



Shocking News

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MEDICAL DIRECTOR'S NOTES



BY DR. STACEY GOUZENNE, MD

First, the good news. You all received a splendid compliment from Dr. Toussi, who feels that our improvement in attitude, knowledge and patient care has been exponential.

The JCHO Stroke Team was evaluating Rowan Regional Medical Center for its Stroke Center certification process and the Team said that the relationship between EMS and the facility regarding pre-hospital notification of possible stroke was "one of the best they had seen" in the country. Keep up the LASS and calling in with possible CVA's....

The hospital newsletter, on the recommendation of the OR staff, is going to feature our partnership with them and this may lead to an article in the local paper about RSI.

Lastly, one of our units transported a morbidly obese patient in respiratory distress without implementing RSI in the field. The paramedics were quite apologetic to Dr. Echterling. She, however, felt that they used superb judgment in NOT attempting to intubate the patient. It was apparently very difficult even for her. Remember the inclusion and EXCLUSION criteria have weights associated.

RSI continues. We had one patient who did NOT meet inclusion criteria. Please take the time to review the indications for RSI. We had one patient in whom the paramedics could not place the ETT. But, because we planned and trained carefully for just such an eventuality, the LMA was placed and the patient was delivered to the flight team with an intact airway. I would not consider that a "failed airway". BE SURE to have the receiving personnel confirm airway placement and document their name and title on the ACR. In addition, record the ETCO₂.

Animal lab dates are tentatively March 8th or 10th. I doubt we would need both dates. Please let Lennie know if you are interested so we can get an accurate head count. Of course, all the new hires are required to attend.

Still need a Risk Management Protocol, still...

You should be getting both positive and corrective input from the continuous Peer Review process. We have seen more great cases this month!

Where is our 4 year training schedule? Let's get started, so we can phase into our continuous certification process...

What else should we do? What else can we do to continue to grow and improve the service?

"Know thyself? If I knew myself, I'd run away." - Goethe

FROM THE EMERGENCY SERVICES DIRECTOR'S DESK



HAIL CAESAR ! [By FRANK THOMASON](#)

This month I want to talk a few minutes about our general direction using technology and how that will impact us all. But first, all the EMS Division staff get a big pat on the back for working with the state's PreMis system. The end of this is in sight folks - just hang on a little longer! There are probably other mentions of PreMis in the newsletter also. As some of you have heard we are getting close to selecting a vendor of choice. Several different EMS personnel have volunteered and stepped up to helping with this selection and evaluation process and those comments have proven invaluable. Its important that we consider all aspects in this large of a project and our fellow staff members have gone to great strides to leave no stone unturned and ask tough questions. Each of you has received an invitation to see a demonstration of the software shortly. I encourage you to stop by, if for only a couple of minutes to look at some of the hardware and software that we will be using. This process has not been without it's disappointments also. We requested proposals from 7 vendors and only received three. I still find this difficult to understand in that we are not asking for anything unique in this project that would make a vendor shy away, yet there were 4. So we move forward - but I feel strongly that our ultimate selection will do a great job for our on staff, our franchise agencies and hopefully our medical responders as well.

Next on the list is distribution of information. Tomorrow I will be issuing a memo to all staff announcing our move from paper memorandums to email and electronic based formats. Our setup of notification group lists have been successful. All department employees are included on at least ONE list depending on your position. But the great thing is that if your name is on multiple distribution lists you'll only get the email once (as opposed to the total number of lists your on!). Over the last two months Lennie Cooper has verified all email addresses and that has also allowed an opportunity for each of you to log in to your email and become accustomed to it. If you have questions, don't hesitate to ask. The web based format of our email system allows for everyone to be able to keep up with what's going on from anywhere you can get a PC and internet connection. This will certainly allow everyone to keep better informed of what's going on, changes and the like.

Supervisors and department administrators have also been using a web based status board so we could keep up with each other a little easier. Remember that this can also be updated from anywhere - not just the office and you can also add "future events" to automatically update your status throughout the day.

The next few months are going to see some dramatic changes to our website. With that will also come another version of electronic forms to allow staff to report and do tasks electronically instead of using paper forms. All of this is in the planning stages but from a few meetings I have had with some of you and your suggestions this will be a great step for us.

That's it for this month --- stay safe out there

MESSAGE FROM THE MANAGER



[By BETH CONNELL](#)

Ann Reece has taken over as the Emergency Services representative to the county Wellness Committee. Her first task in this new role is to coordinate the February 23rd health assessments for our department. Beginning at 0830 Health Stat personnel will be working with county employees. Personal health histories, blood pressures, height, weight, BMI and blood sampling are among the services planned.

By now supervisors should have handed out the health assessment history form and assigned appointments. If you have not filled out your paperwork, please do so now. Completed forms need to be

put in an envelope and sent to Ann Reece. Anne will be holding them until the 23rd. When you arrive for your appointment, Anne will return the form.

Remember employees have the option of having their personal physician do the required blood work. Results obtained within the last six months may be submitted. If you are choosing this option, please bring your photocopy the 23rd.

Health Stat will analyze all of our individual information for risk factors of chronic disease. Results will be mailed to your personal residence. Those with risk factors should seek medical advice to reduce or eliminate these risks.

Site Visits: The interdepartmental committee has visited two sites. So far counties with Sweet Soft and RAM have been toured. Monday, February 7th we travel to a Zoll site. Each vendor has pluses and minuses. A final decision is expected before the end of the month!

Welcome the New employees!

Robert Gaither and Heidi Hatley are now new probationary employees. Robert has been assigned to B shift. Heidi will be working on C shift. Please offer them pointers and help when you can.

Pointers and Reminders from ABC.

On the 2nd Frank Thomason and I met with the Finance Director and the ABC staff. We looked at the progress in documentation. The news was mixed. Over all everyone has improved their performance and written documentation. There has been an increase in the number of missing signatures. Medicare has asked for signatures on file for a series of patients that we transported several times. No signatures were found. Remember staff members at a facility can sign on behalf of a patient, as can family members. This does not in any way financially obligate the substitute signer. It provides the patient with a valuable service because their Medicare claim will be paid!

FROM THE FIRE MARSHALL



By ART DELANEY

There are a few things brewing in the fire marshals' office right now. Some of them involve EMS. As part of my revised 5 year plan I will be pushing for at least 15 SWAT-medics. I know you guys already have the manning docket you are comfortable with, but I figure if I'm presenting a request for 15 maybe we'll actually get somewhere close to the actual number you want. I'm also asking for a financial incentive to become a SWAT-medic. Somewhat like haz mat where we provide a 5% increase for being part of the team. Why would I do this? Trust me, there is a reason. I'm looking for this dedicated team to also become Haz Mat Medics. Trained in level A's and able to enter a hot zone to assess medical situations. I figure if you're willing to get shot at, maybe you'll be willing to stand in the middle of liquid or gaseous death (not the break room kind) also.

I'm also looking to get financial backing to purchase the needed equipment to do both jobs. The perfect world would include a mobile unit that has all of the equipment. You'd roll in, load up, and get ready while responding. Remember, this is a 5 year plan. But for now I'm just looking for money to get ballistic helmets, flak vests, shatter shields, combat boots (steel toe, steel soles, etc), and BDU uniforms. I'm hoping for support at the next homeland security grant meeting, but if I don't get it I'm still going to stand and argue the point. I'm not here to make friends, I'm here to provide the best we can provide for the citizens!

Since that part went a little long I'll close with one last thing. I'm now in the process of developing an Incident Management Team. This team would respond to major incidents to ASSIST the Incident

Commander. Each member is extremely well versed in a specialty area that I feel would be beneficial to the IC during an incident. As this team develops I'll keep you informed.

Feel free to stop in the office if you're up here, nothing wrong with a little fellowship.

[YO QUIERO TRAINING](#)



By [LENNIE COOPER](#)

On the Training front, not a lot again this month. We still are without a long-term training plan. For now I will continue working from the proposal I have and schedule classes month by month. As always, I will put the information regarding the next month on the calendar. If you have any questions about what may be coming up beyond what is posted, please email me and I will get you the information that you need. A long-term training plan is a complex and time-consuming project. Recently my energies have been directed towards electronics documentation.

PreMIS is such a nasty word, Isn't it? Well unfortunately our backs are to the wall on this one. We have spent a great deal of time getting established to do PreMIS online. The State wants the information we are generating and we have no choice except to comply with the mandate. However, there is hope and relief is in sight. After visiting three different services and looking at software packages, we are on the verge of making a commitment. We should have a purchase order in hand by 2/28 at the latest and have a date of no later than June 1st to be using our software package.

Finance sent out an RFP (Request For Proposal) to about 12 vendors. We received bids from three: Zoll Data Systems, Ortivus Sweet Soft and Ram Technologies AIM. When the bids were received it was decided that we should visit locations that used these different software packages to gain more insight in to the operation of each program. There fore we made were three site visits to look more in depth at the systems.

Caldwell County EMS hosted the first visit to view Ortivus Sweet Soft. I must say that I was impressed with this product. It seemed very easy to use and understand. It would be very usable for some of our employees that are not as computer savvy as others. They also offered a solution to bring the other agencies in the County into the program. This system could be paperless if properly configured.

Gaston County was the host of the second visit. There we viewed RAM. This was the program that a couple of the committee members seemed to think would be the best option from the start. Yes, I was one of those people. Was I ever wrong? The program seemed hard to navigate and was not configured to do some of the things that we really wanted to see. There didn't seem to be an easy way to bring in the outside agencies either. Going paperless with this system seemed to be difficult as well.

Our last visit was to Spartanburg County EMS to try Zoll. The program was impressive. It can be paperless. In Spartanburg we even got to run the program on the exact laptops that we will be using, so it was a wonderful opportunity. Everyone seemed to like this program. It was the most customizable of the three we tested.

I will leave you in suspense regarding the final decision. I will say that we picked the program that we felt best fit our needs. It will be much, much better than PreMIS, I PROMISE!

Expect training on the new system in April or May. I know everyone will be ready to be rid of PreMIS.

If ya need me, call me! Thanks for all your hard work.

** EDITORS COMMENTS **



By JERRY LITTLE

A little late getting this edition out - was waiting on some last minute information that needed to be in February edition.

Remember that the SRT program is looking for new recruits. Any FULL-TIME Paramedic with 2 years experience is encouraged to inquire if they are interested. Contact Lawrence or review the requirements listed in the Jan. 2005 Shocking News if you would like to try out (Remember previous issues are available on the RCEMS newsgroup on Yahoo under the FILES section).

Not sure how I'm going to proceed with the RCEMS newsgroup (not to be confused with the official newsgroup Frank uses). I'm thinking of possibly starting a website with a blog that will have a more "user-friendly" interface for employees to use.

Thanks to the STANDARDIZATION COMMITTEE for setting the units up in a more uniformed way. The committee has been catching a lot of grief from some folks - keep in mind that they can't conform to what EVERY employee wants.

Also, anyone that may want to do "swaps" - we have NURSING students on all 3 shifts now. I'm sure they would appreciate it if you were in a position to help out. Their 'leave' will only go so far when they have classes every week.

As ALWAYS I welcome submissions from everyone who has something EMS related to ad. Feel free to contact me if you would like to submit something for the next issue.

A 'hard-copy' of the monthly newsletter will be posted at each base. Content for the newsletter can be left in my mailbox or sent to the following e-mail address:

littlejn@co.rowan.nc.us or med1171@aol.com

-Be safe - J. Little, editor