

# COUNCIL NEWS

Working Together to Build A Better Tomorrow

January 2015

## Another Year Over and A New One Just Begun..

The Staff of the Seven Mountains EMS Council wishes you and yours all the best in 2015!! With the new year comes new advances in EMS in the Commonwealth, and also a new opportunity for growth and development!!

Remember, anything that you would like to see featured in the newsletter, or if you have something to contribute.. PLEASE feel free to contact Amanda at the Council Office or by email at [akrebs@smemsc.org](mailto:akrebs@smemsc.org).



"This calling to give of myself  
Most do not understand  
But I stand ready all the time  
To help my fellow man.."  
The EMS Prayer

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# From the Executive Director

It's hard to believe; but, it's 2015....Happy New Year. As I think back on all we accomplished last year I can't help but be grateful for a knowledgeable, dedicated staff and supportive providers through the Region. As I am sure you would all attest, every job has its days; but I must say that there is no other Region I would rather work for or group of EMS providers to work with than those found throughout Central Pennsylvania. A tip of the hat to all of you for what you do every day!!

I am not one for New Year's resolutions; but, I think it appropriate to make one. I resolve that in 2015 I will do my best to better focus decisions/issues/projects on "patient care", "What's best for the patient" and less on the broad list of other distractions that seem to creep into our decision making process. Since in a vast majority of the time 'patient care' and 'EMS system' interests run parallel; I would ask that you consider doing the same.

Speaking of EMS system development – remember, we need your help!! Council is your representative for statewide dialog on EMS system issues. We are currently accepting applications for membership on the regional advisory committees that provide input & recommendations to the Board of Directors and Bureau of EMS. For a full listing of those committees, along with the application, please check our homepage under the SMEMSC heading

Have an enjoyable, safe 2015 and I look forward to meeting with a number of you in Danville this March at our spring conference (again, check the website for details). As always, if we can be of assistance please contact the Council office.

## Licensure Corner:

The following services are due for relicensure on April 1st, 2015 Please logon and begin the application process as soon as possible. Please contact Jim Urban with any questions:

- ❏ Pleasant Gap Fire Company Ambulance
- ❏ SMEMSC QRS
- ❏ Wayne Township Volunteer Fire Company QRS



## Licensure Reminders

As a new year is upon us, this generally means line officers and company officers change. If your company is a licensed EMS Agency, and you've changed officers, please remember to go online and file a license amendment with your new officers!

Just a reminder to ALL agencies, especially ALS agencies, to review the rules and regulations before your licensure is due. There have been changes that WILL affect your license and the licensure process. The following are some reminders to ensure the process runs smoothly:

- ❏ Drug Security: Remember to have your drugs locked and secured as referenced in Title 28 §1027.5 (9)
- ❏ Reference §1027.3(a) Documentation requirements especially subsection (1) regarding required committees as well as policies and other documentation.
- ❏ Review required equipment and also changes to EMS credentialing in §1027.3(m)

\*\*The Rules & Regulations are available at [www.smemsc.org](http://www.smemsc.org)\*\*

## Sledding

### Safety Tips:

- \* Make sure your sledding area is away from roadways
- \* Make sure you have plenty of room to stop safely
- \* Make sure you have a safe area to climb back up the hill
- \* Make sure the area is free from hazards like trees, playground equipment, or anything else someone could collide with.
- \* Use protective barriers such as hay bales around unmovable hazards such as trees.
- \* Children should be supervised at all times!! 71% of sledding accidents occurred when there was no supervision!
- \* Wear appropriate clothing for the weather!!!
- \* Use appropriate equipment—make sure all equipment is in working order and safe condition, free of cracks, broken pieces or damage. Garbage can lids, shovels, lunch trays, tarps, or anything other than a device for sledding should not be permitted.
- \* ALWAYS wear a helmet! Especially children under 12 years old!! Almost ALL deaths from sledding accidents are a result of traumatic brain injuries that can be greatly reduced by wearing a helmet!
- \* Sit in a forward facing position to better view potential hazards and steer



## Sledding Accidents

Every year, approximately 160,000 injuries are suffered by children in sledding accidents... Test your knowledge of traumatic injuries [here](#)

1. What is the most common injury sustained in a sledding accident?
2. Most children die from what type of injury sustained in a sledding accident?
3. What is the best thing kids can do to prevent a head injury while sledding?
4. Every year, nearly 6,000 kids are severely injured in sledding accidents that don't involve going downhill - what are they doing??

### QUIZ ANSWERS:

1. Extremity fractures
2. Traumatic Brain Injuries
3. Wear a helmet
4. Being pulled behind vehicles.

# From The Regional EMS Education Coordinator

With 2015 starting off as fast paced as ever, training courses are already starting to be offered within the Region. Below you will find two Pa DOH courses being offered.

**Please note that all course information and registrations are to be done by Harrisburg Area Community College.**

\*West End Union County, West Hartley Township Community Building - Emergency Medical Responder  
January 27th, 2015 thru April 7th, 2015

**\*\*Contact Harrisburg Area Community College @ 717-780-2510 for course information or to Register for this class.**

\*Dauntless Hook and Ladder, Snyder County - Emergency Medical Technician  
February 17th, 2015 thru July 28th, 2015

**\*\*Contact Harrisburg Area Community College @ 717-780-2510 for course information or to Register for this class.**

2015 will also mark yet another great Spring Conference by the Seven Mountains EMS Council. Please mark your calendars for March 13<sup>th</sup>, March 14<sup>th</sup> and March 15<sup>th</sup> 2015. As in the past March 13<sup>th</sup> will be leadership day, and joining leadership day this year will also be Preparedness Day followed up Saturday and Sunday with the general Conference. By popular request, the Conference will again be held at the Pine Barn Inn, located in Danville Pa. Please visit our website, [www.smemsc.org](http://www.smemsc.org) for more detailed information.

As 2015 rings in not only a new year, it will also ring in a new recognition period for a portion of our Providers, please take a minute and review the chart on the next page to be sure that you understand what Continuing Education and Patient Care/Core (formally medical trauma) credits you will need to maintain your recognition as a prehospital provider. As always please do not hesitate to contact the Council office should you have any questions concerning your coned requirement.



# From The Regional EMS Education Coordinator

Continuing Education Re-requirements Certification	Renewal Cycle	Total Credits	Credits in Patient Care or Core **
EMR	3 year	16	12
EMT	3 year	24	18
AEMT	2 year	36	27
Paramedic	2 year	36	27
PHRN	2 year	36	27
PHPE	2 year	36	27
PHP	2 year	36	27

**\*\*Patient Care and Core continuing education courses are specified thru a notice by the Department published in the Pennsylvania Bulletin.**



# Keeping Your Stuff YOUR stuff...

Its happened to us all... We take the 2am car accident patients (and three of our backboards and CIDs) to the hospital... It's a busy night.. X-Ray is packed... CAT Scan is full... so your backboards and CIDs stay with the patients at the hospital. No big deal. You have more to stock your truck with at the station, and you'll pick them up later. You go back to the ER the next day. Two of your back boards are there, and one set of CID's. The rest of the equipment is missing. Where did it go? You begin to question the ER about the equipment in the storage room, and they come out to help you look... then it hits you. All you have on the CIDs is a station number... in Sharpie... from 2004.... It's worn off, there's no true identification. It's the same orange color as everyone else... now you're without equipment, and the boss is not happy about it.

So what can you do? BE PROACITIVE about your equipment! Make sure that your durable medical equipment is all properly labeled! A company property sticker, that is NOT worn off is preferable, however BLACK permanent marker is also appropriate, as long as the marker is not worn off, and is reapplied every so many cleanings so that it is CLEARLY visible!!

All equipment should be labeled with the company name, address and contact phone number. DO NOT USE ABBREVIATIONS OR STATION NUMBERS!!! Abbreviation and station numbers make it difficult for hospital staff to determine the actual owner, and makes your equipment fair game for another service to claim.

If your service has a name change, PLEASE update ALL your equipment!! Hospital staff may not recognize the name of a company that changed hands 10 years ago!! This is especially true if your equipment ends up at a hospital miles and miles away from your home station and that hospital doesn't know who your agency IS let alone who your agency WAS ten years ago!!!

Make sure that all detachable equipment is clearly marked too (i.e. head straps, CID blocks, backboard straps, splints, etc.) These are all very easily misplaced, and are equally easy to place on another backboard when one agencies goes missing.

Hospitals make every attempt to return your equipment to you clean and in a timely manner, but this is very difficult when they don't know who it belongs to... Please take a few minutes to go over your equipment. Make sure it is CLEARLY marked and handwriting is LEGIBLE! Addresses and Contact information is KEY to returning your equipment to you. The bottom line is your bottom line... the more you label, the less you lose... the less you lose, the less money you spend on replacing your equipment, and the more you can spend on updating and upgrading.

"An Ounce of Prevention is Worth A Pound of Cure..." Benjamin Franklin



# "Games" EMS Should Know About.... and Parents, too!

We have all heard them.... The Cold Water Challenge, The Ice Bucket Challenge, this challenge and that challenge, some just for fun, others to raise money and awareness for illnesses and charity. But what happens when these “games” go to far?? There has been a recent increase in death and serious injury from social media “games” that kids are playing, either alone or in groups. As EMS providers (and parents) we have seen the effects of and lectured on the effects of drugs and alcohol, but what about the dangers just as deadly, but have NOTHING to do with these substances? These “games” are being “played” mostly by adolescents age 11-17 and boys and girls are equally at risk, but in the age of peer-pressure and bullying, kids of ANY age may find themselves tempted to “Play” - These “games” are far from games, and are causing death in children across the United States for almost fifteen years. In light of recent occurrences of fatal incidents, this article will cover the most common “games” having tragic consequences on today’s youth.

## 1. The Choking Game

Also known as the “good kids high” is defined as strangulation (either alone or assisted) with the hands or a noose to achieve a brief euphoric state caused by a lack of oxygen traveling to the brain. More than 75% of children aged 9-16 know how The Choking Game is played or have played it themselves. Studies show more than 250 kids have died since the believed inception of the game in 2001, most of which were well-behaved children ages 11 to 17. Shockingly, only 25% of parents have heard of this, and only 7% of the victims parents knew of the game beforehand. Warning signs that a child may be “playing” the choking game are discussion of the game with friends or siblings, bloodshot eyes, unexplainable marks on the neck, frequent and severe headaches, disorientation after spending time alone, and ropes, scarves and belts tied to the bedroom furniture or doorknobs. For more information on “the choking game” visit <http://www.cultureofsafety.com/safety-tips/the-choking-game/>



## 2. The Cinnamon Challenge

The cinnamon challenge has been shown in numerous YouTube videos and is all over social media. To successfully complete the cinnamon challenge, a person must swallow one tablespoon of powdered cinnamon in less than 60 seconds without drinking any liquids. Although seemingly harmless, the cinnamon challenge can be dangerous, and in rare cases, deadly. The Cinnamon Challenge almost always leads to coughing fits and/or vomiting as the cinnamon immediately dries out the mouth. In some cases, cinnamon is inhaled into the lungs, causing a severe lung infection sometimes requiring a person be placed on a ventilator. For more information please visit [www.cultureofsafety.com/danger](http://www.cultureofsafety.com/danger)



## 3. The Salt and Ice Challenge

The salt and ice challenge consists of putting salt on your skin and then putting ice on top of that. The combination of the two can cause extreme pain, so the object of the challenge is to endure the pain longer than other participants. The salt and ice challenge is extremely dangerous and lead to frostbite like blisters and scarring. One 12 year old boy endured the pain until he had no pain. His wounds will heal, but he will have lasting scars. Keep alert for strange wounds that look like burns, and for kids seeking salt or ice at strange times.



#### 4. Drinking Hand Sanitizer

We use it to prevent the spread of germs, to keep our kids healthy, but today's kids have started drinking alcohol-based hand-sanitizer to get drunk! Hand sanitizers are 60% alcohol, which is equivalent to 120 proof liquor. While there have been no reported deaths from drinking hand sanitizer, however, drinking enough hand sanitizer can lead to severe motor function impairment. Online references to drinking hand sanitizer began creeping up on Google in 2009, but spiked in 2012 when a news report of kids in Los Angeles getting very ill. Kids have been ingesting bizarre concoctions for years to get drunk, with the most popular being “Robo-Tripping” or drinking enough Robitussin (cough syrup) to get drunk.



#### 5. The Fire Challenge

This challenge involves kids dousing themselves in some form of alcohol to act as an accelerant and then lighting it on fire. The current version of the ‘game’ involves filming the fire and then posting it on social media sites. The increased danger from posting on social media is that it leads to kids attempting to “one up” one another by lighting more than their body on fire and creating larger flames. One of the most dangerous things about the fire challenge is that it is extremely easy to find flammable products that can act as accelerants. Some of the most common products include hand sanitizer, bug spray, nail polish remover, rubbing alcohol and hairspray. The fire challenge is extremely dangerous and can even be deadly. A 14-year-old boy in Texas was hospitalized for second and third degree burns after emulating a video of the Fire Challenge he found posted online. There are numerous stories being reported to the media of participants being hospitalized after receiving severe burns from this challenge. Videos of people participating in the fire challenge also show them accidentally setting their clothes and hair on fire. This “game” also poses other dangers to property, as most times, this challenge is completed indoors and could easily start a building fire.



These are just a few of the many “social media” challenges out there. As EMS providers we need to be diligent in recognizing the possibilities that our calls may be a result of one of these “games” especially in adolescents and young adults.



**All recipes in this section  
and more are available at  
[www.realsimple.com](http://www.realsimple.com)**

**SIMPLE "ON THE GO" SNACKS FOR EMS**

**Bagel with Ricotta & Strawberries**

1. Spread 1/2 toasted whole-grain "flat" bagel with 2 Tbsp. ricotta.
2. Top with 1/3 cup sliced strawberries.
3. Drizzle with 1 tsp. honey or agave nectar

148 Calories/ 4g Fiber/ 7g Protein/ 5g Fat



**Crackers with Chocolate Hazelnut Spread & Banana**

1. Spread 3 crisp bread crackers equally with 1 Tbsp. of chocolate hazelnut spread
2. Top with 1 small sliced banana

214 calo-  
Protein/

ries/ 6g Fiber/ 4g  
7g Fat



**Rice Cake with Peanut Butter, Coconut & Dried Cherries**

1. Spread 1 rice cake with 1 Tbsp. Creamy Peanut Butter
2. Sprinkle with 2 tsp. toasted, unsweetened shredded coconut
3. Top with 2 tsp. dried cherries

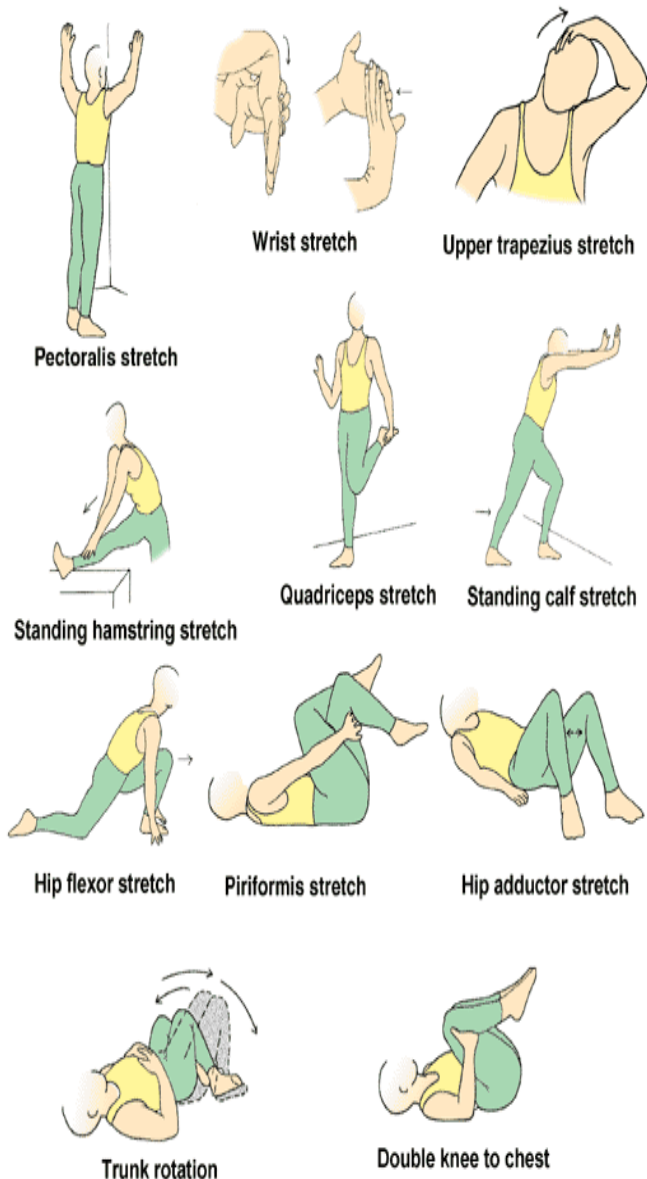
177 Calories/ 2g Fi-

ber/ 5g Protein/ 11g Fat



One of the most common, and often career-ending injuries in EMS are back injuries. By doing simple exercises to strengthen not only your back, but your core muscles, you can decrease your chances of suffering a potentially devastating injury!! See the following stretches and core strengthening exercises!

## Stretching



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<b>Abdominal crunch:</b> Lie on your back with hips and knees bent.		Lift up your head off the floor. You will feel your abdominal muscles tighten. Continue repeating reps as tolerated.
<b>Oblique crunch:</b> Lift one shoulder more than other, alternate sides		
<b>Isometric abdominal crunch</b>		Start with same position as abdominal crunch, but place pillow on knees. Press with arms on pillow, hold and count to 10, then relax. You will feel the abdominal muscles tighten.
<b>Pelvic tilt</b>		By pushing the small of your back against the floor, you will feel your abdominal muscles tighten, and your pelvis will tilt forward. Hold the position and count to 10, then relax.
<b>The Plank:</b> By keeping your hips off the ground, the abdominal muscles contract. Your weight can be on your knees or toes.		
<b>Oblique plank:</b> By rotating your whole body to the side, you can feel the oblique (side) muscles tighten.		The whole body is rotated, without twisting between the hips and shoulders. It is as if your body were a log, rotated as one unit.
<b>Bridging:</b> By lifting the hips off the floor, the back muscles have to tighten.		Hold this position, count to 10, then relax; repeat as tolerated.
<b>Superman or Quadriped:</b> Start with on hands and knees, lift up one arm and opposite leg.		May start by lifting only an arm (to exercise upper back muscles) or one leg (for lower back muscles) and advance to lifting two extremities at a time. Hold the position for a count of 10.
<b>General conditioning:</b> Whatever exercise you choose, it's very important to get your heart pumping.		Exercise has many benefits: cardiac, pulmonary, metabolic, bone health (less risk of osteoporosis), aside from helping your low back.

# Preparedness Corner

# Influenza Epidemic

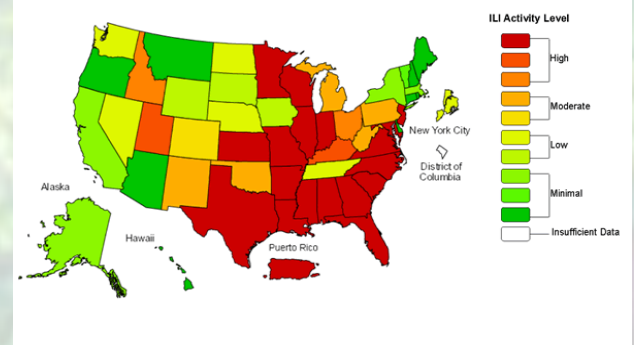
“Flu Season” is currently underway in the United States, and the Center for Disease Control and Prevention (CDC) has recently declared it in epidemic proportions. The CDC’s Influenza tracker website [www.cdc.gov/flu](http://www.cdc.gov/flu) shows the majority of the United States has widespread influenza cases. The CDC monitors flu deaths, hospitalizations, and the percentage of physician visits for influenza-like illness (ILI).

Currently in Pennsylvania, there were 10,117 reported cases of influenza in Pennsylvania and 16 deaths attributed to it. Nationally there have been 15 pediatric deaths (five in the last week) prompting the epidemic declaration by the CDC. So what does it mean for EMS providers? It means to be proactive, review the signs and symptoms of influenza and notify hospitals early if you are transporting a patient with flu-like symptoms.

## INFLUENZA SIGNS AND SYMPTOMS

- 📌 Fever
- 📌 Cough
- 📌 Sore Throat
- 📌 Runny/Stuffy Nose
- 📌 Body aches/Headaches
- 📌 Chills
- 📌 Fatigue
- 📌 Occasionally diarrhea and vomiting

Influenza-Like Illness (ILI) Activity Level Indicator Determined by Data Reported to ILINet  
2014-15 Influenza Season Week 51 ending Dec 20, 2014



## WHAT TO DO

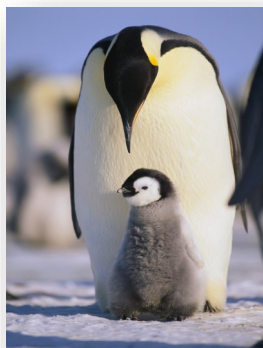
- 📌 Take precautions. If you are transporting a patient with flu-like symptoms, and you are safely able to do so without hindering the care of the patient, have the patient wear a mask. All ambulances, per state licensure, should be equipped with fit-tested N95 masks. Wear them when necessary
- 📌 Follow PA EMS Statewide Protocol 931: Suspected Influenza-Like Illness (ILI) and notify hospitals with as much time as possible that you are transporting a patient with influenza like symptoms.
- 📌 Avoid Close Contact - Stay at least 6 feet away from anyone experiencing symptoms of ILI
- 📌 Stay Home If You're Sick - CDC Recommends staying home from school/work until you are fever free for 24 hours.
- 📌 Cover Your Mouth and Nose - Sneeze or cough into your elbow or cover your mouth and nose with a tissue. Avoid covering your mouth with your hands
- 📌 WASH YOUR HANDS! - The best way to prevent the spread of flu is to wash your hands often! If soap and water isn't available, use alcohol based Hand sanitizer.
- 📌 Avoid Touching Your Eyes, Nose and Mouth - Germs are often spread by touching an infected surface, and then touching your eyes, nose and mouth
- 📌 Practice Good Health Habits - Get plenty of sleep, drink plenty of fluids, manage stress, and stay physically active
- 📌 DISINFECT!! Clean your ambulance after transporting a patient with ILI according to the guidelines in the protocol

Continue to monitor the CDC website and the PA Department of Health Website for more information on influenza illnesses.

**Remember: Flu season runs from October through May, with its peak time in January and February.**

# Regional EMSC Agencies

- ❏ **Bellefonte EMS - Master Level**
- ❏ **Central Juniata EMS - Basic Level**
- ❏ **Centre LifeLink EMS - Advanced Level**
- ❏ **Danville Ambulance Service - Advanced Level**
- ❏ **Elysburg Fire Co. Ambulance - Master Level**
- ❏ **Fame EMS - Advanced Level**
- ❏ **Goodwill Hose Flemington - Master Level**
- ❏ **Lock Haven EMS - Master Level**
- ❏ **Mount Nittany Medical Center EMS - Master Level**
- ❏ **Mountain Top Ambulance - Advanced Level**
- ❏ **Pleasant Gap EMS - Master Level**
- ❏ **Port Matilda EMS - Basic Level**



**Congratulations to these services!!! If you want to learn more about becoming recognized as an EMS for Children Agency, please see the following page...**

# Become a Recognized Pediatric EMS Agency!



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Pennsylvania's Pediatric Voluntary Recognition Program has been implemented in an effort to ensure that all children in the Commonwealth receive the best possible prehospital emergency medical care. EMS agencies are recognized under this program for showing significant dedication to providing excellence in pediatric emergency medical care.

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This multi-faceted program currently has four levels, each building on the previous:

- **Basic**—Pediatric-specific equipment. Based on federal guidance, EMS agencies must carry all recommended pediatric-specific equipment on each of their licensed vehicles.
- **Intermediate**—ChildLine child abuse background clearances. In order to prevent criminal acts against children, all agency EMS providers must have a child abuse background check on file.
- **Advanced**—Continuing education hours. To improve knowledge of the unique medical needs of children, EMS providers must complete four hours of pediatric-specific continuing education annually.
- **Master**—Community Outreach programs. EMS agencies demonstrating excellence in pediatric care also share a responsibility to provide education, injury prevention initiatives, and outreach within their community. This outreach can be accomplished in several different ways and may target a variety of audiences.

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This recognition program was created by the Pennsylvania Emergency Health Services Council EMS for Children Program, in partnership with the Pennsylvania Department of Health, Bureau of EMS.

For the application and more information, visit

[www.PAemsc.org/current-projects](http://www.PAemsc.org/current-projects)

Or contact Tom Winkler, EMS for Children Project  
Director, at [twinkler@pehsc.org](mailto:twinkler@pehsc.org)



PENNSYLVANIA EMERGENCY  
HEALTH SERVICES COUNCIL  
*Your Voice In EMS*

# Conference Update

*The 2015 Conference is only a few months away!!!*

*Some new things will be featured this year:*

- 📅 EMS Provider and Agency awards to be given out Saturday Night!!*
- 📅 Saturday Night Social Event to follow the Awards with food and DJ Entertainment!!*
- 📅 A Preparedness Day along with Leadership Day for those on Strike Teams and in Preparedness Roles!!*
- 📅 Charity Basket Raffle with All Proceeds being donated to the Children's Miracle Network at Janet Weis Children's Hospital at Geisinger!!!*

*For any questions regarding the conference, please see our website or contact Amanda at [akrebs@smemsc.org](mailto:akrebs@smemsc.org)*

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Mount Nittany Medical Center welcomes Dr. Daniel McKinley as a new Medical Command Physician in the Emergency Department. Dr. McKinley trained at Thomas Jefferson University Hospital and Penn State University. He worked previously at Geisinger Medical Center and most recently in the state of Oklahoma. Dr. McKinley begins January 5, 2015.



# HAPPY 2015!!!

# WE WISH YOU ALL THE BEST IN THE NEW YEAR