



The Monitor

The monthly electronic newsletter for the Southern Illinois Regional EMS System.

November 2018

COMMAND: Dr. Haake wanted to thank everyone involved in the Presidential visit in October. From the EMS personnel on site at Southern Illinois Airport to those who worked with the protocol modifications to limit radio and phone traffic during the day.

November has a lot happening like the time change, Election Day, Veterans Day, Thanksgiving, Black Friday, and anything else we may be forgetting. Please change the batteries in your smoke/CO detectors, vote, thank a veteran, be thankful for you and yours, and stay safe!

FINANCE: The EMS Assistance Grant applications are currently under review. Because of staffing changes at IDPH Division of EMS, the normal grant review timeline has been extended. We will keep you updated.

LOGISTICS: Last month, we distributed the new B-34 Environmental Temperature Control Policy. So far, the EMS Office has only received a compliance plan from one SIREMS provider (good job Massac EMS). Again, we encourage the EMS personnel to work with their administrators to develop a plan that will work best for your staff and department.

All IDPH EMS licensees are required to disclose all felony convictions at the time of application per existing Illinois law. In addition, all IDPH license holders are required to disclose all new felony convictions within 7 days. IDPH is working towards performing mandatory background checks on all currently licensed EMS personnel. IDPH has implemented a grace period through December 31, 2018 for voluntary disclosure of felony convictions. ***If an applicant or licensee does not voluntarily come forward and fully disclose any previously undisclosed conviction(s) in writing by December 31, 2018, the licensee will face formal license revocation.*** If you have any questions on how this may affect you or how to formally report, please contact the EMS Office.

The IDPH Administrative Rule changes that reflect the National Education Standards of 2009 have finally been passed and released. There are a number of changes but I will briefly cover some of the most relevant.

- The titles of some EMS license levels have been changed
 - FRD (First Responder Defibrillator) has been changed to EMR (Emergency Medical Responder)

- EMT-B (Emergency Medical Technician-Basic) has been changed to EMT (Emergency Medical Technician)
- EMT-I (Emergency Medical Technician-Intermediate) has been changed to A-EMT (Advanced Emergency Medical Technician)
- EMT-P (Emergency Medical Technician-Paramedic) has been changed to Paramedic
- Starting January 1, 2019, all EMS education submitted for a site code must have a complete curriculum attached. Prior to the changes, all submissions were compared to the national DOT curricula. After the first of the year, individual curricula must be developed for every educational offering. (SIREMS is working on developing system wide curricula to make it easier on the instructors and standardize the education in our system.
- New minimum hours for educational programs
 - EMR: 52 hours didactic
 - EMT: 125 hours didactic, 25 hours clinical
 - A-EMT: 200 hours didactic, 150 hours clinical
 - Paramedic: 500 hours didactic, 500 hours clinical
- Of the 40 hours in 4 years for EMS Lead Instructors renewals, 20 hours must be related to the development, delivery, and evaluation of education programs.

Upcoming Training: Cambria FD will be hosting an EMR class and Carterville FD will be hosting an EMT class. Both are scheduled to start in December...contact the respective departments for details.

OPERATIONS: For a couple of years now, SIREMS has been phasing out the stocking and use of Vasopressin. Dr. Haake has now mandated the removal of Vasopressin from all ALS and ILS ambulances, and we have removed all references of Vasopressin from our protocols and system plan. Contact the EMS Office with questions.

All Transport Services: Please remember to make a call-in to the Emergency Department anytime you are transporting to a hospital, no matter the floor or department destination of the patient. There should be a call-in to announce the arrival and confirm the destination of all patients.

Don't forget to use a triage tag on at least one patient during the 13th of each month. The regular use of triage tags will cause our EMS personnel and receiving ED staff to become more familiar with the tags and START Triage. Remember, a multiple casualty incident is defined as an incident where the patients outnumber the resources. This happens to us more often than we care to admit, and the use of triage would streamline treatment and transport in these situations.

PLANNING: Don't forget about our EMS Calendar at www.sirems.com

Nov 4: Daylight Savings Time ends

Nov 6: Election Day

- Nov 8: IDPH EMS Advisory Council, videoconference at IDPH Marion
- Nov 11: Veterans Day
- Nov 13: SIREMS Triage Tag Day
- Nov 22: Thanksgiving
- Nov 30: NAEMSE Instructor 1, Morris IL

TIP OF THE MONTH: Clear lung sounds are different than absent lung sounds. This could easily pass as a quote from Captain Obvious, but some EMS personnel have developed a habit of only listening for abnormalities. Just because you do not hear wheezing or wet lung sounds does not mean the lungs sound clear by default. Listen carefully for air movement, or more importantly, lack of air movement.

If you have any questions or information for "The Monitor", please contact me at Brad.Robinson@sih.net or SouthernIllinoisRegionalEMS@gmail.com (11-06-18).