Richerte Conference Conference on EMS

EVENT SCHEDULE AND REGISTRATION

The conference offers over 75 sessions divided into clearly defined tracks for the EMS administrator, physician, educator, basic and advanced life support provider and school nurse so that individuals may pursue specific areas of interest.

November 2-4, 2012

Sheraton Atlantic City Convention Center Hotel



Pre-Conference EMS Summit 2012 • November 1, 2012

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REVENUE GUARD

NEW JERSEY EXPERTS IN AMBULANCE / MICU BILLING AND COMPLIANCE

FOR INFORMATION CONTACT:

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A WORD OF WELCOME

Dear Colleague:

On behalf of the New Jersey Department of Health, Office of Emergency Medical Services, I am pleased to welcome you to the Eighth Annual NJ Statewide Conference on EMS. We are proud to sponsor this event in cooperation with the New Jersey Academy of Family Physicians, the Emergency Medical Services for Children Program, the New Jersey Urban Areas Security Initiative, the New Jersey Office of Homeland Security and Preparedness, the Emergency Medical Services Task Force, and the Mobility Transportation Association. We know that your stay here at the Sheraton Atlantic City Convention Center Hotel will be a very enjoyable one.

This year's conference will offer an emergency preparedness track, as well as diverse educational opportunities for basic and advanced life support providers, EMS physicians, educators, managers and school nurses. This year's faculty is comprised of physicians, nurses, paramedics, EMTs and other professionals from the health and safety community. We are confident that their knowledge and expertise will lend itself to a positive experience for every participant.

We are pleased to sponsor the fourth annual METI Games in cooperation with Medical Education Technologies Incorporated (CAE Healthcare). Teams comprised of basic and advanced life support providers will compete against one another. This will challenge team members in their assessment and treatment skills using scenarios and high-fidelity patient simulators. The final competition will be conducted on Friday evening. Plan on being part of the live audience as we present the medical science behind the exceptional care delivered to the human simulator patients!

Additionally, we are pleased to sponsor the first annual Medical Transportation Association of NJ (MTA) Leadership Summit and the third annual Medical Directors Summit, incorporated into our preconference schedule on Thursday, November 1st.

We are grateful to our sponsors and vendors for their support in making this conference possible. Their participation is key to the success of our program and I would encourage you to spend time meeting and visiting with each and every vendor during your stay in Atlantic City.

In closing, let me take this opportunity to thank you for your interest, participation, and support of our conference. Your unselfish dedication and commitment to your profession helps to ensure the viability and quality of New Jersey's statewide EMS system.

Sincerely,

Karen Halupke, RN, M.Ed.

Director

Office of Emergency Medical Services

lupke

WELCOME TO High jill jill always turned on

When you think of Atlantic City, is the first thing that comes to mind "casinos?" Or, do you think of the world's first Boardwalk, salt water taffy and other Atlantic City "firsts?" If you've visited Atlantic City in the past few years, you may think of great entertainment, the booming restaurant scene and an incredible new wave of shopping opportunities. Well, Atlantic City is all this and more.

You can follow tradition and take a stroll on the beach or Boardwalk, get pushed along the wooden way in a rolling chair and sample Boardwalk fare. You can dance until dawn at one of Atlantic City's exciting nightclubs, take a sightseeing cruise or fishing excursion, or play a round of golf – there are 30 highly rated golf courses within 30 miles of Atlantic City.

You can see an A-list entertainer in the casino showrooms, laugh yourself silly at a comedy club, relax with an entertaining lounge act, catch a revue show or attend a concert or show at the historic Boardwalk Hall.

Atlantic City offers everything from gourmet meals and nationally-acclaimed chefs to bountiful buffets, fresh-off-the-boat seafood, a plethora of steak houses, an international menu of cuisines and, of course, fun Boardwalk food. You can shop for bargains at a multi-block outlet shopping district, go for glamour at one of the high-end shops overlooking the ocean at the Pier Shops at Caesars or explore an indoor shopping and dining complex that feels like you're on a street in old Havana. You can even visit an aquarium, an art museum and history museum or one of the other fine area attractions.



Atlantic City truly has something for you, no matter what you enjoy. You can find all the details online at **www.atlanticcitynj.com**, including frequently updated lists of entertainment and casino happenings.

WELCOME TO THE NEW JERSEY STATEWIDE CONFERENCE ON EMS

This exciting, state-of-the-art conference has been designed to provide Emergency Medical Services personnel with educational opportunities that reflect current medical knowledge and practice that will enhance appropriate patient care and reinforce procedures critical to smooth and efficient on-scene operations.

The conference offers over 75 sessions, presented by more than 50 subject matter experts. Sessions are divided into clearly defined tracks for the EMS administrator, EMS educator, basic and advanced life support provider, school nurse, and those with a particular interest in pediatrics or emergency preparedness so that individuals may pursue specific areas of interest. The conference is designed for flexibility by allowing you to select continuing education topics in the areas that are important to you.

Come cheer for your favorite team as they face the human simulators in the 4th annual METI Games. The finals will be held Friday, November 2, from 6PM - 8PM. The top three BLS and ALS teams will go head-to-head managing critically ill or injured patients while trying to clinch the number one spot and bragging rights as the top team of METI GAMES 2012! Several brief physician-directed presentations related to the scenarios will be discussed during breaks in the game. Attendees will earn 2 continuing education credits.

In addition, there will be an exhibition area open during the conference. This is a unique opportunity for you to visit a wide variety of vendors whose products are geared specifically to the EMS community.

In conjunction with this conference, the 14th Annual NJ EMS Awards Banquet will be held on Saturday, November 3rd. This banquet is a way for the Office of Emergency Medical Services and the New Jersey EMS Council to recognize individuals for their hard work and dedication to the provision of emergency medical services in New Jersey.

CONFERENCE HEADQUARTERS

The conference is being held at the Sheraton Atlantic City Convention Center Hotel, conveniently located a few short blocks from the world famous boardwalk and casinos. The hotel is also just a short stroll from "The Walk," a shopping complex featuring over 60 outlet stores, restaurants, and entertainment.

Rooms are available Wednesday night, October 31 through Sunday night, November 4 at this special Conference rate:

Wednesday: \$125, Thursday: \$125, Friday: \$145, Saturday: \$145, Sunday: \$125,

single or double occupancy.

All room rates are quoted exclusive of applicable state and local taxes, currently 14%, as well as the mandatory charge of \$1 for Resort Fees. Attendees are responsible for their own guest room, tax and incidental charges upon check-out. Check-in time is 3 PM and check-out time is 12 NOON.

In the event that you check out prior to your reserved check-out date, an early departure fee of \$75 will be charged to your account. To avoid this fee, you must advise the hotel at or before check-in of any change in your scheduled length of stay.

Contact the **Sheraton Atlantic City Convention Center Hotel**by calling **888-627-7212** or by
accessing the conference website at
njemsconference.com. When making
reservations, mention that you are attending the NJ Statewide Conference
on EMS to receive this special rate.

The deadline for accepting reservations into this room block is 5:00 PM on October 17, 2012. Reservation requests received after this date will be accepted at the hotel's prevailing rate, based on availability.

Parking fees for Sheraton overnight guests are \$20 for valet parking and \$5 for self-parking per day, plus state and local taxes, currently 7%.

CONTINUING EDUCATION CREDITS

Each session has been approved for 1 CEU EMT elective credit and 1 professional development credit (NJ DOE) by the New Jersey Department of Health. Contact hours have been applied for through the New Jersey State Nurses Association, an accredited approver of continuing nursing education by the American Nurses Credentialing Center's Commission on Accreditation.

Application has been made for the provision of physician credits.

REGISTRATION INFORMATION

Early registration is recommended. Attendees are encouraged to register online at:

njemsconference.com

If unable to register online, registration by mail or fax will be accepted.

- Submit one registration form for each individual. Photocopies of additional forms are acceptable.
- PRINT CLEARLY or type your information. Please fill out the form completely.
- Indicate the Session Numbers you plan to attend. Please choose only one class per time period.
- 4. Submit an EMT Training Fund Certificate of Eligibility, if applicable.
- 5. Make checks payable to "NJAFP/NJ EMS Conference"
- 6. Complete the registration form and mail with payment to:

2012 NJ Statewide Conference on EMS c/o Candida Taylor 224 West State Street Trenton, NJ 08608

For credit card payments, REGISTER ONLINE AT:

njemsconference.com or fax your registration form to: **609-394-7712**.

Please keep a copy of your completed registration form and bring it with you to the registration desk so that you know the sessions for which you registered.

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The completed form, along with the proper tuition, must be submitted no later than **October 17th**. Registrations received after that date and on-site cannot be guaranteed.

Phone orders cannot be accepted. Registration forms submitted without payment will be returned without processing.

All sessions will be filled in the order in which paid registrations are received. Session schedules and faculty are subject to change and OEMS reserves the right to cancel any enrollment. Participants will be notified by email if a session is filled or cancelled and given a chance to select another. Students must be registered for each session they attend. Auditing of sessions is not permitted.

Tuition for the Conference includes continuing education credits, session materials, breakfasts, refreshment breaks, and lunches. Tuition does not include hotel accommodations and incidentals, or admission to the EMS Awards Banquet.

GUEST REGISTRATION

Spouses, guests and children must be registered if they plan to attend meal functions, special events and visit the exhibit area. All registered attendees and their guests receive a conference badge that identifies the wearer as an attendee of the conference and permits access to the exhibit area, meals and special functions (excluding the EMS Awards Banquet).

Spouse/Guest and Children over 5: \$25

Children under 5: No charge

REFUND POLICY

If you must cancel, a request must be made in writing and mailed/emailed/faxed to NJ Conference on EMS. Substitute attendees are encouraged and accepted at any time. Phone cancellations cannot be accepted.

If cancellation is received:

Prior to September 30, 2012: refund is **100%**

October 1-14, 2012: refund is **50%**

October 15, 2012 and after:

no refund

Early conference check-in will be held Thursday, November 1, 2012 from 5:00_{PM} - 7:00_{PM}. Regular conference check-in will begin on Friday, November 2, at 7:00_{AM}.

If you have special requirements (handicap accessible rooms, menu requests, etc.) please call to discuss.

If you have any questions, please contact Candida Taylor at 609-393-1613 or candida@njemsconference.com



PRE-CONFERENCE EMS SUMMIT 2012

THURSDAY, NOVEMBER 1, 2012

All-day sessions are from 8am-5pm, AM-sessions 8-12, PM-sessions 1-5. Continental breakfast and registration will be from 7am-8am and lunch will be served from 12pm-1pm.

EMS Medical Director's Summit (All day)

Dr. Paul Pepe, Dr. J. Brent Myers, Dr. Jeffrey Beeson, Dr. Jennifer Waxler

To set the tone, this highly-packed, fast-paced, cutting-edge program will first open with several didactic presentations delivered by the session facilitators who are currently dealing with several of the more challenging and envelope-pushing issues in EMS systems improvement and out-of-hospital emergency care (e.g., 9-1-1) medical practice. As the program evolves, the audience will be involved in various interactive, problem-solving sessions and the so-called "lightning rounds" developed by the facilitators. The audience will also be asked to provide suggested approaches to the issues presented.

First Session - Back to Basics

- · Reassessing Training Level Needs for EMS
- Re-thinking Airway Management in EMS
- New Tools to Establish Competence and Skills
- Eagles Lighting Rounds

Second Session - What's the Alternative?

- Re-Thinking Traditional Dispatches & Scene Dispositions
- Re-Thinking Traditional Transportation Destinations
- Eagles Lighting Rounds

Third Session - Pushing the Clinical Envelope

- Re-Thinking Continuous Compression CPR
- Using EMS Data to improve Public Safety
- Ten Golden Rules for Dealing with MCIs
- 2012 Ways for Dealing with Drug Shortages & Expirations
- Eagles Lighting Rounds

Forth Session - NJ Perspective

- Patient-Initiated Refusal of Care Form for EMS
- Should ROSC Patients go Straight to Cardiac Centers While Being Cooled?
- Eagles Lighting Rounds

MTA LEADERSHIP SUMMIT 2012 – Building a Bridge to the Future (All day)

Jay Fitch, PhD & Anthony Minge, MBA

If anything is certain about the Medical Transportation and EMS industry, it's this: predictability is history. This first leadership summit is all about what's coming and how your organization can be a valuable part of that future. It's time for competence, courage and commitment – at all levels in your organization. Whether paid or volunteer, municipal or private, you need to know how healthcare reform will impact your service, what opportunities exist, and how you can be ready to take advantage of the changes. Market maturation, cost reduction efforts, new healthcare delivery models, payment restrictions, and regulatory changes are forcing service model changes. Some agencies are building a wall around their squads while others are building a bridge to the future. Preparation will make all the difference for your company or agency.

Getting paid is becoming increasingly difficult. You need to make sure you are aggressive in billing for the revenue you are entitled to, without crossing the line. Solid revenue practices can position your organization to survive and thrive. Practical solutions can increase net revenue and improve cash flow by eliminating errors, reducing denied claims and capturing lost payments while reducing the risks associated with poor billing processes and practices.

Safety is a huge issue for both patients and caregivers. Facilitators will review contemporary research and outline practical steps toward reducing risk and improving trust in our industry. Your safety performance is key when it comes to reducing costs. Future partnership opportunities will depend on your record and programs.

SCHEDULE-AT-A-GLANCE

PRE-CONFERENCE EMS SUMMIT 2012 (continued)

NAEMT - EMS Safety Program (All day)

William O'Brien

National Association of EMTs (NAEMT) EMS Safety course aims to promote a culture of EMS safety and to help reduce the number and intensity of injuries incurred by EMS practitioners in carrying out their work. This course helps increase students' awareness and understanding of EMS safety standards and practices and develop their ability to effectively implement them. EMS Safety is the first national and most comprehensive education program of its kind that teaches techniques on how to best achieve safety on the job. The course offers an overview of current issues surrounding safety in EMS, presents and discusses case studies, builds risk assessment and decision-making skills and provides an opportunity for participants to relate their own experiences with EMS safety issues. EMS Safety is for all EMS practitioners and professionals providing prehospital patient care, EMS supervisors and administrators concerned with safety. For those participants interested in becoming EMS Safety Instructors – there is no separate component. In order to qualify for Instructor certification, individuals must meet the following requirements: a score of 76% or better on the final evaluation and certification as an instructor in one of the following: AMLS, PHTLS, EPC, ITLS, ACLS, PALS, PEPP, EVOC, Fire Instructor 1 or be current faculty teaching EMS curriculum at an accredited college or university. Participants must provide a copy of their certification or proof of background before an instructor card can be issued.

New Jersey State Police Open Water Rescue Awareness Level (All day)

Tpr. John Schriner

This Awareness Level (½ day classroom and ½ day in pool) program is designed to train EMS providers, law enforcement, firefighters, and lifeguards in personal rescue skills, as well as the rescue of victims in distress in open water and surf environments. Classroom Topics: SAFE rescue; planning and managing surf rescues; surf and weather conditions; rip currents; physiology of drowning; drowning stages; types of drowning. Pool Topics: Skill development; reaching and throwing; self rescue. EMS personnel and Lifeguards will be expected to enter the water wearing street clothes or what is normally worn while on duty. Law Enforcement personnel will be expected to enter the water in uniform wearing simulated gunbelt and weapon (provided) and body armor (provided). Fire service personnel will be expected to enter the water wearing full PPE (provided) including a SCBA. Pre-requisites for Awareness level training include good physical condition and the ability to swim 100m wearing a Personal Floatation Device (not timed) and treading water for 2 minutes.

Incident Response to Terrorist Bombings-Performance Level (AM-sessions)

Larry Masterman

The four-hour performance level IRTB course provides basic information on explosive and incendiary devices that could be used as terrorist weapons. Classroom topics include: Understanding the terrorist threat; improvised explosive devices (IEDs); safety issues; and departmental or agency policies to ensure compliance with local requirements.

E.S.C.A.P.E. (PM-sessions)

Shawn Tompkins

Emergency Services Control of Aggressive Patients Education (E.S.C.A.P.E.). Assaults and injuries on medical personnel have and will continue to escalate throughout the next decade. While over five percent of all EMS calls involve a violent patient, few agencies provide training that would effectively address this growing problem. E.S.C.A.P.E is a hands-on and interactive program that provides students with simple techniques that can be easily applied to any aggressive person. Based on a foundation of medically accepted and liability conscious techniques, E.S.C.A.P.E. is designed to educate personnel in safely controlling patients for medical treatment or to defend against unexpected assaults.

"RSI for BLS" - Critical BLS Functions and Roles in the Face of RSI (AM-sessions)

Joe Schilli & Larry Fornicola

Are paramedics in your response area performing rapid sequence intubation (RSI)? How familiar are you with this procedure, its purpose, risks and benefits? Do you know what is expected of you and your team when it's time to utilize RSI? Even though mobile intensive care unit personnel must initiate the procedure, a large part of patient

PRE-CONFERENCE EMS SUMMIT 2012 (continued)

management during RSI falls on the shoulders of BLS personnel. The goal of this course is to make the delivery of RSI safer, more efficient and streamlined with a focus on teamwork at all levels. It consists of a classroom lecture series followed by numerous hands on practical skills stations where participants will assist with simulated RSI scenarios as well as become familiar with various types of airway equipment. THIS COURSE IS NOT INTENDED TO TRAIN BASIC LIFE SUPPORT PROVIDERS HOW TO INTUBATE AND DOES NOT QUALIFY ANYONE TO PERFORM ADVANCED LIFE SUPPORT PROCEDURES SUCH AS INTUBATION. This class is limited to 25 participants.

Are You in the Forest and Can't See the Trees? (PM-sessions)

Jennifer McCarthy

The curriculum has changed again! As educators we know the new curriculum is for the better, but personally the changes are overwhelming and somewhat difficult to navigate. This half-day session will identify ways to structure your program and review techniques that will help your program soar while implementing these new standards. Leave this session with templates that will have you seeing the trees and knowing exactly where you are in the forest!

EMS Charts - Beginner (AM-sessions)

Linda Coene

Are you ready? Get set! Go Live! This 4-hour session will get your agency ready to go live in one day! We will discuss basic configuration, how to enter a chart, the benefits of the mobile device if desired, and getting your data to the State Data Warehouse. If you attend this class you will have everything you need to "go live". Just complete your "Homework", notify your instructor when complete, and you will be set to go live in emsCharts. A "Go Live" checklist will be provided so you can make sure it is all done. Training is limited to administrators of services (not yet live), or those who just want a quick review.

EMS Charts - Advanced (PM-sessions)

Linda Coene

So you are an Administrator in emsCharts! Now what? Whether you are a new software administrator or just want to learn a little more about tweaking your current system; this is the class for you! We will be discussing some of the "Admin"-only parts of emsCharts such as setting up Special Reports, defining Activity Audits, what is Data Validation, and Custom Reporting, etc. If you want to learn how to make this system your system then this is the class for you. Questions will be received at the end of the class and custom work on your specific company will be addressed as time permits.

SCHEDULE-AT-A-GLANCE

FRIDAY, NOVEMBER 2, 2012

TIME	TRACK / SESSION TITLE	SPEAKER
8:00 - 8:30	Breakfast	
	Welcome & Introduction	Karen Halupke Christopher Rinn
8:30 - 9:30	Keynote Session: Why Can't We All Get Along?	
	Keynote Speaker	A.J. Heightman
9:30 - 10:45	Breakout Sessions #1	
	Provider-ALS: Termination of Resuscitation (or when to say when)	Bill Wang
	Provider-BLS: Legacy of Heroes - Organ Donation for EMS Jessica Melo	ore & Bryan Fischberg
	EMSC: Take Care of My Baby! The Red Warning Signs of Trouble	Charles McSweeney
	Instructor: Fine - Tuning Your Presentation Skills	Paul Werfel
	Critical Care: "To Use Or Not To Use?" Prehospital Use of Vascular Access Devi	ces Marilyn Bourn
	Leadership: Elements of the Effective Employee Handbook	Jennifer Somers
	Emergency Preparedness: Cheating the Reaper: Conquering the "Killer" Errors in Multi-Casualty Response	Larry Masterman
10:45 - 11:00	Break	
11:00 - 12:15	Breakout Sessions #2	
	Provider-ALS: Clinical Clues	Paul Werfel
	Provider-BLS: I Can't Believe You Just Said That"Patient Communications"	Tim Hillier
	EMSC: High Tech Kids	David Aber
	OEMS Update: What's The Difference? "NJEMS.US vs NJOEMSCert.com"	Candace Gardner
	Critical Care: Pediatric Hypoperfusion	Derrick Jacobus
	Instructor: Does Education Improve Patient Care?	Scott Bourn
	Emergency Preparedness: Joplin Tornado, May 22, 2011	Scott M. Cranford
12:15 - 1:30	Lunch	
1:30 - 2:00	Time With Vendors	
2:00 - 3:15	Breakout Sessions #3	
	Provider-ALS: The Eternal Quest for the Better High: Designer Drugs in the United States	Tammi Schaeffer
	Provider-BLS: Just a Gut Feeling	Paul Werfel
	EMSC: They All Fall Down	Tim Hillier
	Instructor: Leading in the Classroom	Richard Craven, Jr.
	Critical Care: Stuck in the Muck! Crush Injuries, Rhabdomyolysis and Lessons Learned	Charles McSweeney

FRIDAY, NOVEMBER 2, 2012

OEMS Update: Pay No Attention to the Man Behind the Curtain: Learning the NJ EMS Licensing System

the NJ EWIS Licensing System

Emergency Preparedness: Can Your Students Walk the Walk and

Talk the Talk?

Christopher Ryan & Christopher Tams

Jennifer McCarthy

Paul Werfel

3:25 - 4:40 Breakout Sessions #4

Provider-ALS: Cases To Challenge Your Mind

Provider-BLS: EMS Roles/Responsibilities at Crime Scenes Scott Holtzclaw

EMSC: Is this an ALTE? Lisa Drago

Instructor: All Problems are an Opportunity - A Case-Based Review of

Classroom Issues and Creative Solutions

Critical Care: Gag Me - Current Trends in Airway Management Marilyn Bourn

Leadership: Desperately Seeking Competent EMS Leaders and Managers: Raphael Barishansky

How to Avoid the "Peter Principle"

Emergency Preparedness: Responder Safety in Times of Civil Unrest:

Understanding Crowd, Group and Mob Behavior

Steve Crimando

Jennifer McCarthy

Provider - ALS sessions are targeted for advanced level providers, but will be of interest to basic level providers as well. Provider - BLS sessions are targeted for basic level providers, but will be of interest to advanced level providers as well.

METI GAMES 2012

Join us as the competition heats up!

While at this year's Conference, be sure to stop by Friday, on the lower level near registration and support the teams as they manage the realistic responses of the human patient simulators and are challenged with complicated scenarios!



The top three teams will compete Friday evening from 6 to 8pm in the METI Games Finals Dinner Event. Conference participants can register to come and watch as the top 3 teams compete for the title of 2012 NJ METI Games Champion. There will be an instructor-led presentation following each team's skill performance to review the medical/traumatic injuries and/or illnesses as well as the management of each scenario while enjoying dinner.

Who will give the "Life Saving" performance and be crowned the 2012 METI GAMES Champion?

SCHEDULE-AT-A-GLANCE

SATURDAY, NOVEMBER 3, 2012

TIME	TRACK / SESSION TITLE	SPEAKER				
8:30 - 9:30	Breakfast					
9:30 - 10:45	Breakout Sessions #5					
	Provider-ALS: Tie Them Up; Tie Them Down (Just Not Face Down)	Jennifer Somers				
	Provider-BLS: What I Did On My Summer Vacation	Glenn Luedtke				
	EMSC: Tot Talk - Tricks of the Trade to Effectively Communicate with Pediatric Patients	Sarah House				
	Instructor: He Said/She Said - Improving the Reliability of Subjective Practice	al Skills David Page				
	Critical Care: From A to Z (Apnea to Zero) Capnography	Timothy Marks				
	Leadership: Three "Hot" Legal Case Studies and Lessons Learned for EMS Management	, Wolfberg & Wirth, LLC				
	Emergency Preparedness: EMS Prepardness in Today's Israel	Joseph Schmider				
10:45 - 11:00	Break					
11:00 - 12:15	Breakout Sessions #6					
	Provider-ALS: Doughnuts , Digoxin, and Doctors Famous Poisonings and Poisoners in Our Midst	Tammi Schaeffer				
	Provider-BLS: The Ride of Your Life: Ambulance Transport Safety Systems Strategies and Solutions	Nadine Levick				
	EMSC: Recipe for Success - A Cookbook for Pediatric Assessment	Sarah House				
	Instructor: BLS Airway and Ventilation Obstacle Course	David Page				
	Critical Care: What Really Happens in ICU? Late Complications and Care of the Post-EMS Patient	Scott Bourn				
	Leadership: Paid, Volunteer or Both Page	, Wolfberg & Wirth, LLC				
	Emergency Preparedness: Fort Hood Mass Casualty Response Lawrence Ma	sullo & Steven Beckwith				
12:15 - 1:30	Lunch					
1:30 - 2:00	Time With Vendors					
2:00 - 3:15	Breakout Sessions #7					
	Provider-ALS: EMS Safety NOW	Glenn Luedtke				
	Provider-BLS: <i>Identification, Treatment, and Special</i> Considerations for Tropical and Communicable Diseases Michael Passa	afaro & Anthony Guerne				
	EMSC: Outside the Spotlight - Providing Care Beyond the Acute Head Injury	Sarah House				
	Instructor: Getting Out of the Small Pond: An Insider's Guide to Publishing and Lecturing on EMS Topics	Raphael Barishansky				
	Critical Care: "Under Pressure" - Abdominal Hypertension	Dwain Pegues				
	Leadership: Texts, Tweets, Blogs Page	e, Wolfberg & Wirth, LLC				
	Emergency Preparedness: New Jersey EMS Task Force - Here and Now	H. Mickey McCabe				

David Page

NEW JERSEY STATEWIDE CONFERENCE ON EMS Event Schedule & Registration

SATURDAY, NOVEMBER 3, 2012

3:25 - 4:40 Breakout Sessions #8

Provider-ALS: "Please Don't Call Me Honey" - Understanding Raphael Barishansky

Our Geriatric Patients

Provider-BLS: *Is This an ALS Patient?*Andy Lovell

EMSC: Divas & Dead Babies Tracey Loscar

Instructor: Total Recall versus MacGyver: How To Transform Knowledge

Level Multiple Choice into Critical Thinking Measurement Masterpieces

Critical Care: Critical Care Jeopardy

Dwain Pegues

Leadership: Avoiding the "Bad Apple" Page, Wolfberg & Wirth, LLC

ALS/BLS: Caring for the Morbidly Obese Patient Scott Bourn

Provider - ALS sessions are targeted for advanced level providers, but will be of interest to basic level providers as well. Provider - BLS sessions are targeted for basic level providers, but will be of interest to advanced level providers as well.

ABOUT THE EMS AWARDS BANQUET

The New Jersey Emergency Medical Services Council, in cooperation with the Office of Emergency Medical Services (OEMS) announces the Fourteenth Annual New Jersey EMS Awards Program and Dinner. This dinner provides a forum for recognizing and honoring individuals for their hard work and dedication to the provision of emergency medical services in New Jersey.

This year's celebration will be held on **Saturday, November 3, 2012** at the **Sheraton Atlantic City Convention Center Hotel**, beginning at 7:00 pm.

We hope you will join us for this exciting event which celebrates the New Jersey EMS community. Tickets are available for \$55 each. For additional information, please contact **Candida Taylor at (609) 393-1613**.

2012 EMS Award categories:

- ➤ Outstanding EMS Call
- ➤ Outstanding EMS Action by a Youth
- ➤ Outstanding EMS Action by a Citizen
- ➤ Outstanding First Responder
- ➤ Outstanding EMS Dispatcher
- ➤ Outstanding Volunteer EMT
- ➤ Outstanding Career EMT
- ➤ Outstanding Paramedic
- ➤ Outstanding EMS Physician
- ➤ Outstanding ALS-SCTU Nurse

- ➤ Outstanding Emergency Preparedness Provider
- ➤ Outstanding EMS Administrator
- ➤ Outstanding EMS Educator
- ➤ Outstanding Volunteer EMS Agency
- ➤ Outstanding Private EMS Agency
- ➤ Outstanding Public EMS Agency
- ➤ Outstanding Hospital ER Nurse
- ➤ EMS Volunteer Lifetime Achievement Award
- ➤ EMS Career Lifetime Achievement Award

SCHEDULE-AT-A-GLANCE

SUNDAY, NOVEMBER 4, 2012

TIME	TRACK / SESSION TITLE	SPEAKER			
8:30 - 9:30	Breakfast				
9:30 - 10:45	Breakout Sessions #9				
	Provider-ALS: I'm Not an Alcoholic, I Don't Go to MeetingsAddiction in	EMS Corinne Flammer			
	Provider-BLS: Drug Recognition - Cop Stuff for EMS Providers	Jim Graham			
	EMSC: Kids, Culture and Crayons	Tracey Loscar			
	Instructor: Critical Thinking: A New Approach to Patient Care	William O'Brien			
	Critical Care: Lethal Exposures: Carbon Monoxide and Cyanide	Mike McEvoy			
	Leadership: EMS Legal Mythbusters	Matthew Streger			
	Emergency Preparedness: Medical Coordination Centers: Situational Awareness, Planning, and Operations	Tim Phelan			
10:45 - 11:00	Break				
11:00 - 12:15	Breakout Sessions #10				
	Provider-ALS: Swimming With Sharks	Jim Grahar			
	Provider-BLS: Man vs. Machine: "ATV" Trauma Case Studies	Jason Dush			
	EMSC: Update on Common Pediatric Respiratory Illnesses	Joseph Saloma			
	ALS/BLS: When Minutes/Seconds Count - Facing the Challenge of End-of-Life Pre-hospital Care	Sam LaCapra			
	Critical Care: The Acute Diabetic: A Case Study	Kenneth Szwak			
	OEMS Update: HOLD ON - IT'S A WILD RIDE! Steering the Future of EMS Through Data Collection	erry Clancy & Tim Seplaki			
	Emergency Preparedness: Dangers In Your Backyard: Successful EMS Planning for Small-Scale Community Events	Richard Huff			
12:30 - 1:30	Lunch				
1:45 - 3:00	Breakout Sessions #11				
	Provider-ALS: The Ethical Dilemma - Ethics Outside the Box	Jim Graham			
	Provider-BLS: Youth Victims of Violence - Assessment and Awareness of the Effects of Violent Injury	Patty Vitale			
	EMSC: Septic Appearing Infant	Joseph Saloma			
	Instructor: ROAD WORK AHEAD - Intersection of EMS and Critical Care	Mark Bobe			
	Leadership: Different People, Different Brains	Robert Luckri			
	Critical Care: Don't Judge A Book By Its Cover: Atypical & Misleading Patient Presentations	Kenneth Szwak			
	Emergency Preparedness: Organized Chaos: Four Patients and a Medic	Jason Dush			

FRIDAY, NOVEMBER 2, 2012

8:30 - 9:30 Breakfast Keynote Session Why Can't We All Get Along?

A.J. Heightman

This presentation addresses paid vs. volunteer, BLS vs. ALS, and the myriad of EMS, police, fire and dispatch issues that exist in many areas. A.J. Heightman will discuss the "disconnects" that frequently occur on-scene between the various providers as well as during each specialty's ("vertical") training. This session addresses it all and offers solutions to improve relationships on the street and in the classroom, and more importantly, ways to improve the delivery of care on-scene to maximize resources and results.

9:30 - 10:45 Provider-ALS

PA-1 Termination of Resuscitation (or When to Say When) *Bill Wang*

Transport of patients in cardiac arrest with lights and sirens increases the risk of crashes, injuries and fatalities. Resuscitative efforts while transporting the patient lead to suboptimal resuscitation while increasing the risk to EMS providers. This presentation will discuss the need for protocols that allow for termination of resuscitation in cardiopulmonary arrest.

Provider-BLS

PB-1 Legacy of Heroes - Organ Donation for EMS *Jessica Melore & Bryan Fischberg*

This presentation provides an overview of the *Legacy of Heroes Partnership*, an initiative launched with the passing of fallen Jersey City Police Officer, Marc DiNardo, a hero who gave of himself in life, but also gave others life as an organ and tissue donor. EMS, fire, and law enforcement officials came together in solidarity to pledge their commitment to register as donors and spread the word within their membership and communities. This presentation provides an overview of the program and includes the personal inspirational story of Jessica Melore, NJ Sharing Network's Senior Education and Programs Manager, whose life was saved by EMS after a massive heart attack, and who eventually received a heart transplant. This session will also identify candidates for organ donation.

EMSC

EMSC-1 Take Care of My Baby! The Red Warning Signs of Trouble. *Charles McSweeney*

During this dynamic discussion, we will talk about the anatomic differences between children and adults and identify the "Red Warning Signs of Trouble" while assessing and taking care of kids. The healthcare provider must be aware and on their toes to prevent cardio-pulmonary arrest in our smaller patient populations.

Instructor

I-1 Fine-Tuning Your Presentation Skills *Paul Werfel*

An educator's presentation skills and creativity in the classroom are essential to the success of all EMS training endeavors. Educating is certainly more enjoyable when the presenter has mastery of those presentation skills that involve the students and eliminate annoyances that impede learning. In addition, learning is easier when the student enjoys the experience and is an active participant. This workshop will explore the methods of maximizing your presentation skills and putting your students at ease, thus involving them in the learning process. By providing new and innovative methods to make your presentation skills and classroom scenarios more effective and fun, the educator will also find satisfaction and reward in the classroom.

FRIDAY, NOVEMBER 2, 2012

9:30 - 10:45

(continued)

Critical Care

CC-1 "To Use Or Not To Use?" Prehospital Use of Vascular Access Devices *Marilyn Bourn*

Today more and more patients, adults and children, are being discharged from the hospital earlier. It is not uncommon for a patient to continue to have home therapies or medications which require semi-permanent access to vascular circulation. Patients may have indwelling peripheral IVs or central lines left in place for weeks or months. In the past, most pre-hospital providers and emergency nurses were taught little or nothing about these devices. Further, they were given strict instructions to never use them. This lecture will dispel myths and misinformation about vascular access divices (VADs). The presentations will examine emergencies related to VADs, as well as the indications for an emergency use of VADs.

Leadership

L-1 Elements of the Effective Employee Handbook Jennifer Somers

The Employee Handbook is the employer's key tool in communicating policies and work rules to employees. It can be used to orient new employees, maintain consistency among supervisors and spell out workplace policies. It is also one of the first documents the court will review in any employee legal issue. The Employee Handbook needs be positive, inclusive and current. When is the last time yours was updated? Attendees will learn guidelines for developing their handbook, along with a review of handbook do's and don'ts.

Emergency Preparedness

EP-1 Cheating the Reaper: Conquering the "Killer" Errors in Multi-Casualty Response Larry Masterman

Multi-casualty incidents are often plagued by predictable and preventable errors in patient care, scene organization, and incident management. This session will address common errors, how to prevent them, and how to correct them if they occur.

11:00 - 12:15

Provider-ALS
PA-2 Clinical Clues
Paul Werfel

Most assessment presentations today are all-day affairs with endless lists of things to remember. It is not surprising that the stuff is hard, if not impossible to remember. If only someone had decided on several rules or commandments that would make the job easier. That day has come. Please join JEMS Case of the Month author, Paul Werfel in this new and insightful look into patient assessment. We will present you with 20 easy-to-remember clues to better assess your most troublesome patients.



Provider-BLS

PB-2 I Can't Believe You Just Said That... "Patient Communications."

Tim Hillier

You see people at their worst. What they say to you may have nothing to do with you whatsoever. One thing is for sure though; how you react to them will be remembered forever. This session focuses on how to say what you need to without escalating a situation. Tim will bring his personal experiences to this session. "Believe me, if there was something stupid to say to a patient, I have probably said it. Learn from my mistakes."

FRIDAY, NOVEMBER 2, 2012

11:00 - 12:15 (continued)

EMSC

EMSC-2 High Tech Kids

David Aber

This presentation will focus on the pediatric population that we are seeing more and more of at home - those on high tech equipment that we do not deal with on an every day basis. We will cover ventilators, tracheostomy tubes, feeding tubes, seizure abatement devices, diabetic pumps, and more.

OEMS Update

OEMS-2 What's The Difference? "NJEMS.US vs NJOEMSCert.com" Candace Gardner

Are you a provider, EMT coordinator, MICU Clinical Coordinator, Paramedic Program Didactic Coordinator or a CEU provider with education and certification questions? This presentation will discuss the differences between www.njems.us and www.njoemscert.com and how they can be best utilized by the provider, EMT coordinator, CEU provider, MICU Clinical Coordinator and Paramedic Didactic Coordinator. Additionally, this session will cover the differences and similarities between EMT-Basic and EMT; what competency-based education is; how to access EMT Training Fund reimbursement; NJ/PA reciprocal BLS education agreement; EMT program performance data; educational program submission and management; as well the purpose of OEMS audits.

Critical Care
CC-2 Pediatric Hypoperfusion
Derrick Jacobus

Millions of children die of shock due to various etiologies each year. Shock is a state of circulatory dysfunction where the metabolic demands of the tissue cannot be met by the circulation. Several different etiologies from hypovolemia to severe infection can result in shock. With the assistance of the Children's Hospital of Philadelphia and Cooper University Medical Center Pediatrics Department, this block of instruction will focus on the definitions of different types of shock seen in children and will summarize treatment strategies for the acute care practitioner based on pertinent recent literature. Early recognition and timely intervention are critical for successful treatment of pediatric shock. A strong index of suspicion by the treating clinician and early fluid resuscitation followed by ongoing assessment and timely transfer to a higher level of care can make the difference between life and death for the child who presents in shock.



Instructor **I-2** Does Education Improve Patient Care?

Scott Bourn

The promise of excellent initial and continuing EMS education is improved patient care. Unfortunately, there has traditionally been a disconnect between the quality improvement programs of EMS operations and the departments or organizations that are responsible for providing education. The result is a reduction in the relevance of EMS training AND the inability for operations to effectively utilize the most expert educators in their community to improve patient care. This program will use actual cases to demonstrate the impact of this disconnect with patient care, and describe a simple process that can integrate initial EMS training, clinical QI, and continuing education to produce documented improvements in both training efficacy and--most importantly--patient care.

Emergency Preparedness EP-2 Joplin Tornado, May 22, 2011 Scott Cranford

One of the nation's most horrific events occurred on May 22, 2011. History's 7th ranked deadliest and most destructive tornado slammed into the city of Joplin, Missouri. In its aftermath, 161 people were dead and over 8,000 homes and 500 businesses were severely damaged or destroyed. Hear from a chief officer of the Joplin Fire Department about the massive rescue and recovery efforts that ensued. Review some of the lessons learned and the efforts that took place in managing thousands of volunteers who responded to help in this time of need.

FRIDAY, NOVEMBER 2, 2012

2:00 - 3:15 Provider-ALS

PA-3 The Eternal Quest for the Better High, Designer Drugs in the United States *Tammi Schaeffer*

From *Tango* and *Cash* to *Bath Salts*, designer drugs have been around for a long time. The dynamic legislation that has made many drugs illegal over the years has spawned a generation of chemists whose goal it is to stay one step ahead of the law. The problem...they don't always work as advertised. We will discuss some of the historic designer drugs, some that we are encountering now, and perhaps try to guess what the future may hold

Provider-BLS
PB-3 Just a Gut Feeling
Paul Werfel

The assessment and evaluation of abdominal emergencies remains a daunting task for all medical professionals, including prehospital practitioners. In this presentation, we will examine the following abdominal emergencies with the objective of organizing our evaluation skills and giving correct treatment: esophageal varicies, gastric bleeds/ulcers, intestinal obstruction, appendicitis, urinary retention, renal failure, abdominal aortic aneurysm, and abdominal trauma.

EMSC

EMSC-3 They All Fall Down

Tim Hillier

Injuries cause more fatalities among children than all diseases combined. Caring for the injured child requires special knowledge, precise management, and scrupulous attention to details, all while under the intense pressure of dealing with one of the most frightening calls we do in EMS. This session will review assessment and management of pediatric trauma.

Instructor **I-3** Leading in the Classroom *Richard Craven, Jr.*

Leading in the classroom is essential for training and presentation excellence. It is not enough to present information. We must develop a style of presenting that both entertains and empowers our audience. This workshop will give you the key steps to improve your delivery and have more fun when you present. Getting



the material across is so much more than just knowing the subject - it's engaging and empowering the audience to achieve. This workshop will cover elements of adult learning, how to organize your teaching plan; and most importantly how to deliver the session in an interesting, fun and memorable fashion.

Critical Care
CC-3 Stuck in the Muck! Crush
Injuries, Rhabdomyolysis and Lessons
Learned
Charles McSweeney

We will take the audience on the call of a lifetime with an unexpected turn of events. What could have been a simplistic scene becomes a complicated and unimaginable need for resources. This lecture focuses on crush injuries and their complications, mainly focusing on rhabdomyolysis and current trends in treatment through a case study.

FRIDAY, NOVEMBER 2, 2012

2:00 - 3:15

OEMS Update

(continued)

OEMS-3 Pay No Attention to the Man Behind the Curtain: Learning the NJ EMS Licensing System Christopher Ryan & Christopher Tams

CALLING ALL LICENSED AGENCIES! The process for licensing your agency is about to get a lot easier as the Department of Health embarks on a new web-based system. Join staff from the Office of EMS as they review the new EMS licensing system. The process has been automated for your convenience. Staff will provide an overview of the entire system to include creating an account, managing fleet licensing, paying fees online, requesting duplicate licenses, updating contact information, as well as the renewal process. Grab you laptop, and be prepared to follow along as the staff walks you through how to become active in the new EMS Licensing System.

Emergency Preparedness

EP-3 Can Your Students Walk the Walk and Talk the Talk?

Jennifer McCarthy

While in class it is easy for students to talk about the principles and practices of emergency management strategies. Why is practical application not as easy? One theory is that students are rarely exposed to a dynamic learning environment that allows them to practice theories in a controlled learning environment. This session will discuss creative education delivery modes to have your students not only talking the talk but also walking the walk.

3:25 - 4:40

Provider-ALS

PA-4 Cases To Challenge Your Mind

Paul Werfel

This will be a comprehensive and interactive discussion of ten brand new cases, with the objective of fine tuning the assessment skills of the prehospital practitioner. Led by *JEMS Case of the Month* author, Paul Werfel, participants will systematically examine and assess each patient, suggest and discuss presumptive diagnoses and BLS and ALS treatment modalities. The group will then compare and contrast these findings with the in-hospital diagnosis and treatment modalities.

Provider-BLS

PB-4 EMS Roles/Responsibilities at Crime Scenes

Scott Holtzclaw

This course is designed to introduce participants to the different aspects of responding to and functioning at crime scenes. This includes the need to preserve physical evidence, what to do when finding potential evidence, retaining evidence, verbal statements from victims or suspects and treatment of victims and in-custody suspects. This program will also explain the after-action procedures that may occur, including suspect elimination (why your fingerprints are needed), formal statements, Grand Jury testimony, and both criminal and civil court testimony.

EMSC

EMSC-4 Is This an ALTE?

Lisa Drago

This presentation is designed to provide a review of pediatric cases involving mental status change, seizures, breath holding spells, SIDS, GERD and other apparent life threatening events.

Instructo

I-4 All Problems Are an Opportunity - A Case-Based Review of Classroom Issues and Creative Solutions. *Jennifer McCarthy*

As an instructor you stay up late prepping and preparing only to be faced with students texting, falling asleep and seemingly attending for the CEUs rather than for the interest in the topic being taught. Come to this session and share problem-solving techniques to overcome classroom scenarios that can serve as learning opportunities for all.

FRIDAY, NOVEMBER 2, 2012

3:25 - 4:40 (continued)

Critical Care

CC-4 Gag Me - Current Trends in Airway Management *Marilyn Bourn*

This presentation will review some of the current literature regarding intubations, RSI and changing trends in advanced airway management (adult and pediatric). The discussion will include a review of the advantages and disadvantages of various adjuncts to airway management including supraglottic single and multi-lumen airways, combitubes, LMAs, King tubes and other newer devices. Research-based information and case presentations will be used to demonstrate the clinical concepts.

Leadership

L-4 Desperately Seeking Competent EMS Leaders and Managers: How to Avoid the "Peter Principle" *Raphael Barishansky*

Being an industry that tends to promote supervisors, managers and administrators from its field ranks has pluses and minuses when it comes to competence in managerial positions. Becoming an example of the "Peter Principle," or the act of promoting people to their highest level of incompetence, is something we'd all like to avoid. While there are a lot of presentations regarding leadership skills, this discussion will provide a profile of balanced background and knowledge, combining the field experience, education and training, visionary leadership and competent management skills needed by providers placed into EMS supervisory, managerial and administrative positions.

Emergency Preparedness

EP-4 Responder Safety in Times of Civil Unrest: Understanding Crowd, Group and Mob Behavior Steve Crimando

"Can it happen here?" Anger directed at banks, energy companies, government agencies and other public and private entities, such as that seen on Wall Street or in Wisconsin during labor actions, can trigger potentially violent collective behavior resulting in injury, death and destruction of property. Emergency management and response professionals aware and concerned about current world and national events, and the possibility of adverse collective behaviors, will benefit from a knowledge and understanding of the causes, warning signs and behavioral dynamics of groups, crowds and mobs. Such an understanding better prepares leaders, decision-makers and tactical operators for the new challenges associated with the use of social media (Twitter, Facebook, etc.) and globalization as they relate to the development of crisis situations and the potential of dangerous and violent behavior.



SATURDAY, NOVEMBER 3, 2012

9:30-10:45

Provider-ALS

PA-5 Tie Them Up; Tie Them Down (Just Not Face Down) Jennifer Somers

EMS crews are expected to be able to handle patients in various encounters. Occasionally, crews may be faced with a patient exhibiting violent behavior. In this seminar, EMS personnel will be educated on recognizing potential violent behavior. EMS personnel will learn de-escalation techniques. We will discuss what to do if de-escalation fails. Breathing physiology, the impact of restraint on breathing and the risk of positional asphyxia will be reviewed. The importance of documentation will also be examined.

Provider-BLS **PB-5** What I Did on My Summer Vacation *Glenn Luedtke*

Pack your swim fins and your rubber duck, and join us for a trip through some of the common emergencies experienced during a typical east coast summer vacation. We will discuss near-drowning, surf injuries, marine animal stings and swimming pool incidents, along with heat-related and other environmental problems, lightning injuries and much, much more. Included in the discussion will be suggestions for interacting with visiting EMS providers from the perspective of both the responding agency and the visiting EMT.

FMSC

EMSC-5 Tot Talk - Tricks of the Trade to Effectively Communicate with Pediatric Patients *Sarah House*

Everyone remembers a time when they could have approached a call differently for a better outcome. Building a rapport is essential in caring for children, but often a trial-by-fire experience. Participants will learn from the insight and experiences of others to prevent some of the most common mistakes in communicating with children.

Instructor

1-5 He Said/She Said - Improving the Reliability of Subjective Practical Skills

David Page



Inter-rater variability is a major threat to the validity of any subjective or performance evaluation. This presentation will discuss the problem of inter-rater reliability and discuss strategies to increase the dependability of performance and affective evaluations. Interactive remotes will be used to involve the participants in the evaluation of practical skill videos.

Critical Care **CC-5** From A to Z (Apnea to Zero)
Capnography
Timothy Marks

This presentation will include the basic facts of end tidal capnography, capnometry and the indications both prehospital and in the ED. The program will include troubleshooting, set-up, basics, wave form evaluation, and numerical correlations to clinical care. Also presented, will be case studies from the pre-hospital and the emergency department focusing on the efficacy of end tidal CO2 monitoring.

SATURDAY, NOVEMBER 3, 2012

9:30-10:45

Leadership

(continued)

L-5 Three "Hot" Legal Case Studies and Lessons Learned for EMS Management Page, Wolfberg & Wirth, LLC

EMS legal experts, Steve Wirth and Doug Wolfberg will select three recent and fascinating legal cases involving EMS as examples to identify and explore the top vulnerabilities and "weak spots" in every EMS organization. You'll learn practical steps you can take to shore up these critical areas in your own organization. The three cases will represent a broad range of liability situations where the field providers have played a key role. This lively and informative session will dig into the "root cause" of each lawsuit and will discuss the system changes that could have been made to prevent the courtroom scene from happening in the first place.

Emergency Preparedness **EP-5** EMS Prepardness in Today's Israel *Joseph Schmider*

Ten national EMS leaders had the opportunity to visit Israel in April 2011 to review and learn from Israeli leaders about their current EMS system. I had the opportunity to be one of the team who spent 7 days traveling Israel and meeting with government, hospital and EMS leadership to see what they have in place to respond to daily emergencies and disasters. Our group was provided full access to every part of the EMS system. This presentation will be a power point presentation with pictures and video of lessons learned.

11:00-12:15

Provider-ALS

PA-6 Doughnuts, Digoxin, and Doctors...Famous Poisonings and Poisoners in Our Midst *Tammi Schaeffer*

From Michael Swango to Charles Cullen to unknown people still out there, poisonings have always held a place in history. It's the combination of people and chemistry with a good dose of evil. Join us as we explore selected famous poisonings and poisoners, some with ties to New Jersey and others with connections to EMS. Will you still reach for that surprise tasty treat that someone left in the crew room on your next shift?

Provider-BLS

PB-6 The Ride of Your Life: Ambulance Transport Safety Systems Strategies and Solutions *Nadine Levick*

This multimedia presentation addresses a comprehensive overview of the recent National Academies
Transportation Research Board Summit on EMS Safety. This will be followed by a focused presentation on the
operational issues relating to ambulance transport safety. An overview of ambulance safety statistics will be
presented, including specifics of pediatric transport and comparisons with safety perspectives in air medical
services. Guidelines and standards distributed by national and international organizations will be discussed.
Video of ambulance crash testing will highlight important predictable and preventable occupant risks and
outline practices and strategies to enhance safety. New safety systems and technologies will be profiled, with a
review of what is on the horizon in safety culture, safety development, personal protective equipment,
standards, policy, transport systems and vehicle design.

EMSC

EMSC-6 Recipe for Success - A Cookbook for Pediatric Assessment *Sarah House*

You came across a recipe that sounds perfect, you followed it to the "T", but it doesn't turn out quite how you expected. You are left feeling disappointed and questioning your cooking abilities. Instead of sulking about it, you try again and again until you finally get it right. You took the original recipe and tweaked it with your own style to make the process flawless. In the end, you were left with the satisfaction that your hard work and perseverence paid off. Pediatric patient assessment is exactly the same. You are given a "recipe" for how it needs to be done. You follow all the steps and sometimes the end result still isn't right. Maybe you missed an ingredient, maybe your measurement was off, maybe the same recipe doesn't work for every patient every time. In this lively and interactive session, participants will get to put on their chef's hat, and be creative with their recipes while taking a new approach to an old assessment.

SATURDAY, NOVEMBER 3, 2012

11:00-12:15

Instructor

(continued)

I-6 BLS Airway and Ventilation Obstacle Course

David Page

Most obstacle courses are dedicated to intubation and advanced airway techniques. This one will be focused on simple airways with excellent ventilation technique.

Critical Care

CC-6 What Really Happens in ICU? Late Complications and Care of the Post-EMS Patient *Scott Bourn*

The patients we treat are often admitted to ICU for additional diagnosis and treatment. Sometimes patients' conditions worsen during their ICU stay, in some cases leading to death or significant permanent complications. This program will provide insight into the common complications patients develop in ICU, as well as the therapies provided there.

Leadership

L-6 Paid, Volunteer or Both Page, Wolfberg & Wirth, LLC

Today's ambulance services utilize a variety of manpower – volunteer, paid personnel, or a combination of both. Some organizations are also utilizing "volunteer incentive programs," or VIPs, where volunteers are paid "points" toward merchandise, cash or other valuable items or services in an effort to attract and retain members. This session will review the law as it pertains to these "compensated volunteers," as well as explore some common pitfalls under the Fair Labor Standards Act that can trap the unwary ambulance service, like overtime exemptions, sleep and meal time deductions and more.

Emergency Preparedness **EP-6** Fort Hood Mass Casualty Response *Lawrence Masullo & Steven Beckwith*

Fort Hood's response to the shootings of November 5, 2009 will be discussed in this session including an overview of the event, challenges faced by EMS and hospital personnel in their response. The Triage Officer during this MASCAL event will discuss the EMS response and the officer in charge of the emergency department will speak about the hospital response.



SATURDAY, NOVEMBER 3, 2012

2:00-3:15

Provider-ALS
PA-7 EMS Safety NOW
Glenn Luedtke

The dramatic upswing in serious injuries and fatalities among EMS personnel in the past few years has led to a new awareness of the dangers facing you and your fellow responders every time you answer a call. Numerous organizations are looking at how our ambulances are designed, how our equipment works, and how we can be safer while still doing what we need to do for our patients. This session will discuss not only what's coming, but what we can do NOW to improve safety for us and for our patients. We will look at some of the radical changes in vehicle design, and discuss how we may need to re-think the idea that "bigger is better". We'll look at what other countries are doing to improve EMS safety, and how we might adapt their approach to our practice. And we'll look to see what's being done by forward-looking EMS agencies in the US to help ensure that all of their providers go home safe and healthy after every shift.

Provider-BLS

PB-7 Identification, Treatment, and Special Considerations for Tropical and Communicable Diseases *Michael Passafaro & Anthony Guerne*

The world is getting smaller and foreign travel is becoming more and more common. With one of the world's largest international airports and a highly diverse population, New Jersey EMS providers will likely come across communicable and rare tropical diseases not normally encountered. This session will provide the EMS professional with the knowledge to identify and treat all different types of tropical diseases. Special considerations will be presented to protect the EMS provider from contracting and transmitting these diseases.

EMSC

EMSC-7 Outside the Spotlight - Providing Care Beyond the Acute Head Injury Sarah House

Headlines across the nation are shining a light on head injuries. Overwhelming national concerns regarding concussions have spurred a frenzy of education for healthcare providers, coaches, and parents on assessment, treatment of the acute injury, and return to play guidelines. This education is having a profound impact on patient outcomes. However, the acute injury is just the tip of the iceberg. This presentation will step away from the traditional clinical approach to concussions and open your mind to a bigger picture by looking at the continuum of care, the missing links, and what your role is throughout the process.

Instructor

I-7 Getting Out of the Small Pond: An Insider's Guide to Publishing and Lecturing on EMS Topics Raphael Barishansky

Have you ever looked at an article in a trade or academic EMS journal and thought "I could have written that?" Have you ever heard a presenter at a conference and thought "I have a great idea for a presentation!" EMS education does not end in the traditional classroom. Moving from your comfort zone as a big fish in a small pond to the ocean of EMS trade and academic journals and conferences can be a scary proposition, but good ideas and best practices need to be shared. Hear from an experienced writer and lecturer on how to develop and focus your ideas, understand the opportunities available to write and speak, review what and how to present to decision makers, write presentation proposals and just generally how to get yourself ready to enter the wide world of EMS publishing and speaking.

Critical Care

CC-7 "Under Pressure" Abdominal Hypertension *Dwain Peques*

Emergency Department, Critical Care, and Specialty Care Transport personnel are often faced with an insidious threat to the overall stability of their patients – frequently caused by the large amounts of intravenous fluids they give during different resuscitation situations: trauma, burns, and sepsis. If unrecognized and untreated it can compromise the cardiovascular, respiratory, neurological, gastrointestinal, and renal, among other homeostatic systems, and ultimately cause multiple organ system failure and death. Join in on this interactive and informative scenario-based discussion to learn more about the recognition and treatment of this interesting, yet often overlooked phenomenon.

SATURDAY, NOVEMBER 3, 2012

2:00-3:15 (continued)

Leadership

L-7 Texts, Tweets, Blogs Page, Wolfberg & Wirth, LLC

EMS executives, supervisors and managers face unprecedented challenges in maintaining a positive work environment, protecting confidentiality and providing healthcare services in an age of Facebook, Twitter and other social networking sites. Literally in an instant, any employee of your EMS organization can create a PR or compliance disaster by posting private patient information or sensitive employment information for the world to see. This session will explore the frontiers of this evolving area of law, and address issues such as monitoring employees' personal web pages, regulating the use of company and even personal computers, and the limits of "free speech" in the workplace.

Emergency Preparedness **EP-7** New Jersey EMS Task Force - Here and Now *H. Mickey McCabe*

This presentation will cover the roles and responsibilities of the New Jersey EMS Task Force and how it functions within the state. The presentation will cover pre-existing EMS plans for Incidents of Significance, their development, and implementation and future planning efforts. We will also discuss the regional-based specialized EMS Task Force assets, their capabilities and the request procedures for these assets. Discussion will also be held on previous task force deployments and lessons learned.

3:25-4:40

Provider-ALS

PA-8 "Please Don't Call Me Honey" – Understanding our Geriatric Patients Raphael Barishansky

Most EMT and Paramedic programs spend significantly more time discussing pediatrics than geriatrics – even though the percentage of the US population over the age of sixty five is growing at a faster rate than ever before. Advancements in medicine and pharmaceuticals have pushed the average life expectancy to almost 80. An overview of specific pearls and pitfalls of assessing and treating geriatric patients will be covered, including important physical, social and cognitive facets every EMS provider should be familiar with. More common assistive living equipment utilized in home care will be reviewed, as well as relevant topics such as the ins (and outs) of hospice, the uniqueness of geriatric trauma, recognizing elder abuse and being sensitive to end-of-life concerns. This presentation will touch on a wide variety of medical care issues specific to the geriatric population and will hopefully instill a new respectful perspective on the challenges facing these patients.

Provider-BLS
PB-8 Is This an ALS Patient?
Andy Lovell

This session will cover the criteria for ALS dispatch as well as the importance of not only a comprehensive BLS assessment, but the absolute necessity for a detailed HPI and PHMx. Case presentations will be made to a panel of "experts" consisting of an experienced BLS provider, an experienced ALS provider, a BLS physician Medical Director and an ALS physician Medical Director. Each of these professionals will bring their unique expertise, training and experience forth and share their viewpoints of each patient presentation. Participants will find that while some patient presentations are "black and white," there are also plenty of "gray" areas to be discussed. At the conclusion of this presentation, participants should have the knowledge base to make appropriate BLS/ALS patient treatment decisions that first and foremost are in our pre-hospital patient's best interest.

EMSC

EMSC-8 Divas & Dead Babies

Tracey Loscar

There is nothing more devastating than the death of a child. It is far and away one of the most emotionally stressful calls any provider will respond to. The nature and infrequency of these calls make them the perfect storm for errors and chaotic performance. There are things you can do to help navigate these calls and improve your performance when the worst happens. This presentation will take a look at some of the common psychological aspects providers are confronted with on pediatric arrest calls and suggestions on methods for addressing them.

SATURDAY, NOVEMBER 3, 2012

3:25-4:40

Instructor

(continued)

I-8 Total Recall versus MacGyver: How To Transform Knowledge Level Multiple Choice into Critical Thinking Measurement Masterpieces

David Page

Publisher test banks and instructor made exams are often filled with low level knowledge based questions. During this interactive session the audience will help transform knowledge level questions into more difficult items that test the student's abilities to apply information and critically think.

Critical Care
CC-8 Critical Care Jeopardy
Dwain Peques

Learn and review critical care information while having fun - this presentation material is compiled from a number of evidence-based CCRN and CCEMTP preparatory sources. Please join us for an interactive and informative game-show themed class that discusses the rationales behind clinical pearls that are so important to those working in the critical/specialty care transport sector.

Leadership L-8 Avoiding the "Bad Apple" Page, Wolfberg & Wirth, LLC

Let's face it. The work ethic is different today. It's harder to find and keep good people in EMS. While most people want to do a good job, there are some people who just want to do the minimal amount to get by. And it's even harder to deal with the bad apples that slip through under the lid (the hiring process) and spread their rotten ferment (a.k.a. "bad attitude") to others. But there is a way. You CAN take control of your organization. You can set the tone that will allow you to engage and keep positive, motivated people. Join popular EMS attorney, Steve Wirth as he presents proven and practical strategies on how you can develop EMS staff who are not just "punched in" - but also "tuned in" and "turned on" to doing their very best for your organization every day!

Provider-ALS/ Provider-BLS **PA/PB-8** Caring for the Morbidly Obese Patient *Scott Bourn*



Dealing with the morbidly obese patient creates a strain on almost any EMS system. Beyond the obvious logistical issues of how to safely transfer the patient are even more vexing questions concerning establishment of normal assessment baselines, determining drug dosage guidelines, and performing "routine" medical procedures. This program will provide background on the health problems experienced by the morbidly obese, as well as practical guidelines for how to provide compassionate, safe, and high quality care to this challenging patient population.

SUNDAY, NOVEMBER 4, 2012

9:30-10:45

Provider-ALS

PA-9 I'm Not an Alcoholic, I Don't Go to Meetings...Addiction in EMS Corinne Flammer

Addiction is a growing problem in our society and an even larger problem in the setting of emergency workers. The incidence of addiction (alcoholism in particular) is approximately 10% in the general population (not including unrecognized problem drinking). I would suggest that it's even higher, possibly 35% or 40% in EMS fire and police (with corrections officers being the highest group at 50%). Personality, biology and environment all contribute to a person's susceptibility to this terrible disease, that destroys families, careers and lives every year. Since 2001 there has been a marked increase in reported cases of substance abuse among rescue workers. That brings to light the fact that on-the-job stress is a contributor to using alcohol to deal with incidents that overwhelm workers. This presentation will cover warning signs and coping skills while also providing attendees with a path for helping themselves or someone they know desiring help. This presentation will also review the 12 steps of Alcoholics Anonymous, emphasizing the participation of family and friends in the steps and introducing a possibly unfamiliar audience to the concept of the work that is done in the anonymous groups to deal with addiction.

Provider-BLS **PB-9** Drug Recognition - Cop Stuff for EMS Providers *Jim Graham*

As a Drug Recognition Expert (D.R.E) Jim Graham will show how this information can be adapted to pre-hospital providers or ER staff for recognition of the clinical signs of impairment prior to lab confirmation. All abused drugs fall under 1 of 7 drug categories each with its own identifiable signs. This session will discuss the various signs and symptoms listed on the DRE Matrix for each of the 7 drug categories. This presentation show how the use of the DRE Matrix combined with clinical indicators can successfully determine many abused drugs prior to lab confirmation.

EMSC

EMSC-9 Kids, Culture and Crayons *Tracey Loscar*

You start out with the 8-pack of fat colors, just right for stubby fingers. Eventually you graduate to the 16 or 24 pack and eventually you hit the jackpot - 64 colors! The children you encounter on a daily basis come from no less of a diverse background. The impact that unique cultures have on family and environment can influence many aspects of your care - from how they respond to an assessment, to dealing with home remedies or accusations of abuse resulting from what was otherwise a common practice in their country of origin. This presentation will take a look at common parenting practices from a variety of cultures and how they can impact your assessments and treatments. Sometimes you just need a bigger box of crayons; why use plain old orange when "burnt umber" will fine-tune your picture to a masterpiece worthy of the refrigerator!



Instructor

I-9 Critical Thinking: A New Approach to Patient Care William O'Brien

Research shows that paramedics and other EMS responders benefit from increasing their practice of critical thinking, problem- solving and decision making. By using the Recognition-Primed Decision Model (RPDM), a responder is able to use situation matching with previously experienced problems, developing expectations for what may happen in this situation, and finding what worked in the past, evaluating to find a workable solution and implementing a reasonable plan of action to solve the problem. Because in EMS, we pride ourselves in making the best patient care decisions possible, we must explore ways to enhance our thinking process. Critical thinking can greatly impact patient care and be enhanced by infusing it into all aspects of our lifelong learning.

SUNDAY, NOVEMBER 4, 2012

9:30-10:45

Critical Care

(continued)

CC-9 Lethal Exposures: Carbon Monoxide and Cyanide *Mike McEvoy*

Carbon Monoxide leads poisoning deaths worldwide and recent evidence of harm from low-level CO exposure increases danger for emergency responders. This talk will review effects of CO exposures, medical devices that detect CO-exposed patients, and how EMS and firefighters should evaluate patients at the scene of CO alarms, and CO assessment during firefighter rehab. Hydrogen cyanide (HCN) is now believed the leading cause of fire fatalities, and our failure to recognize CN poisoning in fire victims results in higher death rates in the US than in Western Europe and Japan. Prompt recognition and treatment with a new, safer antidote can be expected to reduce deaths from fire and smoke inhalation.

Leadership L-9 EMS Legal Mythbusters Matthew Streger

Frequently we hear something repeated often enough that we believe it to be true, even when a closer look reveals that there is no support for our paradigm. This lecture is designed to address several medical-legal areas that impact EMS providers, including consent & refusal, regulating off-duty conduct, free speech, negligence & immunity, documentation and fraud. Each of these will be examined from a legal basis to find out which of the myths are busted and which are accurate.

Emergency Preparedness

EP-9 Medical Coordination Centers: Situational Awareness, Planning, and Operations *Tim Phelan*

This presentation is designed to provide an in-depth look at the workings of the UMDNJ University Hospital EMS Medical Coordinator Center and why the MCC program is an integral part of what the EMS provider does on a daily basis. The presentation will cover the history of the program, situational awareness methods, NJ EMS Task Force integration, Federal, State, County, and local agency involvement, Multi-Agency Coordinating Center operations, and day-to-day operations.

11:00-12:15

Provider-ALS **PA-10** Swimming With Sharks *Jim Graham*

This program will speak to the differences between criminal and civil litigation, how the two are different, how they are the same, and how they intertwine. It will speak specifically about preparing the provider for their day in court and is unique in that it was developed with the assistance of defense attorneys and litigators revealing tricks, tactics, and wordplay used to direct testimony.



Provider-BLS

PB-10 Man vs. Machine: "ATV" Trauma Case Studies Jason Dush

All-terrain vehicles are popular off road vehicles used for a wide variety of work and recreational activities. Recently, the growing popularity of ATVs and the increasing size and power of the vehicles has led to concern over injury risk. The Consumer Product Safety Commission estimates that ATVs result in more than 100,000 emergency department visits annually, including more than 30,000 injuries to children 16 years of age and younger. During the past decade, more than 200 children have died annually due to injuries sustained on ATVs. Children make up a disproportionate number of ATV injuries. This lecture will focus on the most commonly seen injuries as well as their management.

SUNDAY, NOVEMBER 4, 2012

11:00-12:15

EMSC

(continued)

EMSC-10 Update on Common Pediatric Respiratory Illnesses *Joseph Saloma*

Correlating with the time of this conference, there is historically an increase in the number of calls for pediatric respiratory emergencies each fall. This lecture will review the major respiratory diseases (eg: asthma, croup, RSV, bronchiolitis, pneumonia) and how to differentiate one from another. Audio and visual aids will be utilized so that the participants can see and hear the differences. Treatment updates will also be discussed for the various respiratory illnesses presented.

Provider-ALS/ Provider-BLS

PA/PB-10 When Minutes/Seconds Count - Facing the Challenge of End-of-Life Pre-Hospital Care Sam LaCapra

Are you prepared to handle end-of-life decisions? Do you have the confidence to lead your crew through the tough options that are available? This session will review complex end-of-life cases and discuss systematic ways to navigate through the issues that face EMS providers when dealing with end-of-life patient situations.

Critical Care

CC-10 The Acute Diabetic: A Case Study *Kenneth Szwak*

This lecture is based on an actual patient case in which the patient presented in Diabetic Ketoacidosis (DKA) but with a normal blood sugar. The lecture is intended to provide a greater understanding of the pathophysiology of DKA, how atypical presentations can occur, and how to "treat the patient, not the monitor" or in this case, the glucometer.

OEMS Update

OEMS-10 HOLD ON - IT'S A WILD RIDE! Steering the Future of EMS Through Data Collection *Terry Clancy & Tim Seplaki*

So your agency has been utilizing electronic patient care reporting (ePCR) for some time now; but where does that data go? What does it look like and how is it used for examining EMS system performance? Did you know that New Jersey is releasing an EMS Data Report? What's in it and how will it be used to improve the quality of EMS care in New Jersey? Join staff of the Office of EMS as they answer these and other questions about EMS Data in New Jersey as we move forward in collecting EMS data statewide. Attending this interactive session will surely get you thinking about how to examine your data to improve the outcomes of the patients you care for, improve the quality of EMS care delivered in your service area, and improve efficiency of resource use.

Emergency Preparedness

EP-10 Dangers In Your Backyard: Successful EMS Planning for Small-Scale Community Events *Richard Huff*



EMS types tend to just think about the big one. While that's fine, EMS professionals also need to think about the little events happening in their towns all the time that have the potential to turn bad. They need to know how to put together a plan for local events ranging from fairs and balloon festivals to concerts and more. In fact, those events are more likely to result in a need for EMS planning than most others. Responsible EMS leaders need to plan for "what ifs." What if a ferris wheel topples? What if a craft fair stage crashes? This class will cover planning for events large and small, and the tools necessary to put together an operations plan, staffing, managing staff and other details. Likewise, the class will show participants how creating such plans are good for the organization in terms of community outreach, morale and training. As we know, the first few minutes after an incident are critical, yet also fraught with challenges. This class will show attendees how to prepare for such incidents and be ready when an accident occurs.

SUNDAY, NOVEMBER 4, 2012

1:45-3:00

Provider-ALS

PA-11 The Ethical Dilemma - Ethics Outside the Box

Jim Graham

The workplace is full of atypical ethical dilemmas faced by those who work in public service. This will provide a discussion about some of the dark secrets that many try to keep to themselves. It will define how policy dictates actions but not always ethics and the difference between the two. We will discuss how some policies can be adapted to fit almost any situation and the implications of an ethical violation.

Provider-BLS

PB-11 Youth Victims of Violence - Assessment and Awareness of the Effects of Violent Injury *Patty Vitale*

The problem of youth violence has become a nationwide epidemic and is the second leading cause of death among 10-18 year olds. Even more importantly, the short and long term effects of violence are being studied and there are significant psychological and biological changes that occur in youth victims of violence. Pre-Hospital Providers assess injured youth victims of violence on a regular basis. In many cases healthcare providers may assume these incidents are not random or provoked. This lecture is dedicated to reviewing the latest research on the psychological and biological effects of violence on our youth. Best practices for assessing and managing youth victims of violence with the goal of providing pre-hospital providers with the tools needed to apply these skills to their practice.

EMSC

EMSC-11 Septic Appearing Infant

Joseph Saloma

At any time, EMS can receive a call for a sick infant. However, all may not be what it appears. A sick looking infant may not have a cold at all and may be sicker than he or she appears. The differential diagnoses range from a cold to congenital heart disease to inborn errors of metabolism. The proper treatment of an ill-appearing infant begins with obtaining a thorough history and physical exam. This lecture will equip the provider with the tools needed to help differentiate a "cold" from something possibly life threatening.

Instructor

I-11 ROAD WORK AHEAD - Intersection of EMS and Critical Care *Mark Bober*

Medicine is teamwork and the best medicine is practiced in healthcare systems that establish the most effective team strategies. Outsiders have historically viewed EMS as a means of transportation with basic, short-term patient care as almost an afterthought. At times it seems we allowed the "Intensive Care Unit" in MICU to be forgotten. Participants in this session will gain perspective of how EMS is stepping up in NJ and across the country to play a larger role as part of the healthcare team. A renewed focus on the EMS Critical Care relation ship will be established through measurable data and industry trends.

Leadership
L-11 Different People, Different Brains
Robert Luckritz

Much has been written and discussed in our industry regarding learning styles and effective teaching methods. This presentation adapts these ideals with additional information on the theories of organizational behavior to demonstrate to managers how they can better communicate with their staff, co-workers, and subordinates. Further discussion will occur on building an effective leadership team that capitalizes on behavioral strengths and supports behavioral weaknesses. Students will gain specific understanding of the development of personality types, learning styles, and communication techniques. The lecture will include a brief overview of the Jungian philosophies, including personal interaction, information gathering, decision making, and life structure. Participants will have a chance to work together to develop techniques to communicate with individuals with different personality structures. Significant discussion will occur regarding utilizing the various strengths and weakness to develop an effective leadership team. Students will have the opportunity to consider their own leadership teams and identify potential "blind-spots" and develop techniques to better focus their efforts to address these issues.

SUNDAY, NOVEMBER 4, 2012

1:45-3:00

Critical Care

(continued) CC-11 Don't Judo

CC-11 Don't Judge A Book By Its Cover: Atypical & Misleading Patient Presentations *Kenneth Szwak*

A series of five case studies will be reviewed in which patients presented with atypical symptoms/complaints yet yielded significant injuries or illnesses. Cases will review each patient from presentation to diagnosis and how each case relates to EMS providers.

Emergency Preparedness

EP-11 Organized Chaos: Four Patients and a Medic

Jason Dush

Should the rescuers move quickly through all the victims making some errors? Or, should they go more slowly, aiming for a higher degree of accuracy? Should they begin treatment, or finish the triage first? Should they start CPR on the victim who is in full arrest? The answers to these questions call for a sensible, orderly triage protocol for MCIs. A search of paramedic training material and medical literature reveals several applicable concepts, but no specific, step-by-step plans for initial MCI triage for small scale incidents.



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