The Oregon Emergency Medical Services and Trauma Systems Program is charged with developing and regulating systems that provide quality emergency care to victims of sudden illness or traumatic injury. This update is part of an on-going effort by the program to improve communications among and between providers and stakeholders, an element staff and leadership consider crucial in our ability to meet our responsibilities. If you know of an individual or group that does not receive this monthly update, but would benefit from its contents, please contact Mellony Bernal, program special assistant at 971-673-0522 or at mellony.c.bernal@state.or.us.

EMS PROGRAMS

New Rules
A revised version of the Oregon Administrative Rules Chapter 333 Division 265 – Emergency Medical Technicians is being proposed. These draft regulations are available on the Web site http://www.oregon.gov/DHS/ph/ems/div265_notice_rule.pdf. You may also contact our office at 971-673-0520 for a copy. Public hearings on the rules will be held in La Grande on Nov. 26; in Eugene on Nov. 29; and Portland on Dec. 7. Written comments also may be submitted to:

Oregon Emergency Medical Services and Trauma Systems Program
800 NE Oregon Street
Suite 465A
Portland, OR 97232-2162

Comments must be received by 5 p.m., Dec. 11, 2007.
Preparedness Exercise

TOPOFF4 began Monday, Oct. 15, with Portland, Guam and Phoenix, AZ, the targets of the drill. The goal of TOPOFF, an abbreviation for “Top Officials,” was a focus on disaster coordination, communication and response at local, state and federal levels. From a prehospital/hospital standpoint, all hospitals in Portland played real-time the first one to three days of the event. AMR/Metro West was at the drill site with a total of 15 ambulances on the first day only.

Activities

> The EMSC Advisory Board met on Oct. 19 in Seaside and discussed the priorities for the EMSC grant and program activities. Additional information can be found at [http://egov.oregon.gov/DHS/ph/ems/emsc/index.shtml](http://egov.oregon.gov/DHS/ph/ems/emsc/index.shtml). Beyond that, Philip Engle at 971-673-0525 or philip.p.engle@state.or.us has more information.

> The EMSC Conference was in Seaside on Oct. 20-21. Two-thirds of the attendees were EMS personnel. The other attendees were nurses. The conference agenda can be found at [http://egov.oregon.gov/DHS/ph/ems/emsc/2007emsc_brochure.pdf](http://egov.oregon.gov/DHS/ph/ems/emsc/2007emsc_brochure.pdf). Seaside also will be the location of the 2008 EMS for Children Conference on Oct. 10-12. For additional information contact Philip Engle at 971-673-0525 or philip.p.engle@state.or.us.

> Liz Morgan represented the EMS & Trauma Systems Program at the State Communications Interoperability Plan (SCIP) workshop. The workshop was to identify missing or weak components in Oregon's plan and set the stage for setting priorities for future funding and projects.

> Sixty nine new EMT-Basics were certified in September, as were five EMT-Intermediates and 10 Paramedics. Nine complaint files were closed. There was one revocation. Fifteen ambulances were licensed in September.

> An electronic tracking file for Probationers was established to replace the previous paper system.
> The Department of Human Services EMS Program was awarded funds to conduct a First Responder to EMT-Basic Bridge course for the Oregon State Patrol. Donna Wilson and Leslie Huntington will teach the course, which will begin in January and be conducted through Chemeketa Community College.

> A Pediatric Emergencies for Prehospital Providers course was held in Klamath Falls on Oct. 24-25.

> Liz Morgan acted as certifying officer for an EMT-B/I practical exam in Roseburg.

> The mobile training unit staff served as disaster drill evaluators for Leaburg and Banks; each drill had 12 to 15 patients. The Banks Fire functional exercise included personnel from Hillsboro, Metro West, Cornelius, Newburg, Forest Grove, Life Flight (unable to fly due to weather), and Washington County Sheriff’s Office. Tillamook Ambulance and Fire and Forest Grove Fire served with the MTU as observers. Another functional exercise is scheduled for spring 2008.

> A number of issues have surfaced relating to exam control and quality assurance of EMT-Basic testing. The EMS/Trauma program will be looking into these issues in an effort to bring more accountability to the exam process.

**EMT-Intermediate Information**

> More than 500 EMT-Intermediates have not completed the mandatory bridge course as of the end of September.

> An EMT-Intermediate Bridge course is scheduled in Canyonville on Nov. 2-4, Nov. 16-18, and Nov. 30-Dec. 2. Those interested in signing up should contact Leslie Huntington at 503-931-0659 or at mtu2@teleport.com

> Other agencies conducting or scheduling a bridge course this year include Mercy Flights (Medford), Gladstone, TVFR, Eugene and Mollala.

> Reminders will be sent in December and January to all EMT-Intermediates who have not completed the course, and training officers will be mailed a list of members from their respective agencies who lack this requirement.
TRAUMA

Meetings
The State Trauma Advisory Board will meet Oct. 28 at Tualatin Valley Fire & Rescue headquarters to facilitate debriefing of the TOPOFF exercise. Meeting dates and agenda will be on the Web site http://www.oregon.gov/DHS/ph/ems/trauma/stab.shtml#upcoming.

For Trauma Advisory Board meetings scheduled for areas 2, 5, 6, see http://www.oregon.gov/DHS/ph/ems/trauma/atab/index.shtml

Surveys
Focused site surveys occurred at the following hospitals: Silverton, Providence Newberg, Curry General, Coquille Valley, Bay Area in Coos Bay, Lower Umpqua in Reedsport and Peace Harbor in Florence. Reports are being finalized for Medford Ashland, Springfield, Stayton, Salem and McMinnville. A focused survey in October will be done in Lakeview. Other eastern Oregon surveys will be scheduled.

ANNOUNCEMENTS

The annual influenza vaccination -- the Centers for Disease Control and Prevention recommends emergency responders receive an annual influenza vaccination.

Unvaccinated health care workers, including emergency responders, (60 percent of them each year) can spread influenza to persons who are most vulnerable. This virus is often spread to others in the 72 hours before symptoms appear.

Adults may be asymptomatic while transmitting influenza to patients, co-workers and family members, making them effective vectors. Children may transmit seven to 10 days before onset of symptoms.

Preventing the spread of disease is one of the Emergency Medical System’s key missions. Vaccinating against influenza is a responsibility that helps protect you, vulnerable populations you serve, your co-workers and your families.
Don’t like shots? No worries. Now there’s FluMist!
For additional information see http://www.oregon.gov/DHS/ph/acd/flu/fluvox.shtml

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