeholder groups talk to GETAC about their organizations and their needs, public comment is encouraged at all meetings, and ad hoc groups/task forces are appointed as needed to address more specialized needs.

Some specific accomplishments include: facilitation of the newly appointed Governor's EMS and Trauma Advisory Council meetings; adoption of a comprehensive EMS/trauma rules package; adoption of the EMS education rule including the National Standard Curriculum for Paramedics; development of the re-certification options concept and proposal of the rule to implement it; a successful 2000 Texas EMS Conference; work with the legislative representatives on the Interim Study of Rural EMS issues and the resulting HB2446; successful grant applications for EMS/trauma system and pediatric activities; and distribution of more than \$6 million in EMS/trauma system funds.

I want to thank all of the individuals and organizations that have participated in these processes, from sending in your comments to attending meetings and serving on committees—these are your accomplishments also. And let me also extend very special appreciation to GETAC, including all the committee and task force members. It has been a true pleasure to get to know and work with all of you.

But there is still much work to be done. Current priorities include adoption and implementation of the re-certification options rule (157.34); contracting for the development of the state EMS examinations, including the new re-certification exam; continued work on continuing education requirements; piloting of the Comprehensive Clinical Management Program ("platinum plan" – 157.yy); and implementation of new/continuing projects resulting from the 2001 legislative session (EMS/trauma system strategic planning, EMD Resource Center pilot, AED study, dissemination of grant funds). I hope you all will continue to work with us as we move forward with these challenges.

A couple of other issues: GETAC and its committees/task forces met May 9-11 (see page 33 for recap) and will meet again August 22-24 (see page 7 for schedule or go to the Bureau website at www.tdh.state.tx.us/hcqs/ems or contact us for specific meeting information). The 77th Legislature has completed its work (see page 7 for EMS/Trauma System-related bills that passed). To view bills and other information on-line, go to the Texas Legislature website at www.capitol.state.tx.us and click on "Bill Lists, New Bills" or "Search Bills." See you at GETAC in August.

Texas EMS certifications as of June 6, 2001

ECA	5,186	
EMT	23,390	
EMT-I	3,867	
EMT-P	9,797	
Lic-P	4,192	
Total	46,432	
COORDINATOR	278	
Instructor	2,049	
Examiner	1,627	

EMS Obituaries

Benjamin Olivares, 41, of San Diego, was killed in a single car crash in rural Kenedy County on May 24, 2001. A licensed paramedic, Olivares was working for Harlingen EMS and had also worked for South Texas EMS.

Clifton Pierce, 46, of Alpine, died when his singleengine plane crashed outside Bay City on April 13. Pierce, a physician, worked to promote EMS in the frontier areas of West Texas.



Letters

To Texas EMS Magazine: Dr. Clifton Pierce was killed in April flying in his private airplane. Dr. Pierce was a staunch advocate of EMS in the frontier areas of Far West Texas and was part of the backbone of health care in the region for many years. He was also the only doctor willing to fly to Presidio to take care of the large impoverished client base there. I worked many bad calls by his side and will remember him always. Rest in peace, Dr. Pierce.

—Raina Dodson Former Presidio EMS Senior Paramedic

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2001 Texas EMS Photography Contest entry form

Photographer's Name	E encises quie		
Employed by			
Address	de Grande Dire	more de	
City	State	Zip	
Phone (home)	(work)	

Mail to: Jan Brizendine, Texas Department of Health 1100 W. 49th Street, Austin, TX 78756-3199.

Deadline for entering: November 6, 2001

Tape this form to the back of the photo. For more information call Jan Brizendine at (512) 834-6748.

Brief explanation of scene:		

Photo Contest Rules

- Anyone is eligible; no entry fee is required.
- Entries must be received no later than November 6, 2001. All photos will be displayed and winners will be announced at the Texas EMS Conference, November 18-21, 2001.
- Photos should be unmatted prints, 8X10 inches or 5X7 inches, in color or black and white. Fill out the entry form, tape it to the back of your photograph, and mail your entry to: Texas EMS Photo Contest, Texas Department of Health, 1100 West 49th, Austin, TX 78756-3199. For digital photos: mail a printed copy with the entry form and also e-mail photo in a .jpg format, use CMYK colors and e-mail to Jan.Brizendine@TDH.state.tx.us. Photographs should show good patient care.
- Winning categories and prizes:
 Two grand prize winners (one color and one black and white)—each wins \$125 and a plaque
- One Second place—\$75 and a ribbon
 One Third place—\$50 and a ribbon
 One Honorable mention—\$25 and a ribbon
- The Texas Department of Health will keep all photo entries and will have the right to publish entries in TDH publications. The photographer's name will be printed along with the photo. Ownership of the negative will remain with the photographer.

GETAC meets August 22-24 in Austin

Make your opinion known at the August meeting of the Governor's EMS and Trauma Advisory Council. All meetings take place in Austin at 1100 W. 49th, in the Moreton Building. For more information on the meetings or directions to the building, go to www.tdh.state.tx.us/hcqs/ems and click on GETAC. All documents pertaining to the meeting will be available on the website a few weeks before the meeting. Only copies of the agendas will be available at the meeting.

Wednesday, August 22, 2001

3:00p - 6:00p Rural EMS Task Force (M-739)

6:00p - 9:00p RAC Chairs (M-739)

Thursday, August 23, 2001

9:00a - 12:00p EMS Committee (M-739)

1:00p - 4:00p Education Committee (M-739)

1:00p - 2:30p BAC Task Force (G-107)

2:30p - 4:30p Diversion Task Force (G-107)

4:30p - 7:30p Trauma Systems Committee (M-739)

Friday, August 24, 2001

8:00a - 10:00a Medical Directors Committee (M-739)

8:00a - 10:00a Pediatric Committee (M-618)

8:00a - 10:00a Injury Prevention Committee (G-107)

10:30a - Governor's EMS and Trauma Advisory Council (M-739)

Now the work begins...

Below is a list of bills that passed during the 2001 legislative session. For a complete copy of any of these bills, go to www.capitol.state.tx.us and do a search by the bill number. Watch for more in-depth analysis on what these bills mean to EMS in upcoming issues of Texas EMS Magazine. Staff will be working out the details of implementation for the bills that directly pertain to the Bureau.

Bill # Subject

Relating to creating the Office of Rural Community Affairs.

HB244 Relating to exempting certain emergency service organizations from the sales and use tax on boats and boat motors.

HB100 Relating to the regulation of certain health care activities using the internet.

Relating to the emergency possession of and termination of the parent-child relationship of certain abandoned children.

HB1747 Relating to the continuation and functions of the office of Fire Fighters' Pension Commission and the membership of the board of trustees of the statewide emergency services personnel retirement fund.

HB2446 Relating to Emergency Medical Services.

HB3312 Relating to establishing a pilot program for state emergency medical dispatch resource centers.

SB11 Relating to protecting the privacy of medical records; providing penalties.

Relating to creating a foundation to finance health programs in the rural areas of the

SB126 Relating to the creation and funding of the Rural Communities Health Care Investment Program to attract and retain rural healthcare professionals.

Relating to paid leave for a state employee who is an emergency medical services

SB515 Relating to the establishment of an adult fatality review team and to the reporting and investigation of certain adult deaths.

Relating to requiring TDH in consultation with the General Services Commission to study the cost and feasibility of installing automated external defibrillators in state

SB1006 Relating to testing for accidental exposure to hepatitis B or hepatitis C.

NHTSA Child Passenger Safety Technician trainings Grant Year 2002

TDH Safe Riders

October 23 - 26, 2001 El Paso

November 13-16, 2001 Fort Worth

January 8-11, 2002 Houston

March 25-29, 2002 Wichita Falls

April 16-19, 2002 Lubbock

July 15-19, 2002 City of South Lake (near Dallas)

For information on the above classes, call Susan Warren at (512) 458-7111, ext. 2207, or email her at susan.warren @tdh.state.tx.us.

Rural Passenger Safety Education - TAEX

October 30 - November 2. Johnson City, Blanco County

February 25 – March 1, 2002 Del Rio, Val Verde County

May 21-24, 2002 Fairfield, Freestone County

For information about the rural trainings, call Marlene Albers at (979)862-4658.

AROUND THE STATE AND NATION EMS NEWS AND RESOURCES

By Kelly Harrell

New York nightclubs hire ambulances

Some New York City nightclubs have hired private ambulance services to wait outside so that patrons who overdose on drugs can be whisked off to emergency rooms without accessing the 9-1-1 system—and arousing



the suspicions of police. Emergency department staff began noticing the trend late last year when a large number of young people suffering acute drug over-

doses—as many as five a weekend night—began showing up, usually transported by private ambulances. Many had side effects consistent with overdoses of Ecstasy or GHB (gamma hydroxybutyrate). GHB is commonly known as the date rape drug. The hospital alerted the Manhattan district attorney's office, which began an investigation to determine whether the private ambulances were being used to circumvent law enforcement. The private ambulances charge about \$225 per hour for advanced life support.

Country singer won't be charged for joyride

Country singer Andy Griggs and a fellow musician will not be charged after they took an ambulance for a joyride in Tallahassee, Florida, in February. Both men apologized for the incident and agreed to play a benefit concert for Tallahassee Memorial Healthcare, which owns the ambulance. Proceeds from the concert went to the hospital's charities.

EMTs found shot at Indiana station

Two Indiana EMTs were found dead by co-workers in April during a 6:45 a.m. shift change at Pike County EMS. Both medics had been shot. A day later, police arrested one of the victims' co-workers for allegedly killing 44-year-old Marsha Rainey and 22year- old Bradley Maxwell. Police found empty shell casings in the suspect's home, which were matched to casings found at the murder scene. Police are not releasing a motive. Rainey was a mother of two and had worked for the service since 1979 Maxwell had joined the service in January 2001.

TDH website lists bioterrorism info

If you need health education info on bioterrorism, TDH has a website that may answer your questions: www.tdh.state.tx.us/bioterrorism/ default.htm. The site includes fact sheets on different bioterrorism agents, FAQs, bioterrorism web links, and downloadable symptom/ diagnosis tools.

CE ANSWERS FOR MAY/JUNE '01

6. B 11. A 1. D 2. B 7. A 12. A 3. D 8. C 13. B 14. B 4. A 9. B 5. C 10. B 15. D



Disaster teams recruiting members

The National Disaster Management System needs more people for its Disaster Medical Assistance Teams (DMAT). The teams need all levels

of medics, physicians, nurses, physician's assistants, respiratory therapists, dentists and dental assistants, and anyone with knowledge of logistics, communications and other skills helpful in a disaster such as acts of terrorism or weather-related events. Anyone interested should contact the nearest DMAT. To find the nearest team, go to www.oep-ndms.dhhs.gov and click on NDMS in the links on the left.

Ambulance wrecks injure medics

Two separate wrecks injured Texas medics recently. In April, an ambulance rolled three times near Carlsbad, New Mexico, ejecting one person and injuring two others. According to published reports, none of the injuries were life-threatening. In May, a driver running a red light in Houston sent three people, including two paramedics, to the hospital. The ambulance was responding to an emergency call about 3 a.m. when a van ran a red light and hit the unit. The ambulance tipped over and skidded down the road about 30 feet. Two paramedics and the van driver were transported.



New federal rules require AEDs on planes

New federal rules issued in April will require airlines to carry AEDs on all domestic and international flights within three years. Flight attendants will be trained to use the devices. Several airlines already carry AEDs. V-fib kills about 225,000 people each year in the U.S.



Ford launches booster seat campaign

Ford Motor Company launched a campaign in May to get all 50 states to pass booster seat laws. Just three states—California. Washington and Arkansas now require them for children ages four to 8. About 20 other states are considering such laws. (Texas had no legislation introduced in this past session.) Booster seats elevate a child so that the seatbelt fits properly across the shoulder and lap. The federal government recommends that children from 40 to 80 pounds and less than four feet, nine inches tall always

Texas AA revamps website

use booster seats.

The Texas Ambulance Association has revamped its website at www.txamb.com.

STED CO

Rules of Real World EMS

The following bit of EMS wisdom was taken off the EMS listserver, author unknown

- Air goes in and out, blood goes round and round, any variation on these themes is a bad thing.
- 2. Sick people don't complain.
- The more equipment you see on an EMT's belt, the newer they are.
- When dealing with patients, supervisors, or citizens, if it felt good saying it, it was the wrong thing to say.
- 5. All bleeding stops ...eventually.
- 6. If the child is quiet, be scared.
- 7. EMS is extended periods of intense boredom, interrupted by occasional moments of sheer terror.
- If the patient LOOKS sick, then the patient IS sick.
- If the patient is sitting up and talking to you, then the patient is not in V-Fib, no matter what the monitor says.
- It is generally bad to use curse words on scene, especially in reference to the patient's condition.
- 11. When responding to a call, always remember that your ambulance was built by the lowest bidder.

- Never get into the front of the ambulance with someone that is braverthan you are.
- The number of drugs a patient has on board is directly proportional to the number of knuckles tattooed.
- 14. If you respond to an MVA after midnight and you don't find a drunk, keep looking—you've missed a patient.
- 15. A tourniquet around the neck solves all problems.
- All fevers eventually fall to room temperature.
- 17. Asystole is a very stable rhythm.
- A patient's weight is in direct proportion to their altitude in the building.
- 19. When a call comes in two minutes before shift change, you will always pass your relief one block from the station, he/she will be laughing and waving at you.
- 20. Universal Precautions Is it wet? Is it yours? If it is, and it isn't, then leave it alone.
- 21. Death is a stabilization of the patient's condition.

- 22. Being in emergency services means you get to celebrate your holidays with all your friends, while on duty.
- 23. Working EMS means knowing how to ask in seven different languages "Where are your shoes?"
- 24. The more reflective striping there is on your jumpsuit, the easier it is for the only drunk driver going by the MVA to find you.
- 25. We are all slaves to the god "Motorola."
- 26. The stereo must always be louder than the siren.
- 27. Your patient will get new symptoms after your radio report when you pull up to the ER.
- 28. Don't get excited about blood unless t's your own.
- 29. No matter how many times and ways you ask the patient questions, the story will always change once they get into the ER, making you look like an idiot.
- People don't call an ambulance because they did something right.
- 31. If they talk, they walk.

Man uses stolen ambulance to kidnap 5-year-old girl

Houston police arrested a man Thursday just hours after he lured a 5-year-old girl into a stolen ambulance and abducted her. The girl, who appeared to be okay, was taken to Texas Children's Hospital for observation. The ambulance, with the Unique Ambulance name obscured by spray paint, had been stolen the day before while parked at a Senior Citizens Center. The suspect told children playing at an apartment complex that the ambulance was a mobile playhouse "with candy inside." Other children got out of the ambulance before the vehicle left with the 5-year-old. The suspect is being investigated for several recent abductions.

Injury prevention survey on Bureau website

What kinds of injury prevention programs does your service or hospital do? GETAC's injury prevention committee, in conjunction with the Texas Trauma Coordinators Forum (TTCF) wants you to tell us! The survey, developed by TTCF, asks basic questions about injury prevention programs. Measurement and evaluation of programs is being omitted at this point, but anyone interested in evaluation or results can contact the person listed at the program. TDH will compile the programs and put them into a listing document on the website. To download a copy of the form, go to www.tdh.state.tx.us/hcgs/ ems and click on New Items. Send the completed survey to your RAC chair (also listed on that website) and RAC chairs will forward to TDH. Or, you can fax a copy of the survey directly to TDH at (512) 834-6736.

Annual salary survey gone

Due to declining participation for its annual salary survey, Texas EMS Magazine has discontinued the salary survey after three years. The survey was devised to track rates of pay across the state, with a particular interest in how the creation of licensed paramedic affected salaries. However, the number of surveys that were returned was too small to get a good overall picture of what was happening to salaries in the state. However, a new survey will be going out to providers later this year. Information from that survey will help the Governor's EMS and Trauma Advisory Committee (GETAC) to develop a strategic plan for EMS. The legislature passed a law this session, HB2446, that directs GETAC to develop the plan. Watch our website (www.tdh.state.tx.us/hcqs/ ems) and the magazine for more information.

Government info shows good and bad

Want to know the information the U.S. Department of Labor has gathered about emergency medical personnel? *Cyo* to the Bureau of Labor Statistics at http://stats.bls.gov/oco/ocos101.htm.

Among the findings: Employment of EMTs is expected to grow faster than average through 2008, with much of the growth occurring as positions change from volunteer to paid, and as the population grows. According to the feds, most opportunities will be in hospitals or private ambulance services, while competition for government jobs, including fire departments and third-service departments, will be greater. Now for the bad news: Median income in the U.S. for EMTs was \$20,290 in 1998. The middle 50 percent earned between \$15,660 and \$26,240. The lowest ten percent earned less than \$12,700 and the highest ten percent earned more than \$34,480.

Perry signs pickup truck law

A new law signed in May by Governor Rick Perry makes it illegal for children younger than 18 to ride in the back of a pickup truck driven at any speed. The previous law prohibited children under 12 and speeds of greater than 35 miles per hour. However, the new law does add several defenses to prosecution, including transporting farmworkers from one field to another; operating the vehicle on a beach; operating a vehicle that is the only vehicle over the new law takes effect September 1, 2001.

Playground equipment recalled after fire

A reflective dome used in playground equipment was recalled Friday after a 3-year-old Connecticut boy's shirt burst into flames while he was sitting inside one. The boy suffered seconddegree burns when the sleeve of his shirt caught fire while he was in day care. Fire investigators say that it appears the sun's rays were concentrated by the mirrored dome, pushing temperatures above 250 degrees Kompan Unique Playgrounds, maker of the dome, says the company plans to replace about 45 of the domes across the country with clear plastic domes.

Drug websites fill prescription for info

Looking for information online about drugs? Several sites fill the prescription. Most sites are free and do not require registration. At www.rxlist.com, you can search for medications by name or maker, check out the latest drugs news, look up information in Tabor's Medical Encyclopedia, or browse through the Drug Comix. At www. drug-checker.drkoop.com, you can find out the interactions between different drugs, or between a single drug and foods. But remember: it might be wise to doublecheck information received from the internet before you act on it.

Baby dropped off at fire station reunited with mother

Hours after a baby boy was dropped off at a Dallas fire station in April, the baby's mother came forward to claim him after seeing news reports about the child. The baby, who appeared to be about seven months old, had been left by a woman who told firefighters that the baby's father had left him at a hotel with her. When the father did not return, the woman took the baby to the fire station and left him with veteran firefighter/paramedic Larry Mitchell. The woman may have chosen a fire station because of a state law allowing mothers to leave their babies at a fire station, hospital or police station within 30 days of birth and avoiding prosecution. Five mothers have left their babies with firefighters or police officers since the law was enacted almost two years ago. Neither the mother nor the woman who left the baby will be prosecuted.

Surprise! You've got emergency responders at the door

A Washington, D.C., filmmaker was surprised to hear firefighters knocking at her door in April while she talked to an America Online representative about setting up her new computer. The filmmaker had been in tears about her inability to get on the internet and retrieve emails. Jokingly, she had told the AOL representative that if she didn't get the emails, she would "kill herself." A few minutes later, an operator called on the other line and asked if someone was killing herself. The filmmaker replied no. A few minutes after that, she heard the knocks. When she looked out the window, she saw a fire truck, an ambulance and a police car. An AOL spokesperson said that the safety of its members is its highest concern.

Man arrested for ramming ambulance

A 36-year-old Fort Worth man was arrested in April after he allegedly rammed his car into an ambulance blocking his parking space. The ambulance had been called to a Luby's on a report that a pregnant woman was unconscious inside the restaurant. The ambulance parked in front of the Luby's, blocking Lexal McGuire's car. McGuire demanded that medics move the ambulance, and they told him that they had to first respond to the emergency in the restaurant. The three went into the restaurant. where McGuire allegedly became belligerent and left to get in his car. While trying to back out of the space, he hit the ambulance three times, causing about \$1500 in damage. Police arrested McGuire and he was charged with criminal mischief. Another unit had to be called to tranport the pregnant woman.



November 18-21, 2001 Austin Convention Center — Austin, Texas

- Learn about the latest in EMS technology in the 80,000 square feet of exhibit space filled with state-of-the-art products.
- Choose from more than 100 excellent workshops. You'll learn the latest advances in prehospital care, and have the opportunity to brush up on the basics.
- Your chance to network with 2,500 of your EMS friends!
- The best in preconference classes! All your favorites such as cave and high angle rescue, plus new additions including capnography, 12-Lead and patient simulations.



Sunday, November 18, 2001

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

Monday, November 19, 2001

7:00 am -6:00 pm	Registration in the Convention Center in Palazzo
8:15 am -9:30 am	Opening Session in Ballroom A-C
9:45 am -10:45 am	Workshop Breakouts Ballroom A, Rooms 4-10 (Third floor)
10:00 am -6:00 pm	Exhibit Hall Open
11:00 am -12 noon	Workshop Breakouts Ballroom A-C, Rooms 4-10 (Third floor)
12 noon -1:00 pm	Lunch in Exhibit Hall
2:00 pm -3:00 pm	Workshop Breakouts Ballroom A and C, Rooms 4-10 (Third floor)
3:15 pm -4:15 pm	Workshop Breakouts Ballroom A and C, Rooms 4-10 (Third floor)
4:30 pm -5:30 pm	Workshop Breakouts Ballroom A and C, Rooms 4-10 (Third floor)



If you have questions, please call us at (512) 834-6700 or visit our web site at http://www.tdh.state.tx.us/hcqs/ems. For registration information, go to www.texasemsconference.com

Tuesday, November 20, 2001

7:00 am -3:00 pm	Registration in the Convention Center in Palazzo
7:30 am -8:30 am	Early Bird Workshop Breakouts
	Ballroom A-C, Rooms 4 - 10 (Third floor)
8:45 am -9:45 am	Workshop Breakouts Ballroom A-C, Rooms 4-10 (Third floor)
9:00 am -11:45 am	Exhibit Hall Open (closed during Awards Luncheon)
10:00 am -11:00 am	Workshop Breakouts Ballroom A-C, Rooms 4-10 (Third floor)
11:45 am -1:15 pm	Awards Luncheon Exhibit Hall
	(Exhibit Hall open immediately after Awards Luncheon)
	(Exhibit Hall open immediately after Awards Luncheon)
1:15 pm -3:00 pm	(Exhibit Hall open immediately after Awards Luncheon) Exhibit Hall Open
1:15 pm -3:00 pm 2:00 pm -3:00 pm	
•	Exhibit Hall Open
2:00 pm -3:00 pm	Exhibit Hall Open Workshop Breakouts Ballroom A-C, Rooms 4-10 (Third floor)

Wednesday, November 21, 2001

8:30 am -9:30 am	Workshop Breakouts Ballroom A-C, Room 6
9:45 am -10:45 am	Workshop Breakouts Ballroom A-C, Room 6
11:00 am -12 noon	Workshop Breakouts Ballroom A-C, Room 6

Other groups' conference activities:

EMS Educators Association of Texas Meeting. Call Lee Gillum at (979) 821-0297.

EMS Association of Texas. Call Ron Haussecker at (979) 277-6267.

BTLS Board Meeting. Call Nancy Davis, TCEP, at (512) 306-0605.

TCEP's Medical Director's Committee Meeting. Call Nancy Davis, TCEP, at (512) 306-0605.

Texas Association of Air Medical Services. Call Allen Helberg at (214) 956-0707

Advanced Trauma Coordinator Core Course. Call Lois Blough at 915/521-7984.

Coordinator Update: TDH State EMS Coordi-

nator Eddie Walker teaches a two-hour class on how the new recertifcation rules will affect anyone recertifying. Registration begins at 8 am; class begins at 9 am on Sunday, November 18, at the Hyatt. Cost is \$10. No need to preregister but come early to pay and avoid the last minute rush. For information, email eddie. walker@tdh.state.tx.us or call him at (512)834-6700, ext. 2313.

Conference Adjourns

Ride out with Austin EMS/Tour Brackenridge's Level II Trauma Facility

Ride out with Austin EMS: Want a chance to ride out with an urban service that responds to about 60,000 calls per year? Austin EMS is offering ride-outs at no charge during the conference. Different times are available. Sign up at the conference registration booth beginning Sunday on a first-come, first-served basis. Bring dark pants and shoes and a white, collared shirt. Call Warren Hassinger at (512)469-2060 or email him at warren.hassinger@ci.austin.tx.us.

Tour Brackenridge's Level II Trauma Facility: See what a Level II Trauma Facility has to offer. Different times available on Sunday; no charge for the tour. Sign up before the conference by calling Will Pickard at (512) 473-9591 or email at wpickard@seton.org.

Conference Hotels

Hyatt (Host Hotel)\$70/95
(512) 477-1234
Radisson \$70/100
(512) 478-9611
Four Seasons \$120/160
(512) 478-4500
Omni Hotel\$70/110
(512) 476-3700
Sheraton \$70/90
(512) 480-8181
Embassy Suites \$134/144
(512) 469-9000
Marriott Capitol\$65/65
(512) 404-6946

November 18-21, 2001 - Austin Convention Center

REGISTRATION FORM

Note: Make a copy of this form for each additional registration—only one registration per form. Fill in the name exactly like you want your nametag to be printed.

\$100 before November 1 \$125 after November 1

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If you are takin	ig a preconference class, check the P	Preconference Class Title
\$35, Helicopter Safety and Packaging	\$100, Infection Control	\$75,12-Lead ECG Interpretation
\$140, High Angle Rescue	S60, Moulage	\$35, Working with Deaf Patients
\$140, Cave Rescue	\$50, Capnography: The Ventilation Vital	1Sign
\$55, EMS Managing Hazardous Mater	rials \$20, Grant Writing Workshop	Preconference registration
\$195, Advanced Medical Life Support	\$75, Advanced Patient Simulations	deadline October 6, 2001.
	Total	
paying by credit card, fax your co	empleted registration to: Fax 512/759-17	Preconference Class Fee \$
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November 18-20, 2001 - Austin Convention Center

EXHIBITOR REGISTRATION FORM

For exhibitor information: Call 512/834-6748

Floorplan website: www.tdh.state.tx.us/hcqs/ems/01floor.htm

If paying by credit card, you may fax your completed registration to: Fax 512/759-1719

Sponsored by Texas Department of Health and Texas Health Foundation

(Information used for name badge and printed program-please type or print)			
TEXAS EMS CONFERENCE 2001 — EXHIBITOR REGISTRATION FORM			
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Refunds must be before 10/1/02	Exhibit hall floorplan located at http://ww	ww.tdh.state.tx.us/hcqs/ems/01floor.htm	
18% administration fee charge	d. Regular Booth 10'X10'	VEHICLE BOOTH 20'X20'	
How many	Check box	(for ambulance or helicopter-only)	
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Extra rep fee	☐ Two booths\$575 each☐ Three or more\$550 each	☐ Two vehicle booths \$625 each ☐ Three or more \$600 each	
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\$75 each	Write in booth number(s) requests, all efforts will be made to honor booth choices.	Make check payable to: Texas EMS Conference	
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Preconference Classes

Saturday class

Helicopter Safety and Packaging

4-hour class, \$35, STAR Flight Hangar (Meet at Hyatt at 8:15 a.m.) 9am - 1pm

CE Category: Additional

In this class co-sponsored by Austin/ Travis County's STAR Flight, San Antonio's AirLife and Scott & White's Medivac, learn the basics of safe ground operations and patient packaging for helicopter transport. This class will cover what factors to consider when choosing a landing zone, how to secure a landing zone, and how to operate safely around the aircraft. It will also cover special considerations when packaging patients for helicopter transport. Students will have an opportunity to participate in hands-on exercises. Lunch and transportation will be provided. For more information contact Casey Ping at (512) 802-0200 or email at casey.ping@ci.austin.tx.us.

Saturday/Sunday classes

High Angle Rescue

16-hour class, \$140 8 am - 5 pm Austin Fire Department Training Tower and cliffs at a greenbelt (Meet at the Hyatt at 7:15 am) CE Category: Prep-4, Trauma-6.5, Med-5, Spec Pt-.5

Learn the basics of high angle rescue in this comprehensive two-day introductory course. Participants will have handson training in rappelling, hauls/lowers, basic knots, anchors, patient assessment and patient packaging. This class will fill up fast. This class will award 16 hours of CE and includes all necessary equipment except personal helmets (fire okay) and leather gloves. If you are afraid of heights, this class is not for you - you will be hanging on ropes 80 feet in the air at times. Strictly limited to 25 students. Lunch, a tshirt and transportation included. For more information, please contact Rod Dennison or Mike Foegelle at (254) 778-6744 or email them at rod.dennison@tdh. state.tx.us or mike.foegelle@tdh. state.tx.us or email John Green at john@texasroperescue.com.

Cave Rescue

16-hour class, \$140 8 am - 5 pm Whirlpool Cave & Goat Cave (Meet at the Hyatt at 7:15 am) CE Category: Prep-4, Trauma-6.5, Med-5, Spec Pt-.5

Learn the basics of cave rescue in this comprehensive two-day course. This physically strenuous introductory cave class provides lots of hands-on training in patient assessment, patient packaging, hauls/lowers - all while underground in some of Austin's popular caves. This class will award 16 hours of CE. All necessary equipment is provided except leather gloves and knee pads. Since you will be crawling through tight spaces in the dirt and mud, this class is not for anyone claustrophobic or who minds getting muddy. Strictly limited to 25 students. This class will fill fast so sign up early. Lunch, a t-shirt and transportation included. For more information, please contact Rod Dennison or Mike Foegelle at (254) 778-6744 or email them at rod.dennison@tdh.state.tx.us or mike.foegelle@tdh.state.tx.us or email John Green at john@texas roperescue.com.

EMS Managing Hazardous Materals

16-hour class, \$55, Radisson

8 am - 5:30 pm

CE Category: Additional

Come and see how EMS can respond to a hazmat incident in this hazardous materials class designed specifically for EMS responders. 16 hours of CE. Class limited to 50 students. Call Louis Berry at (512) 834-6700 or email him at louis.berry@tdh.state.tx.us for more information.

Advanced Medical Life Support

16-hours, \$195, Hyatt 8 am- 5:30 pm

CE Category: Medical

This course offers a practical approach to adult medical emergencies. After an introduction on assessment and airway management, the class will review the pathophysiology and presentation of common medical complaints including

shock, dyspnea, chest pain. altered mental status, acute abdominal pain, gastrointestinal bleeding and seizures. The class moves from complair.t-based initial assessment to field diagnosis and management of immediately treatable underlying diseases. On the basis of the information given about each patient, the student is challenged at various points during each case to identify and manage life threats, form a field impression of the underlying etiology and determine appropriate treatment. This class offers an interactive approach with live patient assessments to integrate classroom knowledge with a hands-on approach of the medical patient. Strictly limited to 24 stu-

An AMLS Instructor meeting will be offered on Monday, November 19, at the Hyatt.

For more information on class content, contact Anne McGowan at (979) 845-2202 or email her at abm@hlkn.tamu.edu.

Coordinator Class-NO CE

13-hour class, \$195, Hyatt

Saturday 12 - 6 pm; Sunday 8 am - 4 pm

This course is intended to train Course Coordinators for Texas, Participants will be selected through a competitive application process. Limited to 25 attendees. No CE will be awarded. TDH regional offices will be accepting applications until July 15. To apply, send letter of intent and qualifications to your regional office. Attendees will be selected by August 1 and sent invoices. In order to confirm registration, the fee must be submitted to TDH no later than September 28, 2001. Lunch will be provided on Sunday only. Class includes workbook that will be mailed to participants after fees are submitted. Participants must pass a pretest on the workbook material at the beginning of the class to be able to continue in the workshop. (No refunds for failing grades.) For information on the course and evaluation criteria, and for copies of the course credentialing requirements and the application, contact your regional office. Regional offices are listed on page 27 of this magazine.

Preconference Classes

Pediatric Education for Prehospital Professionals (PEPP)

12.75 CE hours \$185, Hyatt 8 am - 4:30 pm CE Category: Special Patient

Participants will be selected on a first come, first-serve basis. Limited to 25 students. Registration includes the student course manual (instructor resource manuals will be available for purchase). TDH will be accepting applications until August 1, 2001; attendees will be notified by August 31, 2001. In order to confirm registration, the fee must be submitted to TDH no later than September 28, 2001. For information on the course and applications go to http://www.tdh.state.tx.us/hcqs/ems/Eemscpepp.htm or call Terry Lynn Ellis at 254/519-8204 or email tlellis@vvm.com

Infection Control

16-hour class, \$100, Austin EMS Training Facility, 8 am - 5 pm (meet at the Hyatt at 7:15 am); CE Category: Preparatory

This comprehensive two-day program is designed to acquaint EMS personnel with the principles of infection control. Topics include: disease transmission, basic epidemiology, immunization and surveillance programs and compliance with OSHA and TDH regulations including the new sharps rules. Lunch and transportation included. For information on class content, call Dave Wuertz at 448-8380 or email david.wuertz@ci.austin.tx.us.

Sunday classes

Moulage

6-hour class, \$60, Austin Convention Center, 12 pm - 6 pm CE Category: Additional

Learn the basic concepts of disaster makeup using simple, easily purchased materials. Techniques covered include bruising, lacerations, burns, penetrating injuries, and types of terrorism injuries. Wear old clothes that can get ruined! This popular class, which fills fast, awards 6 hours of CE. Students will receive an intro moulage kit. Class limited to 30 students. For information on class content, call Lee Sweeten at (830) 278-7173 or email him at lee.sweeten@tdh.state.tx.us.

Capnography: The Ventilation Vital Sign

4-hour class, \$50,

Austin Convention Center, 12-4 pm CE Category: Preparatory

In this course, you will learn about the pre-hospital use of capnography, a new clinical trend in ventilation. Capnography is considered the standard of care in all patient care environments and is in the AHA Guidelines 2000. The class discusses the common terminology, physiology of CO2, physics, technology, clinical applications and waveform analysis, and will be reinforced by multiple research studies and case presentations. The class awards four hours of CE. For more information, call Lee Richardson at (915) 829-0049 or email mrems@swconnect.net.

Grant Writing Workshop

3-hour class, \$20, Hyatt

1 - 4 pm

CE Category: Additional

Students will gain a working knowledge of the requirements of constructing effective funding proposals. Participants will receive specific examples of funding proposals and program objectives that may be used as a template for future funding proposals. Funding resources will also be shared, including names of local and national foundations and an overview of government programs that may provide funding for specific client programs. For more information, call Donna George at (254)202-9466 or email dgeorge@hillcrest.net.

Advanced Patient Simulations

8-hour class, \$75, Hyatt 8 am - 5 pm

CE Category: Medical

Learn patient assessment and management using the Human Patient Simulator, a state-of-the art mannikin that has over 50 pre-programmed ACLS and allied health scenarios representing physiologically accurate patients. Through interactions with the Human Patient Simulator, students will perform skills relating to patient assessment, ba-

sic and advanced airway management, drug therapy, ECG interpretation and defibrillation. This class awards 8 hours of CE and is presented by the TEEX ESTI EMS program. For more information about class content, call John Rinard at (979) 458-2262 or email john.rinard @teexmail.tamu.edu.

12-Lead ECG Interpretation

8-hour class, \$75,

Hyatt

8 am - 5 pm

CE Category: Cardiac

This nationally acclaimed course is a high energy, fast-paced interactive workshop that keeps the student involved and focused. Favorite conference instructor Bob Page utilizes a multi-media presentation and proven techniques to deliver a workshop designed for field paramedics, no matter how much experience they have with 12-leads. The course is designed for fast learning and to gain experience by working more than 200 12-leads in the course. By the end of this workshop, participants will have working knowledge and easy-to-use tools necessary to determine axis and hemiblocks, bundle branch blocks, wide complex tachycardias and acute MI recognition. For information on class content, email Bob Page at bpagemlm@prodigy.net.

Working with Deaf Patients

2-hour class, \$35,

Hyatt

1-3 pm

CE: Special Patient

Learn basic sign language for medical personnel as you gain an understanding of deafness and learn appropriate signs to communicate and understand medical needs. After this class, you'll be able to ask the patient basic medical questions and be able to communicate what you need the patient to do. This class awards two hours of CE. Taught by Nancy Wheeler, a Texas Commission for the Deaf certified interpreter and an EMT. For more information, email Nancy at IntrepidLady @hotmail.com.

From the 2000 Texas EMS Conference:

Bob Page, NREMT-P





Ralph Hendricks, LP

Robert Gonzalez, Jr., LP





Keith Stout, MD

Brian Haschke, LP





A student in the Cave Rescue class

Texas EMS Conference 2001

Alan Baker, EMT-P

Recognizing and Understanding AV Blocks

Jennie Barr, PhD, LPC

Crime Victims' Compensation and Presumptive Eligibility: A Resource for Victims of Crime

Brent Boen, RN, LP; Ozro Henderson, RN, LP & Kirk Higgins, PA-C

Disaster Medical Response in the 21st Century: Are you prepared?

Scott Bolleter, EMT-P

- Within Reach: Patient Assessment Realities
- 2. Mind, Body and Soul: Lessons from Accidental Angels

Ken Bourvier

Rodeo EMS

Benjamin Earl Brackett

- 1. What you Don't see Could Kill you
- 2. Practical Exercises in Patient
 Assessment

Christian E. Callsen, Jr., LP

Real World Terrorism Response

Jay D. Cloud, LP

Mad Cow, BSE, CJ and EMS

Ken Corn, NREMT-P

- 1. Inhalant Abuse: The Hidden Epidemic
- 2. Autoerotic Asphyxiation (AEA)
- 3. GHB and Other Club Drugs

Angela M. DeTulleo

Clandestine Drug Labs

Stewart Dodson, EMT-P

Circle of Protection: Think Child & Senior Safety, A Community Responsibility

Steven Dralle, EMT-P

Kinematics of Motor Vehicle Trauma and Gun Shot Wounds (GSW)

Ray DuGray

- 1. Violent Patient Management: Control, Escape, & Restraint Techniques
- 2. Stress for Success in EMS

Robert C. Etheridge, Jr., NREMT-P, LP Tissue Hypoperfusion

John P. Frey, BS, LP

- 1. Hotter Than a Jalapeño
- 2. When the Bubble Bursts: Scuba Emergencies

Gene Gandy, JD, LP

- 1. Monitor Magic: Let Modified Chest Leads Enhance your Abilities
- 2. Two + Two May Equal Six: Drug Interactions

Robert Genzel, MD

Really Cool Slides II

Tania Glenn, LMSW-ACP, CTS

The Lying Game: Assessment of Malingering and Deception

Donald J. Gordon, PhD, MD

- 1. The Effects of America's Obesity Epidemic, 2001
- 2. Blunt Trauma: Prehospital Assessment, Treatment & Appropriate Disposition

Jodie Harbert, III, LP

An EMS Approach to the Medical and Physical Abuse of the Elderly

Mark E. Hinson, RN, LP

- 1. A New Look at Rapid Sequence Intubation
- 2. Current Concepts in Seizure Management

Lisa Hollett, RN, BSN, MICN, CEN

- 1. EMS Visits Golden Pond
- 2. A Case Study of the Multisystem Trauma Patient: Complications
- Bruises on the Inside, Tco: Recognizing Domestic Violence

Allen Johnson

C-Spine Clearance

Douglas M. Kleiner, PhD, NREMT, ATC, CSCS, FACSM

Prehospital Care of the Spine-Injured Athlete: Protocols, Protective Equipment & EMS

Carol S. Lawrence, RN

Understanding Lab Values in Occupational Exposures

Gary M. Mailman, MD, FACEP

Diving Injury Case Studies

Larry Nelson, RN, NREMT-P

Alzheimer's Patients: A Challenge for SAR and EMS

Matthew Olthoff, EMT-P

DWI Awareness

Keith A. Ozenberger & Kevan Corson

EMS and Hyperbarics

Workshop Listings

Bob Page, NREMT-P, CCEMT-P

- 1. Airway Dogs: What Tricks can they Do?
- 2. Parrot Medicine
- Riding the Waves: The Role of Capnography in EMS

Paul E. Pepe, MD, MPH, FACEP, FCCP, FACP, FCCM

- Active Compression Decompression (ACD): Taking the Plunge into Life-Saving
- 2. Emergency Ventilatory Management of the Trauma Patient: Elemental or Detrimental?
- 3. Improved Criteria for both Termination and Waiver of Resuscitation Efforts

David E. Phillips, LP

- 1. One Tequila, Two Tequila, Three Tequila. . . Floor: Management of Alcohol Related Emergencies
- Management of MVCs and Multiple Patients [2 hrs]
- 3. Handling Patient Consent & Refusal in the Out-of-Hospital Setting

Jon Puryear

Right Ventricular AMIs: How not to Kill Them

Edward M. Racht, MD

- 1. The 10 Most Important Clinical Issues in an EMS System
- 2. Pitfalls in Field Airway Management

Jim M. Rich, CRNA

Rational Options for Airway Management

Shawn Salter, RN, NREMT-P

- 1. I Can't Get the Tube
- 2. Severe Head Injuries
- 3. Relax! Don't Push!

Joan E. Shook, MD Pediatrics

Paul E. Sirbaugh, DO, FAAP, FACEP

Pediatric Non-Transports: What do you do?

Robert Spranger, EMT-P

Cotton Headed Rattle Moccasins: The Snakes of Texas

Jan Stalder, RN, LP & Jim Allday, RN, LP, NREMT-P, CEN, CFRN

EMS Preparation for International Deployments: Austere Medical Services in Awesome Locations

Ed Strout, RN, EMT-P Understanding Diabetes

Bliss Tancred, RN, CEN, LP

Screening for Domestic Violence in Special Populations

Jennifer E. Thomas, EMT-P

EMS Documentation

Roger Turner, LP

- Law Enforcement Chemical Agents: What to Expect & How to Decontaminate
- 2. Less than Lethal Rounds: Injuries from the Front Lines
- 3. What Did you Say? How to Interpret Street Language

Jack Van Cleve, EMT-P

Willing Hearts; Tied Hands

Lance Villers, NREMT-P

- 1. Pearls & Pitfalls in Cardiac Care: A Look at the Literature
- 2. 32 Minutes to Impact: Keeping Compassion in EMS

Gary W. Waites, LP

- 1. Municipal Response to Industrial Incidents
- 2. Industrial trauma

Karl Wagenhauser, MD

- 1. Geriatric Trauma
- 2. Ice Storm: A Case Study

Rick Wallace

EMS & HazMat: What you Must Know

Nancy A. Wheeler

Communicating with the Deaf/Hard of Hearing

Shawn White, RN, LP

- Responding to Pediatric Emergencies with Confidence
- 2. Pulse Oximetry and CO, Monitoring

Jane G. Wigginton, MD

Gender Related Differences in Mechanisms and Outcomes of Cardiac Arrest

Ryan Wolford, LP

Illicit Drugs

Michael S. Wright, LP

- 1. Operation Stroke
- 2. Submersion Injuries

David R. Wuertz, RN, LP, CIC

Meningitis: The Pain in the Neck you Don't Want

Karen L. Yates, RN, CEN, LP

Expanding the Role of Paramedics in the ED

Nursing Track

Jan Elliott, RN, CEN, CFRN, CMTE

Langolier Personality Type of Healthcare

Nikkey Rush Freeman, RN, CEN, CFRN, LP

Forensics: Saving the Patient & the Evidence

Bridgette Hudson, RN & Damon B. Cottrell, RN, CEN, CCRN

Cardiac Emergencies: Tell it to my Heart

Gene McGowen, RN

Acute Care of the Pediatric Burn Patient

Educators Track

Alan Baker, EMT-P

Using Webct to Help Teach Paramedics

Jay D. Cloud, LP

Implementing Competencies in EMS Education

Lynne Dees

The Unteachables

Darrell J. DeMartino

Facilitating Self-Directed Learning

Steven L. Kolar, LP & Bill Drees, LP

A Guide to Successful EMS Education

Michael Sabala

- 1. Teaching Critical Thinking
- 2. Retrofitting Old School Paramedics

Management Track

Christian E. Callsen, Jr., LP

Extreme Customer Service

Mike DeLoach, LP

If you Paid me What I'm Worth, you Couldn't Afford Me: Volunteer Retention and Recruitment

Ralph Hendricks

Would I Work for me? A Management Workshop for New & Future Leaders in EMS

Allen Johnson

You're not Going to Believe This

Noah Reiter

Effective Communications & Customer Service

Rick Wallace

Establishing an Effective FTO Program

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 Bureau of Emergency Management 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.

Uvalde EMS participates in mock DWI demonstration

Uvalde EMS, along with several other state and local public safety and law enforcement agencies, participated in a Safe and Sober presentation at Southwest Texas Junior College in Uvalde. The students listened to a 16-year-old girl who described waking up in the hospital and finding out that, while driving drunk, she had killed someone, and to the girl's mother who described being told by the police that her daughter had been in a crash. The students were then told about a wreck near the campus and watched as the driver underwent a field sobriety test and the passenger of the car was cut free and declared dead. The purpose of the demonstration was to teach students about the dangers of driving while intoxicated.

Cypress Creek EMS awards scholarships to local students

Cypress Creek EMS, near Houston, awarded EMS scholarships to two local high school students. Matt McCarthy received the 2001 EMT-Basic scholarship and Brittany Trout received the 2001 EMT-Intermediate scholarship. Both are seniors at Klein Oak High School in Spring, plan to volunteer in EMS and are looking forward to careers in the medical field. Designed to encourage careers in emergency medical services and to inspire students to pursue higher education. the schol-

Firefighters work to free a person from a wrecked vehicle in a mock DWI event at Southwest Texas Junior College in Uvalde. Uvalde EMS participated in the program, sending ambulances to transport the injured from the scene.







Matt McCarthy and Brittany Trout received scholarships from Cypress Creek EMS for EMS training. CCEMS hopes that the scholarships encourage high school students to pursue higher education and to consider EMS as a career option.

arship recipients will be enrolled in EMS courses at the Charles R. Hooks Education and Development Center.

Texas trauma nurse staffs the 2000 Olympics

Jeanette Vaughan, RN, MSN, CCRN, TNCC, a critical care nurse from Blue Ridge, was the only U.S. nurse selected to be on the medical team for the 80,000 volunteers staffing the 2000 Olympic Games in Sydney, Australia. She staffed the Main Press Center, where more than 17,000 international media representatives were on hand. The medical team cared for patients with symptoms of flu, asthma, chest pains, dental problems and over-ingestion. While in Australia, Vaughan visited several trauma centers. The most serious case Vaughan worked on in connection with this experience was when a passenger on her return flight

passed out. Even though there was an orthopedic surgeon on board the flight, he deferred to her knowledge and experience in emergency care.

NWEMS hosts TCS bike rodeo, honors 'NASA kid'

Northwest EMS, in Tomball, hosted its third annual Tomball Bike Safety Rodeo in May. The bike rodeo featured free bicycle inspections and repairs, bike safety instruction and safety course, pedestrian safety instruction and refreshments. More than 1,000 free bicycle helmets were given away. Kardi Hicks, known as the NASA kid in the Tomball area, was the guest of honor for his dedication to wearing a bicycle helmet. Eight-year-old Hicks, who has a rare form of skin cancer and cannot be exposed to direct sunlight, uses a UV-protection suit that utilizes technology designed by NASA.

A/TC EMS STARFlight receives air medical accreditation

The Austin/Travis County EMS STARFlight air medical program recently received accreditation from the Commission on Accreditation of Medical Transport Systems (CAMTS). The CAMTS accreditation recognized STARFlight for its commitment to patient care and the safety of the transport environment. While there are several hospital-based CAMTS-accredited providers, STARFlight is the first public safety air medical rescue provider to achieve the accreditation.

Val Verde Safe Kids holds fund raiser

Val Verde Safe Kids, in conjunction with Jacinto Chevrolet, Body Shapers Fitness and Wellness, Coca-Cola, Del Rio High School Athletic Trainers, and Mr. Gatti's Pizza, recently held a 5K Fun Run/Walk to raise funds. A car seat inspection was also held in conjunction with the event.

Pearland Area EMS celebrates 25 years of service with fund raisers

Pearland Area EMS is celebrating 25 years of service to its community by hosting several community events this year. In June, PAEMS sponsored a golf tournament at Clear Creek Golf

Course and in October, PAEMS will host a barbecue cookoff. Funds from these fund raisers will be used for continuing education classes, educational supplies and educational conferences and conventions. For more information about PAEMS' events, check out their web site at www. pearlandems.org.

DeLeon Hospital EMS helps teach students about school bus safety

As part of the Think Child Safety program, DeLeon Hospital EMS participated in a school bus safety program at a DeLeon elementary school. Members of DeLeon High School's Family, Career and Community Leaders of America (FCCLA) gave a puppet show on bus safety and demonstrated safe seating and behaviors on the bus. DeLeon Hospital EMS displayed an ambulance and talked with the elementary students about safety matters.

Fort Worth firefighters recognized at awards banquet

In May, 23 awards were handed out at the annual Fort Worth firefighters' awards banquet. Approximately 700 firefighters and their families attended the awards banquet. Two-time Medal of Valor recipient Robert "Buster" Foster, EMT-P, was awarded the Firefighter of the Year award for saving the lives of five people, including his own son. The Rescue of the Year award was given to Engine 27B

representatives Mike Price, EMT; Don Metcalf, EMT; and J.W. Brunson, EMT, for their rescue, along with Bell Helicopter firefighter Mike Simmons, of eight people from the raging Trinity River after a tornadospawning storm hit Fort Worth in March 2000. The Speciality Operations Employee of the Year was awarded to Dive 3 for launching an inflatable boat into the Trinity River to search for survivors after the 2000 storm. Team members include Landon Stallings, EMT; Randy Malone, EMT; Roy Bingham, EMT; Kris Carr, EMT; David Collard, EMT; Randy Wilson, EMT; Troy Clark, EMT; Mark Smith, EMT; Robert Foster, EMT-P; Gerald Lawson, EMT; Armond Johnson, EMT; and Steve Larison, EMT. The Company of the Year was

As part of the Think Child Safety program, DeLeon elementary students join high school students on a school bus to practice safe habits while riding a bus. DeLeon Hospital EMS members held ambulance tours and spoke with the students about staying safe.



awarded to Engine 22C members Jeff Novak, LP; David Childs, EMT; Todd Brook, EMT; and Matt Otey, EMT, for saving a man and several animals in two structure fires. The banquet also honored volunteers, civilians, support staff and retirees.

LifeNet receives CAAS accreditation

LifeNet, Inc., in Texarkana, recently announced that the service has received accreditation from the Commission on Accreditation of Ambulance Services (CAAS). The process includes a comprehensive self-assessment and an independent outside review of the EMS organization. Currently only four EMS organizations in Texas are accredited by CAAS.

Cleburne Explorer Post teaches safety to community children

In April, the EMS Explorer Post in Cleburne participated in a local Cub Scout convention and in the annual SpringFest. The members of the EMS Explorer Post, all between the ages of 14-21, talked to the children about personal safety and basic first aid. They moulaged the children and gave out coloring books, stickers and information about the EMS Explorer Post. In May, the EMS Explorer Post sponsored a blood drive and presented scenarios about EMS and safety for the public. The EMS Explorer Post's purpose is



Taft VEMS recently took delivery of a new ambulance. From left, Michael Mueller, Wheeled Coach, hands the keys for the new unit to David Griffin, LP, director; Kara Griffin, EMT, and Alan Miller, EMS board of directors member.

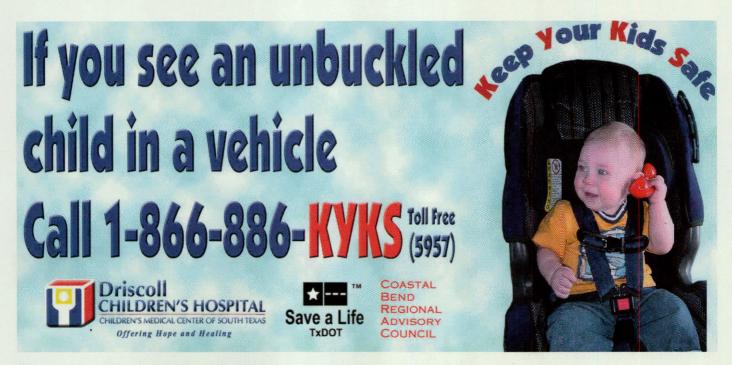
to introduce and educate its members and the community about EMS and emergency medicine.

Taft VEMS takes delivery of new ambulance

Taft Volunteer EMS recently received a new ambulance. TVEMS was able to purchase the unit with funding from TDH Local Projects Grant program, the Meadows Foundation in Dallas, the Coastal Bend Community Foundation and the local American Association of Retired Persons chapter.

Coastal Bend RAC participates in area child restraint campaign

The Coastal Bend RAC, along with Driscoll Children's Hospital in Corpus Christi and the Texas Department of Transportation, recently began a program geared toward getting more children properly restrained with riding in vehicles. The Keep Your Kids Safe (KYKS) program has a 1-800 hotline that allows citizens to report the license plate number of vehicles they see carrying unrestrained children. The program



Billboards advertising the Keep Your Kids Safe program can be found throughout the Coastal Bena RAC's 12-county area. The program emphasizes the importance of properly restraining children riding in vehicles.

will send a reminder to the vehicle owner about the Texas child restraint laws and recommended safety practices for children in the vehicle. The owner is also invited to attend a free seminar on proper use of a car seat and may receive a free or low-cost car seat. Coastal Bend RAC purchased 12 bill-boards across 12 counties and Valero Refining purchased 17 bill-boards throughout Corpus Christi to advertise the KYKS program.

Texas EMT honored at national conference

In April, Pam Manley, an EMT in Fort Worth, was honored at the National Disaster Medical System Annual Conference in Dallas. Manley was awarded the Volunteer of the Year award by her peers at Texas-4 Lone Star Disaster Medical Assistance Team.

The Texas-4 Lone Star DMAT is based in Dallas/Fort Worth and is an all-volunteer team of medical and non-medical personnel who

serve local, state and federal agencies during natural disasters, weapons of mass destruction events and staged events.



A Fort Worth EMT was honored at the National Disaster Medical System Annual Conference in Dallas in April. Pam Manley, EMT, center. is flanked by members of her team at the awards ceremony. From left, Ed Shelton, EMT-I; Carol Safi, EMT; Ozro Henderson, RN, EMT-P, TX-4 commanding officer (behind Pam); Suzanne Stiles, EMT-P; and Norm Tindell, EMT-I.

Texas Department of Health EMS Offices

Bureau of **Emergency Management** http://www.tdh.state.tx.us/hcqs/ ems/regions.htm 1100 West 49th Street Austin, Texas 78756-3199 (512) 834-6700

Public Health Region 1 http://www.r01.tdh.state.tx.us/ ems/emshome.htm

Terry Bayousett P.O. Box 60968, WTAMU Station Canyon, Texas 79016 (806) 655-7151

> Denny Martin 1109 Kemper Lubbock, Texas 79403 (806) 744-3577

Public Health Regions 2 & 3 http://www.tdh.state.tx.us/hcgs/ ems/r2&3home.htm

Kevin Veal 1301 South Bowen Road, Suite 200 Arlington, TX 76013 (817) 264-4500

Jerry Bradshaw 4309 Jacksboro Hwy, Suite 101 Wichita Falls, Texas 76302 (940) 767-8593

Andrew Cargile 1290 S. Willis, Suite 100 Abilene, Texas 79605 (915) 690-4410

Public Health Regions 4 & 5 http://www.tdh.state.tx.us/hcgs/ ems/r4&5home.htm

> Brett Hart 1517 W. Front Street Tyler, Texas 75702-7854 (903) 533-5370

Public Health Region 6 http://www.r06.tdh.state.tx.us/ ems/r6home.htm

C. Wayne Morris 5425 Polk Street, Suite J Houston, Texas 77023 (713) 767-3333

Public Health Region 7 http://www.r07.tdh.state.tx.us/ ems/ems.htm

Rod Dennison 2408 S. 37th St. Temple, Texas 76504-7168 (254) 778-6744

Public Health Region 8 http://www.r08.tdh.state.tx.us/r8home.html

> Lee Sweeten 1021 Garner Field Road Uvalde, Texas 78801 (830) 278-7173

Steve Hanneman Fernando Posada 7430 Louis Pasteur San Antonio, Texas 78229 (210) 949-2050

Public Health Regions 9 & 10 http://www.tdh.state.tx.us/hcqs/ ems/r910home.htm

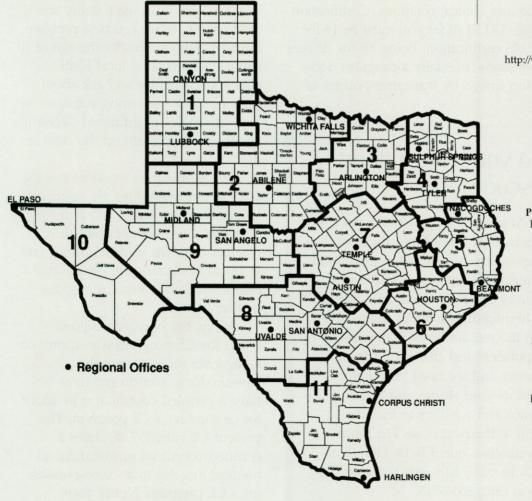
Tom Cantwell Anthony Viscon 401 E. Franklin, Suite 210 El Paso, Texas 79901 (915) 834-7708

Leland Hart 2301 N. Big Spring, Ste. 300 Midland, Texas 79705 (915) 683-9492

Public Health Region 11 http://www.tdh.state.tx.us/hcqs/ ems/r11home.htm

Noemi Sanchez 601 W. Sesame Dr. Harlingen, Texas 78550 (956) 423-0130

Rothy Moseley 1233 Agnes Corpus Christi, Texas 78401 (361) 888-7762 x281



FA Education

Contact Eddie Walker at 512/834-6700 ext. 2313 or email him at Eddie.Walker@TDH. state.tx.us Q: I am completing my EMT-Basic class but am unable to do any clinical rotations because I'm 17. Where in the rules does it say I have to be 18 to do clinical rotations?

A: There is no EMS rule that states you must be 18 before you can do any clinical rotations. Certification rule 157.33 states you must be 18 for EMS certification. Being 18 for clinical rotations is usually a program decision driven by insurance policies of

Do you have a flood rescue story?

At press time, just as the flood waters began receding, stories of rescues from the Houston area flood waters were emerging. In the next issue of *Texas EMS Magazine*, we'll be highlighting some of the calls and the rescues by both emergency responders and citizens during this disaster and we need your help. Send us your stories and your photos and we'll try to include them in the next issue. For more information, email Kelly Harrell at kelly.harrell@tdh.state.tx.us, or call her at (512) 834-6743.

the program and requirements of the EMS providers and/or the hospitals. Many insurance companies used by EMS programs will not cover anyone under 18, and hospitals may feel there is too much liability to allow minors to complete rotations. Unfortunately, this is an issue many students don't realize can be a problem. Students who are under the age of 18 should contact their local EMS education provider and ask about their policies concerning rotations so they can make an informed decision about whether to attend the class or not.

Q: The education coordinator of the EMS service where I am the manager has informed me that he will be leaving soon, and I'm concerned about the CE program here. The medical director said he would conduct the CE classes. Will I need to apply for a new CE program number?

A: No, the number assigned when the CE program was approved is the EMS service's, not the coordinator's. You do not have to have a certified coordinator to apply for or conduct a CE program. The present CE rule, 157.38, states a certified coordinator, instructor or medical director may be responsible for a CE program. Notify your regional office in writing about the change in your CE program.

By LindaReyes

FA CEMS Standards

Q: I read about the exam mis-key error on your website. How do I know if the mis-key problem affected my certification?

A: Within one month of the mis-key discovery, all of the affected personnel were notified by mail. However, some of the notices were returned by the postal service as "undeliverable." Check your certification status on our web site at: www.tdh.state.tx.us/hcqs/ems. Click on Certification Query to see that your status has not changed. Contact your local regional office if you have questions about your certification or would like to update your address.

Q: I made a passing grade on my certification exam during the exam mis-key period, but I am curious to know if I actually made a higher score. Will you regrade my exam?

A: No, unless you provide us with documentation to show you are adversely affected by your score. If you feel you may have scored higher than your reported grade, send us a written request for regrade and documentation from your EMS administrator or medical director indicating you are having to endure negative consequences, imposed by your employer, due to your reported grade, i.e. remedial training, termination. Keep in mind your regrade may produce a lower score than the initial reported score.

Q: I submitted an application for EMT-I certification about two months ago. I have decided not to test for EMT-I certification after all. How do I request a refund of the application fee?

A: EMS application fees are not refundable or transferable. The application fee is considered an application processing fee, not an exam fee.

Q: If I apply for paramedic licensure and find out I do not qualify for licensure, can I use the \$100 fee payment towards paramedic recertification?

A: No. EMS application fees are not refundable or transferable. If we determine you are not eligible for paramedic licensure, we have evaluated your application and documentation, essentially processing your licensure application even though we did not issue your license. To be considered for paramedic certification you will have to submit a completed EMS Personnel Certification Application with the \$75 fee (unless you are exempt from the fee). If you have questions about the college-hour requirements for paramedic licensure, contact your local public health region or the central office.

Q: What is the status of the new recertification rule?

A: Recertification 25 TAC §157.34 is a proposed rule waiting for adoption by the Board of Health. When the rule is adopted it will give you options from which to choose your next recertification procedure. Check out the proposed certification, recertification and CE rules on our web site at: www.tdh.state.tx.us/hcqs/ems/rulpend.htm.

If your expiration date was prior to September 1, 2000:

Contact your local public health region office for instructions. Regional office web sites, addresses and phone numbers are available on page 27 or at: http://www.tdh.state .tx.us/hcqs/ems/regions.htm.

Bureau Websites

Bureau web home page address: http://www.tdh.state.tx .us/hcqs/ems EMS Standards home page: http://www. tdh.state.tx.us/hcqs/ ems/tabcont.htm Internet certification verification now on web site Certification verification phone line: 512-834-6769 Fax number: 512-834-6736

Email: emscert@tdh. state.tx.us



PHOTO FOR ILLUSTRATION ONLY: PHCTO BY JOHN G. DAVENPORT

By Steve Janda, RN, PA

Trauma diversion

The when and why for designated trauma facilities

Steve Janda, RN, PA, is assistant bureau chief for trauma in the Bureau of Emergency Management. He is a former ED nurse and flight nurse for STARFlight.

unit and that the does the frequent around In recer ed the injor metrics.

o you've got a trauma patient about to crash in the back of your unit and the local hospital is telling you that they can't take the patient. Why does this seem to be happening more frequently? Diversion is a hot topic around EMS and hospitals these days. In recent months, stories have dominated the news about hospitals in the major metropolitan areas who closed their

doors to new emergency arrivals for hours at a time due to a shortage of resources. Unfortunately, there are no clear answers as to why general diversion happens and what communities can do about it. These issues will be explored by the Bureau of Emergency Management in coming months. The ideas will be gathered and presented to GETAC for discussion and, we hope, some ideas for solutions.

Fortunately, there are some clear guidelines established about diversion as it relates specifically to trauma. The answers to the trauma diversion questions below may give you an idea about diversion, and will undoubtedly be used as the issue of general diversion is explored in upcoming months. Note that the answers below relate only to trauma and trauma facilities.

Q: How does the Texas Department of Health actually define 'diversion'?

A: It's a procedure put into effect by a trauma facility to insure appropriate patient care when that facility is unable to provide the level of care demanded by a trauma patient's injuries or when the facility has temporarily exhausted its resources.

Q: When and why is a trauma diversion acceptable for a designated trauma facility?

A: The standards regarding trauma diversion are the same for all levels of Texas trauma facilities. Trauma facilities must be available to care for all major and severe trauma patients 24 hours per day/seven days per week. Diversion of such patients to other facilities should be made rarely and only when resources are not available in the ED to stabilize and transfer these patients. Additionally, a standard audit filter for both Level III and Level IV facilities is: "Diverted major and severe trauma patients more than eight hours in any month." Both the trauma facility standard and standard audit filter referenced here went into effect as trauma rules on September 1, 2000; both are available on the Bureau's website at www.tdh.state.tx.us/ hcqs/ems/.

Q: How does a hospital decide when it can't provide the level of care needed by a trauma patient?

A: Diversion of such patients should

be made rarely and only when resources are not available in the emergency department (ED) to stabilize and transfer these patients.

Q: WHAT ROLE DOES A REGIONAL AD-VISORY COUNCIL (RAC) PLAY WHEN IT COMES TO DIVERSION?

A: RACs have to develop an EMS/ trauma system plan, which is subject to approval by the Bureau. One of the plan's components is a diversion policy.

Q: How come the RACs get a say in this?

A: RACs provide an excellent forum where all entities affected by hospital diversion can come together to work through local issues prospectively (not when the patient is in the back of a moving unit). By definition, RACs are representative of all levels of emergency health care professionals in each community. RACs provide a mechanism for discussing, planning, mediating and ultimately evaluating and improving the policy through its performance improvement (PI) program.

Q: CAN A HOSPITAL REQUEST DIVERSION STATUS FOR SPECIFIC TYPES OF PATIENTS (LIKE ADULT MEDICAL ILLNESSES) BUT STAY OPEN TO RECEIVE OTHER TYPES OF PATIENTS (LIKE TRAUMA OR PEDIATRIC)?

A: Yes.

Q: What responsibilities does a hospital have when it requests diversion status?

A: Communication is the key—the following entities should be notified:

- EMS (including air medical services) that transport patients to/from the facility
- Other hospitals that are likely to be impacted
- 3. Fire departments
- 4. Police and/or sheriff's departments
- The local RAC

Fortunately, there are some clear guidelines established about diversion as it relates specifically to trauma.

A request by a hospital for EMS to take patients to another facility is just that—a request. If there is no appropriate alternative, then EMS can and should take the patient to the initial facility.

Q: Does EMS have to divert if a HOSPITAL TELLS IT TO DO SO?

A: A request by a hospital for EMS to take patients to another facility is just that—a request. Of course, if there are other appropriate alternate destinations for a patient, then it may be in the patient's best interest to be diverted to another hospital because the resources at the initial destination may truly be overwhelmed, which could delay care for that patient. However, if there is no appropriate alternative, then EMS can and should take the patient to the initial facility.

Q: WHAT ABOUT PATIENT REQUESTS TO BE TAKEN TO A HOSPITAL THAT HAS REQUESTED DIVERSION STATUS?

A: All other things being equal, a reasonable patient request (not one that has an EMS provider going to another county, for example) should be honored and can override a hospital that has requested diversion status.

Q: How do we know when to over-RIDE A DIVERSION REQUEST?

A: Divert override is appropriate when:

1. The EMS provider has determined that the safety of the patient would be jeopardized by going to a more distant facility.

2. The patient specifically requests to be taken to a hospital that has requested diversion status...but not untl after the EMS provider has advised the patient of the hospital's diversion status and the likely delays that will be encountered in receiving care in a timely fashion.

3. The patient is in a class of conditions designated by written EMS protocol as being "No Divert" cases—for example, severe/major trauma patients.

Q: WHAT IS EMTALA, AND WHAT DOES IT HAVE TO DO WITH DIVERSION?

A: The Emergency Medical Treatment and Labor Act (EMTALA) governs virtually all aspects of a hospital's delivery of emergency services. Among other things, it requires hospitals to conduct a screening exam on a patient that has requested treatment to determine if the patient has an emergency medical condition. If an EMS provider drives onto the hospital's property, the patient is considered to have requested treatment. If the patient does have an emergency condition, the hospital is required to treat and/or stabilize the patient within its capabilities and transfer the patient as needed to an appropriate tertiary care facility.

Q: So, basically, the hospitals have TO DO WHAT WE TELL THEM AND TAKE ALL THE PATIENTS WE TRANSPORT?

A: It's not that simple. When a facility has requested diversion status, EMS providers are tasked with exercising prudent judgment. Because what is in the best interest of patients is paramount, it follows that the relationships between EMS providers and their receiving hospitals is very important. EMS providers should consider diversion requests if possible and if appropriate. It is also a good idea for the EMS provider to "educate" the hospital(s) on the effect a diversion request might have on the provider (e.g., causing it to be out of service for more than an hour).

PHOTO FOR ILLUSTRATION ONLY: PHOTO BY NEIL I. GALINDEZ



GETAC sends rules package to Board of Health in May

The Governor's EMS and Trauma Advisory Council (GETAC) met on May 11th in Austin. This meeting came at the end of almost three days of related meetings including the Rural EMS Task Force, Medical Directors committee, Injury Prevention committee, Blood Alcohol Content Insurance Task Force, combined education/EMS/medical directors committees, Trauma Systems committee and Pediatric committee. Additionally, related organizational meetings, including the Texas Association of Regional Advisory Councils, EMS Association of Texas and the Texas Trauma Coordinators Forum were also held, as well as a forum on suicide prevention (see page 48).

After GETAC approved minutes from their February 16th meeting (see Bureau website at www.tdh.state.tx.us/hcgs/ems/ emshome.htm under "Governor's EMS and Trauma Advisory Council"), members heard reports from the chair, staff, standing committee chairs, and task force leaders. Issues addressed by the chair, Dr. Ed Racht, included a request for Council members to consider how GETAC should respond to requests for input (e.g. legislative, media) with short turnaround times; whether or not standing committee chair/member appointments should be rotated; whether the state should implement "Trauma Facility" highway signs; and potential meeting dates for calendar year 2002. All of these issues should be discussed at the next meeting. Finally, Dr. Racht reiterated his strong conviction on the importance of continuing to utilize a consensus process to address difficult problems and thanked the large audience for their continued interest and participation.

Issues addressed by staff included: the on-going search for a new commissioner of health; the recent audit of TDH and the resulting management review; TDH organizational changes, including the establishment of a single Associateship for all TDH regulatory programs (including EMS); pertinent legislative issues (see Bureau website under "New Items"); the EMS test mis-key problem and final results (see Bureau website); Trauma Registry activities; and an update on the TRAC-IT project. Staff also requested that GETAC review and consider revising the Bureau's 1996 position paper regarding

EMS personnel working in a hospital setting (copies available on request; call 512/834-6700).

The Council acknowledged EMS Week, Trauma Awareness Month and Nurses Week. Michael Wolf from the American Heart Association presented an educational session on "Operation Heartbeat" and "Operation Stroke."

Public comment was heard by GETAC on the standing committee reports, equivalency evaluations of other health care professionals for EMS certification/licensure, and

other general issues. Dr. Racht again asked for feedback from the audience on the Council's work; again it was positive.

The next GETAC meeting is scheduled for August 24th in Austin (standing committees/task forces will begin meeting on August 22nd). Watch our website and e-lists for details.—*Kathy Perkins*

GETAC took the following actions:

- 1) Unanimously voted to recommend that the Texas Board of Health propose, for public comment, new rule 157.34 (re-certification) and revised rules 157.33 (certification) and 157.38 (continuing education) with only the changes required to implement 157.34 (may be viewed on our website at www.tdh.state.tx.us/hcqs/ems/emshome.htm by clicking on Rules);
- Established a Diversion Task
 Force and appointed Eric Epley, Southwest Texas RAC Coordinator, as leader and Ronald Stewart, MD, as GETAC liaison; and
- 3) Requested the Bureau to research the health care professional equivalency issue in depth prior to the next meeting.

State pension plan

Some emergency services personnel may be eligible



PHOTO FOR ILLUSTRATION ONLY: PHOTO BY GREG MAFP

id you know that volunteer emergency responders could be eligible for a pension plan administered by the Fire Fighters' Pension Commission? The Texas Statewide Emergency Services Retirement Act (TSESRA-S.B. 411), effective since September 1977, allows some emergency personnel, through their governing entities, to contribute to a statewide pension. The plan covers departments with responders who work no more than 1000 hours in a calendar year and do r.ot earn from that work more than S2 over minimum wage, or are volunteers. This law replaced another law, HB 258, that covered only firefighters. A 1997 change in the law allowed all emergency responders to contribute, including EMS. If you are interested in having a cost study run for your department at no

charge, send a list of active members, their complete dates of birth, dates they entered the department or old pension system, and their occupation to: Elaine Rummel, Fire Fighters' Pension Commission, P.O. Box 12577, Austin, Texas 78711. For a copy of the Commission's information book, call her at (512) 936-3471 or email her at: elaine.rummel@ffpc.state.tx.us.

Some of the important points:

- At age 55 with 15 years qualified service, a member is eligible for a retirement of six times average monthly contribution. For example, if the monthly contribution is \$12, the member is eligible for a retirement of \$72 a month.
- A member will be vested and have some retirement coming at age

55 with as little as five qualifying years in the new pension plan.

- For each qualifying year a member stays in the plan after the 15 years required for full retirement, retirement increases seven percent compounded annually. There is no maximum amount.
- A department entering the new pension plan after being a member of the old pension plan (H.B. 258) must purchase prior service. It has the option of purchasing buy-back and accrued time, buy-back only, or accrued time only. A department not covered by the old pension system has the same options. It may also come in as a new department, with no prior service for its members. These options are discussed in the information book.
- On-duty disability. If a member is injured while on-duty, the member receives at least \$300 a month as long as the member is unable to perform his/ her duties for the participating department and the duties of any other occupation for which the person is reasonably suited by education, training, and experience. Both criteria must be met. The amount of the monthly disability increases \$50 for every \$12 increase in dues paid for the member by the department.
- On-duty death. The beneficiaries receive a lump-sum payment of at least \$60,000. This is in addition to state and federal benefits for an on-duty death, if eligible.
- In addition to the lump-sum benefit for on-duty death, the spouse and minor children share equally in a monthly pension of two-thirds of the member's retirement. (The member is automatically vested with 15 years of service if killed on-duty, if the member has less than 15 years of service.) As long as both spouse and one or more

dependents survive, an additional one-third of the monthly retirement annually shall be paid to the minor children in equal shares.

- Off-duty death. The beneficiaries receive a lump-sum payment of at least \$2,160. The amount is based on years of service and amount of dues paid but cannot be less than \$2,160.
- If the active member is vested and of retirement age at the time of off-duty death, the surviving spouse is entitled to receive twothirds of the monthly pension the deceased would have received if the deceased had retired.
- When a terminated vested member dies before retirement, the spouse is eligible to receive two thirds of the member's pension effective the date of the member's 55th birthday.
- The governing body must pay dues of at least \$12 per month per member, but it may enter at a higher rate.
- The governing body may decide at any time after entering the pension plan to increase the dues paid to any amount over \$12 a month. If this happens in your department, your retirement is figured at six times the average amount of the dues paid while you were a member.
- If you are a merging city whose retirees are covered by the old pension plan, the pension commission takes over the payment of their pensions. The city is billed for the cost of the retirements but not the administrative costs. Retirees must be paid at least \$25 a month and spouses \$16.67 a month. You may increase this amount at any time.
- The agency prepares 1099'Rs for your retirees and submits the information to the IRS. The agency also reports to the Pension Review Board for you.

Are you eligible?

Is your department eligible to participate in the state pension plan? Departments who have responders who work no more than 1000 hours a year and do not earn more than \$2 over minimum wage for that work, or are volunteers, may be eligible. For information on the pension plan, contact Elaine Rummel at the Fire Fighters' Pension Commission at (512)936-3471 or email her at elaine.rummel@ffpc .state.tx.us. The commission also has an information book available at no charge.





By Carol Lawrence, RN, BSN

PHOTO FOR ILLUSTRATION ONLY: PHOTO BY JEANETTE THOMPSON

Understanding hepatitis and occupational exposures

The call, a two-car wreck on a dimly-lit country road with an unknown number of victims, came in about midnight. In the first car, all of the victims are dead on scene except for an 8-year-old girl. In the other car, only a male seated in the back is alive. Blood covers both surviving victims. The female EMT helping with the extrication of the child punctures her hand with a piece of bloody metal. The paramedic trying to control an arterial bleed in the other victim has blood splashed into his face, and is not

Learning Objectives

After completing this article the reader will be able to:

- 1. Identify two points about hepatitis B, C, D.
- 2. State four criteria for bloodborne exposures.
- 3. State exposure follow-up measures.



wearing a mask or safety glasses. The victims are stabilized and transported to the nearest hospitals. Now the EMT and paramedic are scheduled to become patients. The source patient lab work indicates that the child victim is a chronic hepatitis B carrier, and the adult victim tested positive for hepatitis C and HIV. What happens next?

Understanding hepatitis

Hepatitis simply means inflammation of the liver. There are numerous causes of liver inflammation including: drugs; diseases such as chickenpox, measles, or herpes; and finally, viral hepatitis. Understanding the transmission or risk of viral hepatitis requires some knowledge of terminology. The key terms are incubation period, prophylaxis, onset, chemoprophylaxis, hepatitis profile, and the prognosis or outcome.

The incubation period is the time frame that a specific disease takes to make an individual ill after an exposure. Prophylaxis is medication that can be given after an exposure in an effort to prevent the disease. Chemoprophylaxis is a group of drugs that should be offered after blood exposures if specific exposure criteria are met, as these drugs might prevent transmission of HIV. Chemoprophy-

laxis is recommended by the Centers for Disease Control (CDC). Hepatitis profiles are specific tests that determine whether an individual has or has had hepatitis A, B or C. This test is usually done during the follow-up process after blood exposures, or if an individual is ill with signs of hepatitis. The prognosis or outcome is what the end result is likely to be after contracting a disease. Chronic status in hepatitis B or C means the individual stays contagious and can transmit the disease to others.

There are several kinds of viral hepatitis. The types include A, B, C, D, E, GBV-C/HGV and TTV. Hepatitis A and E are foodborne diseases and will only be discussed briefly. Hepatitis A cases are on the rise, and are a large public health concern in Texas. An available vaccine consists of an initial dose and a second dose six months later. Hepatitis E cases are usually imported from other countries to the U.S. The significant thing to remember about hepatitis E is that it has a high mortality rate in pregnant women.

Hepatitis GBV-C/HGV is usually referred to as HGV. It is apparently transmitted by transfusions, various blood products, IV drug use and sexual activity. It is often found in individuals who have hepatitis C. TTV is often found in individuals who have other types of hepatitis. There is little known about these types of hepatitis and the risk of transmitting illness has not been determined.

Hepatitis B

Hepatitis B has an incubation period of 45 days to six months. The general symptoms are the same as those of hepatitis C: fever, chills, malaise,



weakness, headaches, dark urine, joint pain, jaundice, nausea, dull upper right quadrant pain and intense itching. Occasionally a fine red rash may be present. Some individuals may have no symptoms at all and be unaware that they have a contagious disease. This disease may resolve itself over several months, but has the potential to become a chronic condition, which means the individual will remain contagious. The key points for hepatitis B are:

- The virus is present in large amounts in blood and majority of body fluids.
- Individuals can transmit the disease to others before lab tests identify the presence of the virus.
 (Window period could be several weeks.)
- 3. The disease resolves itself in the majority of cases.
- 4. The disease can cause cirrhosis and liver cancer in later years.
- 5. Vaccine and prophylaxis are available.
- Virus can live in dried blood and body fluids for seven days or longer and still cause illness.
- Diagnosis is made with a hepatitis profile and liver enzymes. With the disease, liver enzymes are elevated because the liver is infected with the virus or damaged in some way.
- 8. The disease has a slow onset.

The hepatitis B vaccine protects individuals from both hepatitis B and D, and is available as Recombivax and Engerix B. The vaccine is given as an initial dose, a second dose a month later, and the last dose five months after the second dose. A blood test called a hepatitis B Surface Antibody Titer may

be done one to six months after completion of the series. Individuals who fail to develop a protective level after a series is completed may be given a second series plus one booster if needed. Individuals who then fail to develop protective antibodies are called "non-responders."

A second option that may be considered is a hepatitis profile. Individuals who already have the disease may not have a detectible titer, depending on the stage of the disease. This action would need to be determined by your medical director. The employee should receive considerable counseling if he/she is a "non-responder" or if he/she has the disease. The CDC does not recommend doing hepatitis B titers yearly, since the titers will drop naturally over time, but rise if an exposure to acute hepatitis B occurs. Employees should be aware of their hepatitis B vaccine status before any patient care begins.

Hepatitis C

Hepatitis C used to be called non-A-non-B hepatitis. Hepatitis C is one of the most serious challenges that EMS personnel and other health care workers face today. There are six major strains of the virus and nearly 90 sub-strains. This makes the development of a preventive vaccine or prophylaxis medication nearly impossible at this time. The main problem is the viruses' ability to mutate, creating new strains.

Individuals who develop this disease may not have any symptoms in the acute phase that would identify illness. It becomes chronic in about 85 percent of the cases, and appearance of symptoms can take as long as ten to twenty years. The symptoms may



Exposure Type	PEP (Chemoprophylaxis)	
Blood splashes to eyes, nose, mouth, non-intact skin - few drops / short duration	May not be warranted	
Several drops of blood, major blood splash present for several minutes	Recommended	
Intact skin	May be considered if a large amount of blood is present, or large area of the body is covered for several minutes.	
Per cutaneous exposure with a solid needle, su- perficial scratch	May be considered	
Needlestick with large bore hollow needle, deep puncture, visible blood on devise, in patient's vein or artery.	Recommended	
Human bite (skin broken)	Recommended	
Mouth to mouth	Recommended	

only become apparent when the liver is actually damaged, and by that time, the damage may be irreversible. Currently, hepatitis C is the leading reason for liver transplants.

An antibody test was developed in 1990. The test, commonly referred to as HCV, does not determine whether the infection is recent or chronic. If the test is positive, then a confirmatory test called a RIBA should be done. A test called a PCR can also look for the presence of the virus, but may not be used routinely because of the cost. Liver enzymes are also a key part of the diagnosis process. The ALT (alanine aminotransferese) is the main liver enzyme that may be elevated, but all may be affected. Elevated liver enzymes usually indicate that some injury has occurred to the liver. A problem in accurate diagnosis is that the liver enzymes will go up and

down numerous times. Consequently, a lack of enzyme elevation does not mean that there is no damage to the liver. Several liver enzyme tests must be done at intervals over the exposure follow-up period.

The major risk populations for hepatitis C infections are IV drug users and those who snort cccaine, individuals infected with HIV, immigrants from Egypt (there is a 20 percent rate of infection in their general population according to recent CDC information), anyone having a blood transfusion prior to 1990, and patients receiving blood products. High rates may also be seen in immigrants from countries with poor infection control measures in the hospitals and re-use of medical instruments without proper decontamination, such as Russia, Africa, Romania, the Middle East and others.



The usual incubation period for hepatitis C is two weeks to six months. A few documented cases with longer incubation periods have occurred where an individual had blood exposure from a source patient infected with both HIV and hepatitis C. In one case, the incubation period was 12 months for HIV and 13 months for hepatitis C. Several other cases have had incubation periods of six months or more, which is usual. It is unknown whether it is the HIV or hepatitis infection that extends the incubation period.

Hepatitis C is treated with Interferon and Ribavirin. These drugs have numerous side effects and individuals have indicated that it felt like having a "bad case of flu" during the treatment, which can last up to a year or longer. Type One is the most common strain, and the most difficult to treat. The drugs do not cure hepatitis C, but cause it to go into remission.

Health authorities believe that hepatitis C is greatly under-reported. The CDC is only able to give an approximate number of the cases in the U.S. However, since 85 percent of the cases become chronic, the CDC believes that there are a large number of people who are contagious and capable of transmitting the disease. However, the CDC claims that fire or EMS personnel are not at any greater risk of contracting the disease than the general population. This may not be correct if your department does not have a good infection control program to prevent exposures or an exposure plan to provide care for individuals who experience blood exposures in the course of their duties. The key points for hepatitis C are:

There is no immunization to prevent the disease, nor prophylaxis if

- you have an occupational exposure.
- Hepatitis C becomes chronic in about 85 percent of cases.
- 3. Disease may resolve spontaneously in 15 percent of cases.
- Disease can be treated and may go into remission but there is no cure.
- Main means of transmission are needlesticks with a large bore needle (hollow).
- 6. Disease can also be transmitted to sex partners.
- 7. Co-infection with HIV may extend the incubation periods.
- 8. Symptoms may not occur for 10-15
- 9. Slow onset; most people are unaware they are infected.
- 10. Major risk for EMS personnel if exposure prevention is not practiced.

Hepatitis D (Delta)

Hepatitis D is a unique virus because it piggybacks to the hepatitis B virus. You can only contract hepatitis D if you have hepatitis B at the time or have had it in the past at some point. This hepatitis has a sudden onset, and the individual may be critically ill. Death can occur as a result of severe damage to the liver. The incubation period is believed to be very short, about two weeks. The key points about hepatitis Delta are:

- 1. The virus piggybacks to the hepatitis B virus.
- 2. Hepatitis B vaccine will prevent both hepatitis B and D.
- 3. Sudden onset.
- 4. Causes very severe illness or death.

Exposure Criteria

All blood exposures should be evaluated for the use of chemoprophylaxis (PEP). It is very unlikely that EMS per-



Bloodborne Disease Precautions

Problem	Prevention
Blood splashed to	Wear fluid resistant
eyes, nose, mouth	mask with eye wear or
	face shield.
Blood splashed to	Wear fluid resistant
open wound,	gown and gloves
abrasions, non-	**cover and double
intact skin	glove if abrasions are are on hands.**
Needlestick	Dispose of all sharps
or penetrating	promptly and carefully
puncture of the	in the bio-hazard
skin with any	container.
contaminated	
item	

Activity	Protective wear
Controlling spurting blood	Gown, gloves, mask with eye shield, or fluid resistant mask and eye wear or goggles.
Assisting with childbirth	Same precautions as above.
Controlling minimal bleeding	Gloves
Starting IVs	Gloves
Giving injections	Gloves
Gun shot wounds	Gown, gloves, fluid resistant mask, eye wear
Contaminated items	Gown, gloves or mask may be needed.

Airborne Disease Precautions

Activity	Prevention
Examination of the throat	N95 mask
Oral or tracheal intubation	N95 mask and eye wear
Suctioning, mouth to mouth	N95 mask and BVM
Condition of patient	Prevention
Rash illness Patient coughing	N95 mask

Location	Prevention
Employee and	N95 mask
patient are in the	
same rcom, vehicle	
ambulance or	

frequently

eyes.

Patient has high fever Stiff neck, light hurts

other enclosed space

***Do not place the N95 mask on the patient. Instead use a surgical mask.

If transporting a patient with a suspected case of tuberculosis, EMS personnel should wear an N95 mask. If feasible, the windows of the vehicle should be kept open and the heating and air conditioning system should be set on non-circulating.



sonnel who have bloodborne exposures will know the source patient's HIV status for several hours or hepatitis status for three or four days. EMS personnel do not have the same rights at this time as hospital employees who have exposures. Hospital employees with exposures may test source patients without their consent. Hospitals, by state law, do not have to test source patients because of a public safety personnel exposure. However, the majority of hospitals are responsive to the situation out of concern for the responder's well-being.

Exposure follow-up measures

All exposures should be reported promptly to your supervisor. If you meet the criteria for chemoprophylaxis, it should be started within the first hour after exposure if possible. State Workers Compensation Law requires that you receive baseline testing within ten days of exposure to show that you were negative for any disease at the time of exposure. Your employer is required to pay for all testing and treatment costs that occur as a result of the exposure. Testing should be offered at baseline, six weeks, three months and six months at a minimum. Some physicians and fire departments will test for up to a year. This may be beneficial since few EMS departments do any kind of disease testing of new hires.

Documentation is critical. All medical records should be locked up with limited access. If you send all employees out to physicians, who may change on a yearly basis, it is important to maintain a logbook with the exposure information. This too would be confidential.

Prevention

Prevention consists of several parts: protective gear worn in the appropriate circumstances, training, education on contagious diseases with a yearly refresher, immunizations, infection control program and exposure follow-up program. Employees must take responsibility for themselves as well by wearing the personal protection equipment (PPE) and by following their department's procedures and protocols.

Bloodborne pathogen law

The Texas Legislature passed a law in 1999, the OSHA Bloodborne Pathogen Standard for Governmental Entities. The key points of the law are recommendations for the use of engineered safety devices, use of the exposure control plan, development of a committee to evaluate the safety devices, and the reporting of all injuries to the state when safety devices were involved. There are no enforcement visits to your department. However, failure to follow the law and specific items in the exposure plan will create significant liability for your department. The exposure plan is divided into specific sections. You may modify the plan by addressing how your department meets each section. This is your plan and should be updated yearly to reflect changes in your department's procedures or protocols. Documentation is a critical part of the plan.

Conclusion

In the opening scenario, the fact that the child is a chronic hepatitis carrier reinforces the importance of universal precautions: Treat all patients as if they have contagious diseases. You should never make assumptions about

For a look at the Texas Administrative Code for bloodborne pathogens on the web, go to 204.65.105.13/ tac/ and click on TAC Viewer. Then click on Title 25, Health Services. Then click on Texas Department of Health. Scroll down to Chapter 96, Bloodborne Pathogens. Or link from our website under New Items. For more information on an exposure control plan or the rules, go to www. capitol.state.tx.us/statutes/he/he008100toc. html, or click on our website under New Items.



Biohazard waste

Biohazard waste is defined as:

- 1. Liquid or semi-liquid blood or other potentially infectious material.
- 2. Contaminated items that would release blood or other potentially infectious materials in liquid or semi-liquid state if compressed.
- 3. Gloves covered with blood or other body fluids.
- 4. Sheets, gowns or other items covered with blood or other body fluids.
- 5. Cleaning cloths used to clean up spills of blood or body fluids.

Use of red biohazard bag

The red biohazard waste bag is to be stored until needed. It is to be used for the above items only. Do not put regular trash with biohazard waste. If there is one piece of biohazard material in the regular trash, then it becomes biohazard waste.

Red rigid sharps containers

Sharps are contaminated syringes, needles, IV cannulas, and glass ampules. These items are to be placed in the rigid red sharps containers on the MICU. Please replace container when two thirds full.

Please dispose of biohazard waste according to the state guidelines.

Source: Carol Lawrence

the absence of disease based on the patient's appearance or age. The EMT who had the puncture wound should be evaluated for the injury, a current Td immunization and a previous hepatitis B vaccine series with a known protective level (titer), offered chemoprophylaxis until patient's HIV status is known, and be given follow-up lab testing at least through six months.

The medic treating the second victim should irrigate his eyes and nose as soon as possible and should be offered chemoprophylaxis, which he needs to take for 30 days, as the patient is HIV positive. Lab testing should be done at regular intervals at least through six months; however, since patients with HIV and HCV coinfection may have increased incubation periods, it may be prudent to test for one year or use the PCR test for HCV and HIV at six months to ensure that all diseases are identified. Both

exposures were significant. The employees will experience a great of stress when the source patient's information becomes available. Counseling on precautions to take at home will prevent any disease from being passed to family members. The main thing to remember is that you cannot place your family at risk for any disease unless you are ill yourself. Precautions practiced by you will provide protection to your family at home.

Carol Lawrence, RN, BSN, has been a nurse epidemiologist for 26 years and has worked in the Infection Control, Epidemiology field for 16 years. She has written video scripts, had articles published in state and national magazines, and co-authored a chapter in an international control group manual, Associated Practitioners In Infection Control and Epidemiology. Her speciality is the development of infection control and occupational exposure programs for public safety departments.

References:

Control of Communicable Diseases, 17th. Edition 2000, James Chin MD MPH, Pages 238-257.

Principles & Practice of Infectious Diseases, Mandell, Bennett, Dolin, 2000.

Infectious Disease, Bannister, Begg, Gillespie, 1996. Pages 183-206

The Biological & Clinical Basis of Infectious Diseases, Shulman, Phais, Sommers, 1992. Pages 312-328.

Continuing Education Questions

(Answer all questions)

- There are several causes of hepatitis. Choose the answer that is NOT correct.
 - A. Drugs
 - B. Chickenpox
 - C. Lacerations
- 2. The time frame that a specific disease requires to make an individual ill after an exposure is:
 - A. Prophylaxis
 - B. Incubation
 - C. Chemoprophylaxis
- The medication that is used after an exposure to try and prevent a disease is:
 - A. Prophylaxis
 - B. Immunization
 - C. Drugs
- 4. Which statement is true about hepatitis B?
 - A. Virus only lives for 24 hours in open air.
 - B. Virus lives for 4 days in open air.
 - C. Virus can live on hard surface in dried blood for 7 days or longer.
- 5. Cases of hepatitis B or C that do not resolve are chronic carriers. What does this mean?
 - A. Infected
 - B. Always contagious
 - C. Has no significance
- Identify the correct statement about hepatitis B or C.
 - A. Hepatitis B or C always has the same symptoms.
 - B. You only see hepatitis B or C in adults.
 - C. Chronic hepatitis B or C carriers may not have any symptoms or even know they have a disease.
- 7. Identify the correct statement about hepatitis B.
 - A. There is no prophylaxis available after an exposure.
 - B. Immunization and prophylaxis are available.
 - C. Oral medication can be given to prevent hepatitis B.

- 8. Identify the correct statement about hepatitis.
 - A. Hepatitis B or C can cause cirrhosis and liver cancer in later years.
 - B. Hepatitis A can cause cirrhosis.
 - C. Hepatitis B resolves without problems.
- Engerix B protects against what types of hepatitis?
 - A. Hepatitis A, C
 - B. Hepatitis B, D
 - C. Hepatitis C, D
- 10. A hepatitis B vaccine titer should be done every year and boosters given if you are below 10.
 - A. No, a titer should be done six months after you complete the vaccine series and boosters given at that time if needed.
 - B. Yes, boosters of vaccine are needed yearly.
 - C. No, only yearly titers are needed.
- 11. A "non-responder" is:
 - A. Someone who has had the hepatitis A vaccine and failed to develop protective antibodies.
 - B. Someone who had hepatitis B vaccine and failed to develop protective antibodies.
 - C. Someone who has had the hepatitis C vaccine.
- 12. Identify the statement that is NOT correct about hepatitis C.
 - A. Hepatitis C used to be called hepatitis non-A, non-B.
 - B. Hepatitis C becomes chronic in about 85% of cases.
 - C. There is only one strain of virus, so a vaccine should soon become available.
- 13. The appearance of symptoms for hepatitis C can:
 - A. Take ten to 20 years.
 - B. Be present as soon as an individual is infected.
 - C. Appear in one month.
- 14. The usual tests for diagnosing hepatitis C are:
 - A. HGV, RPR, TTV, and liver enzymes.
 - B. HCV, RIBA, PCR, and liver enzymes.
 - C. HDV, HGV, and liver enzymes.

- 15. The major risk populations that may have high levels of hepatitis C are:
 - A. IV drug users, immigrants from Egypt, individuals infected with HIV.
 - B. IV drug users, ear piercing, and acupuncture procedures.
 - C. TB patients, homeless, psychiatric patients.
- 16. The main means of occupational exposures to hepatitis C are:
 - A. Blood splashes to non-intact skin.
 - B. Blood splashes to mucus membranes.
 - C. Needlesticks with large bore needles.
- 17. Identify one unique thing about hepatitis D.
 - A. The hepatitis D virus piggybacks on the hepatitis B virus to cause illness.
 - B. The disease is mild.
 - C. There is no vaccine to prevent the disease.
- 18. Occupational exposure follow-up measures after blood exposures include:
 - A. Counseling only.
 - B. Counseling, chemoprophylaxis, lab testing and documentation.
 - C. Chemoprophylaxis, documentation and lab testing.
- 19. Hepatitis prevention includes:
 - A. Infection control program, protective gear, education, immunizations and an exposure program.
 - B. Immunizations, education, and an infection control program.
 - C. Protective gear, training and immunizations.
- 20. The new Bloodborne Pathogen Law for Governmental Entities says:
 - A. The state will provide enforcement measures as OSHA does.
 - B. You need not worry about the law.
 - C. This law is essentially OSHA for governmental entities.

This answer	sheet must be po	stmarked by August	19, 2001.		
	CE Answer Sheet Texas EMS Magazine				
Name		SSN			
Certification Level		The state of the s			
Organization		Work Phone area	code		
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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 appro	priate box for eac	h question. Answer a	ll questions.		
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2001 Texas EMS Award Nomination Application

This nomination is for:	☐ Private Provider Award		
☐ EMS Educator Award	☐ Public Provider Award		
☐ EMS Medical Director Award	☐ Volunteer Provider Award		
☐ EMS Administrator Award	☐ First Responder Award		
☐ Public Information Award	☐ Air Medical Service Award		
☐ Citizen Award	☐ EMS Person of the Year		
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Your daytime telephone number Area Code:			
Your service or other affiliation			
Your signature	Date		
Send awards to: Texas EMS Awards, Texas Department of Health, 1100 West 49 th Street, Austin, TX 78756-3199, or fax to (512) 834-6736.			

Make 15 copies of the nomination packet. Nomination packets should be limited to: the completed form above; three typewritten pages of background information; one page of documentation or examples; and five letters. Only that number of pages will be forwarded to the Awards Committee. Any extra pages will not be reviewed.

Nominations must be postmarked by September 15, 2001.

If you have questions, contact your public health region EMS office or the Bureau of Emergency Management at (512) 834-6700.

We will announce award winners at Texas EMS Conference 2001 during the Awards Luncheon on November 21, 2001.

EMS Award Caregories

EMS Educator Award honors a statecertified EMS Instructor or Course Coordinator who has advanced EMS education in

EMS Medical Director Award honors a physician who has served as a medical director, online 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 Award honors an EMS group or individual for outstanding achievement in public education, injury prevention, or health promotion.

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

Private Provider Award honors a privately-owned commercial organization which assumed a leadership role in EMS by achievement in areas of patient care, public access, medical control, disaster preparedness, public education, and training.

Public Provider Award honors an organization operated by a county, municipality, tax-based hospital, or state or local government agency which assumed 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 which 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 which 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

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

Facts on suicide

- Every 17 minutes another life is lost to suicide. Every day 86 Americans take their own lives and more than 1500 attempt suicide.
- Suicide takes the lives of more than 30,000 Americans every year.
- Suicide is now the eighth leading cause of death in America.
- For every two victims of homicide in the U.S., there are three deaths from suicide.
- In the month prior to their suicide, 75 percent of elderly persons had visited a physician.
- Over half of all suicides occur in adult men, aged 25-65.
- Males are four times more likely to die from suicide than are females.
- More teenagers and young adults die from suicide than from cancer, heart disease, AIDS, birth defects, stroke, pneumonia, influenza and chronic lung disease, combined.
- Between 1952 and 1995, the incidence of suicide among adolescents and young adults nearly tripled.
- There are now twice as many deaths due to suicide than due to HIV/AIDS.

Preventable deaths

ttendance at a recent workshop shows that Texans are ready to talk about a subject more likely to affect our citizens than homicide—suicide. A suicide prevention workshop was held in Austin in May in conjunction with the quarterly meeting of the Governor's EMS and Trauma Advisory Council (GETAC). The turnout proved that Texans are meeting the challenge to talk about, plan and promote prevention, as 107 trauma nurses, police officers, public health officials and survivors of suicide came together to talk about how to reduce the second leading cause of injury death in our state. Edward Racht, M.D., chair of GETAC, shared his alarm at the "lack of knowledge among medical professionals about the magnitude of death attributed to a preventable public health problem. Only motor vehicle crashes have a higher mortality rate among injury deaths." Dr. Racht and Dennis Perrotta, PhD, director of TDH's Bureau of Epidemiology, encouraged attendees to use epidemiologic methods to reduce suicide deaths in Texas. With more than 2000 suicide deaths in 2000, Dr. Perrotta told participants that "Texas had only one deathless day last year—December 5, 2000!"

Molly Loar, Trauma Coordinator for Ben Taub General Hospital and co-organizer of the half-day suicide prevention forum, encouraged participants to "pay attention to the emotional needs of our patients, friends and children." She described the hurt of being a suicide survivor and stated that "a suicide prevention plan for Texas is critical to reducing suicide as the leading cause of death among our young people...our future."

Participants received an overview of Surgeon General David Satcher's National Strategy for Suicide Prevention from Judie Smith, MA, LPC, a board member of the American Association of Suicidology and Director of Counseling for Irving Independent School District. The Strategy has specific goals that include promoting awareness that suicide is a public health problem that is preventable, and developing and implementing strategies to reduce the stigma associated with being a consumer of mental health, substance abuse and suicide prevention services.

Participants had a short period of time to discuss how Texas can meet the objective of developing a comprehensive and coordinated statewide suicide prevention plan. Fourteen other states have suicide prevention plans. And just as Texans have tackled other major public health problems such as drunk driving, smoking and child passenger safety, suicide prevention can be addressed and suicide reduced. The Legislature was asked to establish an interim committee to study suicide and provide recommendations to the 2003 Legislature. Although lawmakers took no action on that during the regular session, the request will be presented again this summer.

Kate Martin, MEd, is the interpersonal violence coordinator for the San Antonio Metropolitan Health District and a member of GETAC's injury prevention committee. For more information about how to get involved in su cide prevention and upcoming meetings, call Kate Martin at 210/207-2028 or email martinm1@uthscsa.edu.

he National Council on the Aging estimates that more than five million older Americans are not getting all of the benefits that they are entitled to simply because they don't know about the benefits. The council has created a website to help people over age 55 find the billions of untapped public assistance dollars for which they qualify. The website, www.benefitscheckup. org, includes information about Medicaid, Supplemental Security Income, state drug benefits, Meals on Wheels, food stamps, health insurance counseling and veterans' medical care and transportation. While the website was designed primarily for low-income seniors, many of the programs don't have any income requirements. If you don't have Internet access, contact the local agency on aging. From The Wall Street Journal, "New Web Site to Help Elders and Caregivers Find Benefit Programs," by Kelly Greene, May 25, 2001.

Inhaled insulin can maintain blood sugar control in diabetics for up to two years without harming their lungs, according to a report released by Pfizer Inc. and Aventis SA. The 24month study found that when a dry powder form of insulin is inhaled into the lungs a few times a day, ten to 15 percent of the insulin is absorbed into the body and controls blood sugar levels. The most common side effect of the injected and inhaled insulin is hypoglycemia. Researchers are now studying to see if the excess inhaled insulin could harm the patient. From The Wall Street Journal, "Pfizer's Inhaled Insulin Worked for Diabetics During 2-Year Study," May 22, 2001.

I wo recent studies published in the Journal of the American Medical Association found that using Serevent (salmeterol xinafoate) alone might ease the symptoms of asthma but will not treat the underlying inflammation of the lung tissue and can allow the inflammation to worsen. The drug is generally recommended for use with inhaled steroids but doctors have begun prescribing it alone. One study found that taking salmeterol allowed the patient to reduce his or her use of the inhaled steroid by half without worsening the asthma, but when the steroids were eliminated, the asthma symptoms increased significantly. The second study found that asthma symptoms and inflammation increased when the patients were switched to salmeterol only, even though most did not complain about

Doctors have suspected that viruses might cause some heart transplant failures, since patients must take immunosuppressant drugs which make them more susceptible to viral infections.

their symptoms. Asthma is a chronic lung disease that affects more than 14 million Americans. From The Dallas Morning News, "Drug alone can worsen asthma," May 23, 2001.

Teart transplants in children may fail due to the organ becoming infected with the virus that causes the common cold. The adenovirus can cause the common cold and pinkeye but rarely causes myocarditis, a condition in which the virus appears to attack the lining of the heart arteries, leading to blockage. Doctors have suspected that viruses might cause



some heart transplant failures, since patients must take immuno-suppressant drugs which make them more susceptible to viral infections. Researchers are now looking into whether the same virus could be affecting other organ transplant failures or even contributing to ordinary heart disease. From *Austin American-Statesman*, "Study: Cold virus harms child heart transplants," May 17, 2001.

New findings recently published in the New England Journal of Medicine have found evidence that some human heart muscle cells can regenerate. Researchers in New York and Italy compared muscle cells from the hearts of people who had died four to 12 days after a large heart attack to that of people who died from other causes. The researchers measured the amount of a protein used in cell division in the cells bordering the site of the heart attack and in cells from other parts of the heart. They found that the number of muscle cells multiplying in the diseased hearts was four percent higher in areas near the damaged area and one percent higher in the other cells. Researchers calculated that rapid growth of even small numbers of new heart cells could regenerate large numbers of heart cells within three weeks. Now scientists are investigating if the regenerating cells are always in the heart and triggered by a crisis situation or if the heart uses cells from other parts of the body in response to heart attacks, and how this knowledge might be used to prolong and enhance the quality of life for humans. Heart disease is the leading cause of death in the U.S. From The Dallas Morning News, "Heart can regenerate itself, findings show," by Lawrence K. Altman, June 7, 2001.

A study of teens in an ultra-Orthodox Jewish community in Brooklyn found that more than half of the children had significantly low bone density and some even met the criteria for an osteoporosis diagnosis. Studying the roles of genetics, sex hormones and cultural patterns in causing osteoporosis, researchers found that some traditions of the ultra-Orthodox can limit exposure to factors that promote bone density. These traditions include encouraging children to pursue scholarly activities (instead of physical activities), dressing modestly (limiting sunlight exposure) and not consuming milk for several hours following the ingestion of meat (limiting the amount of calcium intake). The boys as a group had "profoundly low-

Researchers found that some traditions of the ultra-Orthodox Jewish can limit exposure to factors that promote bone density.

er" bone density in their spines, leading researchers to speculate that sex hormones also affected the bone density of the teens. From *The New York Times*, "Some Traditions Point to Bone Disease," May 15, 2001.

Dengue fever's prevalence in South America has increased dramatically, and has spread to areas where it was previously not detected, causing officials along the Texas-Mexico border to be concerned. Four Brazilians have died from the hemorrhagic form of dengue fever, the most virulent strain, and 10,000 cases of dengue fever have been reported in the first four months of this year. Health offi-

cials in Brazil and other Latin American countries are warning people that the mosquitos that transmit the virus will use water from clean pools or dirty sewers to reproduce and are asking everyone to help control the mosquito population. The governments in many parts of Latin America have scaled down or canceled mosquito eradication programs. Last year, there more than 400,000 cases of dengue fever in Latin America, with 5,657 caused by the hemorrhagic form of the virus, and 73 people died. From San Antonio Express-News, "Dengue cases on increase, causing widespread alarm," by Patrice M. Jones, May 6, 2001.

he World Health Organization recently announced that two cases of polio had been diagnosed in Bulgaria. In the first polio cases in Europe since 1998, a 13-month-old Gypsy baby and a 2-year-old Gypsy child from different towns were found to be infected with a polio virus traced to northern India. Other children in the communities were immediately vaccinated. Polio has been eradicated in North and South America, China and Australia, but these cases show that even children in polio-free countries must be vaccinated because infected travelers can spread the disease. From www.DFW.com, "Bulgarian polio cases prompt worry," May 18, 2001.

Wash your fruits and vegetables before you cut them" is the reminder from the California Department of Health Services. A salmonella outbreak in California, Arizona, Missouri, New Mexico, New York, Oregon, Tennessee and Washington has been linked to cantaloupes with contaminated skins from a farm in Mexico. Nationwide, more than 30 cases have been reported and one 78-

year-old woman has died from complications of the salmonella poisoning. The melon became contaminated when the knife cut through the contaminated skin and spread the bacteria into the fruit. California state officials will visit the farm to study its fruit-handling practices. From www.DFW.com, "Salmonella traced to cantaloupe," May 18, 2001.

A salmonella outbreak has been linked to cantaloupes with contaminated skins from a farm in Mexico. The melon became contaminated when the knife cut through the contaminated skin and spread the bacteria into the fruit.

fficials with the World Health Organization believe that one of the world's major killers, tuberculosis, could be brought under control within five years if nations would pledge a total of \$400 million a year more to diagnose and treat this curable disease. This additional funding would allow more people in the developing countries to be treated for TB and could cut the number of worldwide deaths in half by 2010. A WHO study found that most of the 22 countries where TB cases were most common either had inadequate plans or no plans for the diagnosing and treatment of TB patients. The number of TB cases in developing countries has increased over the past five years, mainly because of the prevalence of AIDS, which weakens immune systems. From San Antonio Express-News, "Money is sought as medicine to wipe out tuberculosis," by Elizabeth Olson, May 20, 2001.

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.

ABC Emergency Medical & Transfer Service, Houston, TX. Twelve months probation of EMS provider license through August 31, 2001. EMS Rules 157.19(c)(1)(A), (K), (T) and (U), 157.11(e), 157.12(c), 157.13(c), 157.11(d)(1)(A) and 157.11(k)(1), fails to comply with any of the provider licensure requirements as defined in 157.11 of this title; provides false or misleading advertising; fails to maintain confidentiality of patient records; violates any Texas Code, including but not limited to, the operation of an emergency vehicle; violates any rule or standard that has a potential negative effect on the health or safety of a patient; provider shall only advertise at the level of care which can be provided in the service area 24 hours a day, 7 days a week.

hours a day, 7 days a week.

Aleman, Gabriel, Beeville, TX. Suspension of EMS Coordinator certification through July 31, 2001 and twelve months probation of EMS Instructor certification through May 31, 2001. EMS Rules 157.64(a)(2)(H), (J), (M), (N), (P), (R) and (T), fails to maintain the integrity of the course; fails to maintain sponsorship with an EMS provider/training entity; repeatedly allows inadequate class presentations; demonstrates a lack of supervision of program instructors, guest instructors, and/or examiners; fails to maintain professionalism in the department approved course; fails to comply with responsibilities of a course coordinator, program instructor, or examiner as specified in 157.61-157.63 of this title; fails to maintain records as specified in 157.61-157.63 and 157.38 of this title.

Allison, Phillip G., Whitewright, TX. 12 months probated suspension of EMT certification through February 28, 2002. EMS Rules 157.37(c)(2)(3)(G)...the offenses listed in subparagraph (F)(i)-(viii) of this subsection are not exclusive in that the department may consider other particular crimes in special cases in order to promote the intent of the EMS Act and these sections.

Amb-Trans Ambulance Service, San Antonio, TX. Twenty-four months probated suspension of EMS provider license and a \$2,500 administrative penalty through June 30, 2002.

AMR San Antonio, San Antonio, TX. 12 months probation of EMS provider license through July 31, 2001. EMS Rules 157.19(c)(1)(A), (U), fails to comply with any of the provider licensure requirements; violates any rule or standard that has a potential negative effect on the health or safety of a patient.

Anderson, Theresa L., Buna, TX. Twelve months probated suspension of EMT certification through March 26, 2002. EMS Rules 157.37(c)(2)(3)(G)...the offenses listed in subparagraph (F)(i)-(viii) are not exclusive in that the department may consider other particular crimes in special cases in order to promote the intent of the EMS Act and these sections.

Andrews, Wanda, Pasadena, TX. Six months suspension followed by twelve months probation of EMT certification through November 30, 2001. EMS

Rules 157.5(b)(8) and (25) and (28), is under the influence of alcohol or is using a controlled substance, as defined by the H&SC, Chapter 481 and/or Chapter 483, which affects the certificant's ability to render aid according to accepted procedures or protocol; violates any rule or standard that has a potential negative effect on the health or safety of a patient, the public or other EMS personnel; and abuses alcohol or drugs that, in the opinion of the bureau chief, could endanger the lives of patients.

Arredondo, David, Rio Grande City, TX. 24 months probation of EMT certification through June 30, 2002. EMS Rules 157.44(c)(2)(B)(vii), the offenses listed in clauses (i)-(vi) of this subparagraph are not inclusive in that the department may consider other particular crimes in special cases in order to promote the intent of the EMS Act and these sections.

Barefield, Shannan, Henderson, TX. 12 months probation of EMT-P certification through October 31, 2001. EMS Rules 157.51(b)(1), (2), (10) and (25), fails to follow the EMS standards of care in the management of a patient; fails to administer medications and/or treatments in a responsible manner in accordance with the medical director's orders or protocols; abandon a patient; violates any rule or standard that has a potential negative effect on the health or safety of a patient, the public, or other EMS personnel.

Barrera, Richard L., Round Rock, TX. T24 months probated suspension of ECA certification through March 14, 2003. EMS Rules 157.37(c)(2)(3)(G), ...the offenses listed in subparagraph (F)(i)-(viii) of this subsection are not exclusive in that the department may consider other particular crimes in special cases in order to promote the intent of the EMS Act and these sections.

Bass, Barbara, Channelview, TX. 12 months probated suspension through March 2002. EMS Rules 157.51(b)(1), (2) and (25), fails to follow the EMS standards of care in the management of a patient; fails to administer medications and/or treatments in a responsible manner in accordance with the medical director's orders or protocols; violates any rule or standard that has the potential to jeopardize the health or safety of a patient, the public or other EMS personnel.

* Bayles, Ben D., Dallas, TX. Twelve months probated suspension of EMT certification through April9, 2001. EMS Rules 157.37(c)(2)(3)(G)...the offenses listed in subparagraph (F)(i)-(viii) of this subsection are not exclusive in that the department may consider other particular crimes in special cases in order to promote the intent of the EMS Act and these sections.

Best Care Ambulance, Houston, TX. 24 months probation through September 30, 2001, and an administrative penalty of \$10,000. EMS Rules 157.11(d)(1)(A) and (m)(13) and (k)(1), a BLS provider shall staff BLS vehicles...with at least 2 certified Emergency Care Attendants; a provider shall only advertise that level of care which can be provided in the service area 24 hours a day, 7 days a week; assuring that a vehicle, when response ready is staffed and equipped in accordance with the H&SC, Chapter 773, and this section for each level of care provided.

Bloodworth, Michael B., Marshall, TX. Twelve months probated suspension of EMT-P certification through December 28, 2001. EMS Rules 157.37(c)(2)(3)(G), the offenses listed in subparagraph (F)(i)-(viii) of this subsection are not exclusive in that the department may consider other particular crimes in special cases in order to promote the intent of the EMS Act and these sections.

Boldware, James L., Houston, TX. Twelve months probation of EMT certification through September 25, 2001. EMS Rules 157.37(c)(2)(3)(G), the offenses listed in subparagraph (F)(i)-(viii) of this subsection are not exclusive in that the department may consider other particular crimes in special cases in order to promote the intent of the EMS Act and these sections.

Bonnett, Matthew R., Horse Shoe, NC. 12 months probated suspension of EMT-I certification through January 29, 2002. EMS Rules 157.37(c)(2)(3)(G), ...the offenses listed in subparagraph (F)(i)-(viii) of this

subsection are not exclusive in that the department may consider other particular crimes in special cases in order to promote the intent of the EMS Act and these sections.

Boswell, Bart Paul, Houston, TX. Four years probation of EMT-P certification through October 17, 2001. EMS Rules 157.44, 157.51(b)(16) and (c) and 157.53, misdemeanor convictions while certified.

Bradshaw, Billy, College Station, TX. Twenty-four months probation of EMS Coordinator and EMS Examiner certifications through September 2002. EMS Rules 157.64(2)(a)(G), (H), (P) and (R), compromises the department approved course examination process fails to maintain the integrity of the course; fails to maintain professionalism in the department approved course; fails to comply with the responsibilities of a course coordinator, program instructor or examiner as specified in 157.61-157.63.

Breiten, Debbie, Hondo, TX. Letter of warning effective February 22, 2001. EMS Rules 157.36(b)(1), (13), (26) and (28), violating any provision of the H&SC, Chapter 773, and/or Title 25 of the TX Administrative Code, as well as federal, state or local laws, rules or regulations affecting, but not limited to, the practice of EMS; misrepresenting level of any certification or licensure; engaging in any conduct that has the potential to jeopardize the health or safety of any person; engaging in any activity that betrays the public trust and confidence in EMS.

Brown, Jack D., Cleburne, TX. 48 months probated suspension of EMT certification through November 3, 2004. EMS Rules 157.37(c)(2)(3)(G), the offenses listed in subparagraph (F)(i)-(viii) of this subsection are not exclusive in that the department may consider other particular crimes in special cases in order to promote the intent of the EMS Act and these sections.

Brown, Kelly James, Kilgore, TX. Suspension of EMT-I certification through November 22, 2002. EMS Rules 157.51(b)(5) and (24), failure to comply with the terms of a probation and failure to give the department full and complete information upon request.

Browning, Kenneth P., Breckenridge, TX. 24 months probated suspension of EMT certification through October 12, 2002. EMS Rules 157.37(c)(2)(3)(G), the offenses listed in subparagraph (F)(i)-(viii) of this subsection are not exclusive in that the department may consider other particular crimes in special cases in order to promote the intent of the EMS Act and these sections.

Buchanan, Thomas W., Dallas, TX. Twelve months probated suspension of EMT certification through November 28, 2001. EMS Rules 157.37(c)(2)(3)(G), the offenses listed in subparagraph (F)(i)-(viii) of this subsection are not exclusive in that the department may consider other particular crimes in special cases in order to promote the intent of the EMS Act and these sections.

Buford, Justin F., Lafayette, Louisiana. Twelve months probated suspension of EMT certification through December 13, 2002. EMS Rules 157.37(c)(2)(3)(G), the offenses listed in subparagraph (F)(i)-(viii) of this subsection are not exclusive in that the department may consider other particular crimes in special cases in order to promote the intent of the EMS Act and these sections.

Bullion, Edgar P., Trinity, TX. Twelve months probation of EMT certification through July 28, 2001. EMS Rules 157.44(c)(2)(B)(vii), the offenses listed in clauses (i)-(vi) of this subparagraph are not inclusive in that the department may consider other particular crimes in special cases in order to promote the intent of the EMS Act and these sections.

Caddel, Brian, Lago Vista, TX. Twelve months probation of EMT certification through July 28, 2001. EMS Rules 157.44(c)(2)(B)(vii), the offenses listed in clauses (i)-(vi) of this subparagraph are not inclusive in that the department may consider other particular crimes in special cases in order to promote the intent of the EMS Act and these sections.

Canales, Adrian, Rio Grande City, TX. Twelve months probation of EMT-I certification through

August 1, 2001. EMS Rules 157.44(c)(2)(B)(vii), the offenses listed in clauses (i)-(vi) of this subparagraph are not inclusive in that the department may consider other particular crimes in special cases in order to promote the intent of the EMS Act and these sections.

Cerda, Gilberto, Laredo, TX. Six months suspension and eighteen months probation of EMT certification through November 2002. EMS Law 773.064(a), knowingly practices as, attempts to practice as, or represents himself to be an EMT-P, EMT-I, EMT, ECA or LP and the person does not hold an appropriate certificate issued by the department under this chapter. Chadwick, James E., Mineola, TX. 12 months

Chadwick, James E., Mineola, TX. 12 months probated suspension of EMT-I certification through October 26, 2001. EMS Rules 157.37(c)(2)(3)(G), the offenses listed in subparagraph (F)(i)-(viii) are not exclusive in that the department may consider other particular crimes in special cases in order to promote the intent of the EMS Act and these sections.

Champion EMS, Longview, TX. Eighteen months probated suspension through May 2002 and a \$30,000 administrative penalty. EMS Rules 157.19(c)(1)(U), (H) and (M), violates any rule or standard that has a potential negative effect on the health or safety or a patient; has a history of staff violations which resulted in disciplinary action as described in 157.51 of this title; and fails to maintain confidentiality of patient records according to H&SC, Chap. 773.

* Chancellor, Bryan, Lake Worth, TX. Letter of warning against EMT-I certification effective May 30, 2001. EMS Rules 157.51(b)(25), violates any rule that has a potential negative effect on the health or safety of a patient, the public, or other EMS personnel. Cleveland, Erin, Channelview, TX. Twelve

Cleveland, Erin, Channelview, TX. Twelve months probated suspension through March 2002. EMS Rules 157.51(b)(1), (2) and (25), fails to follow the EMS standards of care in the management of a patient; fails to administer medications and/or treatments in a responsible manner in accordance with the medical director's orders or protocols; violates any rule or standard that has the potential to jeopardize the health or safety of a patient, the public or other EMS personnel.

Community EMS, Hondo, TX. Letter of warning effective February 22, 2001. EMS Rules 157.16(b)(14), fails to staff each vehicle deemed to be in service or response ready with appropriately and currently

certified personnel.

Cone, Jason P., Quitman, TX. 12 months probated suspension of EMT certification through November 29, 2001. EMS Rules 157.37(c)(2)(3)(G), the offenses listed in subparagraph (F)(i)-(viii) of this subsection are not exclusive in that the department may consider other particular crimes in special cases in order to promote the intent of the EMS Act and these sections.

Contreras, Camile, North Charleston, South Carolina. Twenty-four months probated suspension of EMT certification through February 5, 2003. EMS Rules 157.37(c)(2)(3)(G)...the offenses listed in subparagraph (F)(i)-(viii) of this subsection are not exclusive in that the department may consider other particular crimes in special cases in order to promote the intent of the EMS Act and these sections.

* Cox, Deanna F., Rusk, TX. Twelve months probated suspension of EMT-I certification through April 6, 2002. EMS Rules 157.37(c)(2)(3)(G)...the offenses listed in subparagraph (F)(i)-(viii) of this subsection are not exclusive in that the department may consider other particular crimes in special cases in order to promote the intent of the EMS Act and these sections.

Crawley, Kevin D., Baytown, TX. Twelve months probation of EMT certification through August 22, 2001. EMS Rules 157.37(c)(2)(3)(G), the offenses listed in subparagraph (F)(i)-(viii) of this subsection are not exclusive in that the department may consider other particular crimes in special cases in order to promote the intent of the EMS Act and these sections.

Crim, Jack D., Van, TX. Twelve months probated suspension of EMT-I certification through March 9, 2002. EMS Rules 157.37(c)(2)(3)(G), ...the offenses listed in subparagraph (F)(i)-(viii) of this subsection are not exclusive in that the department may consider

other particular crimes in special cases in order to promote the intent of the EMS Act and these sections.

* Croft, James D., Spring, TX. Twelve months probated suspension of EMT certification through April 6, 2002. EMS Rules 157.37(c)(2)(3)(G)...the offenses listed in subparagraph (F)(i)-(viii) of this subsection are not exclusive in that the department may consider other particular crimes in special cases in order to promote the intent of the EMS Act and these sections.

Dallas Ambulance Service, Dallas, TX. \$12,000 administrative penalty probated for 12 months through February 28, 2002. EMS Rules 157.16(d)(1) and (19), failing to comply with any requirement of provider licensure as defined in 157.11; having been found in violation of any local, state or national code or regulation pertaining to EMS operations or business practices; and/or violating any rule or standard that could jeopardize the health or safety of any person.

Day, Jeri L., College Station, TX. Twelve months probation of EMT certification through August 8, 2001. EMS Rules 157.37(c)(2)(3)(G), the offenses listed in subparagraph (F)(i)-(viii) of this subsection are not exclusive in that the department may consider other particular crimes in special cases in order to promote the intent of the EMS Act and these sections.

De La Garza, Diane, Pleasanton, TX. 24 months probation of EMT certification through October 15, 2001. EMS Rules 157.44, 157.51(b)(16) and (c), misdemeanor conviction while certified.

misdemeanor conviction while certified.

Dickerson, Willie J., Woodville, TX. 24 months probation of EMS Coordinator and EMS Examiner certification through July 2001. EMS Rules 157.64(a)(2)(D)(H)(P) and (S), dealing with falsification of documents, failure to maintain the integrity and professionalism in the course as well as compromise or falsification of the department's skills process and /or standards.

Donaldson, Dan R., Canyon Lake, TX. Six months probated suspension of EMT-P certification through August 2, 2002. Rules 157.37(c)(2)(3)(G)...the offenses listed in subparagraph (F)(i)-(viii) of this subsection are not exclusive in that the department may consider other particular crimes in special cases in order to promote the intent of the EMS Act and these sections.

Douglas, Randall, Avinger, TX. Twelve months probation for EMT-I certification through September 2001. EMS Rules 157.51(b)(1), (2), (10) and (25), fails to follow EMS standards of care in patient management; fails to administer medications and/or treatments in a responsible manner according to medical director's orders or protocols; abandons a patient; violates any rule or standard that has a potential negative effect on the health or safety of a patient.

the health or safety of a patient.

Dunagan, Kenneth A., Corsicana, TX. Twelve months probation of EMT certification through September 25, 2001. EMS Rules 157.37(c)(2)(3)(G), the offenses listed in subparagraph (F)(i)-(viii) of this subsection are not exclusive in that the department may consider other particular crimes in special cases in order to promote the intent of the EMS Act and

these sections.

* Edgar, Jeffrey, Austin, TX. Decertification of EMT-P certification and denial of recertification application effective April 10, 2001. EMS Rules 157.51(b)(15), (16), (23), (24), (26) and 157.53(6), (7) and 157.36(b)(1), (2), (15), (18) and (28), attempts to/obtains certification by fraud, forgery, deception, misrepresentation, or subterfuge; has been convicted of a misdemeanor or felony in accordance with the provisions of 157.44; fails to comply with H&SC, Chapter 773, and adopted rules; fails to give the department complete information, upon request; falsifies the application for certification; misrepresenting requirements for certification; violating any provision of the H&SC, Chapter 773, and/or Title 25 TAC, as well as Federal, State, or local laws, rules or regulations affecting the practice of EMS; any conduct which is in violation of any criminal, civil and/or administrative code or statute; falsifying or altering, or assisting another in falsifying or altering, any department application, EMS certificate or license, or using or possessing any such altered certificate or

license; obtaining or attempting to obtain and/or assisting another in obtaining or attempting to obtain, any advantage, benefit, favor or gain by fraud, forgery, deception, misrepresentation, untruth or subterfuge; engaging in any activity that betrays the public trust and confidence in EMS; HSC Chapter 773.063(b)... A person who violates this chapter or a rule adopted under this chapter is liable for a civil penalty in addition to any injunctive relief or other remedy provided by law; and HSC 773.064(a) A person commits an offense if the person knowingly practices, attempts to, or represents himself to be an EMT, EMT-I, EMT-P, ECA, or licensed paramedic and does not hold an appropriate certificate issued by the department.

Ellis, Jeffery A., Waco, TX. Twelve months probated suspension of EMT-I certification through October 4, 2001. EMS Rules 157.37(c)(2)(3)(G), the offenses listed in subparagraph (F)(i)-(viii) of this subsection are not exclusive in that the department may consider other particular crimes in special cases in order to promote the intent of the EMS Act and

these sections.

* Eisenmenn, Bradley G., Austin, TX. 24 months probated suspension of EMT certification through May 30, 2003. EMS Rules 157.37(c)(2)(3)(G)...the offenses listed in subparagraph (F)(i)-(viii) of this subsection are not exclusive in that the department may consider other particular crimes in special cases in order to promote the intent of the EMS Act and these sections.

Estes, Phillip, Chilton, TX. 24 months probation of EMT certification through July 31, 2002. EMS Rules 157.51(b)(8), (25) and (28), is under the influence of alcohol or is using a controlled substance which affects the certificant's ability to render aid; violates any rule or standard that has a potential negative effect on the health or safety of a patient; abuses alcohol or drugs that, in the opinion of the bureau chief, could endanger the lives of patients.

Evans, Krystal Š., Taylor, TX. 24 months probation of EMT certification through August 8, 2002. EMS Rules 157.37(c)(2)(3)(G), the offenses listed in subparagraph (F)(i)-(viii) of this subsection are not exclusive in that the department may consider other particular crimes in special cases in order to promote the intent of the EMS Act and these sections.

Falls County EMS, Inc., Marlin, TX. 12 months probated suspension through January 31, 2002 and an administrative penalty of \$12,000 probated through January 31, 2002. EMS Rules 157.16(b) and (c) and (d)(17) and (19), an administrative penalty may be assessed when an EMS provider is in violation of the H&SC Chapter 773, Chapter 157 or the reason outlined in subsections (c) and (d) of this section; a licensed EMS provider may not claim a defense when one or more staff members, acting with or without the consent and knowledge of the license holder, commit(s) multiple violations in this section, or perform(s) contrary to EMS standards while on EMS business for the provider and/or 157.16(d)(1) failing to comply with any requirement of provider licensure as defined in 157.11; having been found to have operated, directed, or allowed staff to operate any vehicle while on EMS business in a reckless or unsafe manner dangerous to the health or safety of any person; and having been found in violation of any local, state, or national code or regulation pertaining to EMS operations or business practices and/or violation any rule or standard that could jeopardize the health or safety of any person.

Farmer, David M., Weatherford, TX. Twelve

Farmer, David M., Weatherford, TX. Twelve months probated suspension of EMT certification through February 28, 2002. EMS Rules 157.37(c)(2)(3)(G)...the offenses listed in subparagraph (F)(i)-(viii) of this subsection are not exclusive in that the department may consider other particular crimes in special cases in order to promote the intent of the

* Fedro, Robert, Marlin, TX. Decertification of EMT-P certification effective April 10, 2001. EMS Rules 157.51(b)(11), (16), (22), (23), (24) and (25),

EMS Act and these sections.

appropriates and/or possesses without authorization medications, supplies, equipment, or personal items inappropriately acquired in the course of duty; has been convicted of a misdemeanor or felony in accordance with the provisions of 157.44; obtains or attempts to obtain any benefit to which not otherwise entitled by duress, coercion, fraud, or misrepresentation while in the course of duties as an EMS certificant; fails to comply with H&SC, Chapter 773; fails to give the department or its representative full and complete information, upon request, regarding an alleged or confirmed violation of H&SC, Chapter 773 or rules adopted thereunder; violates any rule or standard that has a potential negative effect on the health or safety of a patient, the public, or other EMS personnel.

Galvan, Martin, Jr., Rio Grande, TX. 48 months probated suspension of ECA certification through October 12, 2004. EMS Rules 157.37(c)(2)(3)(G), the offenses listed in subparagraph (F)(i)-(viii) of this subsection are not exclusive in that the department may consider other particular crimes in special cases in order to promote the intent of the EMS Act and these sections.

Garner, Judy R., Richland Springs, TX. Twelve months probated suspension of ECA certification through December 13, 2001. EMS Rules 157.37(c)(2)(3)(G), the offenses listed in subparagraph (F)(i)-(viii) are not exclusive in that the department may consider other particular crimes in special cases in order to promote the intent of the EMS Act and these sections.

Garza, Jess, Jr., Perryton, TX. 24 months probated suspension of EMT certification through November 2, 2002. EMS Rules 157.37(c)(2)(3)(G), the offenses listed in subparagraph (F)(i)-(viii) of this subsection are not exclusive in that the department may consider other particular crimes in special cases in order to promote the intent of the EMS Act and these sections.

Garza, Roberto, Mission, TX. Twenty-four months probation of EMT certification through December 22, 2001. EMS Rules 157.44, 157.51(b)(16) and (c), misdemeanor conviction while certified.

Garza, Rodolfo, Mercedes, TX. Two years probation of EMT recertification through February 11, 2002. EMS Rules 157.44, 157.51(b)(16) and (c), and 157.53, misdemeanor convictions while certified.

* Gatewood, Tae, Houston, TX. Denial of EMT I certification effective April 10, 2001. HSC 773.041(b)... A person may not practice as any type of emergency medical services personnel unless the person is certified under this chapter and rules adopted under this chapter; HSC 773.064(a) A person commits an offense if the person knowingly practices as, attempts to practice as, or represents himself to be an ECA, EMT, EMT-I, EMT-P, or licensed paramedic and the person does not hold an appropriate certificate issued by the department under this chapter; 25 TAC 157.51(b)(9), (12), (15), (22), (24), (25), (26), and 157.53(1), (6) and (7), represents that he or she is qualified at any level other than his or her current certification level; materially alters any department EMS certificate, or uses and/or possesses any such altered certification; attempts to obtain or obtains certification by fraud, forgery, deception, misrepresentation, or subterfuge; attempts to/obtains any benefit to which not otherwise entitled by duress, coercion, fraud, or misrepresentation while in the course of duties as an EMS certificant; fails to comply with H&SC, Chapter 773 and the rules adopted thereunder; fails to give the department or its representative full and complete information, upon request, regarding an alleged or confirmed violation of H&SC, Chapter 773 or rules adopted thereunder; violates any rule or standard that has a potential negative effect on the health or safety of a patient, the public, or other EMS personnel; falsifies an application for certification or recertification; failure to meet the standards as required in 157.41 or 157.45; falsifies the application for certification; misrepresenting any requirements for certification or recertification.

Gatlin, Michael, B., Lubbock, TX. 12 months probated suspension of EMT-I certification through

October 4, 2001. EMS Rules 157.37(c)(2)(3)(G), the offenses listed in subparagraph (F)(i)-(viii) of this subsection are not exclusive in that the department may consider other particular crimes in special cases in order to promote the intent of the EMS Act and these sections.

Gault, Shelley Wells, Corpus Christi, TX. Four years probation of EMT certification through November 3, 2001. EMS Rules 157.44, 157.51(b) and (c) and 157.53, felony conviction and misdemeanor convictions.

Gilcrease, Shawn, Rosharon, TX. Twenty-four months probation of EMT-P certification through December 31, 2001. EMS Rules 157.51(b)(2), fails to administer medication and/or treatments in a responsible manner in accordance with the medical director's orders or protocols.

Gill, Gina E., Carrollton, TX. Twelve months probated suspension of EMT certification through October 12, 2001. EMS Rules 157.37(c)(2)(3)(G), the offenses listed in subparagraph (F)(i)-(viii) of this subsection are not exclusive in that the department may consider other particular crimes in special cases in order to promote the intent of the EMS Act and these sections.

Gladson, Alan E., Fort Worth, TX. Twenty-four months probated suspension of EMT-P certification through December 6, 2002. EMS Rules 157.37(c)(2)(3)(G), the offenses listed in subparagraph (F)(i)-(viii) of this subsection are not exclusive in that the department may consider other particular crimes in special cases in order to promote the intent of the EMS Act and these sections.

* Golden, Donna, League City, TX. Twelve months probated suspension of EMT certification through May 2002. EMS Rules 157.51(b)(1), (2), (10), (23) and (25), fails to follow the EMS standards of care in the management of a patient; fails to administer medications and/or treatments in a responsible manner in accordance with the medical director's orders or protocols; abandons a patient; fails to comply with H&SC, Chapter 773 and rules adopted thereunder; violates any rule or standard that has a potential negative effect on the health or safety of a patient, the public, or other EMS personnel.

* Goliad EMS, Goliad, TX. Letter of warning

against provider license effective May 30, 2001. EMS Rules 157.16(b)(14), failing to staff each vehicle deemed to be in service or response ready with appropriately

and currently certified personnel.

Gooden, James A., Harker Heights, TX. Twelve months probated suspension of EMT certification through December 13, 2001. EMS Rules 157.37(c)(2)(3)(G), the offenses listed in subparagraph (F)(i)-(viii) of this subsection are not exclusive in that the department may consider other particular crimes in special cases in order to promote the intent of the EMS Act and these sections.

* Gordan, Carl L., Houston, TX. Twenty-four months probated suspension of EMT certification through May 9, 2003. EMS Rules 157.37(c)(2)(3)(G)...the offenses listed in subparagraph (F)(i)-(viii) of this subsection are not exclusive in that the department may consider other particular crimes in special cases in order to promote the intent of the EMS Act and these sections

Graham, Priscilla M., Spring, TX. Twelve months probated suspension of EMT certification through December 28, 2001. EMS Rules 157.37(c)(2)(3)(G), the offenses listed in subparagraph (F)(i)-(viii) of this subsection are not exclusive in that the department may consider other particular crimes in special cases in order to promote the intent of the EMS Act and these sections

Harris, Josh D., Frazier, Colorado. Twelve months probated suspension of EMT certification through January 11, 2002. EMS Rules 157.37(c)(2)(3)(G)...the offenses listed in subparagraph (F)(i)-(viii) of this subsection are not exclusive in that the department may consider other particular crimes in special cases in order to promote the intent of the EMS Act and these sections.

Harris, Kevin L., McAllen, TX. Four years probation of EMT certification through July 5, 2004. EMS Rules 157.44(c)(2)(B)(vii), the offenses listed in clauses (i)-(vi) of this subparagraph are not inclusive in that the department may consider other particular crimes in special cases in order to promote the intent of the EMS Act and these sections

Henry, Douglas A., Kirbyville, TX. Four years probation of EMT-P certification through February 5, 2002. EMS Rules 157.44, 157.51(b)(16) and (c), and 157.53, misdemeanor conviction while certified.

Hernandez, Roberto, Powderly, TX. Twelve months probation of EMT certification through September 25, 2001. EMS Rules 157.37(c)(2)(3)(G), the offenses listed in subparagraph (F)(i)-(viii) of this subsection are not exclusive in that the department may consider other particular crimes in special cases in order to promote the intent of the EMS Act and these sections

* Hill, Virgil A., Austin, TX. Twelve months probated suspension of EMT certification through May 30, 2002. EMS Rules 157.37(c)(2)(3)(G)...the offenses listed in subparagraph (F)(i)-(viii) of this subsection are not exclusive in that the department may consider other particular crimes in special cases in order to promote the intent of the EMS Act and these sections

Houston Fire Department, Houston, TX. \$33,000 administrative penalty probated for 12 months effective February 16, 2001. EMS Rules 157.19(c)(1)(A) and (U) and 157.11(d)(1)(A), fails to comply with any of the provider licensure requirements as defined in 157.11 of this title; violates any rules or standard that has a potential negative effect on the health or safety of a patient; a BLS provider shall staff BLS vehicles, when in service, with at least two emergency care attendants who have active status certification, 24 hours per day, 7 days per week.

Hurst, Richard Ashley, Temple, TX. Twentyfour months probation of EMT-P certificate through June 30, 2002. EMS Rules 157.44, 157.51(b)(16),

misdemeanor/felony conviction.

Jackson, Jody Leon, Dayton, TX. Twenty-four months probation of EMT certification through January 10, 2002. EMS Rules 157.44, 157.51(b) and (c) and 157.53, misdemeanor convictions and a felony conviction.

Jewett EMS, Inc., Jewett, TX. Twenty-four months probation and a \$1,500 administrative penalty probated of EMS provider license through September 2002. EMS Rules 157.19(c)(1)(A) and (U) and 157.13(c), fails to comply with any of the provider licensure requirements as defined in 157.11 of this title; violates any rule or standard that has a potential negative effect on the health or safety of a patient; and required equipment.

Jordan, Colby R., Combine, TX. Twelve months probation of EMT certification through September 25, 2001. EMS Rules 157.37(c)(2)(3)(G), the offenses listed in subparagraph (F)(i)-(viii) of this subsection are not exclusive in that the department may consider other particular crimes in special cases in order to promote the intent of the EMS Act and these sections.

* Keller, Kristen, Lake Jackson, TX. Twelve months probated suspension of EMT certification through May 15, 2002. EMS Rules 157.37(c)(2)(3)(G)...the offenses listed in subparagraph (F)(i)-(viii) of this subsection are not exclusive in that the department may consider other particular crimes in special cases in order to promote the intent of the EMS Act and these sections

Kellar, Shanna, Terrel, TX. Four years probation of EMT certification through June 30, 2004. EMS Rules 157.44(c)(2)(B)(vii), the offenses listed in clauses (i)-(vi) of this subparagraph are not inclusive in that the department may consider other particular crimes in special cases in order to promote the intent of the

EMS Act and these sections.

Key, Roland B., Gail, TX. Twelve months probation of EMT-I certification through July 28, 2001. EMS Rules 157.44(c)(2)(B)(vii), the offenses listed in clauses (i)-(vi) of this subparagraph are not inclusive

in that the department may consider other particular crimes in special cases in order to promote the intent of the EMS Act and these sections.

Keys, Melissa M., Longview, TX. Twelve months probated suspension of EMT certification 15, 2002. EMS through May 157.37(c)(2)(3)(G)...the offenses listed in subparagraph (F)(i)-(viii) of this subsection are not exclusive in that the department may consider other particular crimes in special cases in order to promote the intent of the EMS Act and these sections.

Land, Jimmy P., Amarillo, TX. Twelve months probated suspension of EMT certification through March 27, 2002. EMS Rules 157.37(c)(2)(3)(G)...the offenses listed in subparagraph (F)(i)-(viii) of this subsection are not exclusive in that the department may consider other particular crimes in special cases in order to promote the intent of the EMS Act and

these sections.

* Leake, Titus, Euless, TX. Twelve months probated suspension of EMT certification through April 9, 2002. EMS Rules 157.37(c)(2)(3)(G)...the offenses listed in subparagraph (F)(i)-(viii) of this subsection are not exclusive in that the department may consider other particular crimes in special cases in order to promote the intent of the EMS Act and these sections

Leal, Jaime Ledesma, Mercedes, TX. Twentyfour months probation of EMT certification through August 3, 2001. EMS Rules 157.44, 157.51(b) and (c)

and 157.53, misdemeanor convictions.

Little Elm VFD & EMS, Little Elm, TX. Twentyfour months probated suspension of EMS providers license through March 31, 2002 and a \$5,000 administrative penalty. EMS Rules §157.19(b), 157.19(c)(1)(A) and (U), administrative penalty assessed due to violation of the provisions of the H&SC, \$773.065-773.066; fails to comply with any of the provider licensure requirements as defined in 157.11 of this title; violates any rule or standard that would jeopardize the health or safety of a patient. **Lopez, Tessie J.**, La Feria, TX. Twelve months

probated suspension of EMT certification through November 14, 2001. EMS Rules 157.37(c)(2)(3)(G), the offenses listed in subparagraph (F)(i)-(viii) of this subsection are not exclusive in that the department may consider other particular crimes in special cases in order to promote the intent of the EMS Act and

these sections

Manuel, Larry K., Leakey, TX. Twelve months probated suspension of EMT certification through February 2, 2002. EMS Rules 157.37(c)(2)(3)(G), ...the offenses listed in subparagraph (F)(i)-(viii) of this subsection are not exclusive in that the department may consider other particular crimes in special cases in order to promote the intent of the EMS Act and these sections.

* Martin, Kimberly G., Houston, TX. Nine months probated suspension of EMT certification 30, 2002. EMS Rules February 157.37(c)(2)(3)(G)...the offenses listed in subparagraph (F)(i)-(viii) of this subsection are not exclusive in that the department may consider other particular crimes in special cases in order to promote the intent of the

EMS Act and these sections.

Martinez, Dagoberto, Fort Worth, TX. Twelve months probated suspension of EMT certification through March 26, 2002. EMS Rules 157.37(c)(2)(3)(G)...the offenses listed in subparagraph (F)(i)-(viii) of this subsection are not exclusive in that the department may consider other particular crimes in special cases in order to promote the intent of the EMS Act and these sections.

Mata, Daniel, Edinburg, TX. Twelve months probated suspension of EMT-I certification through March 2, 2002. EMS Rules 157.37(c)(2)(3)(G)...the offenses listed in subparagraph (F)(i)-(viii) of this subsection are not exclusive in that the department may consider other particular crimes in special cases in order to promote the intent of the EMS Act and

Mata, Joseph, Uvalde, TX. Twenty-four months

probation of EMT-I certification through November 002. EMS Rules 157.36(b)(1), (4), (7), (13), (26) and (28), violating any provision of the H&SC, Chapter 773, and/or Title 25 of TAC, as well as federal, state, or local laws, rules or regulations affecting, but not limited to, the practice of EMS; falsifying any EMS record, patient record or report, or making false or misleading statements in a oral report, or destroying a patient care report; performing advanced level or invasive treatment without medical direction or supervision, or practicing beyond the scope of certification or licensure; misrepresenting level of any certification or licensure; engaging in any conduct that jeopardizes or has the potential to jeopardize the health or safety of any person; engaging in any activity that betrays the public trust and confidence in EMS

Mauro, Donald, Houston, TX. Twelve months probated suspension of EMT certification through May 2002. EMS rules 157.51(b)(1), (2), (10), (23) and (25) fails to follow the EMS standards of care in the management of a patient; fails to administer medications and/or treatments in a responsible manner in accordance with the medical director's orders or protocols; abandons a patient; fails to comply with H&SC, Chapter 773 and rules adopted thereunder; violates any rule or standard that has a potential negative effect on the health or safety of a patient, the

public, or other EMS personnel.

* McDonald, Debra, Schertz, TX. Twenty-four months probated suspension of EMT-P certification through April 2003. EMS Rules 157.36(b)(1), (6), (26) and (28), violating any provision of the H&SC, Chapter 773, and/or Title 25 of the TAC, as well as federal, state or local laws, rules or regulations affecting, but not limited to, the practice of EMS; causing or permitting physical or emotional abuse or injury to a patient or the public, and/or failing to report such abuse or injury to the employer, appropriate legal authority and/or the department; engaging in any conduct that has the potential to jeopardize the health or safety of any erson; engaging in any activity that betrays the public trust and confidence in EMS.

McElwee, Cory D., Lubbock, TX. Twelve months probated suspension of EMT-P certification through November 8, 2001. EMS Rules 157.37(c)(2)(3)(G), the offenses listed in subparagraph (F)(i)-(viii) of this subsection are not exclusive in that the department may consider other particular crimes in special cases in order to promote the intent of the EMS Act and

McGee, Thomas R., Kingsville, TX. Twenty-four months probated suspension of EMT certification through January 11, 2003. EMS Rules 157.37(c)(2)(3)(G)...the offenses listed in subparagraph (F)(i)-(viii) of this subsection are not exclusive in that the department may consider other particular crimes in special cases in order to promote the intent of the EMS Act and these sections

McInerney, Brian Michael, Lewisville, TX. Twenty-four months probation of EMT-P certification through February 24, 2002. EMS Rules 157.44, 157.51(b)(16) and (26) and 157.53(3), misdemeanor conviction while certified and falsification of EMS

personnel applications.

Meeks, Bryan R., Kermit, TX. Twelve months probated suspension of EMT certification through March 26, 2002. EMS Rules 157.37(c)(2)(3)(G)...the offenses listed in subparagraph (F)(i)-(viii) of this subsection are not exclusive in that the department may consider other particular crimes in special cases in order to promote the intent of the EMS Act and these sections.

Mendez, Abel, Del Rio, TX. Twelve months probated suspension of EMT certification through February 12, 2002. EMS Rules 157.37(c)(2)(3)(G), ...the offenses listed in subparagraph (F)(i)-(viii) of this subsection are not exclusive in that the department may consider other particular crimes in special cases in order to promote the intent of the EMS Act and these sections.

* Mitchell, Marklyn, Stockton, TX. Twenty-four months suspension of EMT-I certification effective

April 12, 2001. EMS Rules 157.51(b)(16), (23), (24), (25), (28) and 157.44(c)(1)(C), has been convicted of a misdemeanor or felony in accordance with the provisions of 157.44 of this title; fails to comply with H&SC, Chapter 773, and rules adopted thereunder; fails to give the department full and complete information, upon request; violates any rule or standard that has a potential negative effect on the health or safety of a patient, the public, or other EMS personnel; abuses alcohol or drugs that in the opinion of the bureau chief could endanger the lives of patients; when a person's conviction of a felony or misdemeanor directly relates to the duties and responsibilities of EMS personnel, the department may decertify or suspend an existing certificate.

Moore, Frank E., Overton, TX. Twelve months probation of EMT certification through August 8, 2001. EMS Rules 157.37(c)(2)(3)(G), the offenses listed in subparagraph (F)(i)-(viii) of this subsection are not exclusive in that the department may consider other particular crimes in special cases in order to promote the intent of the EMS Act and these sections.

Morgan, Elmer R., Jr., Brenham, TX. months probated suspension of ECA certification through November 2, 2001. EMS Rules 157.37(c)(2)(3)(G), the offenses listed in subparagraph (F)(i)-(viii) of this subsection are not exclusive in that the department may consider other particular crimes in special cases in order to promote the intent of the

EMS Act and these sections.

Morgan, Russell, Bullard, TX. Three months suspension of EMT certification followed by twelve months probation through December 31, 2001. H&SC 773.041(b), EMS Rules 157.51(b)(23) and (25), a person may not practice as any type of emergency medical personnel unless the person is certified under this chapter and rules adopted under this chapter; violates any rule or standard that has a potential negative effect on the health or safety of a patient, the public,

or other EMS personnel.

North Bosque County EMS, Inc., Meridian, TX. Twenty-four months probated suspension through January 31, 2003 and an administrative penalty of \$5000 probated through January 31, 2003. EMS Rules 157.16(b) and (c) and (d)(4), (14), (17) and (19), an administrative penalty may be assessed when an EMS provider is in violation of the H&SC, Chapter 73, 25 TAC Chapter 157, or the reason outlined in subsections (c) and (d) of this section; failing to correct deficiencies as instructed by the department; a licensed EMS provider may not claim a defense when one or more staff members, acting with or without the consent and knowledge of the license holder, commit(s) multiple violations in the section, or perform(s) contrary to EMS standards while on EMS business for the provider; failing to staff each vehicle deemed to be in service or response ready with appropriately and currently certified personnel; having been found to have operated, directed or allowed staff to operate any vehicle while on EMS business in a reckless or unsafe manner and/or in a manner that is dangerous to the health or safety of any person; and having been found in violation of any local, state or national code or regulation pertaining to EMS operations or business practices; and/or violating any rule or standard that could jeopardize the health or safety of any person.

Oakley, Phyllis, Houston, TX. Revocation of probation and twelve month suspension of EMT certification through August 2001. EMS Rules 157.51(b)(5), (23) and (24), fails to comply with the terms of a probation or suspension; fails to comply with H&SC, Chapter 773, and rules adopted thereunder; fails to give the department or its authorized representative full and complete information, upon request, regarding an alleged or confirmed violation of H&SC, Chapter 773, or rules

adopted thereunder.

* Paramed Systems, Inc., Watuga, TX. Letter of warning against provider license effective May 30, 2001. EMS Rules 157.19(c)(1)(U), violates any rule that has a potential negative effect on the health or

safety of a patient, the public, or other EMS personnel.

Parker, Michael Ray, Clifton, TX. Twenty-four months probation of EMT certification through November 4, 2001. EMS Rules 157.44, 157.51(b) and (c), and 157.53, felony/misdemeanor convictions.

Parnell, Christopher, Harker Heights, TX. Twelve months probated suspension of EMT certification through April 4, 2002. EMS Rules 157.37(c)(2)(3)(G), ...the offenses listed in subparagraph (F)(i)-(viii) of this subsection are not exclusive in that the department may consider other particular crimes in special cases in order to promote the intent of the EMS Act and these sections.

Pederson, Erik, Cisco, TX. Voluntary surrender of EMT-I certification in lieu of proposal for suspension effective March 19, 2001. EMS Rules 157.36(b)(1), (3), (9), (26) and (28), violating any provision of the H&SC Chapter 773, and/or Title 25 TAC, as well as federal, state, or local laws, rules or regulations; failing to make accurate, complete and/or clearly written patient care reports documenting a patient's condition upon arrival at the scene, prehospital care provided, and patient's status during transport; abandoning a patient, turning over the care of a patient or delegating EMS functions to a person who lacks the education, training, experience, knowledge to provide appropriate level of care for the patient; engaging in any conduct that has the potential to jeopardize the health or safety of any person; engaging in any activity that betrays the public trust and confidence in EMS

Pinedo, Marisela, Los Fresnos, New Mexico. Probation of EMT-I certification through June 1, 2006. EMS Rules 157.44, 157.51(b)(16) and (c), felony

conviction while certified.

* Pippin, Brian, Lipan, TX. Forty-eight months probated suspension of EMT certification through April 9, 2005. EMS Rules 157.37(c)(2)(3)(G)...the offenses listed in subparagraph (F)(i)-(viii) of this subsection are not exclusive in that the department may consider other particular crimes in special cases in order to promote the intent of the EMS Act and these sections.

Pirtle, Kristopher L., Odessa, TX. Twelve months probation of EMT certification through July 13, 2001. EMS Rules 157.44(c)(2)(B)(vii), the offenses listed in clauses (i)-(vi) of this subparagraph are not inclusive in that the department may consider other particular crimes in special cases in order to promote the intent of the EMS Act and these sections.

Pitchett, Brenda K., Palestine, TX. Eight months probated suspension of EMT certification through November 1, 2001. EMS Rules 157.37(c)(2)(3)(G), the offenses listed in subparagraph (F)(i)-(viii) of this subsection are not exclusive in that the department may consider other particular crimes in special cases in order to promote the intent of the EMS Act and these sections

Pulido, Gilberto, Laredo, TX. Twenty-four months probation of EMT certification through October 15, 2001. EMS Rules 157.44, 157.51(b)(16) and (c), misdemeanor conviction while certified.

Ramsey, Donald Dean III, Portland, TX. Four years probation of EMT certification through January 15, 2002. EMS Rules 157.44, 157.51(b) and (c), and

157.53, felony conviction.

Regional Ambulance Service, Victoria, TX. \$8000 administrative penalty and 12 months probated suspension through February 28, 2002. EMS Rules 157.16(d)(1) and (19), failing to comply with any requirement of provider licensure as defined in 157.11 of this title; having been found in violation of any local, state or national code or regulation pertaining to EMS operations or business practices; and/or violating any rule or standard that could jeopardize the health or safety of any person.

Richardson, Jeffery, Lubbock, TX. Twelve months probated suspension of LP certification through January 16, 2002. EMS Rules 157.37(c)(2)(3)(G)...the offenses listed in subparagraph (F)(i)-(viii) of this subsection are not exclusive in that the department may consider other particular crimes in special cases in order to promote the intent of the EMS Act and

these sections

Ripley, Jimmy J., Winters, TX. 24 months probated suspension of EMT certification through February 5, 2003. EMS Rules 157.37(c)(2)(3)(G)... the offenses listed in subparagraph (F)(i)-(viii) of this subsection are not exclusive in that the department may consider other particular crimes in special cases in order to promote the intent of the EMS Act and these sections.

River City Ambulance, San Antonio, TX. 12 months probation of EMS provider license through July 31, 2001. EMS Rules 157.19(c)(1)(A) and (U), fails to comply with any of the provider licensure requirements; violates any rule that has a potential negative effect on the health or safety of a patient.

Roberts, Tammy, Cedar Hill, TX. Twenty-four months probation of EMT certification through October 28, 2001. EMS Rules 157.44, 157.51(b) and (c),

and 157.53, felony conviction.

Robertson County EMS, Franklin, TX. Twentyfour months probation and a \$1,600 administrative penalty of the EMS provider license through September 2002. EMS Rules 157.19(c)(1)(A) and (U), and 157.13(c)(3), (5) and (6), fails to comply with any of the provider licensure requirements as defined in 157.11 of this title; violates any rule or standard that has a potential negative effect on the health or safety of a patient; advanced airway devices and/or endotracheal tubes in sizes specified by the medical director with laryngoscope and blades; one copy of the Medical Treatment Protocols/Standing Orders that were provided in the provider licensing application packet; a list signed by the medical director which contains the following items as identified in the medical treatment protocols/standing orders.

* Ruben, Allen M., Houston, TX. Twelve months probated suspension of ECA certification through May 9, 2002. EMS Rules 157.37(c)(2)(3)(G)...the offenses listed in subparagraph (F)(i)-(viii) of this subsection are not exclusive in that the department may consider other particular crimes in special cases in order to promote the intent of the EMS Act and these sections.

Ruiz, James J., Luling, TX. Twelve months probated suspension of EMT certification through March 26, 2002. EMS Rules 157.37(c)(2)(3)(G)...the offenses listed in subparagraph (F)(i)-(viii) of this subsection are not exclusive in that the department may consider other particular crimes in special cases in order to promote the intent of the EMS Act and

these sections.

* Rural Metro Abilene, Abilene, TX. \$15,000 administrative penalty probated for 12 months through June 2002. EMS Rules 157.16(d)(1), (10), (14), (17) and (19), failing to comply with any requirement of provider licensure as defined in §157.11 of this title; falsifying a patient care record or any other document or record resulting from or pertaining to EMS Provider responsibilities; failing to staff each vehicle deemed to be in service or response ready with appropriately and currently certified personnel; having been found to have operated, directed, or allowed staff to operate any vehicle while on EMS business in a reckless or unsafe manner and/or in a manner that is dangerous to the health or safety of any person; having been found in violation of any local, state, or national code or regulation pertaining to EMS operations or business practices; and/or violating any rule or standard that could jeopardize the health or safety of any person.

Rural Metro Ambulance Service-Dallas, Dallas, TX. Twenty-four months probation of EMS provider license through May 31, 2002. EMS Rules 157.19(c)(1)(A) and (U), and 157.11(d)(1)(A), fails to comply with any of the provider licensure requirements as defined in 157.11; violates any rule or standard that would jeopardize or has a potential negative effect on the health or safety of a patient; and a BLS provider shall staff BLS vehicle(s), when in service, with at least two emergency care attendants who have active status certification, 24 hours per day, seven days per week.

Saenz, Daniel L., San Antonio, TX. Twelve months probated suspension of EMT-P certification through March 2, 2002. EMS Rules 157.37(c)(2)(3)(G)...the offenses listed in subparagraph (F)(i)-(viii) of this subsection are not exclusive in that the department may consider other particular crimes in special cases in order to promote the intent of the EMS Act and these sections.

Saenz, Humberto, Garciasville, TX. Twenty-four months probation of ECA certification through August 3, 2001. EMS Rules 157.44, 157.51(b) and (c)

and 157.53, felony conviction.

Schuchardt, Ronald, Pipe Creek, TX. 12 months probated suspension of EMT certification through March 2, 2002. EMS Rules 157.37(c)(2)(3)(G)...the offenses listed in subparagraph (F)(i)-(viii) are not exclusive in that the department may consider other particular crimes in special cases in order to promote the intent of the EMS Act and these sections.

Senko, Cynthia, Conroe, TX. 12 months probated suspension of EMT-I certification through January 4, 2002. EMS Rules 157.37(c)(2)(3)(G)...the offenses listed in subparagraph (F)(i)-(viii) are not exclusive in that the department may consider other particular crimes in special cases in order to promote the intent of the EMS Act and these sections.

Sheppard, Jude J., Vidor, TX. 24 months probation of EMT certification through September 25, 2001. EMS Rules 157.37(c)(2)(3)(G), the offenses listed in subparagraph (F)(i)-(viii) of this subsection are not exclusive in that the department may consider other particular crimes in special cases in order to promote the intent of the EMS Act and these sections.

Shipp, Patrick L., Laneville, TX. Four years probation of EMT-I certification through July 28, 2004. EMS Rules 157.44(c)(2)(B)(vii), the offenses listed in clauses (i)-(vi) of this subparagraph are not inclusive in that the department may consider other particular crimes in special cases in order to promote the intent of the EMS Act and these sections.

Sistrunk, Robert, New Waverly, TX. Twentyfour months probation of EMT-P certification through March 31, 2002. EMS Rules 157.51(b)(11) and (22), appropriates and/or possesses without authorization medications, supplies, equipment or personal items inappropriately acquired in the course of duty; obtains or attempts to obtain any benefit to which not otherwise entitled by duress, coercion, fraud or misrepresentation while in the course of duties as an EMS certificant.

Smiley, Matthew M., Port Boliver, TX. Twelve months probated suspension of EMT certification through February 28, 2002. EMS Rules 157.37(c)(2)(3)(G)...the offenses listed in subparagraph (F)(i)-(viii) of this subsection are not exclusive in that the department may consider other particular crimes in special cases in order to promote the intent of the EMS Act and these sections.

Smith, Coby A., Arlington, TX. Twelve months probation of EMT certification through July 13, 2001. EMS Rules 157.44(c)(2)(B)(vii), the offenses listed in clauses (i)-(vi) of this subparagraph are not inclusive in that the department may consider other particular crimes in special cases in order to promote the intent of the EMS Act and these sections.

Smith-Green, Tonya Sue, Burleson, TX. Fortyeight months probation of EMT certification through October 15, 2003. EMS Rules 157.44, 157.51(b) and (c), and 157.53, felony/misdemeanor convictions

South TX Rural Health Services, Inc., Cotulla, TX. Twenty-four months probation through May 31, 2002. EMŚ Rules 157.19(c)(1)(A), (B) and (U), fails to comply with provider licensure requirements 157.11; repeats or commits an offense of a different nature within 12 months of a previous probation; violates any rule or standard that has a potential negative effect on the health or safety of a patient.

Spicewood VFD & EMS, Spicewood, TX. 24 months probation of provider license through February 28, 2002. EMS Rules 157.19(c)(1)(A) and (U), fails to comply with any of the provider licensure requirements as defined in 157.11 of this title, and violates any rule or standard that would jeopardize or has a potential negative effect on the health or safety of a patient, the public or other EMS personnel.

* Steger, John S., Denton, TX. 24 months

probated suspension of EMT certification through May 15, 2003. EMS Rules 157.37(c)(2)(3)(G)...the offenses listed in subparagraph (F)(i)-(viii) are not exclusive in that the department may consider other particular crimes in special cases in order to promote the intent of the EMS Act and these sections.

Stevens, Jeffrey, Nederland, TX. Decertification of EMT-P certification effective January 22, 2001. EMS Rules 157.51(b)(1), (2), (23) and (25), fails to follow the EMS standards of care in the management of a patient; fails to administer medications and/or treatments in a responsible manner in accordance with the medical director's orders or protocols; fails to comply with H&SC, Chapter 773, and rules adopted thereunder; and violates any rule or standard that has a potential negative effect on the health or safety of a patient, the public or other EMS personnel.

Strimpell, Marc, San Antonio, TX. 24 months probated suspension of EMT-P certification through April 4, 2003. EMS Rules 157.37(c)(2)(3)(G), ...the offenses listed in subparagraph (F)(i)-(viii) are not exclusive in that the department may consider other particular crimes in special cases in order to promote the intent of the EMS Act and these sections.

*Stonewall County EMS, Aspermont, TX. Letter of warning against provider license effective May 30, 2001. EMS Rules 157.16(b)(14), failing to staff each vehicle deemed to be in service or response ready with appropriately and currently certified personnel.

Taylor, Eldon, Commerce, TX. Revocation of EMS Coordinator certification effective November 14, 2000. EMS Rules 157.43(m)(3)(E), (I), (K) and (L), falsifying a course completion certificate or any other document that records or verifies course activity and/or is part of the course record; compromising or failing to maintain the order, discipline and fairness of a department-approved course or program; demonstrating a lack of supervision of personnel instructing in courses for which the coordinator is responsible; and compromising an examination or examination process administered or approved by the department.

Taylor, Fred, Bryan TX. Twelve months probation of EMT-P license through September 2001. EMS Rules 157.51(b)(25), violates any rule or standard that has a potential negative effect on the health or safety of a patient, the public or other EMS personnel.

* Transfer One Medical Service, Inc., Harlingen, TX. Administrative penalty of \$3,500 against provider license effective April 10, 2001. EMS Rules 157.16(b)(c)(d)(1); (19); 157.11(d)(1), (2) and (3), failing to comply with any requirement of provider licensure as defined in §157.11 of this; having been found in violation of any local, state, or national code or regulation pertaining to EMS operations or business practices; and/or violating any rule or standard that could jeopardize the health or safety of any person; all EMS vehicles must be adequately constructed, equipped, maintained and operated to render patient care, comfort and transportation safely and efficiently; when response-ready or in-service, EMS vehicles shall have operational two-way communication capable of contacting appropriate medical resources, and shall be in compliance with all applicable state and/or federal laws and, except for fixed wing aircraft, shall have the name of the provider prominently displayed on both sides of the vehicle. Providers who operate rotor or fixed wing aircraft must comply with all requirements of §157.12 or §157.13; substitution, replacement and additional vehicles.

Treadway, Roy Gene, Nash, TX. Eighteen months probation of EMT certification through September 2, 2001. EMS Rules 157.44, 157.51(b)(16) and (c), and 157.53, conviction under the federal code of criminal procedure while certified.

Trevino, Robert P., Troy, TX. Twelve months probated suspension of EMT-I certification through December 15, 2002. EMS Rules 157.37(c)(2)(3)(G), the offenses listed in subparagraph (F)(i)-(viii) of this subsection are not exclusive in that the department may consider other particular crimes in special cases in order to promote the intent of the EMS Act and

these sections.

Turnbow, Brandon L., Lubbock, TX. 24 months probated suspension of EMT certification through March 14, 2003. EMS Rules 157.37(c)(2)(3)(G), ...the offenses listed in subparagraph (F)(i)-(viii)of this subsection are not exclusive in that the department may consider other particular crimes in special cases in order to promote the intent of the EMS Act and these sections.

these sections.

* Turner, Charles L., Fort Worth, TX. Twelve months probated suspension of EMT –P certification through May 30, 2002. EMS Rules 157.37(c)(2)(3)(G)... the offenses listed in subparagraph (F)(i)-(viii) of this subsection are not exclusive in that the department may consider other particular crimes in special cases in order to promote the intent of the EMS Act and these sections.

UTMB Correctional Managed Care, Huntsville, TX. 12 months probated suspension and a \$4,000 administrative penalty probated through November 2001. H&SC 773.050(a), 773.041(b) and EMS Rules 157.19(c)(1)(A), (C) and (U), and 157.11(d)(1)(A), each basic life support emergency medical services vehicle when in service must be staffed by at least two individuals certified as emergency care attendants or certified at a higher level of training; a person may not practice as any type of emergency medical personnel unless the person is certified under this chapter and rules adopted thereunder; violates any rule or standard that would jeopardize or has a potential negative effect on the health or safety of a patient.

Uvalde EMS, Uvalde, TX. 12 months probated suspension and a \$6000 administrative penalty probated through December 2001. EMS Rules 157.16(b) and (c) and (d)(1), (4), (14) and (19), a licensed EMS provider may not claim a defense when one or more staff members, acting with or without the consent and knowledge of the license holder, commit(s) multiple violations in this section, or perform(s) contrary to EMS standards while on EMS business for the provider; violating any provision of the H&SC, Chapter 773, and/or TAC Title 25, as well as Federal, State or local laws, rules or regulations affecting, but not limited to, the practice of EMS; falsifying any EMS record, patient record or report, or making false or misleading statement in a oral report, or destroying a patient care report; misappropriating medications, supplies, equipment, personal items, or money belonging to the patient, employer or any other person or entity; illegally possessing, dispensing, administering or distributing, or attempting to illegally dispense, administer or distribute controlled substances as defined by the H&SC, Chapter 481 and/or Chapter 483.

Van Burskirk, Michael, McKinney, TX. 12 months probation of EMT-Instructor certification through September 2001. EMS Rules 157.64(2)(a)(G) and (R), compromises the department approved course examination process; fails to comply with the responsibilities of a course coordinator, program instructor or examiner as specified in 157.61-157.63.

Wankowski, Jason D., Mertzon, TX. 12 months

Wankowski, Jason D., Mertzon, TX. 12 months probated suspension of EMT certification through March 2, 2002. EMS Rules 157.37(c)(2)(3)(G), ...the offenses listed in subparagraph (F)(i)-(viii) are not exclusive in that the department may consider other particular crimes in special cases in order to promote the intent of the EMS Act and these sections.

Warner, Aaron Denis, Harlingen, TX. Twenty-four months probation of ECA certification through August 4, 2001. EMS Rules 157.44, 157.51(b)(16) and (c) and 157.53, misdemeanor conviction while certified.

Warren, Ganesa K., Houston, TX. Twelve months probated suspension of EMT certification through February 12, 2002. EMS Rules 157.37(c)(2)(3)(G),...the offenses listed in subparagraph (F)(i)-(viii) of this subsection are not exclusive in that the department may consider other particular crimes in special cases in order to promote the intent of the EMS Act and these sections.

Waterwood EMS and Security, Huntsville, TX. 24 months probation through July 2001. EMS Rules 157.19(c)(1)(U), violates any rule or standard that would jeopardize the health or safety of a patient or that has a potential negative effect on the health or safety of a patient.

Wesley, Larry, Houston, TX. Decertification of EMT certification effective January 22, 2001. EMS Rules 157.51(b)(1), (2), (5), (23) and (25), fails to follow the EMS standards of care in the management of a patient; fails to administer medications and/or treatments in a responsible manner in accordance with the medical director's orders or protocols; fails to comply with the terms of a probation or suspension; fails to comply with H&SC, Chapter 773, and rules adopted thereunder; and violates any rule or standard that has a potential negative effect on the health or safety of a patient, the public or other EMS personnel.

Wheeless, Clinton D., Diana, TX. 12 months probation of EMT certification through July 28, 2001. EMS Rules 157.44(c)(2)(B)(vii), the offenses listed in clauses (i)-(vi) are not inclusive in that the department may consider other particular crimes in special cases in order to promote the intent of the EMS Act and these sections.

White, Peter S., Edna, TX. 12 months probated suspension of EMT-I certification through October 26, 2001. EMS Rules 157.37(c)(2)(3)(G), the offenses listed in subparagraph (F)(i)-(viii) of this subsection are not exclusive in that the department may consider other particular crimes in special cases in order to promote the intent of the EMS Act and these sections.

Wieburg, Tomey J., San Angelo, TX. 12 months probated suspension of EMT certification through October 26, 2001 EMS Rules 157.37(c)(2)(3)(G), the offenses listed in subparagraph (F)(i)-(viii) of this subsection are not exclusive in that the department may consider other particular crimes in special cases in order to promote the intent of the EMS Act and these sections.

Wilganowski, Kevin L., Houston, TX. Twelve months probated suspension of EMT-P certification through November 1, 2001. EMS Rules 157.37(c)(2)(3)(G), the offenses listed in subparagraph (F)(i)-(viii) of this subsection are not exclusive in that department may consider other particular crimes in special cases in order to promote the intent of the EMS Act and these sections.

Windham. Todd L., Orange, TX. Twelve months probated suspension of ECA certification through February 5, 2002. EMS Rules 157.37(c)(2)(3)(G)...the offenses listed in subparagraph (F)(i)-(viii) of this subsection are not exclusive in that the department may consider other particular crimes in special cases in order to promote the intent of the EMS Act and these sections.

Womack, Jason M., Fort Worth, TX. Forty-eight months probated suspension of EMT certification through November 1, 2004. EMS Rules 157.37(c)(2)(3)(G), the offenses listed in subparagraph (F)(i)-(viii) of this subsection are not exclusive in that the department may consider other particular crimes in special cases in order to promote the intent of the EMS Act and these sections.

Wright, Harold A., Tomball, TX. 12 months probated suspension of EMT certification through October 4, 2001. EMS Rules 157.37(c)(2)(3)(G), the offenses listed in subparagraph (F)(i)-(viii) are not exclusive in that the department may consider other particular crimes in special cases in order to promote the intent of the EMS Act and these sections.

Zachary, Jessy L., Humble, TX. 48 month

Zachary, Jessy L., Humble, TX. 48 month probated suspension of EMT-I certification through December 5, 2004. EMS Rules 157.37(c)(2)(3)(G), the offenses listed in subparagraph (F)(i)-(viii) are not exclusive in that the department may consider other particular crimes in special cases in order to promote the intent of the EMS Act and these sections.

^{*} These listings are new this issue. Denials, revocations and administrative penalties will be printed in three consecutive issues. Suspensions will be printed until suspension or probation expires.

Meetings & Notices

Calendar

July 16 - August 14. 2001. Phlebotomy course (upon completion, eligible for ASCP national certification exam). Deadline to register July 9, 2001. Contact Marilynn 281/756-3807.

July 21-22. ACLS contact hours for nurses \$150.00 includes textbook. Pearland College Center 281/756-3807 or 281/388-4904.

August 3, 2001. Critical Care Conference. 5p.m. at Scott and White Memorial Hospital, CNE and registration fees TBA. Contact Nan Greeno, 254/724-4798 or e-mail nangreeno

@swmail.sw.org. August 6-7, 2001. 7th Annual Brooke Army Medical Trauma Symposium. Physicians/Dentist/Nurses/Paramedics/EMTs, in San Antonio, TX. Gonzales Convention Center. CE credit. \$150. Register online at http://trauma7.troy.com.

August 11-12. PALS Course. Contact hours for nurses \$200.00/ includes textbook. Pearland College Center. Contact 281/756-3807 or 281/388-

August 23-24, 2001. GETAC and Committee Meetings. Contact Laura McCarty at 512/834-6700 oremail Laura. McCarty@tdh.state.tx.us. For more information visit www.tdh.state.tx.us/hcqs/ems/ governor.htm.

August 25-26, 2001. SPEMS Conference with pre-conference classes and golf tournament. Holiday Inn Park Plaza, Lubbock, \$65.00. CE

available. 1-800-80-SPEMS.

September 14 & 15 2001. Trauma Nursing Core Course at Scott and White Memorial Hospital 18 CEs RNs/200.00, 12 CEs for LVNs / \$12.00, 12 CEs for EMTs/Paramedics/\$150.00. Contact Nan Greeno, 254/724-4798.

September 21-22, 2001. The 17th Annual Tri-

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. Please send in your calendar items six weeks in advance to make the next issue.

Cost: Calendaritems are run at no charge. Calendar items run in the meeting 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 Health, 1100 West 49th Street, Austin, TX 78756-3199. Call 512/834-6700 if you have a question about the calendar section.

State Trauma Symposium Saturday and Sunday at the Amarillo College Business and Industry Center, 1314 South Polk Street in Amarillo, TX. Breaks and meals. Jeff Doiron 806/354-6086.

November 1, 2001. Trauma Symposium Scott and White Memorial Hospital CEs and registration TBA. Contact Nan Greeno, 254/724-4798.

November 15 & 16, 2001. Advanced Trauma Nursing Course at Scott and White Memorial Hospital 15.6 CEs for nursing \$150.00. Contact Nan Greeno, 254/724-4797.

Jobs

Fire Chief: City of McAllen, all fire department operations. Coordinates Emergency Management operations. BA degree in fire science, public administration or equivalent. 5 years exp. in upper level supervision of a fire department. Salary \$46,000 - \$56,920, benefit package. Resumes to City of McAllen, Dir. of Human Resources, P.O. Box 220, McAllen TX 78502-0220.

Director Of Operations: Unique Ambulance is accepting applications. Applicant must be a paramedic with experience in day to day operations of ambulance company. Fax resume along with salary request to 281/499-6898.

EMT/EMT-I/Paramedic: Marble Falls Area EMS Inc. Full-time positions. Our employees receive retirement, medical/dental insurance, life insurance and athletic club memberships. Currently run average of 175 calls per month from two stations. Call 830/693-7277 or mail resume to P.O. Box 296 Marble Falls, TX 78654. +

Fire Rescue Officer: City of New Braunfels accepting applications for the Fire & Rescue Dept. Must be a TX Certified FF and possess a minimum TDH EMT Cert, a valid TDL Class A or Class B. Position closes 08/17/01 at 5:00p.m. For more info call 830/608-2100, 424 South Castell, New Braunfels, TX 78130 or www.ci.newbraunfels.tx.us.+

Paramedics: Faith Community Hospital EMS is accepting applications. Job will include MICU, ER, cardio-pulmonary rehab. Contact J.D. Hailev EMS Director at www.FaithCommunity

Hospital.com or 940/567-6633.+

Émergency Medical Services Faculty: Northeast Texas Comm. College. Associate's degree preferred and teaching experience in EMS required. Request application from 903/572-1911 or NTCC, PO Box 1307, Mt. Pleasant, TX, 75456, or download application from www.ntcc.cc.tx.us. Must submit NTCC application, resume, transcripts of all college work, and two letters of recommendation. +

Paramedics: Knox County EMS is currently accepting applications for full and PRN Paramedics. Competitive salary with benefits. ACLS required. Will consider EMT-I/current paramedic student. For more information contact Lissa at 940/658-3535.+

Paramedics, EMTs: MetroCare EMS is currently seeking experienced full and part time Paramedics and EMTs. Competitive wages, 24 hour shifts, 911/transfer system. Insurance and benefits available. Fax resumes to 409/842-1656 or send to MetroCare EMS, Inc. C/O Human Resources, 4770 Washington Blvd, Beaumont, TX 77707. Contact Kyle Knupple or Tate McIntire at 888/276-2267. +

EMTs/Paramedics/Firefighters: City of Edna EMS and Fire Department. A 24-hour ALS and fire department. Must be Texas certified. Call Loyd Chase 361/782-3159 for application or email LCHASE@JUNO.COM.+

Paramedics: Terlingua Medics, Inc. has fulltime staff positions available. MICU level, rescue and expanded scope care to Big Bend area. Send resume to Terlingua Medics, Inc., P.O. Box 290 Terlingua, TX 79852, 915/371-2536, email tmedics@brooksdata.net.+

Paramedic: Alpine EMS-WTAS has one paramedic position available immediately for city/ county 9-1-1 calls and interfacility transfers. Contact Mike Scudder at 915/837-1119 or mail resume to Alpine EMS-WTAS, PO Box 338 Alpine,

Firefighters/Fire Use Module Crew/Engine Crew/Helitack/Dispatchers/Forestry Technicians/ Engine Foreman/Helitack Supervisors: National Park Service Team is currently hiring in Wildland Fire Management. Areas with the most needs: Everglades National Park, FL; Bandelier National Monument, NM; Ozark National Scenic Riverways, MO; Buffalo National Rivers, AR; Indiana Dunes National Park, IN. To apply: www.nps .gov/fire/jobs or call 1-866-NPS-FIRE. +

Paramedics: South Lake Houston EMS is now accepting applications for paramedics full-time 24/ 72 schedule. Competitive salaries with benefits. Call Joe Fress at 281/459-2807 or send resume to South Lake Houston EMS, 14418 Beaumont Hwy,

Houston, TX 77049.+

Licensed Paramedic/Safety Officers: Health, Safety, & Environmental (H.S.E.) Officers interested in working offshore. Qualified candidates will be licensed paramedic. 2-3 years of offshore experience is desired. Excellent insurance and benefits. Contact Horizon Offshore Contractors, Inc., 8200 Yacht Club Road, Port Arthur, TX 77642, 409/962-6682.

Firefighter/Paramedic: Certified Firefighter/ Paramedic 2,590/mo. City pays 75% of family health insurance. Apply at or send resume to: City of Kerrville, Personnel Dept., 800 Junction Hwy, Kerrville, TX 78028. 830/792–8300 or fax 830/792-3850.

Communication Medics: Austin/Travis Co. EMS is seeking experienced communication medics to fill full-time positions that will be created by expansion. Austin/Travis Co. EMS offers individuals an opportunity to work in a progressive, clinically sophisticated environment. Competitive salaries from \$33,500 - 38,000 depending on certification level, excellent benefits, great opportunities for career advancement. For more information call 1-888-448-2367 or visit us on the web at www.austinems.com.'

EMT or Paramedic: Alpha Therapeutic Corp., an international leader in the collection, manufacturing, and distribution of biological, injectable products harvested from human blood plasma is seeking a medical associate to work in our Killeen, Texas Center. Full-time opportunity for EMT or Paramedic. You will perform initial health evaluations on plasma donors to determine suitability for plasma donation. We offer competitive compensation and full benefit package. Fax or e-mail your resume to B. Fleming, 661/299-9442 or flemingb@pacbell.net.*

Paramedics: Northwest Texas Healthcare System. Full time positions for the Amarillo area. Call 806/354-1901 or fax resume to 806/354-1656 or

Meetings & Notices

mail application: PO Box 1110; Amarillo, TX 79105. Website: www.nwtexashealthcare.com.*

Paramedic: \$500 sign-on bonus (restrictions apply) St. Joseph Health System in Bryan/College Station. Full-time paramedics. Excellent pay & benefits. Call 979/774-1818, or mail/fax a resume to ST. Joseph Employment Office, 2601 Osler Blvd., Bryan, TX 77802; fax number 979/774-0775.*

EMTs: American Medical Response, full-time and part-time EMTs in our San Antonio operation. Comprehensive compensation and benefit packages. Resumes: AMR attn. Mark Blakeley, 2821 S Parker Rd., Aurora, CO 80014 or fax to 877/932-9267 email: resume@amr-ems.com. Visit our website at www.amr-inc.com.*

Medical Specialist: One year experience as a paramedic with 9-1-1 provider, volunteer experience may be considered. EMT paramedic certification. Apply at Harris Co. Human Resources - 1310 Prairie, 2nd Floor, Houston, Texas 77002, or request an application by mail if not residing in Houston. For information contact Renee Armstrong 713/755-2717 or Maria Briones 713/755-2723.*

Administrative Director for Orange County Ambulance Service, Inc. Business or medical degree required. EMS background preferred. Send resume to personnel department. PO Box 1071, Orange, TX 77631. Contact Missy Busby office manager 409/883-7214, fax 409/883-0388.*

EMS Instructor: Instructor for New Caney High School Emergency Medical Technology Program in Montgomery Co. Contact Jim Brecka at 281/354-3505 ext. 234 or www.highwired.com.*

EMT, EMT-I and EMT-P: Texas West Ambulance is accepting applications for full or part time positions for the Midland/Odessa area. For more info call 915/570-4892 or fax resume to 915/520-2501. Mail to PO Box 50542 Midland, TX 79710.*

Paramedics, attendants: Experienced Paramedics and attendants needed for suburban 9-1-1 system. 20,000 calls annually. Competitive salary, benefits. Fax or send cover letter to: Montgomery County Hospital District EMS, PO Box 478, Conroe. TX 77305, 936/532-5094.*

roe, TX 77305, 936/532-5094.*

EMT- BIP, FT/PT: Competitive pay lots of overtime. Paid medical/dental, vacation, retirement plan call 713/771-4222, Fax 713/771-8449 or email us at unitedambulance@argolink.net.*

For Sale: 1991 Ford E350 National Type III ambulance, 1990 Ford E350 Collins Type III

For Sale

ambulance and 1993 Ford E350 Wheeled coach Type III ambulance. Call Mike Scudder, Alpine EMS-WTAS, 915/837-1119 for price information. +

For Sale: 1996 Collins Type III ambulance, 95,000 miles, good maintenance records, dual Redi-Line generators, air and O₂H cylinders, designed for critical care transport, \$15,000. Contact Jack Sosebee 817/885-4281.+

Galveston College is offering courses in EMT(6 semester hrs), EMT- I (9 semester hrs),

Fax items for this section to 512/834-6736

There is not a charge to run items in the calendar.

Miscellaneous

Paramedic II (10 semester hrs), EMS- Research (3 semester hrs). Contact Chris Nollette, Galveston College 44015 Avenue Q, Galveston, TX 77550, 409/763-6551 ext 114, cnollette@gc.edu+

San Antonio Business Services: Professional medical billing and collection services for 16 years. Call Rayleen at 210/696-0028.+

Cowboy Investigations: Pre-employment and discreet investigations for your organization. Contact Brett Shayler at 817/579-1194 or mail inquires to 1407 N. Plaza Dr., Granbury, Texas 76048.+

Angelina College Fire Academy/Lufkin conducts three basic recruit fire academies per year plus fire and arson investigator, fire inspector certification and others. Contact 936/633-5362.+

EMCert provides online CE for EMS professionals. Individual and group subscriptions with customized features. Call toll-free 877/EMS-HERO or go to www.emcert.com.+

EMS/Fire Billing: Electronic, standard and individualized reports, education on billing guidelines for federal and state billing. Contact Health Claims Plus at 888/483-9893 or visit www.healthclaimsplus.com or hcp@imsday.com.+

CE Solutions EMS Continuing Education is accepted in more than 40 states. Internet, software and workbook formats. Click on www.ems-ce.com for 2 free CE hours (first visit) or call toll-free 1-888/447-1993.+

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 or fax 281/922-4429.+

Looking for CE? Call Master Train at 210/832-0422 to inquire about schedules for CPR training, EMT CE, ACLS, and others.+

Texas EMS Consulting Service. Evaluation of EMS/site review, advanced medical life

support, QA/QI services, prep class for TDH paramedic exam. Extensive mgmt exp as FD lieutenant/EMS director. Contact Max Smith, LP, pager with voice mail, 254/ 918-9033, texasems@hotmail.com, www.maxpages.com/emsservices.+

On - line CE specializing in EMS, real estate, social work and hazmat (safety). www. universityofthenet.com or call 214/293-7193.+

Provider Billing Service: Electronic claims submission and collection experience. Ambulance billing electronically. Call 817/279-7386 or Fax 817/279-9658.+

DriveCam Digital Video Systems, a tool to insure safe driving. DriveCam continuously monitors audio, visual and G-force inside the vehicle. Craig Gray,713/761-7569. Website www. drivecam.com.

Training: EMT*S offers ECA - Paramedic Programs, CPR, basic first aid, and all levels of HAZMAT. Provide CE hours at no charge for Texas and National recertification. Contact W. Younger at 915/855-0083.+

Rope Rescue Training: Training for Fire, EMS, Law Enforcement and Industry in Technical Rescue, Rope Rescue, Fire Rescue, Cave Rescue, Vehicle Rescue and Wilderness First Aid. John Green 361/938-7080 www.texasrope rescue.com

Express Billing; Electronic billing including Medicare, Medicade and Comercial Insurance. Medicare electronic remittance download for accurate posting. Custom reports, consulation for EMS office and field employee on HCFA guidlines.Contact 877/521-6111, 713/484-5700 or fax 713/4845777. Website eexpressbill@aol.com.

Providers Billing Service: Electronic claims submission and collection. Local or long distance we handle all claims in the Texas area. Call 817/910-2283 or 817/910-2197 ask for Mascha or fax 817/910-2198. +

- + 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.

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: Sutton County EMS



Front row, from left, Treva McReynolds, EMT-B; Melinda Kessinger, EMT-B; Carla Crites, EMT-B; Carlos Sessom, EiMT-I istanding front); Betsy Knight, EMT-B; Jackie Smith, EMT-B; Alta Alwine, EMT-I; Rheama Benes, EMT-B (standing front); Maray Cearly, EMT-B; Carla Luttrell, EMT-B; and Rose Butler, EMT-B.

Back row, from left are Patrick Campbell, EMT-P, EMS coordinator; Karen Frasier, EMT-P; Pascal Allison, EMT-P; Monica McGee, EMT-P; Kate Kinder, EMT-B; Keith Butler, LP; Tim Thorp, EMT-P; Tl Green, EMT-B; Leslie Thorp, EMT-I; Echi Samaniego, EMT-P; Glenn Husley, EMT-I; Billy Lippman, EMT-B; Dr. Charles Pajestka, MD, medical director.

Number of personnel: Sutton County EMS has 24 members including two full-time employees. We have seven paramedics, five EMT-Is and 12 EMTs.

How many years in service: Sutton County EMS was established in 1975 with one Type I ambulance housed at Lillian Hudspeth Memorial Hospital. Six volunteer personnel provided service. In 1984, the EMS organization was formed with extensive training and recruiting of more certified personnel as our goal. Also, we constructed our own facility, which consisted of two ambulance bays and

Bureau of Emergency Management Texas Department of Health 1100 West 49th Street Austin, Texas 78756-3199 Periodical Rate Paid At Austin, an office. In 1994, with the help of generous contributions from the citizens of Sonora and Sutton County, we added a third ambulance bay and large classroom.

Number of units and capabilities: Three type III units licensed as BLS with ALS capability. Each unit is staffed with three certified personnel.

Number of Calls: Call volume averages 475 calls per year. We also provide mutual aid to the surrounding counties when requested. We are the sole provider of EMS service for Sonora and Sutton County. Sutton County, considered a frontier county, has a population of approximately 5,000 and is 1,496 square miles in size. It sits at the juncture of two major highways: Interstate 10 runs east/west through Sutton County, and from north-to-south, Highway 277 is one of the main routes to Mexico.

Current projects: Sutton County EMS has two TDH-certified coordinators, eight TDH-certified instructors and six AHA CPR instructors. We provide training through our ongoing CE program and conduct all levels of EMT training. We offer first aid classes and all levels of AHA CPR classes to our citizens and local students and teachers. We take blood pressures and staff the registration booth at the annual health fair. We also are very active in Regional Advisory Council (TSA-K) with two members on the executive board. For the past two years, Sutton County EMS hosted the Concho Valley EMS Expo, sponsored by the Concho Valley RAC. Sutton County receives medical direction from Dr. Charles R. Pajestka MD, at our Level IV trauma facility, Lillian M. Hudspeth Memorial Hospital. The nearest Level III trauma facilities are located in San Angelo, some 70 miles away. Sutton County EMS strives to provide the highest level of quality prehospital care in the frontier region. Our motto is "People Who Care" and the pride and dedication of the personnel show that.