



DAY 1

CONFERENCE

AGENDA

Saturday, February 04, 2023

Easton High School, Easton, MD 21601

- 0730–0800 Registration**
- 0800–0845 Welcome with Dr. Ted Delbridge 0.75 M**
- Ted Delbridge, MD, MPH, FACEP, Executive Director, MIEMSS
- Dr. Delbridge will highlight some of the latest trends in EMS as well as share Future Plans for Maryland Emergency Medical Services as we move forward in 2023 and beyond.
- 0845–1000 Cannabis Exposure from Tots to Teens 1 M**
- Elizabeth Quaal Hines, MD, Assistant Medical Director, Maryland Poison Center; Assistant Professor, Department of Pediatric Emergency Medicine, UMMS
- This presentation will identify the incidence and trends seen in the exposure to cannabis for “pediatrics”. The presentation will discuss both intentional and unintentional forms of cannabis ingestions / inhalation, key assessment sign and symptoms, and prioritized care by EMS Clinicians.
- 1000–1030 Break with the Exhibitors**
- 1030–1145 Managing the Effects of Less-Lethal Munitions 1 T**
- Randy G. Stair, MSN, MA, RN, NRP, Supervisory Emergency Services Specialist, Emergency Services, James J. Rowley Training Center, United States Secret Service
- This course will cover the less-lethal weapons utilized by Maryland Police agencies to perform their job duties. This course will cover a variety of less-lethal weapons, how they are used by Law Enforcement, why they are used, and general safety concerns/challenges.
- 1145–1300 Lunch (included with registration)**
- 1300–1430 Breakout Sessions**
- 1430–1500 Break with the Exhibitors**
- 1500–1630 Breakout Sessions (repeated)**





BREAKOUTS

A Human Error & Patient Safety

1.5 M

Thomas G. Chiccone, MD, FACEP, Region IV EMS Medical Director

Given the inevitability of human error, this session shows that adverse events are still able to be prevented and that patient safety can still be assured. The session focuses on human and system factors, and explores the most common logic errors and biases of providers, as well as the actual process of decision-making through evitral thinking.

B The Beating Heart

1.5 M

Kevin Pearl, MD, Base Station Medical Director for Emergency Department, EMMS Shore Health

A pulse is always good, but what does the pulse and the EKG really tell us? Let's look at the clinicial presentation of rhythm with a focus on patient care.

C Advanced Airway Management: Trauma

1.5 T

Cody Winniford, BA, EMT-P, CCP-C, FP-C, PHI Air Medical
Bill Jansen, EMTP, FPC, Maryland State Police SOD

The goal of this session is to present you with new tools, ideas, and mental models that you can use without the need to modify approved clinical protocols (mostly), that will enhance your ability to safely and effectively manage a trauma patient's airway.

D LEADing Forward: How EMS Clinicians Can Interact with Individuals with Intellectual and Developmental Disabilities

1.5 M

Rae A. Oliveira, NRP, RN, ALS Education Coordinator, Montgomery County Fire and Rescue

Approximately 6.5 million people in the United States are diagnosed with Intellectual Disabilities and Developmental Disabilities (IDD/DD). Most IDD/DD are non-institutionalized and therefore live, work, shop, and interact within the communities served by EMS clinicians. This course will identify characteristics of IDD/DD patients, and how their behaviors and communication abilities may vary from the non-disabled population in crises or emergency situations. Using the Self-Advocate Educators (SAEs) with IDD/DD as simulated patient, participants will observe or take part in an emergency scenario for a patient with IDD/DD. *Pre-requisite: Completion of the MIEMSS Online Training Center course - Fire & Medical First Responders and People with Intellectual Disabilities and Developmental Disabilities. Participants will need to bring proof of completion for the prerequisite.*





BREAKOUTS

E When Animals Go Wild

1.5 T

Mary Alice Vanhoy, MSN, RN, CEN, CPEN, NRP, FAEN, Acting Director, Emergency Services, UMMS Shore Health

Humans and animals have lived together for thousands of years, but it has not always been a positive interaction. In only seconds they can go from majestic and loving to vicious and life-threatening. Let's explore the risk and patient care from your pet pig to a cute bear cub.

F Pelvic Injuries: EMS Triage to Temporizing/Definitive Surgical Management

1.5 T

Peter Mittwede, MD, PhD, Orthopaedic Trauma Fellow, R Adams Cowley Shock Trauma Center

This presentation will address the management of pelvic ring injuries, focusing on EMS triage, followed by emergency department management, then finally temporizing and definitive surgical treatment options.

G It's in Your Hands: Pediatric Out of Hospital Cardiac Arrest

1.5 M

Jennifer Anders, MD, FAAP, Associate State EMS Medical Director for Pediatrics, Base Station Medical Director, Johns Hopkins Children's Center

Pediatric Out of Hospital Cardiac Arrests (POHCA) occur in Maryland almost daily and the survival rate is low. Survival is directly impacted by the response of everyone in the Chain of Survival. First the caregivers (family, friends, child care) take action - CPR, and 9-1-1 call. Then - the focus is High Performance CPR for infants, children, teens, and adults. Pediatric HPCPR depends upon early, high-quality CPR (rate, depth and recoil), rapid defibrillations, and remaining in place. Pediatric HPCPR requires ALS to focus on epinephrine before intubation. Children are NOT small adults - the equipment is different sizes. But they deserve the same intentional on scene time, standardized range of dosages, and precision in CPR from Clinicians.

Dr. Jen Anders has a challenge for every station - "It is in your hands" learn what needs to change in the delivery of CPR to children. Stay and practice on manikins that give feedback.





DAY 2

CONFERENCE

AGENDA

Sunday, February 05, 2023

Easton High School, Easton, MD 21601

0830–0845 Registration

0845–0900 Welcome

0900–1015 Reassessing On-Going Assessment

1 M

Peter Fiackos, NRP, ALS Clinician Manager, MIEMSS

Although we train for the most extreme patient conditions, the reality is that the majority of patients that we treat are not truly critical. But how do we know if their condition worsens? The ongoing assessment of course... but are we so intent on monitors and numbers that we are missing important patient care components?

1015–1030 Break with the Exhibitors

1030–1145 See It...Say It: Keeping Our Patients Safe

1 M

Tim Chizmar, MD, FACEP, FAEMS, State EMS Medical Director, MIEMSS

Dr. Chizmar will discuss ways to recognize and avoid common errors in medical decision making. We will explore why some cases seem to “take wrong turns.” Finally, we will identify strategies that promote a culture of patient safety in EMS.

1145–1245 Lunch (included with registration)

1300–1415 Pedestrian Injuries & Fatalities in Maryland

1 T

Tim Kerns, PhD and Cynthia Spriggs, Maryland Highway Safety Office
Margaret Lauerman, MD Assistant Professor Surgical Critical Care, UMMS R A Cowley Shock Trauma Center

Pedestrian safety is an issue that affects everyone in Maryland— young and old, drivers and walkers, during the day and at night. Everyone is a pedestrian in some capacity at one point or another. Many unnecessary injuries and fatalities occur because of intoxication, ignorance, or inattentiveness by either or both motorists and/or pedestrians. This presentation will provide state and local injury & fatality data, injury patterns seen from pedestrian vs motor vehicle, and EMS treatment priorities after these crashes. Specific prevention measure to improve safety will also be discussed.

1415–1430 Break with the Exhibitors

1430–1545 Hemorrhage: The Silent Killer

1 T

Matt Levy, DO, MSc, FAWMS, FACEP, Medical Director, Howard County Fire & Rescue/MIEMSS Region III Medical Director

This session will provide an overview of the science behind current hemorrhage control interventions. The importance of prompt recognition and control of life-threatening hemorrhage will be reviewed. Strategies and best practices for prehospital care of the traumatic hemorrhage will be discussed.

