



THE BLANKET

THE NEW YORK STATE VOLUNTEER AMBULANCE & RESCUE ASSOCIATION, INC.
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A Message from Our President

I want to wish everyone a happy New Year and hope you had a great holiday.

This year our focus must be insuring that dedicated funding is renewed for EMS. As you may be aware, the program that fund EMS expires June 30, 2003. New York State is projecting a significant budget deficit and the Governor is saying that all programs will be cut. Our future relies on the ability of our members to receive the training they need to continue the vital work we do. In the near future we will be asking all our members to contact their legislators and express to them the importance of renewing this funding.



Michael J. Mastrianni, Jr.
 President, NYS VA&RA

I am pleased to report that progress has been made on the EMS "Tree of Life" line of duty Memorial. It appears that ground will be broken this year during EMS Week and the hope is that it will be completed and dedicated during EMS Week next year. If you have any suggestions such as designs, inscriptions, etc. please forward them to me. Our thanks go out to State Senator John Bonacic, Assemblyman Robert Sweeney and the NYS EMS Council particularly Johanna Flanigan and the late Harriet Weber as well as Victor Work of Walkill VAC for all their support and efforts on this project.

Plans for the Convention are progressing well. The speaker schedule is almost complete and will be made available shortly.

On a sad note, our Convention Chairperson Kuntree Sweet, recently lost both of her parents due to illness. Our deepest condolences go out to Kuntree, Roy and her family.

If there are any specific issues that you would like the Association to address or if we can be of any assistance, as always please do not hesitate to contact us.

Once again, thank you for all your help and support. BE SAFE!

Mike

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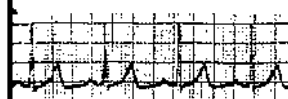
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The Quarterly Newsletter
 of the NYS Volunteer
 Ambulance
 & Rescue Association

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PULSE CHECK 2003



The 48th Annual Educational
 Conference and Trade Show
 October 3 through 5 at
 Roaring Brook Conference Center
 Lake George, New York

*EMS Week is
 May 18-24, 2003*

Decontaminating First Responders

The threat of Chemical, Biological and Radiological (CBR) attack is apparent, and all first responders need to be prepared to address this possibility. First responders have been called upon to respond to every terrorist attack in North America. Their first priority as fire and rescue service personnel is the safety of all emergency personnel to avoid injury or loss of life. Randy Lawson (NIST) and Chief Ted Jarboe (Montgomery County Fire and Rescue, Maryland) teamed up to consolidate CBR decontamination guidelines into a single report, sponsored in part by the USFA. The report, NIST SP 981, Aid for Decontamination of Fire and Rescue Service Protective Clothing and Equipment After Chemical, Biological, and Radiological Exposures, provides first responders with basic emergency decontamination aid of personal protective clothing and equipment (PPE) in the event that it is exposed to CBR contamination. The report provides some basic guidelines for handling equipment exposed to relatively lower concen-

tration CBR environments where human rescue is practical. NFPA 1971, Standard on Protective Ensembles for Structural Fire Fighting and other NFPA (National Fire Protection Association) standards are discussed. It is recommended that all relevant NFPA standards be kept with the NIST report. Guidelines for storing protective clothing and equipment safely after a CBR exposure also are included. A PDF copy of NIST Special Publication 981 may be downloaded from a link at www.fire.gov

For anyone in cold geographic regions or areas that have temperature extremes, another report may be of interest: Guidelines for Cold Weather Mass Decontamination During a Terrorist Chemical Agent Incident (published by SBCCOM) the US Army Soldier and Biological Chemical Command. It has information on cold weather contamination. The report was published on 12 April 2002 and to download it from their web site, go to: <http://www.sbccom.army.mil/>; next, click on SBCCOM ONLINE and search the report title.

Rand Completes Emergency Responder Needs Study

In the aftermath of the September 11, 2001 attacks, the National Institute for Occupational Safety and Health (NIOSH) asked RAND to assess the equipment, training and information required to protect emergency responders as they meet the increased challenges of protecting their communities in the event of acts of terrorism. The RAND report, Protecting Emergency Responders: Lessons Learned from Terrorist Attacks, summarizes the results of a conference held in New York City on Dec. 9-11, 2002, and organized by the RAND Science and Technology Policy Institute. Participants were emergency workers from around the country who responded to the bombing of the Alfred E. Murrah Building in Oklahoma City, the September 11 attacks on the World Trade Center and the Pentagon, and the anthrax incidents that occurred during autumn 2001.

The report features first-person accounts from at-

tendees. For example, according to one of the participating firefighters, "Firefighting equipment is designed well for firefighting operations that typically last 30 minutes, 40 minutes, or an hour. But when you have fires burning for six, eight, nine weeks, bunker gear gets to be pretty cumbersome." The conference participants offered concrete recommendations to address the challenges and improve response capabilities. The apparent tradeoff between the level of protection provided by equipment and the discomfort and physical burden the equipment placed upon those using it was looked upon as an area in need of R&D. Directing R&D toward advanced respirators, clothing, sensors, and other safety gear may be able to reduce that trade-off. Other areas suggested by the conference discussions include applications of information technology and communications systems for better management of worker safety at disaster sites and continued emphasis on technologies for locating responders buried or trapped under rubble. The study points out that technology transfer can help reduce personal protective equipment costs by spreading R&D outlays across a larger user community. It can also speed the introduction of new technologies to the emergency-response community. But the emergency-response community also has special safety needs that may not be adequately met through technology transfer alone.

The report may be viewed and downloaded, free of charge, from the RAND web site <http://www.rand.org/publications/CF/CF176/>.

Cromwell Emergency Vehicles

181 Ashdown Road
Ballston Lake, NY 12019

Office : 516-384-7748
Fax: 708-570-8729
Cell 518-496-7148

Email: tansey@cromwellemergency.com

Web Site: www.Cromwellemergency.com

William Tansey
Sales Consultant

Life Line
EMERGENCY VEHICLES





Fire Districts of New York Mutual Insurance Company, Inc.

No matter how tough it gets, we are there for you.

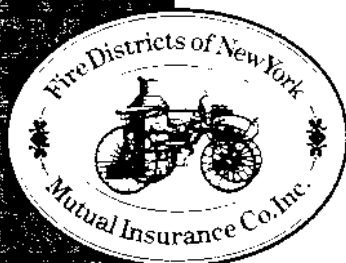
FDM was founded in 1978 by a group of fire districts, in reaction to dissatisfaction with the State Insurance Fund. For 20 years, our mission has been to provide benevolent claim service — the maximum benefits allowable under New York State VFBL and VAWBL laws — to injured volunteer firefighters and ambulance workers.

We believe that the last thing the brave men and women who fight fires or provide emergency services should have to worry about is their insurance coverage. We provide coverage based on 100% loss of earning capacity for all members. We're experienced and responsive, here to process claims promptly and fairly and keep your organization well informed on the status of claims.

FDM service advantages:

- Prompt, courteous 24-hour claim service
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- Coverage starts immediately upon call out
- FDMCARE - assisted medical care
- Unlimited employers' liability coverage
- Loss control services
- Timely medical activity and claim experience reports
- All policyholders are protected by the New York State Guarantee Fund

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BENEVOLENT CLAIM SERVICE

Fire Districts
of New York
Mutual Insurance
Company, Inc.

501 South Main Street
Spring Valley,
New York 10977
Tel: 888-314-3004

Pulse Check 2002

2002-2003 ASSOCIATION OFFICERS

Elections for Officers was held at Pulse check, congratulations to the new officers for 2002-2003.

President	Michael Mastrianni
Executive Vice President	Roy Sweet
Vice President	Henry Ehrhardt
Financial Secretary	Tim Ryan
Secretary	Tracy Abamont
Treasurer	Jean Gourley

DUES

The Board of Directors voted to increase squad dues by 10% from \$50.00 per year to \$55.00 per year. District dues are added to this amount. State Association portion for individual dues remain at \$6.00 per year with District dues added. Please send it membership renewals.

DRILL RESULTS

EMT - Senior Team Competition

1st Place	Wantagh-Levittown VAC Buddahs
2nd Place	Bayshore-Brightwaters VAC Fallen Angels
3rd Place	Bayshore-Brightwaters VAC ACME EMS

Also competing were:

Exchange Ambulance of the Islips EMS
Mid County VAC

CFR - Youth Team Competition

1st Place	Bayshore-Brightwaters VAC Ditzzy Revivers
2nd Place	Bayshore-Brightwaters VAC Septic Shocks
3rd Place	Wantagh-Levittown VAC Misfits

Also competing: Exchange Ambulance of the Islips Exit Wounds

Glendale VAC Trauma Mamas
Manorville VAC Bod Squad
Glen Oaks VAC ChaCha Sliders
Huntington Community FAS Hot Shots

The NOVICE TROPHY was awarded to Huntington Commu-

nity FAS Hot Shots

AMBULANCE DRILLS

1st Place	Bayshore-Brightwaters VAC Fallen Angels
2nd Place	Exchange Ambulance of the Islips EMS
3rd Place	Wantagh-Levittown VAC Buddha Blues

Also competing: MidCounty VAC Senior Extremes

SPECIAL AWARDS

Leadership Award

Robert Franz, Huntington Community FAS

EMS Person of the Year

Michael Chiarelli, Huntington Community FAS

Educator of the Year

Mark Brenner, Huntington Community FAS

Medical Director of the Year

Michael Lippe, MD, FACEO, Good Samaritan Hospital, Suffern

Unit Citation

Huntington Community FAS Bike Unit

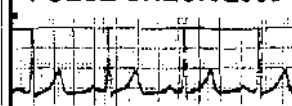
Presidential Award

Mickey & Barbara Favino, Newburgh Rescue Supply Company

Results of the drill held at PULSE CHECK 2001 was made official, the 2001 Championships since no follow up was subsequently held. The winners were:

1st Place	Whitestone VAC
2nd Place	Wantagh-Levittown VAC
3rd Place	Mid-County VAC

PULSE CHECK 2003



The 48th Annual Educational Conference and Trade Show
October 3 through 5 at
Roaring Brook Conference Center
Lake George, New York



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KC2JYS

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Council of Community Services
of New York State, Inc.

Valerie Venezia

Director of Membership & Service Development

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Legislative News

The following is an excerpt from a letter sent to the Association Vice-President Henry Ehrhardt:

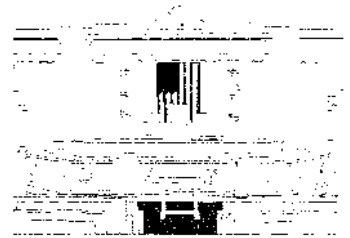
This year working with your organization we were successful in bringing to fruition the following new laws and programs:

- a new "Local Enhanced Wireless 911 Program", the program is designed to help municipalities offset cost associated with the implementation of enhanced wireless 911 service
- the State Budget includes \$2 million in funding for the Volunteer Recruitment Service Scholarship Program to boost the ranks of firefithier and ambulance volunteers by offering free college tuition
- this year the Senate and Governor have followed the Assembly's lead and have supported the creation of a "Tree of Life" memorial to honor fallen EMS personnel. This monument will serve to honor and acknowledge those heroes who have made the supremen sacrifice. Since 1972, more that two dozen emergency service workder are known to have died in the line of duty. That includes eight emergency (medical) service workers who died at the World Trade Center on September 11.

- Property Tax Exemptions for Volunteer Emergency service providers were extended to an additional eight counties
- Legislation passed both houses to amend the Service Award Program to permit program sponsors to develop a policy to address service interruptions caused by mandatory overtime as a result of September 11th
- I have filed legislation A.11345/S.7460 which seeks to increase the payments available for funeral expenses and death benefits payable to the surviving families of volunteer ambulance workers who have been killed in the line of duty.

Thanks for your cooperation and assistance in these efforts.

Robert K. Sweeney, Chair
Assembly Subcommittee on Volunteer
Ambulance/Emergency Services



Legislative Committee
Howard Callman, Chair

United States Postal Service has Volunteer Opportunities Online

The United States Postal Service and Youth Service America are partnering to promote Get Involved America!, a database of volunteering opportunities on SERVENet.org for Americans of all ages. The mission of Youth Service America is to strengthen the effectiveness, sustainability and scale of the youth service movement. Founded in 1986, YSA envisions a powerful network of organizations committed to making service the common expectation and experience of all young Americans. The goal is to have volunteer opportunities available for every ZIP Code in the United States.

The public, when they log on to www.usps.com to

find a ZIP code, see a box on the FIND ZIP CODE page that they can check to be referred to volunteer opportunities within 10 miles of their ZIP code. They can also use an advanced search that expands the area or limits the volunteer preferences.

Nonprofit organizations can log on to www.ysa.org/usps.html and follow the prompts from the link at Post Opportunities for volunteers on SERVENet.org. to register their organization enter volunteer opportunities plus press releases, events and other information.

Mike J. Mastrianni, Jr. Featured at JEMS 2003 EMS Today

As part of the pre-conference program, NYSVA&RA President Mike Mastrianni will be one of the presenters of the two day Volunteer/Nonprofit EMS Leadership Academy on Tuesday March 18, 2003 and Wednesday March 19, 2003. This one of a kind leadership and management course seeks to provide current and future leaders of community based EMS organizations with essential information needed for leading and managing for success. Topics to be covered include: budgeting, insurance,

recruitment, retention, FLSA, legalities, conflict resolution, billing, fund raising, combination (paid & volunteer) departments, etc. The 2003 EMS Today Conference & Exposition will be held in Philadelphia, PA and will run Thursday March 20, 2003 through Saturday March 22, 2003 providing three days of education, networking, continuing education and exhibits. To request a conference brochure log onto the JEMS web site at www.jems.com or call (800) 266-5367.

9/11 Grants Help Volunteers

The NY Community Trust established the September 11th Fund immediately after the World Trade Center attacks. It has made 213 grants totaling \$275,867,000 ranging from \$1,500 to \$130,000,000 to meet the immediate needs of victims, families and affected communities. Many of the grants went for services such as counseling, job training, legal advice and cash assistance. For seven months the Fund accepted proposals from non-profit organizations for reimbursement of costs incurred in providing assistance to victims and their families or in assisting the rescue efforts at Ground Zero, the Pentagon or Shanksville, PA. The volunteer EMS and rescue organizations that received grants are:

NYSVA&RA NYC Region Community EMS Fund: \$937,000 - To replace volunteer ambulances destroyed and equipment and supplies lost or damaged at the World Trade Center

and provide funds to cover system issues and costs associated with increased demands placed on the city's volunteer EMS providers in the wake of 9/11.

Central Park Medical Unit: \$15,607 - To reimburse for costs associated with the organization's response on 9/11 and its donation of surplus medical supplies to hospitals in lower Manhattan.

Chevra Hatzolah: \$200,000 - To replace one (1) ambulance destroyed and repair nine (9) ambulances damaged on 9/11.

Shanksville (PA) VFD: \$10,470 - For costs associated with its response to the crash of United Airlines Flight 93 in Somerset County, PA. Grant paid for hoses, nozzles, equipment as well as food and supplies for fire fighters working at the scene.

Recently Issued NYS DOH Policy Statements

02-05 10/29/02 PREHOSPITAL CARE REPORTS (PCRs)
Supersedes 85-01 and 96-01 and covers when to complete a PCR, information entry, distribution of copies, confidentiality and disclosure of personal healthcare information and disposition codes.

02-09 8/29/02 NEEDLESTICK AND SHARPS INJURIES
Provides advanced life support (ALS) EMS agencies with an explanation of the recent revisions to the United States Department of Labor, Occupational Health and Safety Administration (OSHA) regulations and the Needlestick Safety and Prevention Act which required that OSHA revise the Blood-borne Pathogen standard to add the following components:

- Provide new examples in the definition of engineering controls.
- Require that exposure control plans reflect how employers implement a needlestick safety and prevention program.
- Requires the employer to solicit input from direct patient care employees in the identification, evaluation and selection of safer needle devices and work practices.
- Require employers to establish and maintain a log of sharps related injuries.

Topics covered include: Engineering Controls, Revision to the Exposure Control Plan (ECP), Sharps Injury Log, Selection of Safer Medical Devices, Training and Education on the Use of Safer Devices. The Policy Statement does not supersede or take precedence over any guidance that OSHA or New York State Public Employee Safety and Health (PESH) may provide.

02-10 09/12/02 COURSE FUNDING

Addresses emergency medical services (EMS) course reimbursement and replaces policies 95-02, 95-05, 98-07, 99-05 and 00-05 and is effective for approved EMS certification courses beginning on or after August 1, 2002. Key changes:

- Practical skill examination rates have been increased for all certification levels.
- The Rapid Recertification administrative fee has been reduced but the practical skill rates have been increased.
- EMT-B Original course reimbursement has increased to \$700.00 from \$600.00. The EMT-B Refresher course reimbursement has decreased to \$335.00 from \$415.00. Paramedic Original course reimbursement rate has increased to \$1,500.00 from \$1,200.00.
- AED funding has been eliminated as training has been incorporated into all appropriate curricula.
- Course Sponsors must maintain financial records documenting the use of EMS tuition reimbursement funds.
- The reimbursement policy limits reimbursement for student's tuition costs to no more than two courses within a 12-month period. No more than one of the two reimbursable courses can be an Advanced EMT original certification course.
- A section on "Financial Penalties" has been added.

02-11 09/25/02 PREVENTIVE MAINTENANCE OF EMS VEHICLES AND EQUIPMENT: Provides guidance in meeting Part 800.21(p)(8) requirement to have policies regarding preventive maintenance for EMS vehicles and equipment. Covers use of owners manuals, what equipment should be inspected and documentation of inspections and maintenance in logs. Personally owned vehicles operated as Emergency Ambulance Service Vehicles and their equipment should be covered by agency inspection and maintenance procedures. Agencies are reminded that all vehicle and equipment failures that did or could have resulted in harm to a patient must be reported to DOH with the EMS service's biennial recertification application.

Full text of all current NYS DOH Policy Statements can be viewed online at www.health.state.ny.us/nysdoh/ems/publaw.htm

In Memorium

The following members were remembered during the Memorial Service

District 2

E. John Commolini
Somers VFD

District 4

James W. Alexander
BRAVO VAC

Cathy Brown
Glen Oaks VAC

Joseph Gruber
Glendale VAC

Neil Hoffman
Jamaica Estates-Holliswood-South Bayside VAC

Lori Marx
Glen Oaks VAC

Judith C. Rose
Peninsula VAC

Richard Pearlman
Forest Hills VAC - LODD-WTC

Patricia Wilz
Jamaica Estates-Holliswood-South Bayside VAC

District 5

Evelyn Drew
Town of Highlands VAC

Mary C. Weber
Marbletown First Aid Unit

District 7

Frank Bianco
Huntington Community FAS

Joan Ball
Huntington Community FAS

Joanne Brockman
Huntington Community FAS

Brian Crews
Exchange Ambulance of the Islips & Bayshore-Brightwaters Rescue Amb.

Robert DeVeau
Huntington Community FAS

Leroy Jaret
Huntington Community FAS

Adrian Gollubier
Huntington Community FAS

Kay Kuschner
Huntington Community FAS

Anna LaVasque
Bayshore-Brightwaters Rescue Ambulance

Robert Marone
Huntington Community FAS

Harold Molinelli
Huntington Community FAS

Dr. Joseph Palmieri
Huntington Community FAS

Robert Parsons
Central Islip-Hauppauge VAC

Christine Schmidt
Huntington Community FAS

Ben Wolnick
Bayshore-Brightwaters Rescue Ambulance

District 12

James Convy
Elmont VFDAL, Roslyn Rescue, LODD

Edward Gerherly
Elmont VFD, LODD-WTC

George Hogan
Elmont VFD

Thomas Langone
Roslyn Rescue, LODD-WTC

Pete Langone
Roslyn Rescue, LODD-WTC

Robert Mayer
Elmont VFD

Andrew Mierdiercks
Elmont VFD

District 18

Joseph Biondi
Whitestone Community VAS

Grace B. Herold
Whitestone Community VAS

Raymond Hershaff
Whitestone Community VAS

Dominick Mileo
Whitestone Community VAS

Manfred Waldheim
Whitestone Community VAS

New York State EMS Council (NYSEMSCO)

Henry Ehrhardt, NYSVARA Delegate

- A Bill has been signed that creates a wireless authority to give direction/oversight to dispatch centers. There are three EMS positions on that group appointed by the Governor.
- Supporting and working for renewal of the dedicated EMS fund.
- SEMAC – a handout is being sent out regarding Bio-Terrorism that says EMTs should practice normal protective prevention procedures, as one would with other blood or airborne issues. Basic level of equipment being recommended is the N-100 mask. It will also require that services comply with OSHA standards regarding fit testing. Each region should be involved very closely with the local plans. Local REMSCO and REMAC needs to be part of the planning process.
- The N95 respirator mask is the appropriate PPE for airborne disease, i.e. TB, smallpox, etc.
- A disaster preparedness course is being developed by the Columbia School of Public Health and piloted in NYC. It was felt that an EMS approach to that program should also be developed.
- The Department has prepared first response chemical and biological cards which are currently being printed.
- Committee will be established to look at Mutual Aid in State Disasters. There is no written protocol or procedures in place. There needs to be agreement at the state, county and local levels in place for future events. Regional plans can be done locally, and state would like to have a product in six months.
- Trauma review of the Hospital Trauma System in NYC has been done. Other regions will be reviewed in the future. Trauma is a system issue and it will be looked at regional system by system.
- New CFR Protocol has been completed for review by SEMAC.
- A motion passed to adopt the NHTSA EMT refresher program as the NYS EMT refresher program.
- A five year CME pilot program is in the final draft stages. Participants in the program will be based on EMS agency affiliation.
- Passed to overturn Nassau County REMSCO approval to allow RJV Transport Inc. application to operate an ambulance service.
- Decided to uphold NYC REMSCO approval of the ROCK VAC application for new ambulance service.
- Legislative – motion to support two house bills (A-5433 and S-2134) which would authorize the county EMS coordinators and their deputies to be authorized to have emergency equipment (lights/siren) on their vehicle.
- Proposed legislation for EMS/Fire Criminal Impersonation to be added to the Penal Law.
- The eight EMS personnel killed at WTC will be assigned a per-

(Continued on page 12)

Red Cross and American Heart Courses Accepted as Equivalent

In June, 2002 the American Red Cross and American Heart Association signed a Statement of Understanding recognizing each other's student level CPR training programs as equivalent in content. This collaboration will allow Red Cross Chapters and AHA state and local affiliates to provide information and recognition of the other's training to both instructors and

end users. The agreement covers adult, child and infant CPR courses, AED courses, CPR for the Professional Rescuer and BLS for Healthcare Providers courses. The Red Cross, however, will only recognize Heart Association certificates for the same 1 year validity periods as it provides on its own CPR certificates.

Red Cross AED Essential Course

The AED Essentials module has been made available to Red Cross instructors to give individuals currently certified in Adult CPR the knowledge and skills necessary to provide care for victims of sudden cardiac arrest through the safe use of an automated external defibrillator. To enroll in a stand alone two (2) hour AED Essentials course, participants must hold a current American Red Cross Adult CPR certificate or equivalent. The module can also be added to any Red Cross course that teaches Adult CPR. Instructors will need the AED Essentials Instructor's

Outline, which their local chapter can download from Cross-Net in either Word or PDF versions, and either the Workplace Training: Standard First Aid Video or the AED Essentials Video. Participants will need the Adult CPR/AED Skills Card.

This new module comes at a time as school districts in New York are acquiring AEDs mandated under a recently passed state law. School medical staff and sports coaches already have CPR training and will need only the brief AED Essential course to upgrade their skills.

Red Cross Gets New President & Revamps Fund Raising Practices

Marsha Johnson took over effective August 5, 2002 as President and CEO of the Red Cross. Ms. Johnson previously headed the Girl Scouts of America and before that served 29 years in the US Navy retiring with the rank of Rear Admiral.

The Red Cross has been criticized for mentioning specific disasters in its fund raising advertisements and literature but then using the donations received for other purposes including the salaries of its chief executives. Dr. Bernadine Healey, the most recent President resigned on November 10, 2001 amid criticism from donors, victims and government officials of the ARC's administration of September 11th donations and unwillingness to collaborate with other nonprofit groups. Recently, the San Diego chapter's entire board was removed because of criticism of its handling of more than \$400,000 in the wake of the 2001 Alpine fire. A local newspaper reported an audit revealed that

most of the money went to overhead rather than victims. ARC's (EIN 53-0196605) Form 990 for fiscal year ending June 30, 2000 shows that 2,888 employees were paid over \$50,000 including then CEO A. Frank Donaghue who received over \$300,000 and at least 3 other executives who received over \$250,000 each.

New ARC fund raising guidelines include a more prominent statement that "You can help the victims of this disaster and thousands of other disasters across the country..." as well as a trigger point where if it appears contributions made around the time of a particular disaster may exceed the cost of the anticipated disaster assistance, potential donors will be advised of such and encouraged to donate to local chapter relief funds. While maintaining a policy of honoring all donor designations, the ARC will continue to promote undesignated giving.

New KKK Ambulance Specifications Issued

The US General Services Administration has issued Federal Specification for the "Star-of-Life" Ambulance Version KKK-A-1822E, dated June 1, 2002. This document supercedes KKK-A-1822D, dated November 1, 1994 and includes numerous changes intended to provide for a more reliable, functional, and safer ambulance. Further, this revision includes notes, notices and warnings to inform purchasers of particularly important areas that can directly impact safety, reliability, and the ability of the ambulance to complete its mission.

The purpose of the document is to describe ambulances which are authorized to display the Star of Life symbol. It establishes minimum specifications, test parameters and essential criteria for ambulance design, performance, equipment, appearance and provides a practical degree of standardization. The object is to provide ambulances that are nationally recognized, properly constructed, easily maintained and when professionally staffed and provisioned, will function reliably in prehospital or other mobile

emergency medical service.

Contrary to some beliefs, Section 3.6.3 does permit the use of gasoline engines in ambulances. However, because of the severe operating conditions to which an ambulance is exposed, the use of a gasoline engine results in substantially higher underhood and under vehicle temperatures which could seriously impact vehicle reliability, dependability, safety and may result in some manufacturer's (Ford) chassis warranty being voided.

Copies of the specification may be downloaded at no cost from the internet at fss.gsa.gov/vehicles/buying. Printed copies of the 110 page document can also be ordered from: US General Services Administration, Centralized Mailing List Service
501 West Felix Street, Warehouse 9, South End
PO Box 6477, Fort Worth, TX 76115-6477
Telephone: (817) 334-5215 E-mail: aml@gsa.gov

NYC Disaster Mobilization Plan

The EMS community's initial response to the World Trade Center on September 11th exhibited little coordination and control. At one point there were over 250 ambulances staged along West Street from as far away as Louisiana and Canada. One NYC private ambulance service alone had 96 ambulances at the incident or staging areas. A few communities across NYS had their EMS resources stripped and local officials had little knowledge of what was remaining in the counties. Officials say they have knowledge of at least one patient death in NYC that may be attributed to an ambulance responding to the WTC rather than staying available. There was also some backlog of routine 911 calls across the city that were not being responded to in a timely fashion because of all the resources committed to the WTC.

The Regional EMS Council of NYC was charged by the NYS DOH with developing a Regional Protocol to cover future major incidents and prevent "freelancing". An overview presented involves a two stage response plan to be triggered by a request from the NYC Mayor's Office of Emergency Management. EMS resources outside the NYC 911 system's capabilities to cover a major incident would initially be requested from the private companies which have over 700 vehicles available. A major NYC hospital which has a 24 hour 7 day a week EMS and dispatch operation has offered the use of its facility to be the contact point from OEM. The call would then be made to one or more private companies to send X number of ambulances to a central location and these ambulances would then be deployed as "task forces" to the incident location(s). Volunteer ambulance

personnel would be expected to respond to their squad headquarters and provide coverage for their communities and after that is ensured could put additional ambulances towards the disaster response.

The following points are being strongly emphasized:

- The first responsibility of a NYC volunteer EMS squad is to provide coverage of its local service area. Once that is ensured mutual aid resources can be sent to other areas if requested.
- FEMA and NYS will not consider or provide reimbursement for injuries, losses or expenses if the EMS organization was not officially requested to respond to the incident.
- VAWBL and VFBL insurance are only in effect if a VAC or VFD was officially requested to respond to a mutual aid incident.
- NYPD will control access to an incident to ensure only requested or authorized EMS agencies allowed entry.
- NYS DOH will enforce the protocol. If it finds an ambulance "freelancing" at an incident it will be sent back to its area, a violation notice will be written and a fine of \$2,000 will be imposed on the EMS organization.

Late in 2002 the NYC REMSCO adopted a Mutual Aid Mobilization Protocol, Procedure and Memorandum of Understanding. Hatzolah and District 4 have some concerns about some of the wording in parts of these documents. It is felt that clarification of some of these documents is needed in order to avoid potential future confusion or contradiction concerning other mutual aid agreements, regulations, etc.

Governor Pataki and HHS Secretary Announce Approval of Bioterror Plan

On June 6, 2002 Governor George E. Pataki joined Health and Human Services Secretary Tommy G. Thompson in announcing that New York State's bioterrorism response plan has been approved by the federal government, paving the way for the full distribution of \$60 million in federal funding.

The Governor also announced that, as part of a comprehensive training and education plan for first responders, New York is distributing bioterror response information cards to each of the more than 70,000 physicians across New York State. The bioterrorism rapid response card highlights 12 diseases, including smallpox, anthrax, plague, botulism, tularemia and viral hemorrhagic fever, that are caused by organisms considered by the Centers for Disease Control and Prevention to be the most likely bioterrorist weapons. Since these diseases are rare and may be unfamiliar to many doctors, the card was designed to provide easily accessible information on the diseases' symptoms, tests used for diagnosis, and treatment. Physicians have a critical role in the early recognition and immediate reporting of illnesses that may represent a bioterrorist event. The card also instructs physicians to be alert for clues that may suggest a bioterrorism event, such as a sudden increase in the number of people seeking care, especially patients with fever, respiratory or gastrointestinal symptoms. Physicians are instructed to immediately report any unusual illnesses to their local health department.

Each of New York's counties will receive funding, based

upon their population, to expand their bioterrorism fighting capacity. The amounts range from \$75,000 for Hamilton County to \$1,419,369 for Suffolk County.

Each hospital outside of New York City will also receive \$10,000 to assist in their bioterrorism preparedness efforts. New York City hospitals will receive funding from the federal allocation to the city. These funds can be used for staff training and education, equipment purchases or to support other bioterrorism preparedness related activities.

Six to eight regional referral centers will also be established (via a competitive process) with each center receiving between \$150,000 to \$250,000. An additional \$200,000 will be given to the Iroquois Healthcare Alliance to create new rural bioterrorism preparedness demonstration projects.

In addition to county governments and hospitals, several New York State health care organizations will also receive funding to bolster the State's anti-terrorism efforts

- Medical Society of the State of New York (MSSNY), \$875,000
- NYS Nurses Association, \$100,000
- Healthcare Association of NYS (HANYS), \$75,000
- Greater New York Hospital Association (GNYHA), \$75,000
- Community Health Center Association of NYS, \$50,000
- Home Care Association, \$100,000
- Public Health Association of New York State, \$50,000
- Dental Society of the State of New York, \$25,000

Bits from Around the State and Beyond



TUXEDO VAC in Orange County provided on site EMS coverage for the NY Renaissance Faire held at Sterling Forest, NY on weekends from early August through mid September.

Thousands attend each weekend with many dressed in medieval costumes as such

royalty, knights, barbarians, etc. TVAC BLS personnel staff an aid station and mobile resources include foot teams, bike units and an ATV. Supplemental ALS coverage for the Faire is provided by Rockland Paramedic Services.

MONROE COUNTY PLANS NEW RADIO SYSTEM. At a recent presentation that was widely attended by the volunteer fire departments, it was announced that the present dispatch system will be modified in 2004 into narrow band radio channel operations. This change will render most base stations and pagers obsolete. Each fire and EMS agency will be responsible for their own system. The county has no plans to provide pagers as it presently does. By receiving this information, agencies will have sufficient time to budget for the new equipment. A full report on the events and 1997 report prompting the sweeping change is online at www.monroecounty.gov/aboutmc/emssummary.stm

ROCKLAND PARAMEDIC SERVICE EMERGENCY RESPONSE TRAILER – Stationed on Route 303 in West Nyack, Rockland County is a new MCI/Disaster Response Trailer belonging to Rockland Paramedic Services, a private company started in 1991, which works with the county's volunteer EMS services to provide ALS coverage to Rockland's five towns. The trailer contains medical supplies, medicine, communications & computer equipment, food & water, generators, lights and a tent enabling it to operate independently for up to 24 hours and treat up to 1,000 people if there is a biomedical incident. The estimated cost of the setup is \$15,000. As part of its preparedness plan, Rockland Paramedic Service has also established a 35 member special operations division.

HUDSON VALLEY REGIONAL EMS COUNCIL issued a REMAC Advisory on September 20, 2002 stating that HV REMAC does not authorize AEMTs to draw blood pursuant to NYS Vehicle & Traffic Law Section 1194(4) which indicates that an Advanced Emergency Medical Technician may "withdraw blood for the purpose of determining the alcoholic or drug content..." "(a)t the request of a police officer...under the supervision and at the direction of a physician..." The Advisory is at odds with NYS DOH Policy Statement 01-03 issued May 8, 2001 which says "Each REMAC should develop protocols which allow the advanced EMT to draw blood samples at the request of a police officer." The roll-out of the Prehospital Pediatric Care

Course (PPCC) course is scheduled for the March/April 2003 time period.

MONROE VOLUNTEER EMS/AMBULANCE in Orange County has joined the growing number of squads across the nation that has gone to paid staff to cover calls when their volunteers are at their full time jobs. Founded in 1946, the squad has 50 volunteers who operate three (3) Type III ambulances and one BLS First Response Vehicle answering 80 to 100 calls a month. Earlier this year with over \$100,000 in support from the Monroe Town Board, paid EMTs were hired to cover the Monday to Friday day tours. Tuxedo, Blooming Grove, Highlands and Walkkill are other nearby towns that also employ paid EMTs or Paramedics to help fill their day shifts.

MIDSTATE REGIONAL EMS COUNCIL ANNOUNCES AWARDS

The Midstate Emergency Medical Services Region, encompassing Oneida, Madison and Herkimer counties, honored six Emergency Medical Technicians, one Ambulance Corps and several hospital staffer for their dedication to emergency care. The awards were announced at the 12th Annual Midstate Regional EMS Banquet held on May 17, 2002 at the Twin Ponds Golf and Country Club in New York Mills.

The Mohawk Valley Ambulance Corps (MOVAC) in Mohawk was named EMS Agency of the Year. MOVAC was recognized for serving as a model emergency responder. With more than 50 trained EMTs and Paramedics, and four ambulances, MOVAC responded to 1,937 calls for assistance in 2001.

EMTs/EMT-Ps of the Year included:

- Oneida County BLS Provider of the Year: Margaret Lamandia, Lee Center Fire Department.
- Oneida County ALS Provider of the Year: Kit DiStafano, who works full-time at AmCare and part-time at Vineall, and who has donated numerous hours of instruction to the health care community.
- Madison County BLS Provider of the Year: David Snyder, Southern Madison County VAC.
- Herkimer County BLS Provider of the Year: Kathy DeVincenzi, Old Forge Fire Department.
- Herkimer County ALS Provider of the Year: Deborah Russell, an EMS and fire dispatcher who coordinates the annual fire school in Old Forge, and who has been involved in the training of new EMTs in the North Country for more than a decade.

Dan Broedel, Waterville Ambulance & Faxon-St. Luke's Healthcare EMS Program and clinical coordinator for the Midstate Region, received the EMS Leadership of the Year Award for leadership in education. Janet Premo, a registered nurse in the Emergency Department at Rome Memorial Hospital, has been named Nurse of Excellence for 2002 for her work with EMS personnel. She was cited for her role as a valued instructor for students performing clinical rotations in the Emergency Department and for her attention to patient care. Dr. John Rubin, an emergency physician at St. Elizabeth Medical Center, has

(Continued on page 11)

Third Party Billing Reminders

Certified Ambulance Group (CAG), a major supplier of Medicare, Medicaid, auto personal injury and general insurance billing services to nonprofit ambulance services has issued a reminder about items needed on a run form. The items include:

- Patient's full name (first name and last name) no abbreviations.
- Complete mailing address. Please try to include the ZIP code.
- Date of service.
- Time of service is very important and should be on every run form.
- Pick up location is a must, ZIP code is CRITICAL! Show street #, city and ZIP. Do not show simply doctor's office, medical building, McDonalds, Exit 39, etc. for pick-up locations without the street #/city/zip.
- Drop off location (hospital, nursing home, rehab center, residence, etc).
- Reason for transport.
- Social Security Number is great to have. A run report can be

input without it, but getting it would be helpful.

- Date of birth is also great to have. Both Medicare and Medicaid need it in order to bill and get paid.
 - A signature from the patient is a MUST. Both Medicare and Medicaid need a signature on file. If one is not gotten for the run form at the time of the call a letter has to be sent to the patient to request a signature. CAG can't bill Medicare or Medicaid without that signature.
 - "Loaded" patient miles is to be shown. Going to or from a call is not billable mileage.
 - Write/print CLEARLY.
 - If able, make copies of the patients' insurance cards. Hospitals usually have copy machines in or near EDs.
- With new Medicare regulations as well as reduced claim time on no fault claims it is imperative that as much information be secured at the time of a call. Please try to do the best you can under the circumstances.

More Bits From Around the State

(continued from Page 10)

been named Physician of Excellence for 2002 for his support of EMS personnel as a vital part of the patient care team. The award cited, among other things, his readiness to instruct and teach EMS personnel to help provide better patient care. Phyllis Ellis, RN, a vice president at St. Elizabeth Medical Center, was given the Willis DeKing Award for her "commitment and dedication to the growth and development of EMS in the Oneida-Herkimer-Madison region." Ellis chairs the EMS Oversight Committee and is an active member of the Regional EMS Council. She was involved in the start-up of the trauma center at St. Elizabeth and served as its first trauma coordinator.

SOUTH AFRICAN BUREAU OF EMS visitors were hosted by **CORONA VAC** and **FOREST HILLS VAC**. CVAC's Medical Director, Dr. Neill Oster, MD, initiated the session with the US State Department and the Institute of International Education. The South Africans were in New York City for a week before heading out to Washington, D.C. to meet with FEMA. While they were in NYC they stayed at Forest Hills Volunteer Ambulance Corps using the community room for sleeping quarters. They rode along with Corona, Forest Hills and FDNY-EMS Battalion 4 from July 1st through the 5th. In addition, they spent time in seminars, demonstrations and information sessions with FDNY-EMS and FDNY-Fire. A farewell barbecue was held on Saturday, July 6 held in honor of the visitors and in recognition of the many squad members who have given up an extensive amount of time to make stay possible. The delegation left on Sunday morning July 7th. An exchange program between NYC and South Africa has been introduced and eligible members of each of the participating VAC has an opportunity to go to South Africa to get a perspective on how they perform their duties.

SUFFOLK COUNTY

Suffolk County lawmakers on August 27, 2002 amended the

county's 2002 Capital Program and Budget to appropriate funds for the purchase of automated external defibrillators (AEDs) for public safety vehicles. Prompted by the death in March 2000 of a 14 year old Northport high school lacrosse player and supported by a recommendation of the Suffolk County Defibrillator Task Force formed in response to the death, legislator Andrew Crecca of Hauppauge proposed the legislation to provide \$200,000 for about 96 AEDs to be placed in police patrol cars by the end of the year. In neighboring Nassau County, police cars have carried the devices since 1999.

Suffolk County legislators held a Public Hearing regarding Intro. No. 1829 a local law authorizing 10 percent property tax exemption for volunteer firefighters and ambulance workers and Intro. No. 1832, a local law implementing volunteer firefighter and ambulance workers county real property tax exemption. The county firemens group as well as Huntington Community First Aid Squad spoke in behalf of the proposals. It was mentioned during the hearing that the state law recently passed authorizing counties to provide such tax relief to volunteers has an error which is going to be corrected by the state legislature in January. Details on exactly what had to be corrected were not given.

The Town of Huntington in Suffolk County announced it is going to implement a Firefighters/EMS Incentive Recruitment Enhancement (F.I.R.E.) Committee composed of representatives from 12 fire departments and 2 volunteer ambulance squads to determine how funds from fines collected for fire lane and handicap parking violations will be spent. There is approximately \$35,000 to 40,000 available. The Town Board has to approve the concept at their September 2002 meeting.

Suffolk County Regional EMS Council, responding to often prolonged response times for life threatening emergencies, established a Response Committee to study the problem and develop recommendations. Accepting the Committee's recommendations,

(Continued on page 13)

Access Health Systems Announces 2002 Scholarship

August F. Matt is the winner of a \$1,000 scholarship awarded by Access Health Systems, a major provider of occupational and school health services in upstate NY. August is 18 years old and has been a member of the Fayetteville NY Fire Department Explorer Post for over 3 1/2 years. In addition, he has been a member of the 174th Air National Guard Fighter Wing Explorer Post 203 for 2 1/2 years. He rides with Metro Ambulance Service as well as the Easter Area VAC and has recently been appointed a firefighter/CFR with Fayetteville FD.

This is the third year Access Health Systems has awarded a scholarship to a member or dependent of a fire-

fighter demonstrating community service, scholarship and social compassion.

For information: Access Health Systems
Scholarship 2003
776A Watervliet-Shaker Road
Latham, NY 12110

Applications must be submitted by April 15, 2003. Announcement of the winner is expected to be made on or about June 1, 2003. Questions should be submitted to Chad M. Paul at (518) 782-2200.

US DOT Forums On Emergency Preparedness

As part of the U.S. Department of Transportation's efforts to improve homeland security, the Federal Transit Administration (FTA), with its partners, the Federal Railroad Administration and APTA, is offering free two-day forums on "Connecting Communities: Emergency Preparedness and Security." The forums are being held in selected cities across the country and are designed for state and local emergency management coordinators, transit managers, transit security personnel, fire/police/EMS personnel, hospital disaster relief coordinators and representatives from other agencies that are involved in transportation and emergency response. Subjects include:

- Is it time to update your organization's emergency response plan?
- What role can your community's transit agency play during an emergency?
- Do you know who your emergency response partners are?
- Does your community's emergency response plan include all the right players?
- How will your system respond and support a neighboring agency in need of assistance?

Hands-on exercises, including discussions, various emergency scenarios, group break out sessions, video and instructor-led presentations, will allow participants to:

- Network and coordinate with local transit, police, fire, and emergency officials to share the latest techniques, strategies

and best practices;

- Understand the role of a transit agency in responding to emergency and disaster situations in the community;
- Discuss how to activate alternative transportation methods within the community during a crisis;
- Identify the elements, people, organizations, procedures, equipment and facilities needed for an effective emergency management program, as well as understand how the interaction of these elements affects the management of emergency situations;
- Discuss existing transit system emergency management, disaster recovery and security plans;
- Explore the interagency role in handling emergency response; and
- Understand the roles and responsibilities of community officials, transit system personnel, emergency response personnel (police, fire, EMS, OEM and hospital) and media during an emergency.

Attendees will also receive a wealth of resources and visual guides to educate their agency's employees on the lessons learned from the forums. For more information, dates/locations of the forums and to browse the Emergency Preparedness and Security Resources CD that is being distributed at the forums go to <http://transit-safety.volpe.dot.gov/training/conferences.asp>

NYS EMS Council

(Continued from page 7)

- permanent EMS number starting with 911.
 - Approved a proposed amendment to Part 800.26, Emergency Ambulance Services Vehicle (EASV) Equipment Requirements. The REMSCO's will be solicited for comment.
- PAD state wide report, there are 1,632 PAD agencies with 61,585 trained providers and 5,371 AED units. The report included public schools PAD programs listed by REMSCO region. NYS Education regulation required that the EID must be PEDs capable if the constituents of that school building are under 8 years old. It was pointed out that there is only one manufacturer that can provide that type of AED to date.

There are other AED's with PEDs ability.

- EMS Service inspections continue, since February 2002, there have been 378 full inspections performed statewide. Of these inspections:

167 deficiencies were identified, 91 corrected on site
115 Statements of Deficiencies were issued
875 vehicles have been inspected. Of the deficiencies documented: absent; lacking or poor policies and procedures were by far the most common issues cited.

- SEMSCO Officers for 2003

Chairperson	Ken Beers
First VC	Warren Darby
Second VC	Mike McEvoy

More Bits From Around the State

(Continued from page 11)

the Council voted on July 9, 2002 to require EMS agencies to follow the following requirements:

- Establish and participate in a crew "call-in" system.
- Establish and Participate in an Emergency Medical Dispatch (EMD) dispatch criteria for Alpha, Bravo and Charlie level calls.
- Crew must notify dispatch that they are en route to quarters within 2 minutes.
- If no crew or crew incomplete crew, a Signal 3 call for additional help is sounded at 2 minutes.
- If complete crew not available (confirmed en route to quarters) at 4 minutes, a signal 24 request for mutual aid is sounded.
- Dispatch criteria for Delta and Echo level calls:
- Crew must notify dispatch that they are en route to quarters within 2 minutes.
- If complete crew not available (en route to quarters) at 2 minutes, a signal 24 request for mutual aid is sounded.
- Agencies may designate and authorize first responder units whose presence on scene may stop the clock if medically appropriate.
- All agencies should transmit to MedCom/Firecom en route, on scene, leaving scene and destination times.
- ALS should be requested/provided for Charlie, Delta and Echo level calls.

The county goal is to have an ambulance on scene in less than 9 minutes for 90% of the calls. All interested EMS providers were invited to open meetings held in August in Riverhead and Hauppauge to discuss the findings and recommendations of the Response Committee. It was acknowledged that some services may have to make changes in their Standard Operating Procedures (SOPs) but other ambulance services either already meet the goal or are so close that only fine-tuning will be needed.

The average age of EMS providers in New York State is 38. In New York City it is 33. Statewide, 80% of providers are male and 20% are female.

Southern Tier Regional EMS Council and Chemung County will be looking at the use Gx codes in the county's Emergency Medical Dispatch (EMD) system's use of first responders when ambulance response time is expected to be over 10 minutes. The codes were developed in response to a request from fire chiefs in the county who wanted to decrease the frequency of sending a response to calls only to find they were not needed or the ambulance had arrived and the patient was gone. Patient outcomes, PCRs, etc. will be studied as part of a QI project to look at the impact of the use of Gx codes in the EMS dispatch process.

Westchester County's Department of Emergency Services, EMS Division sent out, for the 1st time ever, a mutual aid run card, similar to what the fire agencies have been provided with for years. The breakdown was generated from the Computer Aided Dispatch (CAD) system and is based on the closest response agency by distance. It is requested that these forms be returned to the Department of Emergency Services as soon as possible so that back up

information can be put into the CAD computer system. The County's full EMS Mutual Aid Plan is on-line at www.westchestergov.com/emergserv/ems.htm

SECURITY IS EVERYONE'S CONCERN

All emergency services personnel are advised to lock emergency vehicles whenever they are unattended especially at incident scenes and hospitals. Promptly report any unusual or suspicious interest in emergency operations or response procedures to proper authorities.

Ask Us

Association officers and committee members have years of experience in EMS, a wealth of knowledge concerning NYS regulations, policies, guidelines, etc and an extensive network of contacts throughout the state. The NYSVA&RA will gladly assist member squads or individual members with answers to technical questions or point them to where the answers can be found. We are here to help you.

Letters to the Editor

Dear Sirs,

I am 53 man living in the Czech Republic. In connection with Attack on America I began care of the work of Firemen. I saw their heroism, their victims and their hard work. So I started a project to create a collection of the emblems (patch) of all fire-brigades from the U.S.A. Also I want find out all available informations of their history. By the time that collection will be complete (maybe), I want hand over our Czech firemen, as the remembrance of his U.S. fellows. If you could be help me anyhow, please help.

Thank you very much.

With best wishes

Dalibor Vlcek.

Address: Dolni Paseky 1612, CZ-756 61 Roznov p.R., Czech Republic, Europe

My e-mail addresses: dalibor.vlcak@volny.cz or dalibor@itihv.cz and/or HYPERLINK mailto:vlcek@itihv.cz

Dear Editor:

We have a great new member chapter of PFC (Paramedics for Children) that is also a fire department in Guatemala, and they are in dire need of extrication tools. Do you know of any fire departments or rescue squads that are getting new stuff and may want to donate the old gear to us? Right before I left for the states they showed me a compelling video of them trying to extricate a crash victim using crow bars and another car. It was very sad site to see. The patient died because they could not extract them in time. I would like very much to help these guys get some extrication tools. Any ideas?

Rodger Harrison, President, Paramedics For Children
311 Eagles Walk, Gastonia, NC 28056, (704) 763-2585,
www.paramedicsforchildren.com


Prehospital Pediatric Care Course CD-ROM Sent to Squads by NYS DOH

In late July 2002 the NYS Department of Health mailed to squad Training Officers a CD-ROM copy of the new York State Department of Health, Bureau of Emergency Medical Services, Emergency Medical Services for Children Prehospital Pediatric Care Course 2001 (PPCC). The re-development of the PPCC was undertaken as a major project of the Bureau's Emergency Medical Services for Children (EMSC) Program. The Fire Department of the City of New York, Division of EMS Training, authored this project under contract with the Bureau through Health Research, Inc., with funding provided by EMSC. The curriculum reflects their dedication to this special population, their expertise, and countless hours of effort. The New York State PPCC has been designed to be used by both EMS agency training officers and certified instructors in order to enhance or reinforce prehospital pediatric care by as many EMS providers

as possible throughout the state. It can be taught in whole or in part, depending upon providers' needs. In addition, it may be utilized by individual providers for self-study at computer stations. The CD-ROM contains eight lessons on slides for the instructor in Microsoft PowerPoint along with eight Student Resources and Handouts in Adobe Acrobat. The CD-ROM contains downloadable PowerPoint and Adobe Acrobat viewer software if these programs are already on a computer hard drive. The ReadMe file will instruct you how to download the viewer programs. An accompanying page of Training Officer FYIs addresses a few discrepancies and issues in the PPCC. There have been a few changes in policy since development of the curriculum began in 1999. Any questions about the PPCC should be directed to Gloria Hale, EMSC Coordinator, at (518) 402-0996, ext. 14.


Child Helmet Law Expanded and Public Information Materials Available

Effective July 1, 2002, scooter riders under the age of 14 will be required to wear approved helmets. The maximum penalty for an offense is a \$50 fine, however, if a parent can prove that a helmet has been obtained, the fine will be waived. New York State Law already requires all children under the age of 14 to wear approved safety helmets while bicycling or in-line skating. Several types of injuries are sustained by both children and adults while bicycling, in-line skating and riding scooters. Many of the injuries can result in traumatic brain injury, requiring costly medical bills and lifelong rehabilitation. Bicycle helmets, when fitted properly, can reduce the risk of head injuries by 85 percent and brain injuries by 88 percent.



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"Saved by the Helmet Club" Information Materials Available

The New York State Department of Health Bureau of Injury Prevention, in cooperation with the Brain Injury Association of New York State and the Governor's Traffic Safety Committee, is pleased to announce the New York State "Saved by The Helmet" Club. The Club recognizes those individuals who have been saved from head injury, brain injury or death by wearing safety helmets while bicycling, in-line

skating or riding scooters. Anyone who has been saved by a helmet and applies to join the Club will receive a free membership, a "Saved by The Helmet" Club T-shirt and other gifts. For copies of the "Saved by The Helmet" Club campaign materials and information on how you can promote the program to your community, call the state Health Department at (518) 473-1143.

EMS for Children Activity Books Available

Have you had open houses or visited schools to talk to children about safety, 911, or first aid and wish you had something appropriate to hand out to young children? The National EMSC Resource Center has just delivered a few hundred children's activity books called, "Be Prepared, Not

Scared" to the New York State EMSC Program for distribution. The activity and coloring books are appropriate for children ages 3-9 years. To get copies of these books, please contact Shannon Nichols or Gloria Hale at the Bureau of EMS, at (518) 402-0996, ext. 14

Pediatric Prehospital Care Reference Cards Available

NYS EMS For Children Pediatric Prehospital Care Reference Cards for use in ambulances and first response vehicles or for use as adjunct educational tools are still available from the EMSC

office. To request copies of color coded laminated or non-laminated cards please call Gloria Hale, EMSC Coordinator at (518) 402-0996 extension 14.

To Re-tilt or NOT to Re-tilt... That is the Question

In 2000 the guidelines for treatment of obstructed airway in an unconscious individual were simplified somewhat based on research and teaching experience. The Red Cross National Headquarters has received numerous inquiries from the field regarding the skill sequence for the unconscious choking victim performed by certified lay responders and professional rescuers. The following gives a detailed description.

Certified Lay Responder

For an unresponsive (unconscious) choking victim, certified lay responders are taught a modified CPR technique to clear the airway obstruction. There is no re-tilt, nor reattempt of breaths performed during the modified CPR cycle except during the initial assessment of checking an unconscious victim.

Each time the airway is positioned to give rescue breaths, the responder will look for an object in the victim's mouth and remove an object only if one is seen. Then the breath(s) in the CPR cycle are given. This process applies regardless of whether the victim is an adult, child or infant.

Rationale - Early scientific research indicates that chest thrusts are as effective as, and potentially more effective than, abdominal thrusts. This revision results in simplifying training for the certified lay responder by reducing the number and complexity of skills taught in class.

The same basic skill of chest compressions and rescue breaths is used on victims who either have no pulse/signs of circulation or are unconscious and choking. Since this skill is a modified CPR technique, responders will be taught CPR before the airway obstruction skill so that the learning process is logically connected

and builds on the skills previously learned. This technique is not new. The chest compression technique basically equates to the "chest thrust" that are currently taught in Red Cross courses for the unconscious choking victim who is noticeably pregnant. This modified CPR technique is virtually identical to CPR in that the compressions-to-breaths ratios are the same as is the rate of delivery and technique of compressions. This technique is included within the following programs: First Aid/CPR/AED, Community First Aid and Safety, First Aid: Responding to Emergencies and Sport Safety Training.

Professional Rescuer

The unconscious choking victim skills performed by the professional rescuer did not change with the release of the Emergency Cardiovascular Care 2000 Guidelines. This includes the use of: abdominal thrusts for adults and children, back blows and chest thrusts for infants, finger sweep for adults and re-tilting the airway, and re-attempting 2 rescue breaths during each cycle (for adults, children and infants).

Rationale - Research continues as to the most effective skill for professional rescuers, such as lifeguards, to use when clearing an obstructed airway in an unconscious adult. Because of the emphasis for professional rescuers on training, including initial training as well as refresher and in-service training, the ECC 2000 Guidelines recommended that professional rescuers continue to be trained using abdominal thrusts when clearing the airway of an unconscious adult until further research is completed. This technique is included within the following programs: CPR/AED for the Professional Rescuer, Lifeguarding and Emergency Response.

ZOLL Established AED Instructor Foundation

The AED Instructor Foundation is a non-profit organization dedicated to the professional development and success of initial emergency care instructors who teach CPR and automatic external defibrillator (AED) use. The goal is to help make public access defibrillation (PAD) a widespread reality, and thereby save thousands of lives lost to sudden cardiac arrest. Zoll offer affiliates:

Access to a variety of educational and training resources on the affiliate-only section of the web site, including:

- Free promotional and business development tools
- Instructional tools and resources
- AED training materials
- A schedule of Foundation seminars
- Links to major AED information/resource sites
- Listing in the Foundation's International registry of AED and initial emergency care instructors
- AED Instructor Foundation Certificate of Recognition of adherence to the highest training standards and ethics
- Ability to participate in seminars on instruction enhancement, PAD promotion, business development, and AED program implementation
- Access to specially-priced AEDs
- A new, inexpensive AED for clients

- A special AED training unit
- A one-time discount on an AED for affiliates
- Qualification for the Foundation's PAD support program to help fund AED training and implementation activities
- Special discounts on software to help you manage your training center

In the future, the Foundation will also offer members savings on professional liability insurance and discounts on products and services needed by training entities.

Membership in the AED Instructor Foundation is free and open to any person engaged in Initial Emergency Care training and/or AED program implementation, and who has completed a prescribed instructor training for a state or nationally approved initial life support and/or AED training program. If requested, a copy of a current instructor certification must be submitted to the Foundation.

For more information check the web site at www.aedinstructorfoundation.org or contact:

Frank J. Poliafico, RN, Director
 The AED Instructor Foundation
 Front & Main Street, Suite 911, Upland, PA 19015
 Phone: 610-872-7447, Fax: 610-872-5727 or
 e-mail: director@aedinstructorfoundation.org

The Association is on the Web! You can find us at: <http://NYSVARA.org>

MARK YOUR CALENDARS

FIRE, RESCUE & EMS MEGA SHOW at the Nassau Veterans Memorial Coliseum, Uniondale, Long Island on Saturday & Sunday 2/1 & 2/2/2003. For more information call (631) 669-4300.

EMS TODAY CONFERENCE & EXPOSITION will be held in Philadelphia, PA and will run Thursday 3/20/03 through Saturday 3/22/03 providing three days of education, networking, continuing education and exhibits. To request a conference brochure log onto the JEMS web site at www.jems.com or call (800) 266-5367.

STEP (SOCIETY FOR TOTAL EMERGENCY PROGRAMS) CONFERENCE, Saturday & Sunday April 4 & 5, 2003 at the RIT Inn & Conference Center (formerly Marriot-Thruway Hotel), 5257 West Henrietta Road, Rochester, NY. The 9th offering of this annual EMS conference is open to all EMS, Fire, Police, Nurses, Physicians and other Health Care Professionals, Hospital Administrators, Government and Facility Managers. The conference expects to offer six tracts: BLS, Advanced Care, Trauma, Fire EMS, Law Enforcement/Security Management/Training and each track will offer 6 workshops for a total of 36 workshops to chose from. Conference early registration fee is \$115 for the two days and includes all meals. To reserve a room contact the hotel directly at 359-1800. For more information check the web site at <http://home.rochester.rr.com/emsroch/step/conference.htm> or write STEP, PO Box 18023, Rochester, NY 14618-0023.

SPRING MELT FIRE & EMS FLEA MARKET Sunday 4/13/03 at the Allentown Fairgrounds, in Allentown, PA.

INSIDE EMS CONFERENCE May 16/17, 2003 at the Holiday Inn, Fishkill, NY. Sponsored by the Hudson Valley Regional EMS Council. For information call (645) 567-6740 or e-mail hvremSCO@hvremSCO.org

FIRE EXPO 2003, May 16, 17 & 18, 2003 at the Farm Show Complex, Harrisburg, PA.

FIRE 2003, Thursday 6/11/03 through Saturday 6/14/03 sponsored by the NYS Association of Fire Chiefs at the Empire EXPO Center in Syracuse, NY. For info call (800) 676-3473 or log on to the web site at www.nysfirechiefs.com.

PULSE CHECK 2003, the 48th Annual Educational Conference & Trade Show of the NYS Volunteer Ambulance & Rescue Association will be held Thursday 10/2/03 to Sunday 10/5/03 at the Roaring Brook Resort & Conference Center, Lake George, NY. Event features seminars, exhibits, awards dinner and the country's only statewide EMT and CFR team skills competition. For information call (877) NYSVARA, (518) 883-4192 or e-mail pulsecheck2000@aol.com

**THE NEW YORK STATE
VOLUNTEER AMBULANCE &
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