



Update from the Office of EMS

Volume XV, Issue I

Provider Service News

It is license renewal time for provider services in the North, BREMSS, and West regions. These services have a June 30, 2014 license expiration date. There are 165 services eligible for renewal in June. OEMS will begin accepting renewal applications for services in these regions on April 15, 2014. The last day to submit renewal applications will be June 20, 2014. The provider licensure application is available on our website (www.adph.org/ems). The application is designed so that fields may be filled via a desktop computer. Upon completion, print the application, obtain necessary signatures, include required plans and the \$25.00 fee (transport services), and mail the application to OEMS. Handwritten applications will not be accepted. Several agencies utilized the web-based provider application during the last renewal cycle. This application is submitted on-line and requires a convenience fee of \$4.00. License fee and convenience fee must be paid by credit card.

Currently, OEMS staff is working to ensure all off-line medical control physicians have successfully completed the required web-based Medical Director's course. This course and current credentials in ACLS or PALS are required for off-line physicians. Also, OEMS staff continues to monitor the submission of electronic patient care reports (e-PCRs). Any provider who is not submitting e-PCR data within the time frame required by EMS rules could be subject to delays in renewal of their provider license.

Hugh Hollon
Provider Service Licensure Coordinator

Licensure and Education Information

- All EMS students must be licensed by the State of Alabama at the previous level.
- Please remember the requirements as stated in the EMS Rules document under **420-2-1-.11 Licensed Provider Service Staffing** License Provider Services shall not allow EMSP to respond to a medical emergency with the intent to treat or transport a patient unless the EMSP are clean and appropriately dressed and wearing photo identification with the level of license, license number, and name of EMSP visible. The photo identification shall be displayed at all times unless extenuating circumstances prevent the photo identification from being available.

2014 License Renewal Requirements

- **A New/Current photo** (services should upload new photo through Web Management)
- A current completed application
- National Registry card (if applicable)
- A copy of your **TYPED** (appropriate) CPR card
- Walk-ins **WILL NOT** be processed during the license renewal period. Applications are processed on a first come-first served basis.
- **Protocol Certificates are NOT required for 2014 license renewal**
- \$50 late fee will be accepted for license renewal through the month of April

Ambulance Driver Qualifications

The requirements for all ambulance drivers are: a valid drivers' license, a current EVOC from an approved EMS course, a current approved CPR course, and a certificate of completion of an approved Emergency Medical Responder (EMR) course, or be a previously licensed EMSP. All EMSPs who drive an ambulance must maintain an initial approved EVOC course and a refresher every two (2) years. Alabama EVOC is still a requirement; you **MUST** have a current EVOC certificate in your personnel file.





Emergency Medical Responder (EMR) Course

The following are approved EMR Courses:

- EMS approved courses offered through your regional office, or
- A course approved by the Alabama Fire College which should include the Emergency Care Provider Course.

Transition Courses

The National Registry website indicates that all EMSPs need to complete a transition course to re-certify. The OEMS has determined that Alabama EMSPs will **NOT** have to take a transition course. The National Registry renewal application will ask “have you transitioned?” All EMSPs should respond “yes” to this question. This transition is in name only and all EMSPs should disregard any request to submit transition paperwork to the National Registry.

Training Officers Register Your Agency (the employer) on the NREMT Website!

Online re-certification allows:

- Certified EMS providers to document their continuing education using the NREMT website
- You to monitor the progress of their continuing education
- You to enter continuing education documentation for all providers at your agency
- Electronic verification of continuing education and skills.

Persons authorized to serve as a Training Officer by their employer (service) should register their agency on the NREMT website by following [these simple instructions](#). User guides for the online re-certification process can also be found [online](#).

Please note:

- Audits and verifications of agencies and Training Officers will be performed
- There is no fee to register your agency online, this program is a service provided by the NREMT.
- There are no additional fees to Nationally Certified providers who use the online system to document their continuing education. Current re-certification application fees using continuing education are: First Responder=\$10; EMT-Basic/Intermediate=\$15; EMT-Paramedic=\$20.

National Registry Continuing Education

Individuals who have utilized the Mark King initiative may use continuing education that has been acquired during this initial extended certification period. After this initial certification period, the National Registry will only accept continuing education gained within the 24-month certification period. Training officers may use a training mechanism available on the National Registry's website (www.nremt.org).

Protocol Verification

Protocol verification is a combination of physical skills and scenario competency testing. Listed below are the specific skills that each level should be evaluated on by a Medical Director or Training Officer, during their licensure period to determine proficiency.

Paramedic

- Blind Insertion Airway Devices
- Cardioversion
- Chest Decompression
- Continuous Positive Airway Pressure (CPAP)
- ECG (12-Lead)
- Endotracheal Intubation
- External Pacing
- Hemostatic Agents
- Intraosseous Therapy

Intermediate

- Blind Insertion Airway Devices
- Cardioversion
- CPAP
- ECG (12-Lead)
- Endotracheal Intubation
- Hemostatic Agents
- Intraosseous Therapy

Advanced EMT

- Blind Insertion Airway Devices
- CPAP
- ECG (12-Lead)
- Hemostatic Agents
- Intraosseous Therapy
- Cardiac Arrest Management

EMT

- Cardiac Arrest Management
- Spinal Immobilization (seated patient)
- Spinal Immobilization (supine patient)
- Bleeding Control/Shock Management
- Long Bone Immobilization
- Joint Immobilization
- ECG (12-Lead)

J. Gary Mackey
Deputy Director
Individual Licensure Coordinator





Common Causes of Upper Airway Obstruction in Kids

Courtesy of Nicole Jones, MD
Pediatric Emergency Medicine Attending
Children's of Alabama

Croup

- *Background* - Croup, or laryngotracheobronchitis, is one of the most common causes of upper airway obstruction in kids. It is typically caused by a viral infection that results in inflammation of the subglottic airway. It is usually seen in children less than 6 years of age.
- *Clinical presentation* – The classic presentation consists of one to two days of cold symptoms followed by barking cough, hoarse voice and stridor. More severe cases result in respiratory distress.
- *Management* – The mainstay of therapy is systemic steroids. Dexamethasone IM or oral is most commonly used. Nebulized epinephrine should be used in patients with severe disease (stridor present while at rest). When nebulized epinephrine is given patients should be observed for at least 120 minutes post treatment to evaluate for rebound symptoms.

Foreign Body Aspiration

- *Background* – Foreign body aspiration is a leading cause of death in young children in the US. Food items, in particular nuts, are the most common aspirated items. Latex balloons, including latex gloves found in physician offices, are among the most common non-food items implicated.
- *Clinical presentation* – The most reliable finding is a history of choking. Other signs and symptoms can include cough, hoarse voice, stridor, wheeze, respiratory distress, decreased breath sounds on auscultation, respiratory arrest. A high index of suspicion is necessary as patients may be asymptomatic at the time of presentation. Lack of a viral prodrome and acute onset of symptoms should raise suspicion for aspiration.
- *Management* - The gold standard treatment for airway foreign body removal is bronchoscopy. ABCs should be emergently attended to while awaiting definitive management. It is important to note that the clinically stable patient should be left in a position of comfort (parents lap etc.) with efforts made to limit interventions that may aggravate the child and lead to respiratory distress.



General Information

Do You Have Questions for OEMS Staff?

This is another reminder to those of you calling our office (334) 206-5383:

Complaints, Investigations—Call Mark Jackson

Service Inspections or Service Licenses—Call Hugh Hollon or Stephanie Smith

Individual Training, Testing, or Individual Licenses—Call Gary Mackey or Kempley Thomas

EMS for Children, Grants, Contracts, Website, Facebook, and Twitter—Call Katherine Dixon Hert

Requests for Information from Regional Offices

The Office of EMS would like to request that you comply with any request for information from your regional office. Some Directors are still having issues receiving information and data as requested by the State office. We would greatly appreciate your cooperation and compliance.

Facebook and Twitter

Alabama Office of EMS and Alabama EMSC are now on Facebook and Twitter. Please Like our pages and follow us on Twitter. Alabama Trauma Registry has recently joined Facebook so go like the ATR page too.

Newsletter Reminder

The newsletter is free to anyone as long as they have internet access to our web page (www.adph.org/ems). The newsletters can be found on the Newsletter page which is linked to the home page. All Alabama licensed EMSPs who have a **VALID** email address will receive notice when the newsletter has been published. Our licensure database is used to store your last submitted valid email address, but cannot accommodate unlicensed people. They will have to visit our website to view or download the newsletter.

If you are not getting our newsletter announcements via email, it is because your email address was illegible or in an incorrect format or you have changed it and not updated your information with our office. You can email any changes via emsinquiry@adph.state.al.us or call office staff at (334) 206-5383.



East Alabama EMS 2014 Leadership Academy

Our Leadership Academy will culminate with “ Disney’s Approach to Building a Culture of Health Care Excellence”. We have limited seating in this session so you will need to contact the East Alabama EMS office, 205-763-8400, to receive a control number before you register for the class. We will then send you a registration form. Get your registration in early. We want to make sure all of our service providers take advantage of this great opportunity. The price will increase from \$250 per person to \$350 per person after we reach the 150 attendee mark. Please give me a call if you have any questions, Debby Noll, 256-591-0529 or email to dnoll.ems@centurytel.net. Look forward to hearing from you.

Disney’s Approach to *Building a Culture of Healthcare Excellence*

Building a Culture of Healthcare Excellence is designed to inspire your team to create a sustainable service culture that can lead to a competitive edge for your healthcare organization. That culture will foster transformative patient and caregiver relationships, where expectations are consistently exceeded.

Morning Learning Objectives

- Explore the Disney definition of brand loyalty.
- Examine the link between brand loyalty and financial results.
- Understand the Disney definition of quality service.
- Recognize the value in exceeding expectations and attention to detail.
- Learn the Disney demographic measurement methodology.
- Learn the Disney approach to psychographic measurement by identifying customer needs, wants, stereotypes and emotions.
- Define a common purpose and its importance.
- Examine the significance of corporate culture by design versus culture by default, and the value in leveraging culture in strategic goals.

Afternoon Learning Objectives

- Learn how Disney creates a supportive work environment for every Cast Member.
- Understanding the importance of providing employees with a supportive and caring environment to create pride in supporting the organization’s culture.
- Discover how effective leadership, from the company’s inception to the present, has been the catalyst to drive employee/customer satisfaction and bottom line results.
- Use storytelling to capture insight into your own leadership values.
- Examine the strategies that Disney leaders employ to connect with people and nurture long-term success in their role.
- Explore the continuous improvement model Disney uses every day to sustain innovation in our organization.