

Maryland

# E·M·S

## NEWSLETTER

Vol. 17, No. 6

For All Emergency Medical Care Providers

February 1991

### EMS Responds to Tornado in Reisterstown

The crew of Engine 412 of the Reisterstown Volunteer Fire Company (VFC) were called out in the driving rain and gusting wind on October 18 to what they thought would be an apartment fire. Instead, they were shocked to find devastation as far as the eye could see—trees uprooted, cars overturned, and buildings ripped apart. Although Maryland is a very low incidence area for tornados, the Reisterstown/Glyndon area had been hit by a Force 1 tornado with winds of 100-125 mph. (Force 5 tornados, the most severe, have winds of 250-300 mph.)

Chief Ted Rohde, who was on the first responding vehicle, reported an apparent tornado and requested additional fire and medical support. "From my vantage point I saw six apartment complexes and numerous single-family dwellings totally destroyed," says Chief Rohde. "I expected mass casualties." He sent his

crew in two at a time to begin searching the buildings.

Roads leading to the incident from every direction were blocked by trees and debris. Responding units circled the area futilely trying to find openings for medical units. The downed trees blocking the roads had to be dismantled by chain saws—some provided by rescue trucks and others by neighbors who used their own. Able-bodied citizens eager to assist in the rescue effort helped move the cut-up trees out of the way.

Incident Commander Deputy Chief J. Edward Crooks of the Baltimore County Fire Department (BCFD) sectorized and coordinated the incident; Battalion Chief Gary Warren of the BCFD was responsible for the medical sector. Rescue, fire, and EMS personnel searched the unstable buildings. The Baltimore County Fire Department Advanced Tactical Rescue Team went in with search dogs to verify

that nobody was trapped.

Because of the potential for numerous casualties, units responded from Baltimore County as far away as Kingsville and Perry Hall; Carroll County; and Baltimore City as far away as Belair Road. Treatment/triage areas were set up and several fire surgeons managed triage to Baltimore County General and Sinai hospitals. Although there were many minor injuries, it was amazing that only nine injured patients needed transport to hospitals.

Another sector was set up for displaced people at the Reisterstown VFC firehouse. Food, communications, shelter, and medical attention for walk-in victims were provided there until the Red Cross set up its site at nearby Franklin Middle School. The Maryland Critical Incident Stress Debriefing Team was available for psychological support on site and at the firehouse.

Due to the magnitude of the

*(Continued on page 2)*

### Ford Ambo Owners. . .

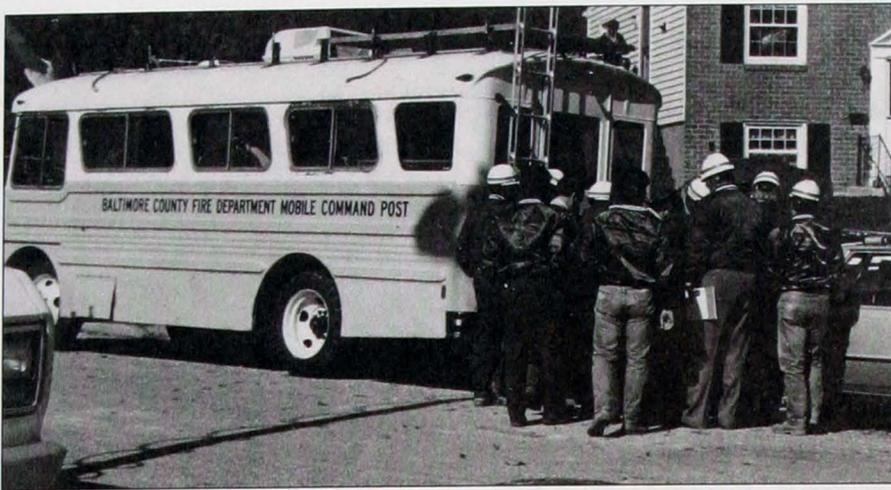
A problem has been identified with the adjustment and replacement of drive belts on 1988-1990 Ford E250, E350, F250, F350, and F superduty trucks having a 165 Amp Leece-Neville alternator.

Improperly adjusted drive belts may break, resulting in loss of the service provided by the alternator and vacuum pump.

Additional information is available from your Ford dealer (Technical Service Bulletin # 90-11-12) or by writing to Ken Young, MIEMSS Training & Certification, 636 W. Lombard Street, Baltimore, MD 21201.



Damage was extensive during the recent tornado that ripped through the Reisterstown/Glyndon area.



The Baltimore County Fire Dept. Mobile Command Post (above) and the Maryland Chapter of the American Red Cross Disaster Services (below) at the site of the tornado.

## In Case of Tornado, You Should . . .

Although the "Wizard of Oz" has indelibly linked the relationship of tornados and the state of Kansas in most of our minds, it might surprise you to know that Maryland also has one or two tornados a year. Maryland's tornados are generally smaller, occur in rural areas, and are less damaging than those in the midwest, says Norm Lewis, prime-time meteorologist for WMAR-TV in Baltimore. Tornado formation requires a combination of three conditions: cold dry air; warm moist air; and hot dry air. Tornados form in minutes and dissipate quickly, unlike hurricanes, which usually form over a period of several days.

In 99 out of 100 cases, the tornado precedes the rain by about 15-20 minutes. In the Reisterstown storm the rain and tornado struck simultaneously, obscuring the view of the cone formation. This made it difficult for the weather service to ascertain that it was, indeed, a tornado.

Mr. Lewis suggests that if you learn about a tornado watch you should be prepared to move to a place of safety. A tornado warning means that the tornado is happening at that instant. The safest places in a house are the basement or the bathroom.

(Normally the bathroom is the smallest room, the plumbing fixtures are heavy and not easily moved, and the pipes in the wall add strength. Usually the only things left of a destroyed house are the bathtub and toilet, Mr. Lewis says.) If neither a basement nor bathroom is available, stand in a doorway. The frame gives it extra strength.

If the outside air pressure drops, the air pressure inside the house tries to escape. Some people believe that opening windows will equalize air pressure and keep the tornado from damaging a house. Mr. Lewis says this is a fallacy—some air will get out if you open a window, but it is impossible to move the volume of air quickly enough. You would probably be caught by the storm while opening the windows and be hit by "exploding" glass. The best advice is, if you see threatening weather, seek shelter immediately.

◆ Erna Segal

## EMS Response to Tornado

(Continued from page 1)

incident, State EMS Director Ameen Ramzy, MD, Chief Paul Reincke (BCFD), and fire department staff were on the scene to assist in the coordination of the incident. Dennis Rasmussen, then Baltimore County Executive, and Governor William Donald Schaefer both came to the scene to evaluate the extent of the devastation and determine what support was needed at the county and state levels.

Reisterstown VFC President Craig Coleman describes the word-of-mouth response: "A Baltimore County Firemen's Association banquet had been planned for that evening at the Pikesville Volunteer Fire Department (VFD). The Pikesville VFD packed up the whole banquet and delivered it to the Reisterstown VFC for the tornado victims. Local merchants brought in food and other members of the community brought in blankets, pillows, and clothing."

Police later escorted residents to

the damaged buildings so they could gather necessities. A police command post was established in a trailer to provide around-the-clock security to the area. This service was maintained for several weeks.

"Luckily the potential for mass casualties was not realized, partly because there were not many people home at that time," says Chief Rohde. "There were a number of elderly people in the apartments, but the tornado struck in the late afternoon before most working people had returned. The rescue effort also had the advantage of daylight for part of the time."

Battalion Chief Warren says, "This incident, like the Amtrak incident, proved that the total Maryland response system—fire departments, police departments, EMS providers, MIEMSS, and the various other agencies involved—is truly one of the finest available to any citizens. It is recognized across the nation."

◆ Erna Segal



**April 26-28, 1991**

*at the Greenbelt Marriott Hotel in Greenbelt, Maryland*

*Sponsored by*

**Maryland Institute for Emergency Medical  
Services Systems and the Region V EMS Advisory Council**

*Hosted by*

**Prince George's County Fire Department**

## **The Program**

EMS Care '91, Maryland's eighth annual statewide EMS conference, will focus on meeting the needs of the provider. With the input and suggestions of providers throughout the state, we have developed a program that balances the basics with new and innovative programs of interest to prehospital care providers.

## **Continuing Education Credits**

Twelve hours of continuing education are available for the Saturday/Sunday programs. EMT-As who plan to earn all of their continuing education credits at EMS Care must choose workshops that add up to at least 4 hours of medical(M), 4 hours of trauma (T), and 4 hours of Local Option (L). ALS credits (categories A, B, and 2) are also available. Categories are designated for each course.

## **Hotel Accommodations**

A special conference rate of \$70 per night plus 15% tax, single or double occupancy, has been arranged with the hotel. Send your registration directly to the hotel to ensure your reservation. These rates are guaranteed only if your reservation is received by April 8, 1991. Tax-exempt organizations must pay by check (imprinted with organization's name), accompanied by documentation of tax-exempt status.

## **Social Events**

During refreshment breaks and Saturday evening's reception and dinner/dance, there will be many opportunities to share ideas, to network, and to have fun.

## **Directions**

From the Capital Beltway (I-95), take Exit 23 to Kenilworth Avenue. Follow through one light. Take the next left on Ivy Lane. The Marriott is the second building on the left.

## **Registration Information**

Pre-registration is required. We will accept registrations received in the Region V Office by April 22 if space is available. **No walk-in registrations will be accepted.** Refunds, excluding a \$20 processing fee, will be provided for cancellations received in writing prior to April 12, 1991. We can invoice companies and government agencies directly. Contact the Registrar for details.

## **Fees**

An \$80 registration fee covers all conference activities on Saturday and Sunday, continental breakfast both days, the luncheon and a reception on Saturday, and brunch on Sunday. A limited number of tickets to the Saturday evening dinner featuring cornish game hen are available for \$15. The cost of the pre-conference program on Friday is \$30 for EMS Care participants also attending the Saturday and Sunday sessions and \$35 for those attending only the Friday session.

## **Early Registration Bonus**

A deluxe canvas EMS Care tote bag or mug will be provided for participants whose registrations are postmarked prior to March 20, 1991. EMS Care shirts for both adults and children will be available for purchase.

## **Sponsors**

We have been able to keep the costs of EMS Care well below comparable programs because of the outstanding support of the hospitals and trauma centers across the region and the state. The physicians of the MIEMSS Shock Trauma Center provided generous support to underwrite the expenses of the academic program, while the printing was provided by MIEMSS. The dinner on Saturday is sponsored by the Region V hospitals, emergency departments, and medical directors. Please note the other sponsorships indicated throughout the program.

## **Additional Information**

For additional information, contact Registrar Angie Glidden at the Region V Office, 5111 Berwyn Road, College Park, MD 20740 or call 301-474-1485.

## Friday, April 26, 1991 Pre-Conference Programs

7:30 am  
Registration

8:30 am - 5:00 pm

### Hazardous Materials Awareness—Level 1

A basic introduction to the hazardous materials problem from the first responder perspective. A certificate of completion will be awarded. BLS, 4 HRS/L; ALS, 4 HRS/2

### The Maryland Hazardous Materials Program for EMS Providers

This program will prepare ambulance personnel for the EMS role in a HazMat incident. It includes the A.S.A.P. (Always Suspicious, Always Prepared) program as

well as hands-on experience in preparing the ambulance and the provider for the transport of a grossly decontaminated patient. Prerequisite: Haz Mat Awareness. BLS, 4 HRS/M and 4 HRS/L; ALS, 4 HRS/B and 4 HRS/2

### Emergency Vehicle Driver Training Program

This program for emergency vehicle operators will combine classroom preparation and behind-the-wheel experience. Prerequisite: A valid Maryland driver's license. Enrollment is limited. BLS, 4 HRS/L; ALS, 4 HRS/2

### Provider-Based Quality Assurance Facilitator's Workshop

Quality assurance is the challenge of the 90s for EMS. PBQA is based upon the concept that the most successful QA programs are ones in which the providers are involved in both identifying QA needs and establishing policy. Attendees will learn how to implement this

program in their own squads. BLS, 4 HRS/L; ALS, 4 HRS/2

8:30 am - 1:00 pm

### Hazardous Materials Program for Hospital Personnel

This half-day workshop will provide hospital personnel an overview of the hazardous materials problem facing hospitals, the haz mat response in the field, and the generic hospital haz mat protocol. Practical information regarding how a hospital can meet the haz mat challenge will be included. Recommended for hospital personnel. This half-day program includes lunch.

The Maryland Council of the Emergency Nurses Association will hold its annual meeting at EMS Care '91. Contact Dottie Dyott, RN, at 301-822-0357 for details.

## Saturday, April 27, 1991

7:30 am  
Registration

Continental Breakfast (Courtesy of Suburban Hospital Emergency Department and Trauma Center)

8:30 am  
Opening Ceremonies

Chief Steven T. Edwards  
Prince George's County Fire Department  
James P.G. Flynn, MD  
Director, Maryland Institute for Emergency Medical Services Systems  
Parris N. Glendening  
Prince George's County Executive

9:00 am  
Where Does Maryland Stand: A National Perspective on Prehospital Emergency Medical Services

Ameen I. Ramzy, MD, FACS  
State EMS Director  
BLS, 1 HR/L; ALS, 1 HR/2

10:00 am  
Minimizing Damage from Trauma to the Spinal Cord

Walker Robinson, MD  
Director of Neurosurgery, MIEMSS  
BLS, 1 HR/T; ALS, 1 HR/B

11:00 am  
Workshops

Workshops A-G will be worth 1 CEU in the category indicated.

#### A. Hi-Tech Patients

An increasing number of people in the community have sophisticated in-dwelling devices and implants which may affect emergency care by prehospital care providers. This workshop will provide practical advice on coping with such patients. BLS/M; ALS/B

#### B. Pediatric Medical Assessment

This workshop will cover the assessment portion of the Pediatric Advanced Life Support Program (PALS). BLS/M; ALS/B

#### C. Mechanisms of Injury

Understanding how an injury occurred can assist prehospital care providers in assessing a patient's severity and in making triage decisions. BLS/T; ALS/B

#### D. The Roadside Detective

A doctor will provide the clues but you will do the work in this unique approach to developing your trauma assessment skills. BLS/T; ALS/B

#### E. Issues in BLS/ALS Interface

We talk about the team approach in EMS, but how do we make sure that it is a reality? A veteran EMS provider will lead a lively discussion on interface issues and how we can improve team play. BLS/L; ALS/2

#### F. Volunteer Recruitment Workshop

Practical suggestions on recruiting EMS volunteers to work in your squad. BLS/L; ALS/2

#### G. Reaching and Teaching the Adult Learner

A master teacher shares tips on EMS teaching. Valuable for instructors and company training officers. BLS/L; ALS/2

12:15 pm  
Luncheon

1:30 pm  
Workshops A-G will be repeated.

2:30 pm  
Workshops

Workshops H-M will be worth 1.5 CEUs in the category indicated. Workshop N will last 3 hours and have 3 CEUs.

#### H. Obstetrical Emergencies

An experienced OB nurse will discuss obstetrical emergencies and how to cope with them. BLS/M; ALS/B

#### I. Neurological Field Assessment & Emergency Care in the Older Patient

As EMS providers, we need to hone our skills in evaluating older patients. A neurologist will present useful information in evaluating neurological status, assessing altered mental states, and providing care. BLS/M; ALS/B

#### J. Trauma Case Reviews

A trauma surgeon from the S.T.A.T. Unit at Prince George's Hospital Center will review recent cases. BLS/T; ALS/B

#### K. Trauma Management from the Urban Perspective

A comparison of how trauma patients are managed in Maryland and in New York City from a trauma surgeon's perspective. BLS/T; ALS/B

#### L. Small Incident Triage & Management

We tend to associate triage with mass casualty situations. However, we should also be initiating a basic incident command system and triage for multi-casualty incidents with 3-10 victims. BLS/L; ALS/2

#### M. Designing Company EMS Drills and Continuing Education Offerings

Learn how to develop programs to meet your company's specific training needs. BLS/L; ALS/2

## Saturday, April 27, 1991 Continued

### N. Mass Transit/Metro Rescue

This 3-hour workshop will focus on mass transit and subway rescue operations. Practical field experience will be included. Limited spaces are available. **This workshop will not be repeated.**

BLS, 3 HRS/L; ALS, 3 HRS/2

### 4:00 pm

**Break (Courtesy of the Maryland Chapter of the American College of Emergency Physicians [ACEP])**

4:10pm

Workshops H-M will be repeated.

6:30 pm

**Reception for All Participants**  
"Mocktails" and light refreshments

7:30 pm

**Dinner**

9:15 pm

**Dance (Open to ALL attendees.)**

## Sunday, April 28, 1991

8:15 am

**Continental Breakfast (Courtesy of Southern Maryland Hospital Center and Trauma Center)**

9:00 am

**General Session**

BLS, .5 HR/L; ALS, .5 HR/2

9:40 am

**System Abuse vs. Patient Neglect: Balancing the Scales in EMS Today**

A panel of EMS providers and administrators, as well as legal and medical authorities, will debate some of the controversial issues facing the EMS community today. A lively discussion is expected. BLS, 1.5 HRS/L; ALS, 1.5 HRS/2

11:00 am

**Workshops**

Workshop O-U will be worth 1 CEU in the category indicated.

### O. Drowning & Near Drowning

A practical approach by a certified diving instructor. BLS/M; ALS/B

### P. Airway Management

A practical review of airway management including advanced techniques. BLS/M; ALS/A

### Q. Chest Trauma

A review of the kinematics and pathophysiology of trauma to the chest cavity. Emphasis will be on field assessment and treatment. BLS/T; ALS/B

### R. Developing Interpersonal Communication Skills

How effectively we communicate with our patients, our co-workers, and hospital determines how well we do our jobs. This workshop will cover techniques to assist you in communicating more effectively in all areas of your life. BLS/L; ALS/2

### S. The Problem Provider

How do you identify a provider impaired

by alcohol or drugs? What can you do to help this person? What if this person is you? BLS/L; ALS/2

### T. Incident Command

How does an incident command system work and where does EMS fit? Who is in charge of what? Examples will range from small incident management to NDMS. BLS/L; ALS/2

### U. Patient Interviewing Techniques

The best source of information about the patient is the patient. How well do we ask questions and how well do we listen to the answers? Practical help on sharpening our patient interviewing techniques may not only improve patient care but also help to keep us out of the courtroom. BLS/L; ALS/2

12:15 pm

**Brunch**

1:30 pm

Workshops O-U are repeated.

2:20 pm

**Break (Courtesy of the Maryland Chapter of ACEP)**

2:30 pm

**Workshops**

Workshops V-AA will be worth 1 CEU in the category indicated.

### V. Differential Assessment of Chest Pain

A cardiologist will review signs and symptoms associated with different types of chest pain that are critical to patient outcome. A cardiologist will review these. BLS/M; ALS/A

### W. Trauma in the Older Patient

The older generation in America is healthier and more active than previous generations. Because of this we are seeing an increasing number of older trauma patients with special medical needs. Are these patients being

properly assessed and triaged? BLS/T; ALS/B

### X. Pediatric Trauma Assessment

The special needs of the injured child will be the focus of this workshop. Effective assessment and resuscitation will be included. BLS/T; ALS/B

### Y. Legal Case Reviews

A review of actual court cases involving EMS providers will be presented. BLS/L; ALS/2

### Z. Disaster Response and Management

Preplanning, training, strong mutual aid agreements, and resource inventories are just some of the ways small communities can be prepared for the "big one." BLS/L; ALS/2

### AA. Public Information Programs for EMS Organizations

Virginia has developed innovative programs for rescue squads. Learn how they can work for you. **This workshop will not be repeated.** BLS/L; ALS/2

### BB. Rescue and Extrication Techniques for EMS Providers

This 3-hour practical workshop will provide valuable techniques for the EMS provider. **This workshop will not be repeated.** BLS, 3 HRS/L; ALS, 3 HRS/2

3:50 pm

**Break (Courtesy of the Trauma Service, Childrens Hospital National Medical Center)**

4:10 pm

Workshops V-Z will be repeated. Workshop BB will continue.

### CC. Careers in EMS (Panel)

Finish the day by exploring opportunities for a career in EMS. Representatives from public and private agencies that employ EMS providers will make brief presentations and be available for your questions. **Offered only once.** BLS, 1 HR/L; ALS, 1 HR/2



## MCISD Members Honored at Training Session

The fifth annual Maryland Crisis Intervention Stress Debriefing (MCISD) educational and training session, held September 17 and 18 in Baltimore, focused on the theme "Taking Care of Each Other." Currently there are 92 MCISD members and 34 trainees—all volunteers.

In welcoming those attending the program, Marge Epperson-SeBour, director of the MCISD, noted how the size of the group and the number of requests for CISD assistance have grown. In the past nine months, 31 debriefings, 24 defusings, and 18 educational sessions were conducted for 1325 first response personnel. (A CISD is a group interaction in which a team of mental health professionals and fire/rescue/police/EMS peer support persons allow EMS personnel to talk about their thoughts, actions, and reactions to a stressful event. They learn what are normal expected behaviors and feelings following events such as disasters, mass casualty incidents, the deaths of colleagues in the line of duty, the tragic deaths of children, and other catastrophic events.) Ms. Epperson-SeBour praised the MCISD for being a model for the nation. Although there are approximately 300 CISD programs throughout the nation, few are statewide, and they lack the uniformity of training and continuing education, data gathering capability, and accountability that are necessary for the programs to continue to be effective and grow.

Following speakers on topics such as post-traumatic stress disorder, alcohol/drugs and accidents, the CISD process, stress and car crashes, and others, awards were presented to MCISD members who had made outstanding contributions. Officer James Shelley was recognized for his efforts to advance the MCISD within the Baltimore City Police Department; Brian Flynn (National Institute of Mental Health), for his support of the MCISD through his national networking; Larry West (EMS Training & Certification), for his work in developing MCISD in Region II; and Corp. Rose Miller, for her enhancement of the MCISD program through her work with the Baltimore County Police Department and civilian victims of critical incidents.



*MCISD Director Marge Epperson-SeBour with team members honored for outstanding contributions: Maj. Patrick Bradley, Brian Flynn, Dep. Chief Larry Mabe, Chief James Terrell, Officer James Shelley, Corp. Rose Miller, and Larry West.*

Certificates of Appreciation were presented to: Maj. Patrick Bradley, for promoting the MCISD in the Baltimore City Police Department; Chief James Terrell, for his support of the MCISD in

Harford County; and Deputy Chief Larry Mabe, for his development of the MCISD as a support service to the volunteer system in Harford County.

◆ Beverly Sopp

## COMMENTS

The dictionary defines the word train as "to form by instruction, discipline, or drill; to teach so as to make fit, qualified, or proficient." A major emphasis of EMS activity is training. While initial training and continuing education comprise a major focus of EMS activity throughout the year, special opportunities are on this year's agenda.

The 13th National Trauma Symposium will be held in Baltimore from March 21 to 23, 1991. While the symposium focuses primarily on topics for in-hospital providers, a special segment this year will focus on EMS. On Saturday afternoon, March 23, several distinguished national faculty will present some of the most recent research findings and their relevance to EMS. These speakers will include Dr. Charles Brown from Ohio State University, Dr. Joe Ornato from the Medical College of Virginia, Dr. Doug Floccare from MIEMSS, and Dr. Lenworth Jacobs from the University of Connecticut.

The 8th annual statewide EMS conference, EMS Care '91, will be held this year on April 26 to 28, 1991, at

the Greenbelt Marriott. Twelve hours of continuing education credits are available for the two-day program, in addition to a pre-conference program. A range of relevant and stimulating topics will be addressed.

Events halfway around the world can even have an impact on training. Because of the military situation in the Persian Gulf, it was recognized that EMS providers being called to military service needed special provisions for their training and certification needs. For this reason, a policy was developed by MIEMSS and approved by the State Board of Physician Quality Assurance in November 1990 to allow for a modified recertification process in the event of deployment or activation of an ALS provider. The policy likewise is being extended to BLS providers.

Training should serve to make all of us "fit, qualified, or proficient" to better serve patients in need of emergency care.

◆ Ameen I. Ramzy, MD  
State EMS Director



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## DATED MATERIAL



### **PG County Celebrates Fire/Rescue Services Day**

*(Top, left) Prince George's County Fire Chief Steven T. Edwards welcomes visitors to Fire/Rescue Services Day and the dedication of the Fallen Firefighters Memorial last fall at the Cranford/Graves Fire Services Building in Landover Hills. (Bottom, left) Inscribed on the memorial are the names of 29 PG County Fire Service members killed in the line of duty. Fire/Rescue Services Day celebrated the 20th anniversary of PG County's Fire Department, which is recognized internationally as one of the most progressive combination fire/rescue systems.*

### **NREMT-P Exams**

The MIEMSS Office of Prehospital Training & Certification and the Paramedic Education Committee have announced the following dates for National Registry Paramedic examinations in 1991:

**June 11** - Written Exam  
UMBC

**June 14** - Practical Exam  
Essex Community College

**July 2** - Written Exam  
Prince George's County

**July 10** - Practical Exam  
Prince George's County

**October 2** - Written Exam  
MIEMSS

**October 4** - Practical Exam  
Charles County Community College

All candidates must register a minimum of six weeks in advance in order to be admitted to the exam. For further information on eligibility and registration, students who took their EMT-P training in Maryland should contact their instructor; reciprocity candidates should contact Dia Gainor, MIEMSS Prehospital Training & Certification, at 301-328-3666.

### **STC Gala to Be Held**

The sixth annual Shock Trauma Gala is scheduled for May 11, at the Towson Center, Towson State University, from 7:30 pm until midnight. Gov. William Donald Schaefer is the honorary chair of the gala. For information contact Allison Bell at 301-328-4400 or Anne Taylor at 301-328-8778.

### **Attention: EHS Grads**

Emergency Health Services graduates of UMBC are invited to attend the Annual Spring Banquet (celebrating the 10-year anniversary of EHS) on May 4, 1991. For further information, call EHS at 301-455-3223.

See insert for EMS Care '91 program and registration.