

BUCKS COUNTY EMS NEWSLETTER – AUGUST 2005

(PUBLISHED EVERY OTHER MONTH AND MAILED TO PROVIDERS)

FROM THE DIRECTOR

In our last newsletter, I asked everyone some questions regarding why they chose EMS, why they are still in EMS or not in EMS. I received a few responses, and I promised to share them with you.

I heard from a paramedic who stated he was returning from a fire call with his fire company when he saw a broken down vehicle. The engine stopped to render assistance and noticed that the driver was a member of the local squad. While assisting in changing the flat tire, the driver asked the firefighters if any of them would be interested in driving the ambulance on Wednesdays during the day. He also asked them if they had CPR and AFA cards. This gentleman answered yes and stopped by the squad to complete the paperwork to become a member. He proceeded to start taking EMS classes, first EMT, then Paramedic. He has held numerous Officer positions with EMS and Fire, and yes, is still in the fire service also. He has had his ups and downs within the system, starting in the Southern end of the County and finding his home in the Northern portions of the County. Amazing that a flat tire 19 years ago could have sparked such an interest. We thank you for your dedication to our system and the County of Bucks.

Another paramedic sends an email stating he is no longer in EMS because it is looked upon as a job instead of a career. He still is in Emergency Services, operating as a police officer and firefighter. He expressed concern over EMS being treated as the red-headed step-child in Emergency Services. He himself states he has no answers for correcting this, and I think we have all felt this way at some point in our careers (volley or career).

I also heard from an EMT who was happy to just have someone ask his opinion. He stated he wasn't sure if I wanted to hear what he had to say, however, he decided to send it anyway (Please note: never feel you can't call the Office and discuss something, that is why we are here). His concerns were the disrespect shown to EMTs by providers, nurses, squad members, other EMTs, police, etc. He himself is a confident and assertive EMT. He states this is not an issue for him. He watches it occur around him and would like to try to change this.

Well, I thought I would receive more positive comments, however, negativity once again rules. We are our own worst enemies at times; however, when called for help, we can figure anything out – adapt and overcome. How about we stick together, help each other and overcome ourselves. Keep your suggestions coming, via email, phone, snail mail or fax – I enjoy hearing from everyone!

Don't forget it's August – ALS Providers need 18 con-ed credits with at least 9 of those in med/trauma by December.

CPI

Aspirin - There is some confusion about the administration of aspirin for chest pain. Aspirin should be given to all patients that have or experienced chest pain of suspected cardiac origin as soon as possible. The benchmark for Aspirin is 100%; we are currently at 38%. The only contraindications to Aspirin are: hypersensitivity and active ulcer disease. Listed are some frequently asked questions:

- 1) If a patient is now pain free, should Aspirin be administered? YES. If a patient experienced chest pain and is now pain free they should still receive Aspirin.
- 2) What about patients who have already taken an Aspirin prior to my arrival? The treatment dose of Aspirin is 160 mg – 325 mg. If the patient took a treatment dose then do not give Aspirin, otherwise you should give the Aspirin.
- 3) Can Aspirin be administered without IV access? YES. The current protocol is being revised; Aspirin will be given before Nitro.

Remember, if you deviate from the Chest Pain Protocol and do not give Aspirin, be sure to document this on your patient care report.

Doing a good job - Since the last newsletter, I receive an email from a student who has been riding with Paramedic Scott Frank. The student describes Scott Frank as one of the best instructors, who practices exactly the way he teaches. This student further compliments Scott's consistent treatment regardless of whether it is the first patient of the shift, or the tenth patient. Keep up the good work, Scott!

DATA COLLECTION

In July, we held our first EMSPRO users session. A small group attended and found the session to be useful in customizing the application. We decided to keep the changes to a minimum at this first session to get things started.

Some of the changes made were:

- 1) Time tab was removed.
- 2) Quick Pick list for interventions was modified.
- 3) Cervical Collar was added as its own intervention and Spinal Immobilization was removed.
- 4) Reassessment was added as an intervention.

There was minimal feedback on these changes and we are planning another session in the near future.

All providers are welcome to assist in enhancing the application and improve its usability.

As always, if you have any questions or have difficulty with any areas of the application, please contact your organizations administration or the EMS Office.

TRAINING/CON-ED

Con-Ed Cards - In order to receive credit for continuing education classes, the student must complete two (2) forms of proof of attendance. The student must complete a con-ed bubble card and sign-in on the sign-in sheet. The con-ed sponsor hosting the class will then forward this paperwork to our office for processing. The con-ed card must be totally completed and accurate or it will not scan in the computer system. If the card is incomplete or not accurate, con-ed will not be credited to the student's con-ed report. The instructor/sponsor of the class has the instructions on how to properly complete the card. Please note: It is no longer necessary to provide the Social Security number on the card.

Learning Management System (LMS) – Are you registered? Currently, there are over 75 con-ed courses available. This is the State's website where you can complete con-ed courses. You need to subscribe to it through our office. There is a link on our website called LMS. After you complete the registration form, it will be routed to our office and then forwarded to the State. You will receive a confirmation email from the State in 5-7 business days. After you complete a course, print the certificate and forward to our office so the credits can be applied to your certification.

First Responder/EMT Reinstatement – The State has a process called "Reinstatement" that allows expired First Responders or EMTs to become recertified without taking another certification class or testing. The requirements include completing paperwork that is available from our Office, completing all required con-ed credits (16 for FR and 24 for EMT) (at least half of the credits have to be in the medical/trauma category), and completing a Healthcare Provider or Professional Rescuer CPR course. When all these requirements are completed and submitted to our Office, the recertification will be issued. To receive the reinstatement packet, please call our office.

Email Group – If you wish to be added to our email group, please send an email to Jason at jsdiefenderfer@co.bucks.pa.us. In your email, please include your first name, last name, and level of certification.

BUCKS COUNTY SQUAD CHIEF'S ASSOCIATION

The next meeting of the Squad Chief's Association is Tuesday, September 20, 2005, at Squad 125.

WEBSITE

Please refer to our website, www.bcehc.org for information on courses, protocols, licensure, etc.

HOW TO CONTACT US

General Phone: 215-340-8735

Fax: 215-957-0765

Jeryl DeGideo, Director - 215-340-8723

jldegideo@co.bucks.pa.us

Deb Kates, Secretary - 215-340-8720

drkates@co.bucks.pa.us

Heather Klitsch, Admin. Asst. - 215-340-8725

hjklitsch@co.bucks.pa.us

John Scott, Asst. Training Coord. - 215-340-8727

jmscott@co.bucks.pa.us

Jason Diefenderfer, Field Rep. - 215-340-8724

jsdiefenderfer@co.bucks.pa.us

Michele Rymdeika, Training Coord. - 215-340-8722

mlrymdeika@co.bucks.pa.us

Larry Loose, CQIC - 215-340-8721

ljloose@co.bucks.pa.us