The office of the Oregon Emergency Medical Services (EMS) and Trauma Systems Program is open Monday through Friday, 8 a.m. - 4 p.m., in Suite 465A of the Portland State Office Building, 800 NE Oregon Avenue, Portland.

**EMT Regulations**

The updated EMT regulations are awaiting enactment. The EMS and Trauma Systems Program will provide notification when the regulations are adopted. We would like to thank the many people who took time to offer comments on the draft regulations.

**EMS Preparedness Plan**

The EMS and Trauma Systems Program and Oregon Office of Rural Health will jointly convene four meetings across the state to discuss the Oregon EMS Mass Casualty Incident Plan and EMS Communications Plan.

The meetings will include a facilitated discussion of the elements in the plan.

If you would like to send a representative to one of the meetings, e-mail Kassie Clarke at clarkek@ohsu.edu for registration. Lunch will be provided at each meeting for those who register in advance. Details will follow your RSVP. The meetings are scheduled for:

March 6, Portland, 9 a.m. to 2 p.m.
April 5, Medford, 10 a.m. to 2 p.m.
April 10, Bend, 12:30 p.m. to 4 p.m.
April 12, Pendleton, 1 p.m. to 4 p.m.

**Electronic prehospital reporting pilot project**

In conjunction with the Oregon Office of Rural Health, the EMS and Trauma Systems Program will conduct a pilot project to study the usefulness of a Web-based data entry system for prehospital care reports. The study aims to identify the costs and benefits of Web-based Patient Care Record entry. Comments from Oregon EMS agencies will help us determine whether a system similar to those recently established in Idaho and Washington would be useful in Oregon.

The pilot project will use ImageTrend State Bridge, a product that has been adopted in both Washington and Idaho. Some agencies may choose to test ImageTrend Field Bridge, a similar product that can prepare a Patient Care Record on a local computer (not needing broadband Internet access). Copies of
State Bridge are available without cost to any Oregon EMS agency. The pilot has a limited number of Field Bridge copies available.

In addition to being able to prepare and print a Patient Care Record, the ImageTrend product can prepare many reports that would be useful to EMS administrators, supervising physicians and QA officers.

Trainings are planned for the following dates:
- Northeast Oregon: April 10, 11 and 12
- Central/Southern Oregon: May 15, 16 and 17
- Webinar accessible by any agency: TBD.
The times and locations of the trainings will be determined soon.

We will contact EMS providers in Northeast Oregon in late February and March. You can find out more by contacting Will Worrall at 971-673-0536 or william.h.worrall@state.or.us.

**Free Pediatric Training Resource CD-ROM**
EMSC is offering Teaching Resource for Instructors in Prehospital Pediatrics (TRIPP) on CD-ROM. TRIPP was developed to bridge the knowledge gap that exists in this specialized field. It is an encyclopedic resource that furnishes EMT instructors with fundamental background knowledge about assessing and treating critically ill and injured children so that they can provide more effective training. While intended primarily for instructors who teach the pediatric sections of the revised EMT-Basic National Standard Curriculum, TRIPP can benefit all emergency medical personnel interested in prehospital care of children. If you would like a copy contact Philip Engle at 971-673-0525 or Philip.p.engle@state.or.us.

**Supervising Physicians Forum** - Friday, April 25, in Eugene.
The agenda will include quality improvement and patient safety processes; protocol comparisons; disaster preparedness; and public access defibrillation programs.

**Oregon Medical Board EMS Advisory Committee News**
The committee considered a change in the Recommended EMT-Intermediate scope of practice from “Analgesics” to “Analgesics for Acute Pain” (for morphine, nalbuphine, ketorolac, and fentanyl) to eliminate EMT-I use of transdermal fentanyl for chronic pain. Also considered was a change in the EMT-I scope of practice to add lidocaine as "Intraosseus infusion anesthetic" to allow EMT-I to use IO in conscious patients.

The committee determined that obtaining and transmitting 12 lead ECGs is considered noninvasive diagnostic monitoring and thus allowed by first responders, EMT-Basics, and EMT-Intermediates. Interpretation of 12 lead ECG for ST elevation is an EMT-P skill. An EMT-I can do ECG rhythm interpretation only, which does not include ST segment interpretation.
Suggestions for proposed changes to the first responder and EMT scopes of practice are welcomed by the committee. In order for the EMT Advisory Committee to consider such proposals, adequate background information will be sought, including:

- What are the advantages of the proposed change?
- What are the disadvantages or risks of the proposed change?
- Who else might be affected by the change?
- Who might oppose the change?
- What are the educational requirements of the proposed change?
- What are the financial impacts of the proposed change?
- Is the proposed change currently being done in other EMS systems in the US? In other countries?
- What research or evidence is there that the proposed change is useful, beneficial or works?

An online form will be developed to help facilitate this process.
Submitted by Committee Chair Paul Rostykus M.D.

Communications Report
The Joint Advisory Committee on Communications Capabilities of Emergency Medical and Public Health Care Facilities (JAC) has submitted its report on emergency communications to Congress. The JAC recommended transitioning to broadband networks that can enable interoperable, real-time voice and data transmission. The JAC also proposed to ensure that all broadband networks are managed to limit congestion and prioritize emergency traffic and that a nationwide broadband network dedicated to emergency-use only be developed. The JAC was established by the Chairman of the Federal Communications Commission and the U.S. Department of Commerce pursuant to the Implementing Recommendations of the 9/11 Commission Act of 2007. The report can be downloaded at http://energycommerce.house.gov/Press_110/JAC.Report_FINAL%20Jan.3.2008.pdf.

Happy Birthday 9-1-1!
February 16, 2008 marks the 40th anniversary of the first ever 9-1-1 call. This historic call was placed from the Haleyville, Ala., City Hall by Alabama Speaker of the House Rankin Fite to U.S. Rep. Tom Bevill at the city’s police station. Learn more about the history of the 9-1-1 system from the National Emergency Number Association at http://www.nena.org/.

EMS Medical Directors Information Update
We are attempting to correct information in our database concerning EMS medical directors for Oregon EMS agencies. Please e-mail Will Worrall at william.h.worrall@state.or.us with the following information:

1. Name of your EMS organization
2. Name of your EMS medical director (if more than one, please identify each physician)
3. EMS medical director’s phone number
4. EMS medical director’s address
5. EMS medical director’s e-mail address

EMSC Prehospital Survey Request
Approximately half of the Oregon transporting EMS agencies have responded to the request to complete this survey. We are required to meet federal performance measures that evaluate the effectiveness of the EMS for Children program. The performance measures evaluate the capacity of a state to provide pediatric emergency care at the scene of an emergency and include the ability to provide on-line and off-line pediatric medical direction, and the availability of pediatric equipment.

Please assist the Oregon EMS for Children Program by completing the survey. If you have specific questions or need assistance, contact Philip Engle, EMSC program manager, at 971-673-0525 or philip.p.engle@state.or.us.


STOP Stroke Coalition Sponsors Capitol Hill Briefing
The STOP Stroke Coalition sponsored a legislative briefing January 16 for U.S. Senate Health, Education, Labor and Pensions (HELP) Committee staff to discuss advances in stroke care, what stroke systems of care and primary stroke centers are, and why the Stroke Treatment and Ongoing Prevention Act (STOP Stroke Act) is needed. It is anticipated the bill will be scheduled for mark-up and consideration by Congress. Additional information on stroke prevention and related links are available at http://www.strokeassociation.org.

National EMS Education Standards
Ritu Sahni, MD, Oregon EMS Medical Director participated in DC meeting of national stakeholders to work on the National EMS Education Standards. These standards will replace the current National Highway Traffic Safety Administration curricula that are referenced in Oregon rules. It is expected that these curricula will be available in 2010.

Intermediate in a Box
Tualatin Valley Fire & Rescue, Lake Oswego Fire, and Eugene Fire have jointly developed an Intermediate Bridge Course. This course includes DVDs of the didactic material. The course still requires some group discussion and work with your training officer is still required. Please have your training officer contact.
Eric Schult at TVFR eric.schult@tvfr.com
Karen Anderson at Eugene Fire karen.l.anderson@ci.eugene.or.us
EMS Program Activities
During January, 11 new ambulances were licensed, 20 fingerprint background checks were conducted and 269 Law Enforcement Data System (LEDS) Oregon background checks were processed. The program received seven new complaints and opened four new investigative files. The program placed one certificate holder on suspension; one voluntary surrender was accepted, and two individuals were placed on probation. Five investigations were closed. Sixteen certificate holders are completing court-ordered probation after DUII incidents (monitored by the EMS/TS program staff), and 15 individuals currently are on department stipulated probation.

Kristen Turley, Compliance Specialist 1 in Prehospital Standards Unit of EMS departed on February 15 to take a position with the Department of Public Safety Standards and Training Unit (DPSST) in Salem. We thank her for her hard work and wish Kristen good luck in your new position.

Prehospital Standards Unit will be recruiting at the beginning of March for a Compliance Specialist 3 (Prehospital Standards Representative). This position will be responsible to conduct inspections and licensing of ambulances and ambulance agencies, determine whether an investigation is warranted on complaints received about certificate holders who are First Responders and EMTs. Applicants must hold a current State of Oregon certification as an Emergency Medical Technician-Paramedic. Registration by the National Registry of EMTs within one year of employment will be required for EMT Paramedics hired into this position. At least five years full time experience as an advanced life support provider of prehospital emergency care in an EMS agency. For further information contact Duenna Ignacio-Kawanishi at 971-673-0523 or email: duenna.l.ignacio-kawanishi@state.or.us

Upcoming Events

The Supervising Physicians Forum has been changed to Friday, April 25, 2008, in Eugene. The one-day NAEMSP medical director’s course has been changed to Thursday, April 24, in Eugene. Check with Ritu Sahni, MD, MPH, for confirmation and details at 971-673-0631 or ritu.sahni@state.or.us.

Friday, May 30, 2008, is the date for the symposium Acute Stroke and Acute Myocardial Infarction: Pre-hospital & Emergency Departments Working Together to Establish Systems of Care to Improve Health Outcomes. The event will bring together EMS supervising physicians, cardiologists, neurologists, hospital emergency department managers/administrators, EMS agency managers and others to share experiences, learn about STEMI triage programs and discuss how these ideas might apply to stroke care. The symposium will be held in Eugene.
2008 Oregon EMS Conference. The Oregon EMS conference has been scheduled for Oct. 10-12, 2008, in Bend. A Supervising Physician’s Forum also is scheduled for Friday, Oct. 10, 2008, in Bend. Also planned is a Infection Control Officer class.

EMS Week 2008 Planning
EMS Week 2008 will take place May 18-24, 2008, with May 21 designated as EMS for Children Day. The slogan for 2008 is “EMS: Your life is our mission.”

TAX CREDIT FOR VOLUNTEER EMTs
The Oregon Department of Revenue offers a tax credit for EMTs who volunteer their services to rural Oregon communities. The application process is done through the Office of Rural Health at Oregon Health and Sciences University. To obtain an application for the tax credit, visit: http://www.ohsu.edu/ohsuedu/outreach/oregonruralhealth/providers/taxcredit/provider_tax_credit_emt.cfm, or contact Eric Jordan at 866-674-4376 or jordane@osu.edu. To be eligible for this credit, you must be an EMT licensed in Oregon and provide some services on a volunteer basis.

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