

The Blanket

ISSUE 2 • 2009



New York State Volunteer Ambulance & Rescue Association, Inc.

PRESIDENT'S MESSAGE

Michael J. Mastrianni, Jr.
President



I hope everyone has had a great summer. I want to bring everyone up to date on recent happenings.

- PULSE CHECK 2009, our annual Educational Conference and Trade Show, was held 10/1/09 through 10/4/09 at the Holiday Inn on Wolf Road in Albany. Mike McEvoy and Rich Beebe, our seminar coordinators, put together an outstanding series of seminars with nationally recognized presenters from agencies around New York State as well as from Vermont and Hawaii. New this year was a pre conference workshop consisting of core content CMEs for the CME based EMT Refresher Program. The next issue of the BLANKET will include information on election results, special awards and scholarship awardees, the Memorial Service and drill winners. Information on dates and location for PULSE CHECK 2010 should be posted on the web site at www.nysvara.org by the end of November.
- On May 20, 2009, the NYS EMS Memorial Service was held on the Plaza in Albany. I, along with several members of our Association attended this moving service. Sadly, two names were added to the Tree Of Life. They were Edward P. Mueller of West Islip Volunteer Fire Department and Norman H. Haines of Laurens Fire District Emergency Squad. I want to thank those members of the Association who attended the ceremony.
- On May 21, 2009 I attended the annual EMS Appreciation Barbeque hosted by and held at Good Samaritan Hospital in Suffern, NY. I, along with representatives from District 1 and District 5, announced that Good Samaritan Hospital will be honored at Pulse Check 2009 for its continuous generous support to the EMS community and its contributions to Districts 1 and 5 and to the State Association. A banner was presented to Good Samaritan Hospital acknowledging the honor. The banner will be hung outside their Emergency Department and then will be displayed at our Convention.
- Our participation continues in the North Central EMS Cooperative. Every squad that is a member of our Association is a member of the Cooperative. I encourage you to visit the web site at www.ncemsc.org for more information about the goods and services that are available. If you have any questions, please contact Cindy Sobania at office@ncemsc.org or call her at 888 603-4426. I want to remind everyone, that this member benefit is a great value in these difficult

economic times, not only in saving money for your squad, but can also provide income for our Association.

- I along with Henry Ehrhardt continue to represent the Association on the NYS SEMAC and SEMSCO. I along with several other members of the Council am still awaiting formal appointment to the SEMSCO.
- As I had mentioned previously, as a result of our work on SEMSCO, we have formed a group of the EMS providers in the State. The group is called the NYS EMS Consortium. Members include: NYSVA&RA, Firemens Association of the State of NY (FASNY), NYS Association of Fire Chiefs, NYS Association of Fire Districts and the private operator's United NY Ambulance Network (UNYAN). While we may not agree on every issue facing EMS, the consortium's goal is to develop an agenda whereby the group can speak to our state officials in a voice that is louder than each of us individually. The group has been periodically meeting informally and has had a good exchange of ideas. A more formal meeting will be scheduled for September in Albany. Our hope is to formalize some of the conversations that we have been having. More information to follow.
- I am pleased to announce that as a result of a cooperative effort between Fire Rescue GPO, Sprint Nextel and NYSVARA, Sprint Nextel is able to offer the members of squads that belong to NYSVA&RA **and their families** a 22% discount on monthly service from Sprint Nextel on up to 5 lines per account. This discount applies to **new as well as existing accounts**. All that is required is that you visit the web site that has been created especially for us, www.sprint.bz/nysvara. Use the discount code: **HCANT_FRG_NY_ZZZ**. You can also visit any Sprint Nextel store. The only requirement is that you use the discount code when you order. There are also special discount packages on cell phone accessories and customer service. This is a great opportunity for our members who currently have Sprint Nextel service or are looking to save money on their cell phone service to take advantage of this great new member benefit. If you have any questions, please contact Guy Lister at guy.lister@sprint.com.

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Sprint and New York State Volunteer Ambulance & Rescue Association are pleased to announce

*A new wireless program for Volunteer Ambulance and Rescue Association members and family members.**

It's our way of saying thank you!

Eligible individual Ambulance Company employees and volunteers qualify for up to 5 lines all with a 22% discount on select Sprint or Nextel monthly plans

Requires 2-year service agreement.



Start saving today!

Call 866-212-4471 for more details

Visit www.sprint.bz/nysvarai

Or shop at your nearest Sprint Retail Store

Please reference discount code: HCANT_FRG_NY_ZZZ

May require up to a \$36 activation fee/line, credit approval & deposit. Up to \$200 early termination fee/line applies. **Individual-Liable Offer:** Applies to individual-liable lines eligible for a discount under their employer's services agreement. **NVP Empl. Discount:** Discount available to eligible employees of the company participating in the NVP program. Subject to change according to the company's agreement with Sprint. Available on select plans only. Discount applies to monthly service charges only. **Other Terms:** Coverage not available everywhere. Nationwide Sprint Network reaches over 275 million people. The 3G Sprint Mobile Broadband Network (including roaming) reaches over 270 million people. Offers not available in all markets/retail locations or for all phones/networks. Pricing, offer terms, fees & features may vary for existing customers not eligible for upgrade. Other restrictions apply. See store or Sprint.com for details. ©2009 Sprint. Sprint and the logo are trademarks of Sprint. Other marks are the property of their respective owners.

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The Quarterly Newsletter
of the NYS Volunteer Ambulance
& Rescue Association

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Christy Hubbard, Secretary
Robert Franz, Treasurer
Michael Wilhelm, Financial Secretary

NYSVARA Membership Information

If you are not a member, please join NYSVARA today and help increase the voice of the community/volunteer/non-profit EMS/First Responder Sector in New York State. For information on NYSVARA membership go to our web site at www.nysvara.org.

PRESIDENT'S MESSAGE

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Lastly, these are very trying times for all of us in EMS. Our Association is the voice of volunteer EMS in New York State. I urge you to participate in your local District. I am also asking for your help in the State Association. If you are interested in working with us or have any questions comments or concerns, please feel free to contact me. Thank you for all you do for your community and I hope to see you all at Pulse Check 2009 in Albany

Be safe!

Michael Mastrianni, Jr., President
president@nysvara.org

The graphic shows the NCEMSC logo (a stack of blocks) plus the NYSVA&RA logo (a circular emblem with a map of New York State) followed by an equals sign and the text "Saving\$".

The North Central EMS Cooperative (NCEMSC) is affiliated with the New York State Volunteer Ambulance and Rescue Association (NYSVA&RA)...therefore, if your squad is part of the NYSVA&RA, you are part of us! NYSVA&RA member squads automatically become members of the NCEMSC. NYSVA&RA elects to pay your squad's annual NCEMSC membership dues (a \$75 value)! Your involvement is important. We share revenue! A percentage of your purchases are returned to the NYSVA&RA, which helps NYSVA&RA recoup the annual NCEMSC membership dues and support other projects. The NCEMSC is a group of more than 2,000 EMS organizations that have joined together to take advantage of volume pricing discounts on a wide array of EMS products and services. As a NYSVA&RA member squad, you will have the opportunity to share in these discounts.

**Are you tired of paying catalog prices?
If so, the NCEMSC can help you!**

The NCEMSC assists members in providing cost-effective, quality service by negotiating discounted contracts for the following equipment and supplies:

- Ambulances
- Billing & Collection Services
- Cardiac Monitors/Defibrillators
- Electronic Patient Care Reporting System
- EMS Legal Services & Seminars
- Fleet Fuel Cards
- Medical Supplies & Equipment
- Office Equipment, Furniture & Supplies
- Promotional Clothing & Items



Inquire Today!

NORTH CENTRAL EMS COOPERATIVE
www.ncemsc.org
(888) 603-4426
office@ncemsc.org

NCEMSC VENDORS

A grid of logos for various vendors including BoundTree medical, PSV Premier Specialty Vehicles, ZOLL Advancing Resuscitation. Today, TAYLOR MADE 800-468-1310, =ISAKSEN= Promotional Specialties, Page Wolfberg & Wirth The National EMS Industry Law Firm, Corporate Express, WRIGHT EXPRESS, METRO-BILLING SERVICES, L.L.R., IMAGE TREND INC, and ZOLL Data Systems.



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NFPA TECHNICAL COMMITTEE FOR AMBULANCE STANDARDS

The National Fire Protection Association's (NFPA) Technical Committee on Fire Department Apparatus has a new project being developed and a new 30 member technical committee being established to address ambulance standards. While NFPA is not a government agency its standards on emergency vehicles, fire, electrical and building systems are followed by many municipal fire organizations by reference in contracts and regulations. Last year comments on this new project were invited as well as expressions of interest from those interested in participating on the Committee. The Federal Standard for Ambulances (KKK-A-1822F), which is the federal government's purchase specifications, may be used as a starting point to develop the new document. Private and independent EMS services account for over half of the ambulance industry but there is concern on the part of some that the NFPA may gear their standard toward using medium to heavy duty chassis more suitable for fire organizations. This would require expensive changes to the designs of the 5,500-6,000 ambulances build in the USA each year. The NY State EMS Council (SEMSCO) also has a committee looking at Part 800 requirements as they relate to ambulances.

IRS FORM 990 REVISED

The IRS has released final instructions for the newly redesigned Form 990 (for use in tax year 2008 to be filed in 2009). The new instructions are at www.irs.gov/charities/article/0,,id=185561,00.html.

As part of the phase-in of the new 990, some organizations not eligible to file the Form 990-EZ for 2007 will be eligible to file Form 990-EZ for 2008. A summary of the transition period filing requirements for Form 990, 990-EZ, and 990-N is at www.irs.gov/charities/article/0,,id=184445,00.html. As part of the redesign more information needs to be provided and the length of the 990 has been increased. Consequently, many organizations were unable to complete the forms by the 5/15/09 deadline and requested automatic three month extensions.

NYS SALES TAX COLLECTION CHANGE AFFECTING NON-PROFITS

A number of VACs and VFDs sell t-shirts, hats, sweatshirts, patches, etc with squad logos from their internet sites. Little noticed amendments to the New York Tax Law, effective 9/1/08, requiring exempt organizations to collect sales tax on sales of certain goods and services which in the past were exempt. Under past law, retail sales in NY of tangible personal property such as clothing by qualifying exempt organizations were generally subject to sales tax only if made at a physical shop or store. The change for many organizations is the new requirement to collect sales tax on items sold over the internet and by other "remote" means such as telephone and mail if such sales are made with a degree of regularity, frequency and consistency. One representation firm has indicated that, unofficially, NYS takes the position that one sale per month makes sales tax remittable but that sales tax would not be collectible for a once a year event, such as an online auction.

An exempt organization that makes any taxable sales must register with the NYS Department Taxation and Finance for sales tax purposes if it has not already done so. Once registered, organizations generally will be required to file quarterly sales tax

returns, regardless of whether any sales tax is actually collected. Guidelines issued by the NYS Department of Taxation and Finance discussing these changes and providing examples can be found at www.tax.state.ny.us/pdf/memos/sales/m08_5s.pdf. If squad officials have any questions about the new requirements they should consult a qualified accountant or attorney.

CALIFORNIA GOOD SAMARITAN CAN BE SUED FOR NON-MEDICAL CARE

The California Supreme Court has ruled that a young woman who pulled a co-worker from a crashed vehicle isn't immune from civil liability because the care she rendered wasn't medical. The divided high court appeared to signal that rescue efforts are the responsibility of trained professionals. It was also thought to be the first ruling by the court that someone who intervened in an accident in good faith could be sued. Go to <http://www.latimes.com/news/local/la-me-good-samaritan19-2008dec19,0,4033454.story> for an LA Times article on the case.

CRASH RESPONSE FEES RAISE FUNDS FOR SOME MUNICIPALITIES

A NY Times article in April reported on how some municipalities have turned to crash response fees as a way to raise revenue. It gave the example of Winter Haven, FL which charged a woman \$316 for police and fire department response to a side-swiping incident. Winter Haven in 2008 became one of a dozen cities in the country to start charging "accident response fees" to shift the expense of tending to and cleaning up crashes directly to at-fault drivers. Either they, or their insurers, are expected to pay. However, such unexpected bills come as a shock to residents who assume their municipal taxes on property and/or income cover municipal emergency services. Then they find that most insurance policies actually don't cover the expense. The ordinances infuriate motorists and generate bad press but local governments find them hard to resist. A company in Dayton, OH called Cost Recovery Corporation specializes in setting up collection systems for municipalities that bill for police and fire responses. The company keeps 10% of billings and says inquiries have tripled in the last year. Winter Haven has only been able to collect 20% of the \$32,000 that had been billed. The woman the Times article mentioned indicated she had no intention of paying the fee.

CME VODCASTS FROM UNIVERSITY OF ROCHESTER

Continuing Mobile Education for EMS Providers is a program to provide easily accessible vodcast-based training for EMS providers downloadable onto iPods or computers. The initial offerings focus on geriatrics education because EMS providers receive relatively little training despite caring for large number of older adults – up to 40% of calls in some jurisdictions. Development of the program was led by Manish N. Shah, M.D., M.P.H., an emergency medicine physician and chief of the Division of Pre-hospital Medicine at URMC and also EMS Director for the Monroe-Livingston County region. He explained "When we talked to a number of emergency providers, they all asked for more 'on-demand' training, so we set out to design something that would be truly useful" and added "With a video podcast, they can sit in their ambulance or base between calls and learn new skills." To access the program go to www.rochesterems.org and click on continuing medical educa-

tion on the left side of the home page. Choose the topic you want to learn about and watch the segments you are interested in. There are several viewing options.

PRO BONO LEGAL ASSISTANCE AVAILABLE

New York Lawyers for the public Interest has a Pro Bono Clearinghouse to help non profit organizations and community groups with legal issues. The Clearinghouse draws on hundreds of volunteer lawyers from New York's major law firms and corporate law departments. The range of legal needs addressed includes reviewing contracts and lease agreements, guidance on corporate structure and governance, drafting personnel manuals and procedures, resolving landlord/tenant and contract disputes and general counsel representation for organizations on an ongoing basis. For more information call (212) 260-8813.

MEDIVAC HELICOPTER SAFETY

US Representative Jason Altmire (PA) introduced HR 978, the Helicopter Medical Services Patient Safety, Protection, and Coordination Act on 2/11/09. There were 13 initial co-sponsors. The bill is intended "to recognize and clarify the authority of the States to regulate intrastate helicopter medical services pursuant to their authority over public health planning and protection, patient safety and protection, emergency medical services, the quality and coordination of medical care, and the practice of medicine within their jurisdictions." For more information on the bill go to <http://www.thomas.gov/cgi-bin/bdquery/D?d111:2::/temp/%7EbdvK5x::>

In related news, the National Association of State EMS Officials (NASEMSO) provided witness testimony at National Transportation Safety Board hearings. State EMS Directors Dan Manz and Dr. Bob Bass served as expert witnesses at hearings on helicopter EMS held in Washington, DC. NASEMSO reiterated multiple challenges faced by states and the ability to regulate helicopter EMS caused by the Airline Deregulation Act during this testimony and in its revised air medical position statement available at www.nasemso.org.

MEDICAL DEVICE RECALLS

PediCap End-Tidal CO2 Detector (PediCap and PediCap 6) is the subject of an urgent voluntary medical device recall. Covidien, formerly known as Tyco Healthcare issued the notice 8/14/09. After receiving a customer report in which they experienced difficulty manually ventilating an intubated patient through the PediCap the company believes that a recent modification to the PediCap End-Tidal CO2 Detector may result in increased resistance to airflow through the PediCap. This could result in ineffective ventilation of the patient and/or inadequate detection of CO2 levels, so that the indicator paper will not change color. Although the company received no reports of patient injury, it has determined that all PediCap and PediCap 6 End-Tidal CO2 Detectors from 80 specific lots should be returned. For more information or a copy of the recall notification including lot numbers, contact Covidien's Technical Services group at 1-800-635-5267, option 3, then option 1. If product was purchased from a distributor, please contact your provider for their return process.

NEW PEDIATRIC DISASTER PREPAREDNESS PRODUCT POSTED TO NRC WEBSITE

Pediatric Disaster Preparedness: A Resource for Planning, Management and Provision of Out-of-Hospital Emergency Care is

now available as a downloadable PDF file. This resource, developed by the Center for Pediatric Emergency Medicine on behalf of the EMSC National Resource Center, focuses on the practical and essential elements of pediatric prehospital emergency care in EMS system planning for disasters and terrorism. It is designed for use by EMS agency and system medical directors and administrators, emergency managers, and any other key stakeholders who will be concerned with the functions and activities of EMS care providers during a disaster, terror event, or other public health emergency. To download the document, go to http://cpem.med.nyu.edu/files/cpem/u3/pediatric_disaster_preparedness.pdf

LONG ISLAND RAIL ROAD EMERGENCY RESPONSE GUIDELINES

The first on-scene responders should immediately contact the LIRR's Movement Bureau at (718) 558-8204 and provide:

- Location, type of incident and any special hazards present
- Rail road equipment involved – diesel locomotive, passenger rail car, freight train, structure, etc.
- Rail road action required – third rail power removal, stop order, etc.
- Command post location and name/rank of Incident Commander
- Staging area (if appropriate)
- Expect trains at any time, on any track and in either direction.
- Consider all electrical equipment including third rail, train contact shoes and power sub-stations to be energized.
- Request confirmation of any action requested from the rail road.
- Safety zone at emergency operations should extend 2,500 feet in both directions.

NATIONAL EMS EDUCATION STANDARDS & INSTRUCTOR GUIDELINES

The National EMS Education Standards have been approved and posted on www.EMS.gov. Also posted are the corresponding Instructional Guidelines for Emergency Medical Responder (EMR), Emergency Medical Technician (EMT), Advanced EMT (AEMT), and Paramedic. To download a PDF version of these documents, please go to www.EMS.gov, click "Education" on the top red navigation bar and select "National EMS Education Standards" from the drop-down menu.

YOU CAN'T MAKE THIS UP

DHS OFFICIAL'S HANDLING OF ODD MAILING RAISES CONCERNS

The Washing Post reported in February that a senior official at the Department of Homeland Security (DHS) set off alarms after she received white powder and a dead fish in the mail at home and brought them to work. She sealed the fish in a plastic bag without noticing the white powder, contacted DHS security and was told to bring the fish to the office. She left the fish in her car parked under a ventilation shaft in the DHS building garage at 1120 Vermont Avenue, NW in Washington and entered a secure area inside, potentially contaminating everywhere she went. The FBI, Federal Protective Service and DC police and fire units later sealed off the building and took samples. Laboratory results did not indicate the powder was harmful.

The employee was a former Energy Department official and was assigned beginning in 2006 to collect intelligence to counter weapons of mass destruction. The fish package had a return address from Battelle, which is managing a National Biodefense Analysis and Countermeasures Center for DHS at Fort Detrick, Md. A company spokeswoman would not confirm that, but said the company is working with investigators. The FBI is investigating the incident, and the official, a career employee in the department's intelligence and analysis directorate, continues to work for DHS.

CDC PROVIDES NEW BLAST INJURY FACT SHEETS

The Centers for Disease Control and Prevention (CDC), in collaboration with partners from the Terrorism Injuries Information, Dissemination and Exchange (TIIDE) Project, have developed fact sheets for health care providers that provide detailed information on the treatment of blast injuries. These fact sheets address background, clinical presentation, diagnostic evaluation, management and disposition of blast injury topics. The fact sheets may be viewed and downloaded for use in the treatment of blast injury patients, in the training of clinical staff or to disseminate to others. Topics include: Blast Injuries; Essential Facts; Injury Care: Prehospital; Lung Injury: Prehospital Care; Lung Injury; Radiological Diagnosis; Crush Injury and Crush Syndrome; Post Exposure Prophylaxis for Bloodborne Pathogens; Abdominal Injuries; Extremity Injuries; Ear Injuries; Eye Injuries; Thermal Injuries; Pediatrics; Older Adults; and Bombings and Mental Health. These fact sheets will soon be available in Spanish, Chinese, and French. Additional fact sheet topics will be posted as they are developed. For more information, go to <http://www.bt.cdc.gov/masscasualties/blastinjuryfacts.asp>.

EVACUATION DISTANCES FOR BOMB THREATS

The National Counterterrorism Center web site has a useful chart for first responders that provides evacuation distances for various types of bomb threats. The chart is available at http://www.nctc.gov/docs/2006_calendar_bomb_stand_chart.pdf

FIRE SERVICE ORGANIZATIONS WANT FEMA TO STAY AT DHS

Three prominent fire and emergency service organizations are urging President Barack Obama to leave the Federal Emergency Management Administration (FEMA) in the Department of Homeland Security, DHS. To move FEMA out of DHS could endanger America's emergency response capabilities, said the leaders of the International Association of Fire Chiefs (IAFC), International Association of Fire Fighters (IAFF) and the Congressional Fire Service Institute (CFSI) in a letter dated December 22 to then President-Elect Obama. Over the past month, press reports have cited opinions from emergency management groups and others that FEMA should be removed from DHS, an idea that alarmed these fire service leaders. For a copy of the letter to President-Elect Obama, go to the www.iafc.org: Government Relations > Issues: Homeland Security.



CPR MANIKIN GRANTS FROM NATIONAL AUTOMOBILE DEALERS CHARITABLE FOUNDATION

Since its inception in 1975, the National Automobile Dealers Charitable Foundation has given over 4,100 CPR training units in all 50 states and Washington, D.C. for a total donation of over \$2.3 million in grants. More than 1.9 million people have been trained on foundation donated CPR manikins, and countless lives have been saved. In addition to Resusci-Anne, Resusci-Baby, and Resusci-Junior, which teach cardio-pulmonary resuscitation (CPR) skills, the Little Anne AED training systems donated by the Foundation teach how to properly use the automated external defibrillators located in many public places. Information about the foundation and its programs and a link to the grant application form is on the web at <http://www.nada.org/Advocacy+Outreach/CharitableFoundation/>. A local dealership who is a member of the National Automobile Dealers Association must sign off as sponsoring an application.

NYS-DOH-BEMS, SEMSCO, SEMAC AND OTHER STATE LEVEL ACTIONS

The Codes TAG is reviewing 800.15 and 800.16, along with ambulance supply and construction requirements as they related to more cost efficient European model ambulances.

Governor's Office continues to hold all appointments to the SEMSCO and the SEMAC, pending a review of constituent make-up and apparent lack of diversity of the membership.

SEMAC issued an advisory that glucometry devices are the standard of care to determine blood glucose levels for any agency that does blood glucose determination. This removes the ability of an ambulance service to use the colorimetric drop of blood on a dipstick method of blood glucose determination. Agencies performing blood glucose determination must have a Clinical Laboratory Improvements Amendment (CLIA) Permit Waiver issued by the NYS DOH Wadsworth Center.

RECENT NYS DOH POLICY STATEMENTS

09-01 MUNICIPAL CERTIFICATE OF NEED APPLICATIONS "MUNI-CON"

Under the provisions of NYS Public Health Law Article 30, section 3008(7)a, a municipality, as defined by Article 1 of the General Municipal Law, may determine on its own that a need exists to establish an ambulance or advanced life support first responder service (ALS-FR). Before the municipality may begin operation of the service, it must make notification to the State EMS Council (SEMSCO), complete a number of steps and possess an EMS Operating Certificate good for up to two years issued by the NYS DOH. To continue the service past two years the municipality must follow Policy Statement 06-06 and file the usual application and supporting documentation with its Regional Council and go through the normal process including a public hearing.

09-02 EXTENSION OF CERTIFICATION FOR MILITARY PERSONNEL

Outlines the procedure for military personnel being released from active duty to have their CFR/EMT/AEMT certification extended under the provisions of Chapter 206 of the Laws of 2008 signed by Governor Paterson on July 7, 2008 and Section 3011 of Article 30 of Public Health Law. Generally, the extended certification shall be for the period of military duty and for

twelve months after they have been released from active military duty.

09-03 PUBLIC ACCESS DEFIBRILLATION

The purpose of this policy statement is to assist a person, firm, organization or other entity in understanding the notification process for operating an automated external defibrillator pursuant to a collaborative agreement under the provisions of Chapter 552 of the Laws of 1998 authorizing Public Access Defibrillation. Issues covered include PAD program requirements, reporting AED use, Regional EMS Council responsibilities and data collection requirements. Ambulance and ALS first response agencies may not participate in PAD programs but must apply through their Regional Medical Advisory Committee (REMAC) got authority to utilize AEDs. Interestingly, at least one region has mandated AEDs on ambulances through a regional REMAC “advisory”.

09-04 INSTRUCTOR COURSE PROGRAM COORDINATOR

Program Coordinator (PC) has the overall responsibility for directing and coordinating the planning, organization, administration, and Continuous Quality Improvement of a NYS DOH Bureau of EMS (BEMS) Prescreening, Certified Lab Instructor (CLI), Certified Instructor Coordinator (CIC), or Certified Instructor Update (CIU) Course. The statement covers the job description, criteria for appointment, apprenticeship guidelines, behavioral objectives and demonstrated proficiencies needed for the position.

09-05 CERTIFICATION FOR INDIVIDUALS WITH CRIMINAL CONVICTIONS

Describes the process for the review of applicants seeking EMS certification with a history of criminal convictions. This policy also describes the responsibilities for the applicant, the Certified Instructor Coordinator (CIC) and the Department of Health. The Department will review all criminal convictions from any federal, military, state and/or local jurisdiction to determine if such convictions fall within the scope of those specified in Part 800 to determine if the applicant for certification represents a potential risk or danger to patients or the public at large.

09-06 COURSE FUNDING – COURSE SPONSORS AND EMS AGENCIES

Covers student eligibility, special considerations, course sponsor requirements, financial penalties, reimbursement policies, course reimbursement rates and funding eligibility. Replaces Policy Statements 95-02, 95-05, 98-07, 99-05, 00-05 and 02-10.

09-07 SAFETY AND SECURITY OF EMS RESPONSE VEHICLES

Policy is intended to encourage EMS agencies to develop policies and procedures that will improve the security and safety of their response vehicles and minimize the possibility of unauthorized use or theft.

09-08 REPORTING INCIDENTS, INJURIES AND CRASHES

Form DOH-4461 has been established to aid agencies in complying with Part 800.21(q) requirements to report certain types of incidents to the NYS DOH within 24 hours of the event and in writing within five business days.

09-09 FENTANYL FOR PREHOSPITAL EMS SERVICES

Updates 07-02 allowing the use of vials or ampoules when sub-stocking fentanyl, changes the Medical Director reporting date from 12/31 to 1/31 of each year and reminds agencies that they must submit Controlled Substance Operations Plan changes or amendments to NYS DOH prior to implementation.

CHEMTREC DVD AVAILABLE

The 2009 CHEMTREC® outreach effort kicks into gear with new DVD, CHEMTREC – *An Overview for Emergency Responders*. Go to www.CHEMTREC.com to download the video for free.

CDC VIDEO SHOWS HOW TO USE HAND-HELD RADIATION SURVEY EQUIPMENT

An 18 minute skills training video that demonstrates how to screen people for external contamination using a hand held Geiger Mueller Detector is now available from the Centers for Disease Control and Prevention (CDC). The program is designed for individuals assigned to conduct mass screening for contamination from radioactive materials following a large scale incident. The program may be used as pre-incident training or intra-incident just in time training. Supplementary training material on utilization of ion chambers and alpha scintillation detectors is provided. A downloadable graphic illustration of the procedure for performing a radiological survey (G-M Detectors Job Aid) is also provided. For more information go to <http://emergency.cdc.gov/radiation/screeningvideos/index.asp>

CLARIFICATION RELATED TO FACEMASKS AND N-95 RESPIRATORS RELATED TO H1N1 INFLUENZA VIRUS

The National Association of State EMS Officials issued the following bullet points extracted from multiple CDC and FDA guidance documents concerning use of surgical face masks and N-95 respirators in the wake of the H1N1 flu outbreak:

1. Based on currently available information, for non-healthcare settings where frequent exposures to persons with novel influenza A (H1N1) are unlikely, masks and respirators are not recommended.
2. All patients with acute febrile respiratory illness should wear a surgical mask, if tolerated by the patient. Persons who are ill with influenza-like symptoms should stay home and limit contact with others as much as possible. When not alone or in a public place, protect others by wearing facemasks (meaning surgical masks) to reduce the number of droplets coughed or sneezed into the air and the time spent in crowded settings should be as short as possible.
3. Respirators (meaning N-95 or higher filtering facepiece respirator certified by NIOSH) should be considered for use by individuals for whom close contact with an infectious person is unavoidable. This can include selected individuals who must care for a sick person (e.g., family member with a respiratory infection) at home.
4. Pending clarification of transmission patterns for this virus, EMS personnel who are in close contact with patients with suspected or confirmed swine-origin influenza A (H1N1) cases should wear a fit-tested disposable N-95 respirator, disposable non-sterile gloves, eye protection (e.g., goggles; eye shields), and gown, when coming into close contact with the patient.

5. All EMS personnel engaged in aerosol generating activities (e.g. endotracheal intubation, nebulizer treatment, and resuscitation involving emergency intubation or cardiac pulmonary resuscitation) should wear a fit-tested disposable N-95 respirator, disposable non-sterile gloves, eye protection (e.g., goggles; eye shields), and gown, unless EMS personnel are able to rule out acute febrile respiratory illness or travel to an endemic area in the patient being treated.
6. The FDA issued an Emergency Use Authorization (EUA) for N-95 respirators on April 27, 2009. This EUA permits the deployment of these products, accompanied by fact sheets with information for use during the 2009 H1N1 flu virus emergency, from the Strategic National Stockpile for use by the general public to help reduce wearer exposure to airborne germs during this emergency. The specific products covered by the EUA are identified by manufacturer and model number (see <http://www.fda.gov/cdrh/emergency/N-95-authorization.html>).
7. The term "general public" in this EUA is broad and includes people performing work-related duties, for example in occupational health care settings. However, this EUA does not affect Occupational Safety and Health Administration (OSHA) requirements. If respirators are used for people in occupational settings, employers must comply with the OSHA Respiratory Protection Standard, (29 CFR 1910.134), which can be found at <http://www.OSHA.gov>.
8. The EUA does not waive fit testing and other OSHA requirements that apply when respirators are used for people performing work-related duties.

The EUA did authorize the release of N-95 respirators from the Strategic National Stockpile (SNS) for "persons performing work-related duties," presumably public health and safety personnel such as EMS. While NASEMSO has not received a federal agency clarification related to "general public," it seems that the definition was intentionally broad to permit public health authorities to determine appropriate distribution of N-95 respirators for their populations at risk.

NIOSH ISSUES NEW GUIDANCE ON PPE AND RESPIRATORS FOR BIOLOGICAL AGENTS

The National Institute of Occupational Safety and Health (NIOSH) has released "NIOSH Publication No. 2009-132: Recommendations for the Selection and Use of Respirators and Protective Clothing for Protection Against Biological Agents." This document is based on current understanding of the potential agents and existing recommendations for biological aerosols and is oriented toward acts of terrorism. NIOSH Associate Director for emergency preparedness, John Decker, explained that when the previous guidelines were published in 2001, there was no breathing gear that offered protection against all four types of hazardous agents: chemical, biological, radiological, and nuclear (CBRN). The new guidelines include breathing apparatus assessed to protect against CBRN materials and cite revised National Fire Protection Association (NFPA) protective clothing standards. Information is on the web at <http://www.cdc.gov/niosh/docs/2009-132/>

NIOSH WARNING ON MISLEADING REPRESENTATION OF THE MAINSTAYS RESPIRATOR

It has been brought to the attention of the National Institute for Occupational Safety and Health (NIOSH) that

Allway Tools Inc., is importing and selling a particulate respirator, Mainstays Projects (RSP2MS), as a NIOSH-approved respirator. These respirators were sold at Wal-Mart Stores. The Mainstays Projects RSP2MS Particulate respirator is not certified and is not approved by NIOSH. The Mainstays Project (RSP2MS) respirator is individually packaged and the words Allway and the NIOSH N-95 logo imprinted on the face of the respirator. A NIOSH approval is issued to a respirator only after it has been evaluated in the laboratory and found to comply with all the requirements of Title 42, Code of Federal Regulations, Part 84 (42 CFR 84), including a review of the manufacturer's quality plan. For more information go to http://www.cdc.gov/niosh/npptl/usernotices/pdfs/Mainstay_082008.pdf.

FEMA AWARDS \$17.6 M TO SMALLER EMERGENCY RESPONSE AGENCIES

The US Department of Homeland Security's (DHS) Federal Emergency Management Agency (FEMA) announced the award of equipment and training worth \$17.6 million to 1,045 emergency response agencies in 46 states and the Commonwealth of Puerto Rico under the fiscal year 2008 Commercial Equipment Direct Assistance Program (CEDAP). Since the program's inception in 2005, DHS has provided roughly 6,800 CEDAP awards worth more than \$120 million to support all hazards response capabilities in smaller jurisdictions around the country. Eligibility for CEDAP is limited to law enforcement agencies, fire departments and other emergency responder agencies with specific financial and capability needs. FY 2008 CEDAP funds equipment and training in five categories: extrication devices; thermal imaging, night vision and video surveillance tools; chemical, biological and radiological detection tools; information technology and risk management tools; and vehicle tracking tools. For more information on CEDAP and other DHS grant programs, visit www.fema.gov.

SCHOOL NURSES ASSOCIATION ANAPHYLAXIS AWARENESS CAMPAIGN

The National Association of School Nurses (NASN) launched an anaphylaxis awareness campaign in response to recent survey findings that 72% of school nurses have students with known allergies but do not bring auto-injectable epinephrine to school. The campaign encourages parents of children with known allergies to provide the child's school with auto-injectable epinephrine and work with the school nurse to have an emergency care plan in place. The NASN is inviting readers to visit its website at <http://www.nasn.org/Default.aspx?tabid=563> for more information.

AEMS RECRUITING MEMBERS FOR CONGRESSIONAL EMS CAUCUS

Advocates for EMS is promoting the formation of a Congressional caucus to educate Members of Congress on federal policy issues affecting the diverse delivery of care that constitute EMS. On its web site at <http://www.capwiz.com/naemt/home/> Advocates have provided instructions on how to contact Members of Congress asking them to participate, a copy of the "Dear Colleague" letter currently being circulated by Caucus Co-chairs, Congressmen Boustany (LA), Ruppertsberger (MD), and Walz (MN), and a list of members that have already joined the Caucus.

WOULD YOU DRIVE WEARING A BLINDFOLD?

by Bill Tricarico, Loss Control Director
Emergency Services Insurance Program

I would hope that your immediate response to the title of this article would be a resounding "NO, that would be ridiculous!" And yet, people do something very similar every day. According to the National Highway Traffic Safety Administration, the leading cause of automobile accidents is distracted drivers and driving an emergency vehicle is no different.

Event recorders are being used more and more today. These video cameras record what happens just before and just after a sudden change in the "G" force of a vehicle. Quick stops, jack rabbit starts, hard turns, and collisions. I have reviewed hundreds of such videos and a common theme can be found. Drivers deeply involved in conversations having nothing to do with response, drivers operating the radio or the sirens, or amazingly on a cell phone!

Most people when faced with the task of operating a motor vehicle simply must get the vehicle from point A to point B. Emergency vehicle operators must also get their vehicle from point A to point B, but point B is not the office, or grandma's house, or the mall. Point B is where someone desperately needs assistance from someone with your specific training. Their required assistance may be a matter of life and death! Now, add to that the fact that your vehicle could be 25 tons in weight, you may have several people on board, you're traveling with lights and sirens working, and sometimes you go through red lights and stop signs. Add into the mix other drivers who have radios turned up loud, who are on their cell phone, or eating, or putting on makeup, or shaving, or heaven knows what else they are doing! Now is not the time for you to be distracted.

Drivers of emergency vehicles should have only one job; get that vehicle from point A to point B safely and quickly. Safely being the optimum word in that sentence. The driver should not operate the siren, should not speak on the radio, should not help the officer look for the optimum hydrant, or anything else other than driving. Doing so would be the same as putting a blindfold on and remember, you said that would be ridiculous.

In the airline industry, during take-off and landing, the pilots may only discuss take-off or landing. That is an industry rule. They may not discuss the economy, the new car they are buying, their child's graduation, or last night's ballgame. They must be totally focused on the job at hand; safely guiding that plane to its destination. It is sometimes called the "Sterile Cockpit."

It is time we took a similar tact in the emergency services. When the lights and sirens go on, the vehicle driver must focus on one and only one thing; getting to the scene safely. Remember, you can't help anyone if you become part of an incident yourself.

COMMERCIAL DRIVERS' LICENSES - FIRE AND POLICE VEHICLE ISSUE RESOLVED

Just in time for annual Memorial Day parades across the state, the NY Assembly and Senate passed legislation which was then quickly signed by the governor allowing large fire and police vehicles to be driven at all times without the need of a Commercial Driver's license (CDL).

An interim change allowing driving back from emergencies was included in the state budget legislation passed in April. The full exemption was subsequently passed in bills S1624B introduced by Assemblyman Robert Sweeney and A6051A introduced by Senator Brian X. Foley both of Suffolk County amend-

ing Section 501 of the Vehicle and Traffic Law and signed by Governor Paterson 5/21/09.

NYS INSURANCE DEPARTMENT HALTING AMBULANCE SUBSCRIPTION PLANS

MedGuard run by eight volunteer squads in Onondaga County and Spirit offered by Rural-Metro EMS have been halted at the direction of the state agency. MedGuard was offered as a "subscription plan" at \$45 a year per household (\$40 if over 65) to cover costs associated with ambulance service not covered by insurance including any co-pay. Multimed in Bladwinville handled claims for participating EMS agencies which included East Area VES, Greater Baldwinville VAC, Marcellus Ambulance VES, North Onondaga VAC, North Area VAC, Skaneateles Ambulance VES, Southern Oswego VAC and Western Area VES. Income for the group was about \$250,000 a year. Spirit, offered at \$50 a year, was similar. The state, which had known of MedGuard since its inception in 1996, now considers it a form of insurance which the agencies are not licensed to offer. Also, the state says under the law co-pays cannot be waived and that ambulance providers have to take an "agreed to" payment from insurance companies. Agencies are now looking for ways to make up the lost income.

As a reminder, squads cannot bill for the difference between what was billed and what an insurance company paid.

Ambulance plans are not alone in receiving cessation notices. A doctor in NYC who offered a plan whereby patients agreed to pay \$79 a month for a year in return for unlimited office visits, some tests and even in-office surgery with a \$10 co-pay has also been ordered to drop his fixed rate plan. He says he can afford to charge such a small amount because he doesn't have to process mountains of paperwork and spend hours on billing. The state believes his plan runs afoul of the law because it promises to cover unplanned procedures - like treating a sudden ear infection - under a fixed rate. That's something only a licensed insurance company can do. The doctor is fighting back. The application form for this contract has *THIS IS NOT INSURANCE* emblazoned on every page. He is challenging the bureaucracy's ruling.

LOCAL GOVERNMENT CONSOLIDATION ENABLING LEGISLATION ADOPTED

At the behest of NY Attorney General Andrew Cuomo, Assembly Bill A8501 and Senate Bill S5661 ("The New N.Y. Government Reorganization and Citizen Empowerment Act") were introduced in mid May by Assembly Speaker Sheldon Silver and Senator Andrea Stuart-Cousins, to amend the petition process whereby a Town, Village or Special District such as for fire, ambulance, recreation, water, waste collection, etc could be merged or dissolved. Presently 50% of the voters in a local government entity need to sign a petition to get the issue before all voters in a referendum but the proposed legislation would drop the requirement to 10% or 5,000 voters, whichever is less. For an entity with 500 or fewer electors the petition shall contain the signatures of at least 20% of the electors. For the referendum to pass a majority need to say yes. This would then require the entities' governing body or bodies to meet and develop a proposed written plan to implement the voters' decision, followed by the plan's publication and public hearings. Voters could get a say on the plan if another petition is filed with at least 25% of eligible voters signing.

There are over 10,500 local government entities in the state. Examples include Erie County with 1,044 such entities, including 3 cities, 25 towns, 15 villages, 32 fire districts and 939 special districts. Likewise, Nassau and Suffolk Counties combined have over 340 special districts and in Hamilton County there exists one layer of government for every 132 people.

For a primer on consolidation check out the 2008 publication *21st Century Local Government* report by the NYS Commission on Local Government Efficiency & Competitiveness which is on the internet at http://www.nyslocalgov.org/pdf/LGEC_Final_Report.pdf?pagemode=bookmarks. The Assembly passed A8501 on 6/1/09 by a vote of 118 to 26 and it was delivered to the Senate for action where it passed on 6/3/09 by 46 to 16.

PROPOSAL TO EXTEND PUBLIC SAFETY OFFICERS' BENEFIT TO VOLUNTEERS

In June, US Senators Patrick Leahy and Bernie Sanders, both from Vermont, introduced legislation to extend the federal Public Safety Officers Benefits (PSOB) program to paramedics and emergency medical technicians killed or disabled in the line of duty who are employed by non-profit organizations and ambulance services. Named the "Dale Long Emergency Medical Service Providers Protection Act" in honor of a Vermont EMS killed in an ambulance accident earlier in June, the bill would extend federal death benefits under the PSOB program run by the US Department of Justice to paramedics and EMTs who are employed by are members of a non-profit ambulance agency. Additional information on the proposal is online at <http://thomas.loc.gov/cgi-bin/query/z?c111:S.1353>:

SCHOLARSHIPS FOR GENESEE-LIVINGSTON-ORLEANS-WYOMING REGION VOLUNTEER EMERGENCY RESPONDERS

Volunteer emergency responders throughout the Genesee-Livingston-Orleans-Wyoming region, and members of their immediate families, are now eligible for Genesee Community College's new Benjamin Franklin scholarships. The scholarships are funded through the Genesee Community College Foundation and are named for one of the founders of the United States and the founder of America's first volunteer firefighting company.

The Batavia Daily News reports the Benjamin Franklin scholarships are believed to be the first privately-funded scholarships for volunteer emergency responders in New York State. The idea for the scholarships came from New York State Assemblyman Stephen M. Hawley, a former Genesee Community College Foundation board member. Hawley became concerned about the vitality of many volunteer firefighting companies in Western New York over the last year, and suggested the scholarship program as a way to recognize the service of volunteer responders and to encourage more citizens to become involved in their local fire and ambulance companies.

During its first year, the scholarship program will provide up to 20 scholarships of \$500 each, renewable for a second year of study. Applications are now being accepted. Any individual who has served as a volunteer firefighter or volunteer emergency responder in the GLOW region for at least a year is eligible to apply, as are spouses, children, and grandchildren of volunteer responders. In the event that more applications are received than can be funded, scholarship decisions will be made based on applicants' financial need and academic background.

NEWS ITEMS FROM THE NATIONAL ASSOCIATION OF STATE EMS OFFICIALS

MASK AND RESPIRATOR SHORTFALL IF TRUE INFLUENZA PANDEMIC OCCURS

The Department of Health and Human Services (HHS) says the nation would need more than 30 billion masks - 27 billion of the simple surgical variety which can be worn safely for only about two hours before needing replacement and 5 billion of the sturdier N-95 respirator variety, which also requires regular replacement - to protect all Americans adequately in the event of a serious epidemic. However, the Centers for Disease Control and Prevention (CDC) Strategic National Stockpile currently contains only 119 million masks - 39 million surgical and 80 million N-95 respirators.

EMERGENCY RESPONDER ID PROGRAM PROGRESSES

According to a new report in Federal Computer Week, "Federal Emergency Management Agency officials hope a pilot program recently demonstrated to make first responders' credentials interoperable across jurisdictions will expand nationwide. Run by FEMA's Office of National Capital Region Coordination (NCRRC), the program encourages state and local officials and the companies that run critical infrastructures to ensure that their credentials comply with Federal Information Processing Standard 201. Officials say credentials that conform to that personal identity verification standard will give emergency responders and others quick access to secure areas after a disaster by allowing them to prove who they are."

STAR TREK MEDICAL TRICORDER COMING SOON

Boeing and Washington University's School of Medicine, Tech Solutions is developing the Standoff Patient Triage Tool (SPTT), a device that classic Star Trek fans will recognize for its resemblance to the medical diagnostic tool known as the tricorder. Like the tricorder, SPTT takes key physiological readings necessary to any diagnosis - pulse, body temperature, respiration - from an injured person at a far distance. It's triage at twenty paces. The magic behind SPTT is a technology known as Laser Doppler Vibrometry, which has been used in aircraft and automotive components, acoustic speakers, radar technology, and landmine detection. When connected to a camera, the vibrometer can measure the velocity and displacement of vibrating objects. An algorithm then converts those data points into measurements emergency medical responders can use in their rapid assessment of a patient's critical medical conditions. The goal is to develop a handheld unit about the size of a legal notebook and as thick as a ream of paper. Achieving this will require further testing of optical stabilization technology to make sure the unit can function despite a responder's arm and hand movements.

FEMA vs. EMAC - WHO IS GOING WHERE WHEN DISASTER STRIKES

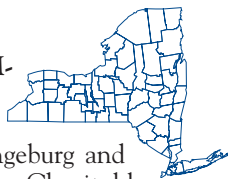
There are presently two main national disaster mobilization systems in the country that potentially could compete for ambulance resources in time of need. American Medical Response (AMR) won the federal government contract in 2007 for coverage of 21 states in FEMA's Gulf Coast and Atlantic Coast regions. A one year contract began 8/1/07 with an option for up to four one year extensions through 7/30/12. Under the contract AMR would supply up to 300 ground ambulances, 25 air ambulances and enough paratransit vehicles (busses, vans, etc.) to carry 3,500 individuals in each of the two regions. AMR in turn

contracted with over 100 private, fire and volunteer ambulance providers to actually supply the vehicles and personnel when needed. In 2007 and 2008 there were mobilizations under this contract calling in resources from as many as 200 locations in 41 states. There is also the Emergency Management Assistance Compact signed by 48 states excluding California and Hawaii designed to pretty much the same thing. A potential problem exists because AMR considers the list of subcontractors and the rates it will pay them to be proprietary information not to be disclosed to state officials. There is also potential for a delay in subcontractor response as reimbursement rates from AMR vs. EMAC may differ and companies may hold back resources waiting for the higher rate. The National Association of State EMS Officials met with FEMA and AMR earlier this year to try and address these concerns. With a new FEMA Administrator in place there may be some movement.

BITS FROM AROUND THE STATE & BEYOND

DISTRICT 1

HAYERSTRAW VOLUNTEER AMBULANCE CORPS, Rockland County, received a Resusci Anne adult CPR manikin donated by Kolb Subaru in Orangeburg and the National Automobile Dealers Charitable Foundation. Attending the presentation ceremony were Maryann E. Kolb, president of the local dealership and NYS Assemblyman Kenneth P. Zebrowski.



NEW SQUARE EMERGENCY SERVICES, Rockland County, has agreed to have its personnel train to become firefighters and work under the auspices of the Hillcrest Fire Department. The issue of the village operating an apparently “unofficial” firefighting organization was raised after repeated instances of a particular municipal vehicle showing up at fire scenes. The New Square truck has markings for Village of New Square Emergency Services and Rescue 1, official plates, is on a Ford chassis with a 12 foot utility body, painted red and is equipped with a 200 gallon water tank, pump, rack on top for extension ladders and other equipment suitable for firefighting and rescue. It has been responding to smaller fires in the village for about a year. The Village of New Square is in the Town of Ramapo and is covered by the Hillcrest Fire Department and Moleston Fire District. The status and training of the New Square responders came to a head since a mid July 2009 house fire where responding Hillcrest firefighters found village volunteers on scene with the makeshift fire truck and a hose line in operation. NYS has specific requirements for firefighter training and equipment as well as the reporting and investigation of fires. Included for interior firefighting is use of self contained breathing apparatus with full face air masks for personnel. This later requirement clashes with the strict religious beliefs of the mostly Hasidic residents of New Square requiring men to wear beards. There are un-attributed statements made to the news media that NYS Public Employees Safety and Health (PESH) and federal OSHA had started to investigate the village fire brigade but backed off. In the past, village officials indicated a willingness to have volunteers go through the required training and become members of the Hillcrest department. While this did occur, the personnel eventually dropped their affiliations with Hillcrest FD. What direction this issue takes in the future remains to be seen.

STAT FLIGHT, Westchester County, based at Westchester Medical Center in Valhalla was discontinued on 8/3/09. STAT Flight helicopters operating from Kobelt Airport in Wallkill, Orange County, 62 miles from the hospital and Catskill Regional Medical Center in Harris, Sullivan County, 86 miles from the hospital will cover the area. In making the announcement company officials said it makes more sense to respond from where patients are likely to be rather than from the receiving hospital. Call volume also evidently played a role as monthly responses have dropped from more than 40 a month to about 20 a month. Representatives from agencies in Putnam, Rockland and Westchester generally expected no problems due to the cut and the medical center expected no drop in patients arriving by medivac. There are other helicopters based in Connecticut and New Jersey that also cover the area. STAT Flight’s parent company is Air Methods Corporation, headquartered in Colorado.

STONY POINT, Rockland County, opened their own town Emergency Operations Center (EOC) in January. While the County of Rockland has a state of the art EOC, the Town of Stony Point utilized part of the basement on their police station to create a point of command, control and communications enhancing the Incident Command System for police, EMS, fire, public works and other agencies within the town that can be utilized in case of a large scale emergency. The Center is dedicated to and named for the late Stony Point Town Council Member A. William Serra who pushed for the creation of the Town EOC prior to his passing. Funding for the creation and equipping was provided in part through a grant arranged by NYS Senator Thomas P. Morahan.

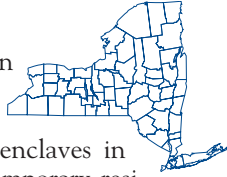
DISTRICT 5

WOODBURY COMMUNITY AMBULANCE, Orange County, was named Agency of the Year by both the Orange County EMS Council and the Hudson Valley Regional EMS Council. The all volunteer squad began in 1953 and has grown to 37 active members including 21 EMTs, operating three ambulances and one first responder vehicle. Call volume is almost 900 per year with a 10 minute average response time. The service area includes hot spots such as a section of the NYS Thruway and regional attraction Woodbury Common Premium Outlets. Headquarters is in a newly expanded 2 story building with meeting rooms, offices, bunk rooms, kitchen and training rooms. Since its beginnings the squad has been financially self sufficient relying on donations and more recently third party insurance reimbursements to cover operating expenses. Besides emergency care and transport, the WCAC makes tremendous contributions to the community. These include an annual blood drive as well as active participation in local parades, the Monroe-Woodbury High School Prom drill, Woodbury Common Breast Cancer Walk, Lions Club 5K Race, local EMS drills, Woodbury Day and numerous Town of Woodbury recreation activities. More recently, the ambulance began holding its annual Woodbury Family Fun Day. Held in conjunction with EMS month, the ambulance brings thousands of community members to their building to share in a day of fun coupled with EMS awareness and education. WCAC instructors teach CPR to community and town emergency service workers including police, lifeguards, camp employees and volunteer firefighters.



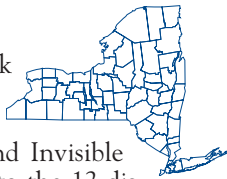
DISTRICT 6

CATSKILLS HATZALAH, Sullivan County, summer emergency services coordination meeting has been held. In the summer, about 175,000 Orthodox Jews from enclaves in New York City and other areas take up temporary residence in the Catskills. Included in this group are upwards of 400 Hatzalah EMT members from various divisions plus paramedics operating under ALS Services, Inc who supplement year round medical providers. EMS personnel operate under the auspices of Catskills Hatzalah, which the NYS DOH web site lists as an ALS transporting ambulance service with an address in Brooklyn. On Sunday 6/28/09 emergency service providers from Hatzalah met with other providers and agencies covering the region at an annual breakfast get-together in Monticello in Sullivan County. Current attendance has grown to about 120 people from 30 different agencies. The purpose is to allow the different providers to get a sense of each others practices so that emergency scenes are better coordinated. Before these annual meetings, scenes were chaotic - there were many people, but no one was in command. Interagency disagreements were the norm and there were also instances of imposters at scenes. Since the lines of communication opened, Hatzalah realized it's that its members needed identification and once unmarked minivans now have laminated cards and men in black jackets now wear clearly labeled emergency vests including photo IDs with a holographic insert. Local firefighters, EMS and police have also gained an understanding of religious practices, such as those that bar unrelated men and women from touching. While incident command, coordination and control are not always perfect things have improved.



DISTRICT 7

HUNTINGTON TOWN, Suffolk County, fire districts received donations of specially designed oxygen masks for dogs and cats. The Canine Fence Company and Invisible Fence Brands teamed up for the donation to the 12 districts in the town. The masks were originally designed for use in veterinary offices but can be used to resuscitate pets that have suffered smoke inhalation in fires.



PATCHOGUE VOLUNTEER AMBULANCE, Suffolk County, celebrates 75 years of service in 2009. The squad was started in 1934 when a small group of volunteer fireman from the Patchogue Fire Department formed a committee to start an ambulance company. At that time, the closest hospital was in Port Jefferson, and many of the sick or injured people died because the local general practitioners were not able to handle the severity of the cases or have the injured transported quickly and safely. In its first year, the squad was answering calls for help as far away as Bellport, Medford, Sayville, Oakdale and all towns in between until those areas started their own ambulance services. Today's Patchogue Ambulance Company consists of members of many different levels of medical training answering approximately 2,400 calls per year, 24 hours a day, seven days a week.

ISLIP TOWN, Suffolk County, is seeing better daytime response times since the Islip Ambulance Chiefs Association agreed to jointly staff one roving ambulance to provide backup to the five volunteer ambulance services in the town. The extra ambulance is in service weekdays from 6:00 AM to 6:00 PM and will respond if the primary service can't get an ambulance on the way within 4 minutes of a call. Since the beginning of 2008 the

"response without borders" cooperative service has answered over 500 calls with a median response time of eight minutes. Previously, there were many instances of 20 to 40 minute response times because the primary service had 9 minutes to get a crew together before calling mutual aid, which had 9 more minutes to act before the call was passed on to a third squad. An additional benefit is that once the five began working together, they came up with ideas to jointly purchase medical supplies and equipment and negotiate lower prices, so that even with the extra ambulance, Islip's \$5.5 million funding for the five ambulance districts has remained the same.

MILLER PLACE VFD, Suffolk County, was approved by Suffolk REMAC to upgrade from AEMT-I to the AEMT-P level.

SOUND BEACH VFD, was approved by Suffolk REMAC to upgrade from BLS to ALS level.

SOUTHAMPTON VOLUNTEER AMBULANCE, Suffolk County, is seeking an expanded headquarters with more space. The 40 members are twice the number they had a few years ago and the squad room only comfortably fits a fraction of that for meetings and training. Two ambulances are parked in bays but a first responder vehicle is parked outside. Overnight crews sleep on air mattresses on the floor and kitchen facilities are a refrigerator and a microwave. Equipment and supply space needs increased since upgrading from BLS to ALS two years ago. Earlier this year Southampton Village Trustees signed off on creating a trust fund for a new building estimated to cost \$1 to \$2 million but so far nothing has been deposited. Another trust fund created for a new ambulance, however, received pledges from 10 anonymous benefactors to donate \$15,000 each. The Southampton Fire Department also wants a new station to replace one of its three and if successful the old station might be given over to the ambulance squad. The local paper indicates Village officials seem content to let the current situation continue on while they gauge public sentiment.

SOUTHAMPTON, Suffolk County, officials say narrow, winding mansion driveways are causing a safety hazard in the Hamptons and have proposed regulations would ensure driveways are wide enough to get ambulances and fire trucks through. Narrow gates and low-hanging trees also would be regulated. The Westhampton Beach Fire Chief was reported saying such problems can cause thousands of dollars in damage to a fire truck and it can be difficult to back up or turn around a rescue vehicle. The proposed changes would affect new construction. Existing driveways and gates wouldn't require changes unless the owner renovates and needs a building permit. A Southampton Councilwoman said residents like the rural look that narrow driveways provide and public hearings are scheduled.

SUFFOLK COUNTY DOHS EMS DIVISION Staff continues to work with representatives of the Clinical Laboratories Evaluation Program (CLEP) concerning the countywide Clinical Laboratories Improvement Amendment (CLIA) permit waiver affecting all ALS services in Suffolk County. This was made necessary due to recent changes in the Public Health Law for multi-site licensing. Modifications are needed to address the multi-site licensing agreement which has been in place since 2002 with Suffolk County EMS as the permit holder and listing each ALS ambulance service as an off-site laboratory with authorization to perform on scene blood glucose determinations.

Approval was secured from the NYS DOH for EMT-CCs in the county to provide continuous positive airway pressure (CPAP) therapy.

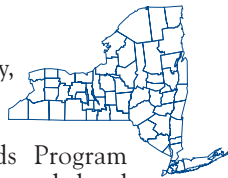
Technical assistance and focused training for patient-to-EMS-to-hospital interface situations involving pediatric patients with congenital adrenal hyperplasia (CAH) was arranged and provided.

Technical assistance and focused training for patient-to-EMS-to-hospital interface situations involving patients with a Left Ventricular Assist Device (LVAD) was arranged and provided.

SUFFOLK COUNTY DOH EMS Division's ePCR 30 day pilot program has been completed. An end-users meeting was held with representatives of the five pilot agencies to gain information about program functionality, experiences and to gauge success of training. Written confirmation has been received from the NYS DOH that the data extract has been successfully transmitted and received, and that the system meets required NY State specifications. Printers and cables have been installed in all Suffolk hospitals and additional printers and cables have been approved and ordered for select hospitals in eastern Nassau County that routinely accept patients from Suffolk County services. Multiple additional user suggested modifications to ensure consistency with State and County requirements have been made. Product has been formally accepted by the county. Additional training sessions have been offered to pilot agencies to address deficiencies in training and are in progress at four of the five agencies. Plans underway to open the ePCR system to the first round to other interested ambulance services.

DISTRICT 12

HEMPSTEAD VFD, Nassau County, saw its former chief arrested in July for tampering with computer records to ensure eligibility for a Length of Service Awards Program (LOSAP) retirement pension. Newsday reported that he inflated the number of emergency calls he and his firefighter wife responded to over several months in 2008. He was charged with 16 counts each of first degree tampering with public records and falsifying business records plus several misdemeanors and faces up to seven years in prison if convicted. The paper added that he had already unknowingly qualified for the benefits he wanted to secure. The department operates Rescue Co. #1 which is a BLS level EMS service.

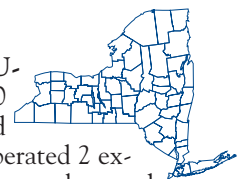


NASSAU COUNTY PD'S EMERGENCY AMBULANCE BUREAU (EAB) should be privatized is a recommendation contained in a February report by County Executive Thomas Suozzi to the Nassau Interim Finance Authority. The EAB has 120 employees, a budget of \$15.3 million, operates 22 ambulances, and handles an annual call volume of 50,000 serving areas or times not covered by local volunteer fire departments or volunteer ambulance corps. It is also responsible for operating Nassau County Medical Control, which provides coordination and medical direction for ALL ambulance providers in the county. EAB ambulances are staffed by one civilian Ambulance Medical Technician (an EMT-CC or EMT-P) and is met at an emergency call by a police officer who drives the ambulance to a hospital. The police officer has to be returned to the scene to pick up his/her cruiser by the ambulance or another police officer. This level of police involvement in ambulance transports is unusual. Nassau has one of the highest police pay scales in the country bringing officers with nine years seniority to a top salary of \$116,955 annually, not counting benefits, overtime and night differential resulting in periodic questioning of continued police involvement.

ROCKVILLE CENTRE, Nassau County, has contracted with North Shore-Long Island Jewish Health Systems for daytime ambulance coverage beating out the Nassau County Police Department's Emergency Ambulance Bureau. The Rockville Centre VFD provides a paramedic level ambulance service but like many departments is unable to put out a daytime ambulance on a regular basis. The department supported the village choice of NS-LIJ for 6:00 AM to 6:00 PM weekday coverage by an ambulance staffed by one paramedic and one EMT. Cost of the contract is dependent on the number of calls NS-LIJ responds to and will be determined after a six month trial period. The village has allocated \$200,000 in the 2008-2009 budget for the service. Requirements in the contract include a maximum 9 minute response time and NS-LIJ will provide a second ambulance if needed. NS-LIJ supplies ALS and BLS ambulances in the NYC 911 system and operates its own dispatch and on-line medical control facility and will be using NYC REMAC protocols for its Rockville Centre ambulance(s).

DISTRICT 16

GREECE VOLUNTEER AMBULANCE, Monroe County, celebrates 50 years of service in 2009. When the squad started in 1959 its 14 original volunteers operated 2 ex-Cadillac hearses out of a former water treatment plant and answered 600 calls during the first year. First aid training was only 20 hours. A headquarters was later built with money loaned by one of the charter members. Currently, the squad has 11 full-time paid staff, 30 part-time staff and more than 65 volunteers and has five ambulances and two "fly cars" to provide advanced life support services. Annual call volume is now over 4,000.



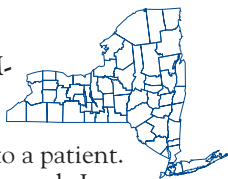
HENRIETTA AMBULANCE, Monroe County, recently renovated its training center. A ribbon cutting and dedication ceremony was held on Sunday morning 8/30/09. The facility features a main training room and three smaller rooms, all used for interactive training courses and meetings. Plans for the rooms include hosting several regional training classes for paramedics, hospital staff, firefighters and police agencies. The facility will also be open to outside organizations for meetings and training events. In April the squad took delivery of two (2) Ford/Braun Type III Raider ambulances. The vehicles were designed with safety in mind. At one end for the bench seat is a IV start drawer with a shelf to hold the Philips MRx monitor secure during transport. At the other end of the bench seat is the computer, radio and all the controls for the patient compartment (heat - A/C, lights, suction, vents, etc), all within easy reach of the medic. This design allows the medic to remain seated with the seat belt fastened during transport. There are two computer mounts to allow the medic to work on the chart in the back while in transport or in the front passenger seat while returning to base. Also included in the design is an IV warmer and medication refrigerator. The outside of the vehicle is also designed for safety including a side sliding door so that anyone exiting the side door has a clear view prior to exiting the vehicle and the rear of the vehicle has chevrons for improved visibility. In 2008 Henrietta Ambulance received the Agency of the Year award from the STEP Council of the Monroe-Livingston Region.

MONROE COUNTY'S alternative ambulance destination demonstration project is hitting some resistance. The project was undertaken in an attempt to decrease 911 use by patients for their primary care needs which is problem both nationally and across New York. Under a regionally approved protocol an ALS

response was dispatched to specific low priority EMS calls and in consultation with On Line Medical Control referred patients meeting project criteria to urgent care centers or community clinics instead of hospital emergency departments. Planners have encountered several roadblocks including paramedics that were reluctant to participate, stand alone for profit clinics that did not want to take Medicaid patients due to lower reimbursement rates and patients that expected to go to an ED and were not amenable to alternative destination transportation. The project is continuing but additional work in the region remains.

DISTRICT 19

BROADALBIN VOLUNTEER AMBULANCE, Fulton County, had their sole ambulance stolen on 5/16/09 while the two member crew was inside a house attending to a patient. The vehicle in a driveway 120 feet off the road. It was found about two miles away. The thief had smashed into a tree backing down the driveway causing about \$5,000 worth of damage to the rear of the vehicle. Squad officials indicated they plan to install a secure idle device to prevent anything similar happening in the future. Luckily, patient transport was not delayed as the Ambulance Service of Fulton County, which has a mutual aid contract with Broadalbin, happened to arrive on scene just as the thief was pulling out of the driveway with the ambulance.



MONTGOMERY COUNTY BOARD OF SUPERVISORS appointed three new members to the county Emergency Medical Services Advisory Board. Named in March to replace three outgoing members of the seven-member board were: Mark DeLafayette, to represent all Montgomery County fire departments, Deb Voght, public health representative and Sheriff Michael Amato, who will be allowed to designate someone else from the Sheriff's Office to stand in for him. The seven-member board includes the county EMS coordinator and representatives from St. Mary's Hospital, the county Department of Public Health, county fire services, medevac airlift services and the ambulance agencies in the county. The board's duties include working with state agencies in relation to EMS training and related activities and advising the Board of Supervisors and the EMS coordinator.

ST. JOHNSTOWN VOLUNTEER FIRE DEPARTMENT, Montgomery County, organized a mock DWI presentation for St. Johnstown Central School students on Thursday 5/21/09. The Little Falls Evening Times reported that after months of planning a realistic scenario was presented involving crashed cars, injured students, fire trucks, police cars, ambulances, a helicopter and even a hearse. During the presentation one student victim was taken away in an ambulance, a second was taken away in a medivac helicopter and a third was taken away in a hearse. The driver was "arrested" for DWI. Other agencies participating included the administrative, teaching and maintenance staff of St. Johnstown Central School, St. Johnstown Police Department, Montgomery County Sheriff's Department, St. Johnstown Volunteer Ambulance Corps, Greater Amsterdam Volunteer Ambulance Corps, Mohawk Valley Volunteer Ambulance Corps, LifeNet of New York, Montgomery County STOP DWI, the Hamilton, Fulton and Montgomery Prevention Council, Montgomery County Sheriff's Office 911 Center; the Applegate-Day & Enea Family Funeral Home and other volunteers.

Other mock pre-prom and pre-summer DWI events were staged across the state at many schools including Oneida High

School and Vernon-Verona-Sherrill High School in Oneida County, Morrisville-Eaton Middle-High School, Madison County, Beacon High School, Dutchess County, Saratoga Springs High School, Saratoga County and Babylon High School, Lindenhurst High School, Riverhead High School and Rocky Point High School in Suffolk County.

REGION 1 (Western NY)

CATO-IRA-MERIDIAN-VICTORY AMBULANCE CORPS, Cayuga County, took possession in May of a new 2009 Trauma Hawk model ambulance, replacing a vehicle that had been in service for about 10 years. The squad operates two ambulances answering about 500 calls a year with a combination paid and volunteer staff. To help offset costs CIMVAC hosted its second annual chicken barbecue on a Saturday in late May at the corps headquarters with a barbecue pit borrowed from the Meridian Fire Department. In addition to the food, CIMVAC headquarters also played host to a craft fair with a half dozen local crafters offering things like needlework, blankets, baked goods and jewelry.

GENESEE COUNTY'S eight member Ambulance Task Force recommended Mercy Flight, Inc., a not-for-profit EMS helicopter service, as the countywide ground ambulance provider.

Mercy Flight was among four that responded to a Request for Proposals. The others were Monroe Ambulance, Rural-Metro Medical Services and TLC Emergency Medical Service. Earlier this year Batavia's City Council voted to end its fire department municipal ambulance service at the end of August and go with a county provider. Mercy Flight, plans to base two ambulances in Batavia and one at Genesee County Airport where it has hangar space.

Batavia had provided ambulance service since 1986 when it purchased the Fire Department's first ambulance to operate as a back up rescue squad. Since that time the Department has progressed to a full ALS provider with 24 paramedics operating six ambulances serving the City and Town of Batavia in a primary capacity and the County of Genesee in a secondary capacity. The BFD is also a NYS DOH authorized EMS course sponsor. The city operated a Medical Billing Unit for the purpose of recovering costs from the treatment and transport of the sick and injured.

The changeover is not without controversy. The firefighters' union has filed an "improper practices claim" against the city for an alleged Taylor Law violation in deciding without negotiations to discontinue the city-backed ambulance service. The claim is the city has taken steps to "subcontract" the ambulance jobs by discontinuing the city service. The city response seems to be that it is not contracting with Mercy Flight but rather just going with who ever the county selected. However, the county position seems to be that it is up to each municipality to decide whether or not it wants to contract with Mercy Flight as they would receive the service in any event but a contract would hold the organization to specified response times and equipment availability. The latest news reports indicate Mercy Flight, which has not operated ground ambulances, intends to buy the BFD ambulances and stated a preference for hiring existing city ambulance personnel. The NYS DOH web site lists nine other ambulances in the county plus nine fire department run BLS first responder agencies.

Mercy Flight is not presently authorized by the NYS DOH as either and BLS or ALS ambulance provider and will have to apply to the appropriate Regional EMS Council and go through

a Certificate of Need (CON) process which includes a public hearing. Mercy Flight operates three helicopters from bases in Buffalo in Erie County, Batavia in Genesee County and Olean in Cattaraugus County that serve western New York, northern Pennsylvania and southern Ontario, Canada. Mercy's founder and current President is Douglas Baker. In 1961 at the age of 19 he established LaSalle Ambulance and Mercy Flight in 1981. LaSalle was sold in 1995 to Rural Metro.

Interestingly, at a City Council meeting in on 5/26/09 the Council President raised the stakes in a discussion of money saving measures by suggesting converting the Batavia Fire Department from fully paid to a combination paid/volunteer department. Consideration of removing the fire chief's car allowance and a \$4,000 stipend became a discussion of eliminating a good part of the department's annual \$2.5 million payroll and benefit costs. The Council agreed to pursue a study and gave the City Manager the permission to authorize a study to move the FD from completely paid to mostly volunteer.

MACHIAS VOLUNTEER FIRE DEPARTMENT, Cattaraugus County, was assessed a civil penalty of \$6,000 by the NYS DOH for 3 violations of Public Health Law Section 3005(1) which indicates "no ambulance service shall be operated unless it possesses a valid operating certificate". The department's ambulance operates at the AEMT-CC level.

ONTARIO COUNTY ALS CHANGES. The Board of Directors of Thompson Health announced on 6/3/09 that the NYS DOH issued operating certificate for Ontario County Advanced Life Support (OCALS), a non-transporting ALS 1st responder service, would be transferred to the Canandaigua Emergency Squad, a nonprofit organization that has been serving the community for almost 70 years.

The decision, which followed nearly a year of planning, was prompted by changes in the delivery of services, with local agencies taking on more responsibility for staffing and ALS care that were originally provided by OCALS in the early days of local emergency services. OCALS was founded in 1983 as a volunteer-based organization with Dr. Benjamin Lankheet, then the head of Thompson's Emergency Department, serving as Medical Director. The agency originally provided service from 4:00 PM until midnight, with a used station wagon donated by a local auto dealer as a "fly car." The fly car would be dispatched to meet up with a volunteer squad, and the OCALS paramedic would ride along as the squad transported the patient to the hospital. In 1995, OCALS became a corporation of Thompson Health and began providing 24/7 ALS coverage. Over the years, as volunteer ambulance squads began to move from a BLS service to ALS level service, the need for fly car service declined and OCALS began to provide staffing, on a contract basis.

Pending formal approval from Finger Lakes Regional EMS Council and NYS DOH, the transfer of OCALS' Operating Certificate is expected to take place in late summer. An operating certificate outlines the primary operating territory for and EMS agency. The certificate to be transferred to the Canandaigua Emergency Squad covers an area encompassing all of Ontario County and portions of Middlesex. Currently, OCALS serves Bristol, Honeoye, Naples and most of South Bristol.

Canandaigua Emergency Squad is a volunteer ambulance and rescue service serving a 325 Sq. Mi. region in the Finger Lakes Region since 1940. They are the busiest volunteer 911 service in Ontario County answering over 4000 calls annually. It has over 100 volunteers plus it employs 14 full-time EMTs and

Paramedics to assist when the volunteers are not available. The population base is approximately 20,000, of which 17,000 live in the 12 Sq. Mi. City of Canandaigua and the remaining 3000 live in rural areas. The squad operates six ambulances and two super-visor vehicles. Specialized service for large gatherings is provided with a Bicycle Unit and specialized transport for obese patients with a Bariatric Unit.

In addition to transferring the operating certificate to the Canandaigua Emergency Squad, Thompson Health will offer support services and start-up supplies to the Richmond Fire Department in its quest to upgrade its ambulance squad from AEMT-I to AEMT-P service. Also, Thompson will provide staffing services to squads that need assistance with manpower, as well as offer emergency preparedness training and quality assurance services.

STARFLIGHT, Chautauqua County, has acquired two twin engine MD 900 Explorer helicopters. The county paid \$3.7 million for the two used units. The organization, which was started in 1986, operated military surplus copters and was down to one since the end of 2007 when a second craft was taken out of service because repair costs were too high. Because of operating surplus government equipment, STARFLIGHT was considered a public service provider and was ineligible for Medicare reimbursement, instead relying on funds grants and the county. Now it will qualify for Medicare as a community provider and hopes to be financially self sufficient. STARFLIGHT is based at WCA Hospital in Jamestown (western New York) and has a crew of four - two pilots from the Chautauqua County Sheriffs Office and a medic and nurse from WCA Services Corporation. STARFLIGHT primarily covers a 75 mile radius of Jamestown with an annual call volume of about 300.

REGION 2 (Northern NY)

LAKE PLACID VAS, Essex County, is planning a 2,900 square foot expansion of its 30 year old headquarters. The existing two bay garage will be torn down with the area used for parking. A new three bay garage with administrative offices on the second floor will be constructed at an estimated cost of \$450,000 to \$500,000. A local construction company agreed to do excavation work for free. An alternative location was offered to the squad by the Adirondack Medical Center but the estimated \$1.4 million cost of a complete new building was more than could be afforded. The squad was established in 1976 and is currently a combination agency with 35 volunteers plus paid full time and per diem medics and six paid drivers operating two ambulances and a first response vehicle. Its service area includes the Town of North Elba and the Village of Lake Placid plus it provides ALS coverage when requested to Wilmington, Keene and the Ausable Forks area. Annual call volume has risen in the last five years from 800 to over 1,200.

MIDSTATE REGIONAL EMS COUNCIL developed workaround method of transmitting 12 lead EKG data to On-line Medical Control resources. It is important for those patients with ST segment elevation on their 12 lead EKG to be transported to a hospital with cardiac catheterization capabilities. Technology, however, can be expensive and both transmitting and receiving sites must have compatible equipment which can be expensive. Midstate's procedure for providers is:

1. Conduct and print out a 12 lead EKG per manufacturer's recommendations. Do not place patient's name on 12 lead before the picture.

2. Place the printed EKG on a flat surface and take a picture with a camera phone.
3. The picture should take in the entire 12 leads
4. Send the picture via text picture to ems_resource@mvn-health.com (note the underscore in the address)
5. Call On-Line to give your report and advise them you have sent a 12 lead. It is recommended to add the e-mail address to the phone's contact list to save time.

On a computer screen these picture files can be zoomed in on and can be read quite well.

MOHAWK VALLEY AMBULANCE CORPS, Herkimer County, donated one of their old vehicles to the Field of Boaz, a furniture ministry provides used furniture at no cost to families in need. In the last three years over 200 families have sought its assistance. The ministry relies on donations of old and used furniture from the community and in the past has run into difficulties in transporting the furniture that people were willing to donate since it likes to have the opportunity to see the furniture before accepting it to ensure that it is in usable condition. Often they had to request that the donation be delivered by the individuals or had to try to make arrangements to pick up the furniture at a later date. Sometimes this caused the Field of Boaz to miss out on the opportunity to accept these donations.

MORIAH AMBULANCE SQUAD, Essex County, former Treasurer was sentenced in May to two to six years in state prison for third degree grand larceny and one and one-third to four years for first degree falsifying business records, to be served concurrently. The 36 year old admitted that while she was assistant captain and acting treasurer of the squad she took a total of \$9,600 from the squad's treasury on three occasions between March and May 2008 to pay \$1,500 to buy a car and to make back payments on a mortgage. A pre-sentence report prepared by the Essex County Probation Department showed that Rodriguez also spent about \$400 a week playing bingo. News reports indicate that the individual had made complaints to the NYS DOH which resulted in problems for the past squad captain and five EMTs members until they were cleared.

NEW HARTFORD POLICE DEPARTMENT, Oneida County, offered three sessions of a training program in April created after the January shooting death of an EMT in Cape Vincent. The course titled "Violence and Safety Awareness for Emergency Responders" was open to all emergency service agencies that serve the Town of New Hartford, but also open to any interested emergency response personnel, a press release said. Topics covered include scene safety, approaching emotionally disturbed patients and self-defense. The course was given at the New Hartford Fire Station, the Willowvale Fire Station and the Central Oneida County Volunteer Ambulance Corps.

NEWARK-ARCADIA VOLUNTEER AMBULANCE, Wayne County, saw its former Director of Operations arrested in March. The 26 year old was charged with third degree grand larceny after an investigation revealed that he charged more than \$13,000 in personal items while employed at the ambulance service using the company credit card. The VAC's Board of Director began its investigation when they found discrepancies in their financial statements. As a general reminder, all are presumed innocent until proven guilty in a court of law.

SOUTHERN MADISON COUNTY AMBULANCE CORPS (SOMAC), Madison County, presented a proposal to

representatives from the villages of Hamilton and Earlville and the Towns of Hamilton and Lebanon for increased ALS coverage. The \$168,000 plan calls for a increasing the present paid daytime ALS coverage with 24 hour ALS level service. If approved the proposal would cover the costs of a full-time paramedic and would take effect on a contractual basis after 12/31/09. Based on the call history by municipality, Earlville would be responsible for approximately 6 percent of the \$168,000, the Town of Hamilton would pay 25%, Village of Hamilton 52% and Town of Lebanon approximately 7%. The remaining approximate 10% would be considered "other." SOMAC currently operates with 42 active volunteers which includes 17 Colgate students.

REGION 3 (Capitol Region, Hudson Valley, Southern NY)

ALAMO AMBULANCE SERVICE, INC., Hudson Valley Region, was acquired by TransCare Ambulance Corp., the downstate area's major private ambulance agency. The transfer was announced by Alamo's owner Health-Quest on 6/10/09 and was approved by the NYS Attorney General, State Supreme Court, Hudson Valley REMSCO and the NYS DOH. The price of the sale was not disclosed. Alamo provided ambulance and wheelchair transportation as well as emergency medical care for Health Quest, the mid-Hudson Valley's largest healthcare system with facilities in Columbia, Dutchess, Ulster, Orange, Putnam and Westchester Counties including Northern Dutchess Hospital, Putnam Hospital Center and Vassar Brothers Medical Center in Poughkeepsie. TransCare took possession of Alamo's assets, including its fleet of ambulances and Alamo's current employees were merged into TransCare with no expected impact on headcount. TransCare already has operating authority for the five boroughs of NYC, Nassau, Suffolk, Westchester, Rockland, Putnam, Dutchess, Orange, Ulster and Sullivan counties. ALAMO was originally established in 1966 by a sole proprietor, James Alamo but over they years became a non-profit affiliate of Health Quest. Last year, Health Quest was negotiating with NDP EMS, formerly known as Northern Dutchess Paramedics, about a merger but that fell through in December and Health Quest's board said to look at other options for Alamo.

DUANESBURG VOLUNTEER AMBULANCE CORPS, Schenectady County, is handling more calls after going through a reorganization period. News reports indicate internal strife starting around 2003 resulted in members leaving with active membership dropping to five EMTs plus about seven others by early 2008. Calls had to be turned over to other organizations including Rotterdam EMS nearly 20 minutes away, Greater Amsterdam VAC in Montgomery County and private provider Mohawk Ambulance along with Schoharie County first responders from Burtonsville VFD and an Esperance VFD ambulance. Town officials cut their funding which had provided a third of the organization's budget. In May of 2008 there were personnel and other changes and subsequently the Town Board restored funding on a month-to-month basis. Personnel sharing arrangements were entered into with several local fire companies enabling the ambulance to respond with only a driver as long as it is met at the scene by an EMT.

LIFEGUARD AIR RESCUE, Albany County, may be able to put off for a while the need to find a new ALS service to supply medics to ride NYS Police (NYSP) helicopters based at Albany International Airport. Colonie EMS has supplied the

specially trained medics since 1993. In mid 2008 the Town Supervisor sought to end the program when the current agreement expired citing cost, liability, safety of its personnel and a desire to refocus its efforts. The Town Board at the end of a four hour public hearing voted on 8/14/08 to keep the program operating temporarily. On 12/18/08 the Town Board voted unanimously to approve a new agreement through the end of 2009.

2007 call volume included 108 medical emergencies, 8 search and rescues and 212 standby notifications. Most calls, however, are outside of Colonie which is near the Albany Medical Center. Past responses included the Ethan Allen tour boat sinking on Lake George. Net annual revenue to Colonie EMS is reported to be about \$150,000 annually as the NYS allows Colonie to bill for its services. Another benefit to the town is the experience the medics receive taking care of critical patients. A series of fatal medivac crashes, however, caused some to rethink the value of the service vs. the dangers. The Town Attorney cited specific costs which include \$289 an hour for personnel and \$32,000 overhead for equipment. He also noted a lawsuit against the State Police pending in Rochester for operating a similar program which claims it unfairly competes with private enterprise. A full audit of costs is continuing.

The new agreement sent to the NYS police for review contains some new requirements which may lead to negotiations between the parties before things are finally settled. Missions are to be limited to emergency medical evacuations, flights are to remain within a 100 mile radius, paramedics cannot sit in the pilot or co-pilot seat and family members of paramedics are banned from flying aboard the aircraft. The radius restriction, if strictly enforced, could prohibit flights to burn centers or specialty hospitals in Westchester, Syracuse, Boston and NYC.

To fend off a possible suspension of service, Mohawk Ambulance Service, a private ALS level operator with 27 ambulances and 180 employees operating from bases in Albany, Schenectady and Troy reportedly offered to provide appropriately trained paramedics for the police medivac helicopters. There are a total of five medical helicopter services operating in New York State.

LLOYD TOWN BOARD, Ulster County, has renewed its contract with Mobile Life Support Services for the provision of two ambulances to provide daytime and one for nighttime EMS coverage for the town. The 2009 contract calls for a payment of \$242,000 which covers only a portion of the approximately \$1 million cost with third party billing providing the rest of the funds. Performance criteria calls for 90% emergency responses within nine minutes which the company has been meeting. One ambulance is stationed at the firehouse on Route 9W while the other is on Route 299 next to the NYS barracks. Ambulances are equipped with GPS to aid responses. Mobile Life is headquartered in New Windsor. A staff of 350 operating out of 20 stations primarily in Dutchess, Orange and Ulster Counties. Annual call volume is about 56,000.

PUTNAM VALLEY VOLUNTEER AMBULANCE CORPS, Putnam County, was proud to report that its 100 members were able to answer all 695 calls it received in 2008. On one day in November they set a record by responding to nine calls in one day. For the year they responded to 138 motor vehicle accidents and 521 medical emergencies. They transported 455 patients, had a paramedic on board 209 times and traveled 13,077 miles for the year. The types of medical emergencies they responded to ranged from 152 cases of pain and general illness,

and 105 cases of respiratory and cardiac problems, to an array of cases involving bleeding, diabetes, fractures, head injuries, seizures, spinal injuries, trauma, and unconsciousness.

INTERNATIONAL

DUBAI CLAIMS WORLD'S LONGEST AMBULANCE -The world's longest "ambulance" according to the Dubai Ambulance Center is 59 feet long and can accommodate 44 patients. Dubai authorities intend to contact the Guinness Book of World Records to register the vehicle as the world's longest ambulance. However, a further reading of press reports might put the vehicle more the class of a mobile emergency response vehicle (MERV) rather than a traditional transporting ambulance. The vehicle was manufactured in Germany and is actually a three axel articulating bus chassis as seen in a number of large cities. It is fitted out with a surgical facility, ICU area, radiography room, pharmacy, bed area and seats. No cost was given but a spokesman for the ambulance authority indicated it was more time and cost effective than sending several small ambulances as patients can get immediate treatment and might not even need to be transferred to a hospital.



CPR TRAINING COMING THROUGH NINTENDO Wii

The University of Alabama (UAB) announced on 7/9/09 that the American Heart Association (AHA) has pledged \$50,000 to fund the work of UAB biomedical engineering undergraduate students who are working to develop a computer program that teaches CPR using hand-held remote controls from the Nintendo Wii video game console. They began work on the project as seniors at UAB. Along with faculty advisers the team has been developing the Wii CPR technology since the beginning of the year. The goal is a computer program that can be downloaded on home computers and synched with the wireless technology of the Wii remote to teach users proper CPR technique.

The AHA wanted a better sense of how it might work, so the research was assigned to senior year biomedical engineering students this past spring semester for their senior project. The team worked on the Wii CPR project for its Design in BME biomedical engineering course, which required the students to successfully design and construct a prototype of the technology for real-world use in order to pass the course. After a successful class presentation in May, which showed the students' progress and the real potential for the technology, the AHA contacted UAB to offer the education grant.

If successfully completed, the UAB Wii CPR program will become available on the AHA web site as an open source code download, which would make it free and available to anyone with Internet access. The UAB team says it could complete its program development by early fall of 2009.

IRS FORM 990 BOARD OF DIRECTOR DISCLOSURE ISSUES

The newly revised IRS Form 990 Return of Organizations Exempt From Income Tax asks for much more information about governance and board members, some of it delving into facts about Board of Director members that a nonprofit manager com-

pleting the 990 won't necessarily know, unless they ask each Board member. In particular, questions in Part VI of the core form, Governance Management, and Disclosure, ask for the number of "independent" Board members and whether there were family or business relationships among board members. The Non Profit Coordinating Committee of New York (NPCC-NY) advises agency managers to specifically ask individuals these questions because it shouldn't be assumed that the answers are know. While its not required to get this information in writing an official is required to sign off on the 990 and is required to answer the question as to whether the board reviewed the 990. It is recommended to request Board members complete a simple questionnaire before the end of the fiscal year since the 990 probably won't be completed for months after the fiscal year ends. Take the results from the completed questionnaires and charge the Board's governance or executive committee to review, summarize and share the results with the entire Board for review before it's incorporated into the draft of the 990, since some Board members won't get to this portion as it's further in the back of the 990.

The IRS is accepting comments on the redesigned form 990. They will review these comments for consideration to future revisions of the form, schedules and instructions. E-mail your comments to form990revision@irs.gov

MAGNET MAILINGS – POSTAL REGULATIONS MUST BE CONSIDERED

Refrigerator magnets with emergency contact phone numbers and/or first aid hints are a popular community relations tool for EMS and fire departments. The US Postal Service (USPS) is

strict about the contents and preparation of bulk mail and has a number of requirements about inclusion of magnets so ensure that automated mail handling equipment is not hindered. The guidelines below are specific to thin flexible magnets for Bulk Mail and Automation-rate letter-size mailpieces:

Enclosed or attached magnets should have a minimum of 10 poles per linear inch.

- Magnets may not exceed 1/32 inch in thickness.
- The magnetic surface may not exceed 26 square inches (length X times X height).
- The magnetic surface may face either the address or the non-address side.
- Enclosed magnets must be affixed to the contents, wrapped within the contents to prevent excess shifting, or fill the mailpiece with no more than 1/2 inch clearance between the left and right edges of the magnet and the mail piece edges.
- Magnets permanently attached to, or prepared as, an integral part of unfolded cardstock pieces should be located on the leading edge of the mailpiece.

Regular Bulk Mail and Automation-rate letters must meet other relevant standards in Direct Mail Manual (DMM) 201. For additional information contact your local post office or a regional Mailing Requirements office.



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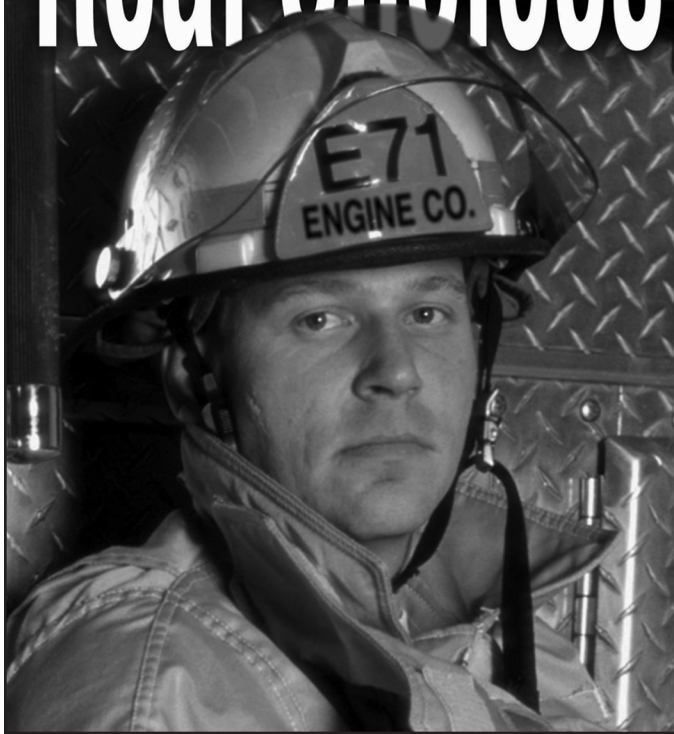
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