



The Monitor

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

December 2019

COMMAND: Dr. Haake is planning on holding another SIREMS Town Hall Meeting in January of 2020. He would like our system participants to submit questions and potential topics to the EMS Office in December to better prepare for the meeting and ensure the content is relevant and important to our system participants.

With Christmas and New Years Day approaching, Dr. Haake and the EMS Office staff wish all the SIREMS and Region 5 EMS personnel a Merry Christmas and Happy New Year! Stay safe and watch out for each other in the coming weeks.

FINANCE: The four regional IDPH EMS Assistance Grants have been submitted but, as of the publish date, we have not received news of any award announcements.

LOGISTICS: We received some concerns about the ability to read the copy of the Regional Trauma Field Triage Guidelines protocol online. We have increased the font size and cleaned up the formatting so it is now easier to read. It can be found at www.sirems.com as protocol DD-14 under the Trauma Protocol tab in the SIREMS Protocol list, or copy and paste the following link:
<https://www.sirems.com/emsfiles/Section%20DD%20Trauma/DD-14%20REGION%205%20MINIMUM%20TRAUMA%20FIELD%20TRIAGE%20GUIDELINES.pdf>

When seeking out continuing education, make sure it has an issued code/number or approved by one of the following.

- Illinois Department of Public Health EMS Continuing Education Site Code
- Commission on Accreditation for Prehospital Continuing Education (CAPCE)
- Approved by your EMS Medical Director

If you participate in EMS continuing education that does not have written approval or an issued code by one of the three listed above, it may not count towards your EMS license renewals. If you have any questions on the status or validity of any CE offering, please contact the EMS Office.

Remember to fully test any radio when they are purchased/programmed new, or when they are repaired/reprogrammed during service. Though every emergency department is required to use the state BLS radio channel, many also have their own encode or decode tones on their specific programming of the channel. Short version, make sure you can hear the ER and they can hear you...preferably before you are making a call-in.

OPERATIONS: We reminded everyone last month about the IDPH regulation to leave a PCR at the receiving facility before leaving the facility. This is becoming even more of an issue for the Level 2 Trauma Center at Carbondale. The state has a number of requirements on the trauma team for data entry into the trauma registry, and the EMS PCR is one of the vital parts of this data. As of the November 4, 2019 official opening, there has been a constant list of EMS PCRs that have not been left with the trauma patients. Besides leaving a paper copy in the ED with the trauma patient, MHC also has a virtual fax file where the PCR can be sent as well. The fax number is 618-351-4893.

Transport Services: IDPH has added many regulations and reporting requirements for EMS Systems and ambulance services that leave paper reports at the receiving facilities and enter the data when they return to the base. That's why SIREMS can no longer continue allowing the practice. If you work for an ambulance service that utilizes paper PCRs, contact your service's management for additional information. As always, you can also direct any questions to the EMS Office.

Dr. Haake recommends using the MIST format for hand-off reports, especially for the EMS time out at the MHC Trauma Center. The key is to provide pertinent information in a timely manner. The trauma team's "EMS Time Out" is a less than one minute period of time where everyone focuses on EMS to get the most accurate information of the pre-arrival and current status of the patient.

M: Mechanism or Medical complaint

I: Injuries or Illnesses identified

S: Signs and Symptoms

T: Treatments

EMS TIME OUT REPORT

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| M | Mechanism or Medical Complaint | Name, Age, Sex Mechanism: Speed, Mass, Height, Restraints, Number and Type of Collisions, Helmet Use and Damage, Weapon Type Medical: Onset, Duration, History |
| I | Injuries or Illness Identified | Head to Toe Pain, Deformity, Injury Patterns STEMI—12-Lead / Stroke— Cincinnati |
| S | Signs and Symptoms | Symptoms and Vitals Initial, Current, Lowest Confirmed BP HR, BP, SPO ₂ , RR, ETCO ₂ , BG GCS: Eyes ____ Verbal ____ Motor ____ |
| T | Treatments | Tubes, Lines (Location and Size), Fluids, Medications and Response, Dressings, Splints Defibrillation / Pacing |

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

Dec 13: SIREMS Triage Tag Day

Dec 25: Christmas Day

Jan 01: New Years Day

TIP OF THE MONTH: Remember to wear your high visibility reflective wear when working along a road or highway. With less hours of daylight this time of year and the prevalence of distracted drivers, please remember this life-saving step. Besides, it's an OSHA requirement.

If you have any questions or information for "The Monitor", please contact me at Brad.Robinson@sih.net or SouthernIllinoisRegionalEMS@gmail.com (12-08-19).