NAEMSP® Executive Office
P.O. Box 19570
Lenexa, KS 66285
800/228-3677
Fax: 913/895-4652
info-naemsp@goAMP.com
www.naemsp.org
PRESIDENT’S MESSAGE

I am very proud to present the NAEMSP® 2012 Annual Report. To our more than 1,400 members, I can say with great confidence that it has been a good year. This Annual Report speaks for itself and lists the accomplishments made possible through the many hours of dedicated member expertise. Financially we are sound, membership is growing and our EMS Medicine Subspecialty launched. It is good, very good.

As you can see in the following pages, our committee participation is robust. Your volunteer work is the lifeblood of this organization and of which each member should be proud. Thank you to all who have participated in the success of NAEMSP®.

One of the most meaningful capstone events of this year is likely unknown to most members. This fall’s Board of Directors elections included the largest number of candidates from which to select, the most number of votes cast and closest final tallies in memory. These facts signify a vibrant and dedicated membership that is committed to the wellbeing of the organization. The perception that the Board of Directors is a star chamber with little connection to the membership is no longer.

Finally in my last report as NAEMSP® President, let me diverge from the usual recap of the year’s events and make a prediction for 2013. Our new Subspecialty will lead to a raucous yet productive year for our organization.

raucous (raw-kuhs) adjective meaning: strident, boisterous.

Let me use the word in a sentence or two. The ACGME has released the EMS Fellowship Program Accreditation Requirements. The quest to be the first Accredited EMS Fellowship Program in the United States will be a raucous competition. The first EMS Subspecialty Certification Examination dates have been set as 23-25 October 2013. The celebration after becoming Board Certified in EMS Medicine will include a raucous party. The next four NAEMSP® Annual Meeting venues selected are New Orleans, 2015 and 2017, and San Diego, 2016 and 2018. The upcoming Annual Meetings will precipitate raucous debate determining the best science in EMS Medicine. I am proud to be President of a raucous organization.

BOARD OF DIRECTORS

President
Ronald G. Pirrallo, MD, MHSA
Term through January 2013

President-Elect
Ritu Sahni, MD, MPH
Term through January 2013

Secretary/Treasurer
Jane H. Brice, MD, MPH
Term through January 2013

Immediate Past President
Theodore R. Delbridge, MD, MPH
Term through January 2013

Physician Members-at-Large
Kevin Mackey, MD, FACEP
Term through January 2013

J. Brent Myers, MD
Term through January 2014

Ronald Roth, MD
Term through January 2014

David K. Tan, MD, EMT-T, FAAEM
Term through January 2013

Karen P. Wanger, MDCM, FRCP, FACEP
Term through January 2013

Allen Yee, MD
Term through January 2014

Professional Member-at-Large
Lynn J. White, MD
Term through January 2014

David Slattery, MD
Program Committee Chair
Term through January 2013

Standards and Clinical Practice Chair
Michael Millin, MD, MPH
Term through January 2013

During the fall of 2012, the NAEMSP® membership elected the following individuals to the Board of Directors, each for a 2-year term beginning January 2013:

President-Elect
Jane H. Brice, MD, MPH
Term through January 2015

Secretary/Treasurer
Kevin Mackey, MD, FACEP
Term through January 2015

Physician Members-at-Large
Karen P. Wanger, MDCM, FRCP, FACEP
David K. Tan, MD, EMT-T, FAAEM
David Slattery, MD
Term through January 2015

2013 elections will be held during the fall for three Physician Member-At-Large and one Professional Member-At-Large positions.
Committee Highlights

The following highlights just some of the important work completed or being pursued by NAEMSP®'s members through its committees:

Air Medical Services Committee
- Worked in conjunction this year with representatives from AMPA, ACEP and AAEM to draft a joint position paper on Appropriate and Safe Utilization of Helicopter Emergency Medical Services. This was written to accompany the joint position statement on the same topic that has already been received favorably by the NAEMSP®, AMPA, AAEM and ACEP Boards.
- This draft joint position paper with position statement has now been formally approved by the AAEM and AMPA Boards and has been received favorably by the ACEP EMS Committee and Air Medical Task Force and NAEMSP® Air Medical Services Committee. It will be considered by the ACEP and NAEMSP® Boards in the near future.
- If all Boards are in agreement, simultaneous publication of the position statement/paper will be sought in each of the journals with which each organization is affiliated.
- Monitored the progress of the Model State Air Medical Guidelines project which is intended for joint consideration by NASEMSO/NAEMSP®/AAMS.

Asian EMS Council
- Conducted the Asian EMS Council/PAROS meeting including EMS Medical Director's and Leader's Course Dubai, UAE in April 2012.
- Planning the execution of the Dispatcher-CPR Course, in conjunction with Pan-Pacific Emergency Med Conference in Seoul, Korea, October 2012 and the Asian EMS Council/PAROS meeting including EMS Medical Director's and Leader's Course) in Osaka, Japan, November 2012.

Canadian Relations Committee
Over the past year, the NAEMSP® CRAHC stakeholders (72 MDs, paramedics, contractors and regulators) maintained intermittent communication to address issues facing prehospital practice in Canada. Although not a formal NAEMSP® meeting, many of these stakeholders met at EMS Committee meetings at the Canadian Association of Emergency Physicians (CAEP) National Scientific Assembly in June 2011. Primarily, CRAHC has been functioning as a collaborative communication portal linking EMS professionals in the country. There has been continuing work in the following areas:
- Recruitment initiatives for Canadian membership in NAEMSP® and participation in the annual NAEMSP® conference.
- Organizing Canadian-content based preconference for the 2013 annual NAEMSP® meeting.
- Development of the Canadian national EMS research agenda.
- Discussion of optimal prehospital triage score, including the use of available scoring systems and the creation of a novel score for EMS.
- Recognition of EMS sub-specialization in Canada and abroad.
- Management of medication shortages.

Communications Committee
- Redesign and implementation of the new NAEMSP® website. That project has been completed and has received favorable reviews (see it at www.naemsp.org).
- Continued publication of the quarterly NAEMSP® Newsletter, led by Editor Joe DeLucia.
- With completion of the new NAEMSP® website, NAEMSP® Dialog will be moving the archived content from prior sessions to its new home on the NAEMSP® website with new sessions to resume soon.

EMS Fellow and Fellowship Graduates Committee
- Submitted a proposal for a presentation on physician scene response programs that was accepted for the 2013 annual meeting.
- Supported a survey of physician response vehicle use at EMS fellowships.
- Disseminated information regarding EMS subspecialty certification and fellowship accreditation to EMS fellows, fellowship applicants, fellowship graduates and fellowship directors.
- Facilitated additional learning and training opportunities for EMS fellows during or around the time of their EMS training (such as the NAEMT pilot educational course).

Emergency Preparedness Committee
- Prepared a draft position statement and resource document on Mass Gathering Medical Care for consideration by the Public Health and Standards and Clinical Practice committees.
- Provided input and assistance on topics and speakers on Emergency Preparedness and Response for the 2013 Annual Meeting.

Education Committee
- Working with NAEMSP® to produce a condensed EMS board review document to be utilized in the planning of an EMS subspecialty review course.
- An assessment by the Fellowship Committee identified two educational areas in need of further education. Have been working with both Tactical Medicine and Air Medical sections to development an on-line educational webinar.

Membership Committee
- NAEMSP®’s current membership numbers are higher than ever before and growing!
- Following the progress of the first State Chapter in Wisconsin. Their progress has been slow, but moving forward. We have had a couple of other states seek information regarding the development of their own chapters.
Committee Highlights continued

Pediatrics Committee
- Worked with program committee to continue to provide excellent pediatric topics at the 2013 annual meeting
- Worked with preparedness committee to offer pediatric expertise for the 2013 pre-conference
- Participated with the American Academy of Pediatrics Committee on Pediatric Emergency Medicine in formulation of policy statements and guidelines
- Working closely with the American Academy of Pediatrics subcommittee on EMS to ensure that pediatric-trained EMS physicians are informed of and prepared for the newly announced EMS subspecialty exam
- Will continue to work with the American Academy of Pediatrics subcommittee on EMS to assist institutions with both Pediatric Emergency Medicine and EMS fellowships to join forces to continue to train pediatric EMS specialists
- Participated in DHHS roundtable discussion on the movement of pediatric patients during a disaster
- Increased awareness of NAEMSP® annual abstract presentations within the pediatric emergency medicine community to increase the number of pediatric abstract submissions

Program Committee
- The program committee met at in person at the Annual Meeting, and has had several conference calls throughout the year. We have accomplished the following:
  - Planned and developed a scientifically sound and engaging Annual Meeting, which is able to capture the interest of our members and meet their learning needs identified in the annual survey and meeting evaluations
  - Working with NAEMSP® executive team, supported the availability of WiFi connectivity in the conference hall at no additional charge to our members

Research Committee
- Reviewed 208 submitted abstracts for potential presentation at the 2013 annual meeting an increase of submissions by 3.5%
- Accepted a total of 126 abstracts for presentation at an acceptance rate of 60%
- Will be piloting an abstract presentation session in 2013 that displays posters electronically on large TV monitors instead of the standard printed poster format
- Will begin Year 2 of electronically judging poster presentations prior to the annual conference to determine eligibility for research awards

Public Health Committee
- Established working group to evaluate role of Public Health Committee in supporting interdisciplinary community EMS outreach
- Comment and review on concept of community Paramedicine

Quality Improvement Committee
- Completed draft Position Statement: “NAEMSP® Policy Statement on Electronic Documentation and Health Information Exchange between EMS and other Healthcare Entities.”
- Dr. Roth initiated a Drop Box for QA queries
- E-mail discussion regarding need for QA/QI course for new QA officers

Rural EMS Committee
- Well-attended annual in-person meeting January 2012
- Held two phone conferences during 2012
- One listserv discussion took place
- Suggested topics to the Program Committee for the January 2013 Annual Meeting
- Subcommittee developed, together with a subcommittee from the National Rural Health Association, a draft Community Paramedicine position paper for presentation to the Board of Directors

Standards and Clinical Practice Committee
After a very productive 2011, the S&P committee has initiated work on a number of new projects.
Completed in 2012
- Withholding and Termination of Resuscitation of Traumatic Cardiopulmonary Arrest two joint position statements with NAEMSP® and the American College of Surgeons – Committee on Trauma
In Review
- Withholding and Termination of Resuscitation of Traumatic Cardiopulmonary Arrest Resource Document
Projects in Development
- Emergency medical dispatch
- Use of the long backboard and spinal immobilization in EMS
- Hemorrhage control
- The role of physician extenders in medical oversight
- Appropriate handling of concealed weapons in the EMS environment
- Culture of safety
- Handoff of care from EMS to the hospital

The S&P committee is your voice in the development of the association’s practice standards. All members of NAEMSP® are welcome and encouraged to participate.
Committee Participation

EM Fellowship and Fellowship Graduates Ad Hoc Committee

W. Scott Gilmore
Erik Glassman
Michael A. Kaufmann
Thomas Kwiatkowski
Serge Lemay
Kayla Long
Kevin E. Mackey
Christian Martin-Gill
Joshua Mastenbrook
Sarah McCrean
Howard Mell
Ira Nemet
Craig William Ott
Kevin M. Payne
Michael Redline
Ritu Solhni
David J. Schoenwetter
Rebecca Schulman
Charles E. Stewart
Gregory Stiller
Bridgeite Svan textarea
Robert Swor
Kevin Underhill
Carin M. Van Gelder
David Vitberg
Laura L. Walker
Gary E. Wiemokly

Emergency Preparedness Ad Hoc Committee

Brian Schwartz, MD – Chair

R.M. Abdul Ali
Juan F. Acosta
Mohamed Al Busafi
David C. Allen
Roy L. Alson
Lynthia B. Andrews
Bowman
Jenny G. Atlas
Dan Avstreih
Aaron Bair
Janna E. Baker Rogers
Robert R. Bass
Gerald Beltran
Dan Beskind
Anthony J. Billittier
Richard A. Bissell
Sandy Bogucki
Rommel G. Bole
Richard Neville Bradley
Robert Burgess
Aubrey Bowman
Dan Busek
Jonathan L. Burslein
Jonathan M. Busko
Dustin Joseph Calhoun
Scott I. Cameron
Daniel H. Celik
Elizabeth Charr
Michael Clark
Robert P. Colligan
Craig W. Cooley
Derek R. Cooney
Arthur Cooper
Eric Cooper
Raymond W. Cordi
Heidi P. Cordi
Gaston A. Costa
Sean Covant
Norris W. Croom III
James M. Cusick
Fabrice Czarnecki
Joshua C. Daily
John A. DeArmond
Paul Del Porto
Steve Delahousey
Joseph A. Delucia
Richard Dione
Christopher Dong
Constance J. Doyle
Robert B. Dunne
William D. Fales
Preston Fedor
Julia Diane Rebekah Fox
Arthur J. French III
Jocelyn De Guzman
Josiah C. Daily
Derek R. Cooney
Craig W. Cooley
Christopher B. Colwell
Mary Giovanna
Dustin Joseph Calhoun
Jason A. Carter
Ryan M. Carter
Alix Carter
Benjamin T. Squire
E. Reed Smith Jr.
Mary Giovanna
Benjamin Ostrovsky
Craig William Ott
Michael J. Pasirstein
Debra Perina
Kari L. Scantlebury
Ronald Roth
Karl L. Scantlebury
David Schoenfled
Mark W. Schmeidler
Ethan B. Schmeidler
Dustin Joseph Calhoun
Jason A. Carter
Ryan M. Carter
Alix Carter
Benjamin T. Squire
E. Reed Smith Jr.
Mary Giovanna
Benjamin Ostrovsky
Craig William Ott
Michael J. Pasirstein
Debra Perina
Kari L. Scantlebury
David Schoenfled
Mark W. Schmeidler
Ethan B. Schmeidler
Kevin Walter Simons
Chester J. Skiba
Chris Smith
Irvin E. Smith
Nicholas Sparrow
Murty B. Sturkie
Michael P. Sullivan
James C. Suozzi
Thomas W. Trimmer
Amy Vertin
Jim Walery
G. Scott Warner
Keith Wesley
Chelsea C. White IV
Jenna White
Michael R. Wilcox
Kelvin Williamson
Gary L. Wingrove
Robert Worden
Scott P. Zietlow

**Standards & Clinical Practice Committee**

Michael G. Millin, MD, MPH – Chair
R.M. Abdul Ali
Benjamin N. Abo
Beth Adams
Mohamed Al Busafi
David Alexandre Alcindor
Nawfal Abdullah Aljeiran
Dennis M. Allin
Steve Andrews
Lynthia B. Andrews
Bowman
Dan Avstreih
Eric H. Beck
R. Dan Bledsoe
Brian E. Bledsoe
Sandy Bogucki
Gail Bradley
Asher Brand
Lawrence Brown
Jonathan L. Burstein
Jonathan M. Busko
Charles E. Cady
Scott L. Camron
Elizabeth Char
Jeff J. Clawson
Brian Clemency
Darrel E. Colbourn
Caroline A. Collier
Elena M. Collins
Thomas E. Collins Jr.
David C. Cone
Derek R. Cooney
Eric Cooper
Patricia A. Cortes Picazo
Michael D. Cummings
Jeffrey T. Cushman
James M. Cusick
Michael W. Dailey
Sherrin Dean
John A. DeArmond
Joseph A. DeLucia
William F. Dick
Robert M. Domeier
Ian Drennan
Richard J. Eisenhut
C. Wayne Gallops
Erik Glassman
Bruce Gordon
Matthew Gratton
Kent R. Griffith
Robert W. Grow
Francis Guyette III
Troy M. Hagen
Jonathan S. Halpert
Alvera Hanna
Michael T. Hillon
Joel E. Hornung
David Hostler
Richard C. Hunt
Ryan Jacobsen
Jeffrey L. Jarvis
Jan L. Jensen
William Justiz
Jason A. Kegg
Christian Knutson
Jan R. Kornilow
Ricky C. Kue
David S. Kugler
Douglas F. Kupas
Benjamin Lawner
Debra Lee
Wayne Lee
Serge Lemay
Larry Loosie
Angie Loza
John Lyng
Kevin E. Mackey
Mathurin Malby
Gerald E. Maloney Jr.
Sarah McCrean
Ross E. Megaragel
Kenneth T. Miller
Andrew D. Miller
Keith A. Monosky
James M. Montoya
Vincent N. Mosesso Jr.
Nee-Kofi Mould-Millman
Jeffrey W. Myers
Diana Neubeker
Marvin Eric Nix
Michael Nolan
Jonathan L. Nortor
Alberto Perez
Jason R. Pickett
Jessica E. Pierog
Ronald Roth
Jeffrey P. Salomone
Joseph A. Salomone III
David Schoenfeld
David J. Schoenwetter
Kathleen S. Schrank
Brian Schwartz
Charles W. Sheppard
Keith H. Sherry
Kevin Walter Simons
Dena L. Smith
Sherrie Squires
Jeffrey Brian Thompson
Kevin Underhill
Darren Walton
Henry E. Wang
Scott Weir
Keith Wesley
Lynn J. White
Jenna White
Lynn K. Wittwer
Arthur H. Yancey II
Ernest L. Yeh
Paul Zeeb

**Tactical EMS**

James Fitch – Chair
Heidi Abraham
Mohamed Al Busafi
Nawfal Abdullah Aljeiran
Steve Andrews
Janna E. Baker Rogers
Richard N. Barney
Joseph Bart
Gerard Beltran
Oliver Michael Berrett
Joshua Bobbo
Gail Bradley
Kathryn Brinsfield
James E. Brown Jr.
Sara A. Brown
Jonathann M. Busko
Dustin Joseph Calhoun
Philip Carmona
Robert P. Colligan
Thomas E. Collins Jr.
Marc Conterato
Craig W. Cooley
Heather Coombs
Patricia A. Cortes Picazo
Gaston A. Costa
Phillip L. Coyle
Norris W. Crom III
Bethany A. Cummings
David Cummings
Fabrice Czarnecki
Jack B. Davidson
John A. DeArmond
Paul Del Porto
Joseph A. DeLucia
Jean-Claude Deslandes
Harinder S. Dhindsa
William F. Dick
Edward T. Dickinson
Melissa J. Doherty
Darrel Donnato
Christopher Dong
Thomas J. Doyle
Donald M. Downy
Jeffery D. Dumberoth
Robert B. Dunne
Mark E. A. Escott
William D. Fales
Preston Fedor
James Fenno
Douglas J. Floccare
Arthur J. French III
Brian Froelke
Gregory Fuller
Jim Garland
Marc Gautreau
Robert B. Genzel
Thomas D. Gifford
W. Scott Gilmore
Erik Glassman
Eric Goedette
Scott Goldstein
Kent R. Griffith
Joseph R. Haake
Kevin Hanrahan
Nick Harper
Andrew J. Harrell IV
William E. Hauda II
Garrett Herzberg
David J. Hirsch
Jeffrey Ho
Joseph E. Holley
Joel E. Hornung
Robert B. Horton
Kermil Huebner
Michael J. Hunter
Alexander P. Isakov
Ray K. Jennings
William Justiz
Richard Kamin
Jason A. Kegg
Christian Knutson
Jan R. Kornilow
Jon R. Kromher
Kerry C. Kue
David S. Kugler
David P. Lehrfeld
E. Brooke Lerner
Mark Levine
Jason M. Liu
Michael T. Loeheimer
Kayla Long
John Lyng
David Marcozzi
Sean W. Marquis
Charles M. Wackerhar
Howard Mell
Lawrence F. Miller
Jerry L. Mothershead
Steven Myers
Clifford J. Neal
Michael T. Lohmeier
Attila Uner
David Vilberg
Alvin Wang
G. Scott Warner
Leonard Weiss
Kelvin Williamson
Joseph W. Winchell
Allan Yee
Philip Yoon
Paul Zeeb

**Wilderness EMS Committee**

Michael G. Millin, MD, MPH – Chair
R.M. Abdul Ali
Benjamin N. Abo
Mohamed Al Busafi
Nawfal Abdullah Aljeiran
Janna E. Baker Rogers
Kevin M. Payne
Bjorn K. Peterson
Kari Peterson
Donald G. Phillips
Taylor K. Ratcliff
Marc Restuccia
James Richardson
Kathy L. Rinner
Andrew Robert
Daniel M. Roberts
Lawrence H. Roberts
Jason Rossa
Marc S. Rosenthal
Darren Sandbeck
Curtis C. Sandy
Kari L. Scanlon
Herbert N. Schiller
Jonathan J. Schmitz
David Schoenfeld
David J. Schoenwetter
Rebecca Schulman
Richard Schwartz
Daniel S. Schwartz
Lalainia M. Secreti
Fred A. Severny
J. Matthew Sholl
James Sideras
Kevin Walter Simons
Will R. Smith
E. Reed Smith Jr.
Irvin E. Smith
Cary Spiegel
Christopher T. Stephens
Shannon Stephens
Andrew W. Stern
Gregory Stiller
Jon P. Strotkamp
Jennifer Stuth
Timothy S. Talbot
Gary W. Tarmkin
David K. Tan
Thomas W. Trimmer
Louis S. Ulric
Allila Uner
Kevin Walter Simons
Donald L. Slack
Will R. Smith
E. Reed Smith Jr.
Gregory Stiller
Jon P. Strotkamp
Jennifer Stuth
Timothy S. Talbot
David K. Tan
Thomas W. Trimmer
Elizabeth Weinstein
Leonard Weiss
Jenna White
Kelvin Williamson
Neil Yoder
During 2012, NAEMSP®:

- Held its Annual Specialty Workshops, Scientific Assembly and Trade Show in Tucson, Ariz., at the JW Marriott Starr Pass. It was our largest attendance ever with 662 attendees.

- Completed external financial audit and currently in good standing.

- Published its 16th volume of *Prehospital Emergency Care*, including 576 pages.

- Launched the redesigned NAEMSP® website in June.

- Elected, via electronic voting, a president-elect, treasurer and three physician members-at-large who take office in January 2013.

- Conducted four regional NAEMSP® Medical Direction Overview Courses™ held in Evansville, Ind.; Oklahoma City, Okla.; Eugene, Ore., and Waltham, Mass.

- Provided liaisons and representatives to dozens of organizations and EMS-related activities and conferences.

- Held its mid-year Board of Directors meeting in Milwaukee, Wis.

- Members of the Board of Directors served on the Board of Directors for Advocates for EMS and participated in the third annual “EMS on the Hill” Day in Washington, D.C.

- Presented another NAEMSP® Advanced Topics in Medical Direction™ Pre-Conference workshop.

### MEMBERSHIP

NAEMSP®’s membership has been stable over recent years. As of June 30, 2012, there were 1,395 members. The following graph details the various membership categories.

- **Physician**: 333 members
- **Professional**: 64 members
- **Resident**: 56 members
- **Fellow**: 29 members
- **Student**: 29 members
- **International**: 6 members
- **Honorary**: 6 members

**Total Members – 1,395**

### MISSION STATEMENT

NAEMSP® is an organization of physicians and other professionals partnering to provide leadership and foster excellence in out-of-hospital emergency medical services.
The theme for this year’s financial report is steadiness. While the economy continues to be unpredictable and performing below historic levels, the NAEMSP® treasury has remained steady. We are pleased with our continuing relationship with our investment partner, H.L. Zeve Associates, and have been impressed with its responsiveness and expertise.

The 2012 Annual Meeting at the JW Marriott Starr Pass Resort in Tucson, Ariz., was a great success with excellent attendance. This year we budgeted for modest growth in membership and conference attendance and were pleased to see this become a reality. Our members are our greatest asset. Membership revenue has improved and continues to be our main source of revenue for daily Association operations. As our subspecialty matures, it is imperative that the organization take advantage of the new subspecialty designation to increase overall member numbers.

Identifying opportunities for revenue continues to be a priority for the NAEMSP® Board of Directors. Securing additional grant and contracts will contribute to our overall financial health. Our official indirect expenses rate will also offset administrative expense. One potential area for growth lies in supporting material and courses for subspecialty board examination preparation. Grants and contracts have many intangible benefits, including opportunities for member involvement in meaningful and rewarding projects which builds NAEMSP®’s reputation and furthers its credibility.

NAEMSP® benefits tremendously from the expertise of its management firm, Applied Measurement Professionals (AMP). As we celebrate our 15th year with AMP, we are in the middle of a 5-year-long contractual relationship confirming a stable relationship with an excellent association management firm at a reasonable expense. NAEMSP®’s financial health is sound. The financial position and records of NAEMSP® as of June 30, 2012, as confirmed by an independent auditors’ report, are in conformity with sound accounting principles. Our reserves remain strong and we have a sound investment policy. The Board of Directors thanks the many dedicated members of NAEMSP® whose financial support of their Association with their dues and meeting registration continue to be strong. The Board believes that this is a testimony that NAEMSP® provides each member with a value-added experience professionally, scientifically and socially.
Prehospital Emergency Care (PEC)

Editor's Report

2012 saw the completion of Volume 16 of Prehospital Emergency Care (PEC). The volume had 576 pages. The January/March issue included a record-high 150 abstracts, which were presented at the NAEMSP® Annual Scientific Assembly. This special section was edited by Drs. Jane Brice and Daniel Patterson. We continue to seek sponsorship of a supplement for presenting the Annual Meeting abstracts, which we hope to make a regular feature.

In July PEC received its 2011 Impact Factor, which remained solid at 1.785. PEC is now ranked 9th of the 24 Emergency Medicine journals that are currently rated by the ISI Web of Knowledge. PEC ranks 7th out of the 15 journals that have a 5-year impact factor (PEC 5-year Impact Factor is 1.682). We are ranked 69/157 Public, in the Environmental & Occupational Health category. PEC had an even more impressive Immediacy Index, which indicates how rapidly articles that are published in PEC are cited in the same year. PEC had an Immediacy Index of 0.459. This ranks PEC 4th out of the 24 EM journals that are ranked in terms of being rapidly cited. PEC continued to be placed ahead of such well-established journals as Journal of Emergency Medicine, Pediatric Emergency Medicine, Emergency Medicine Clinics of North America, Canadian Journal of Emergency Medicine, Journal of Emergency Nursing, and European Journal of Emergency Medicine.

The ISI Impact Factor system is not without critics, many of whom believe that the mysterious system is flawed. There are other services that rank journals’ impact as well. SCOPUS has an alternative method. Its Scimago system produces an “H Index.” By this method, PEC ranks 7th out of the 44 emergency medicine journals that are ranked by SCOPUS. Our strategic plan is to continue to advance in ranking. In order to accomplish this, we will need the continued support of NAEMSP® members via submission of their best work to PEC.

PEC continues to utilize iFirst electronic publication ahead of print. This allows more rapid publication as a service to PEC authors and readership. As of this writing, PEC was on pace to receive a record number of submissions. The number of manuscripts submitted to PEC has increased every year since its inception, but has leveled off in recent years. In terms of peer-review, PEC has an average time to first decision of 18 days. The acceptance rate of papers submitted to PEC is 31%, which is by far a record low. This is indicative of the health of the journal quality-wise, as it has become increasingly difficult to get published in PEC (i.e., the bar for quality has been raised).

Additional peer reviewers are always needed. This is especially true in the areas of pediatrics, trauma, education, qualitative research, EMS operations and air medical services. Those interested should send an email of interest (citing area of expertise with a CV attached) to Dr. Menegazzi at menegazz@pitt.edu.

Some of the highlights of Volume 16 included:

Special Sections
- Safety in EMS

Focus Sections
- Focus on Cardiac Arrest
- Focus on Trauma
- Military Medicine
- Focus on Pediatrics (twice)
- International EMS (twice)

Position Papers
- Role of EMS in Disaster Response
- Medical Direction for Operational EMS Programs

Case Conferences
There were nine Case Conferences published in this volume of PEC, which is a record high. This is a very nice forum for enabling prehospital providers and junior faculty to get published. We continue to encourage submissions to this section of the journal.

Abstracts
- Abstracts for the NAEMSP® Scientific Assembly

NAEMSP® News
Under the direction of its editor, Joseph A. DeLucia, DO, FACEP, EMT-T, NAEMSP®’s quarterly newsletter continues to provide members with timely information and updates. Each issue is sent electronically to members via our E-News. It is available for download through our website.
2012 Annual Meeting
The 2012 NAEMSP® Annual Meeting: Specialty Workshops, Scientific Assembly and Trade Show was held at the JW Marriott Starr Pass Resort in Tucson, Ariz. The meeting was chaired by David Slattery who was assisted by all of the members of the Program Committee.

- Highlighted presentations included Preparedness for Emergency Medical Services: The DHS Perspective – Alexander G. Garza, MD, MPH; Culture of Safety afternoon seminar; EMS Subspecialty Certification: Implications & Implementation – David Cone, MD; Jane Brice, MD, MPH; and Debra G. Perina, MD
- More than 600 members, guests and exhibitors attended the 2012 Annual Meeting
- More than 50 exhibitors provided financial support for the association’s education program by attending the Annual Meeting and purchasing exhibit space.

Board of Directors Mid-Year Meeting
The Board of Directors held its mid-year meeting this year in Milwaukee, Wis.

Liaisons Meetings
- Advocates for EMS
- CDC Trauma Triage meeting
- Culture of Safety meeting
- EMS on the Hill Day
- EMS Summit – EMS Today
- Expert Consensus meeting for Ambulance CPR
- IAFF EMS Medicare Section Summit
- Mass Care meeting
- NAEMSE Conference
- NAEMT Conference
- NASEMSO Conference
- National Fallen Firefighters Foundation Symposium
- NFPA Technical Committee on EMS
- Pan-Asian Resuscitation Outcomes Study Meeting
- ROC Steering Committee meeting
- Spring EMS Section membership meeting
- Transportation Safety Advisory Group meeting

Future NAEMSP® Annual Meetings
January 16-18, 2014
JW Marriott Starr Pass Resort & Spa
Tucson, Ariz.

January 22-24, 2015
Hyatt Regency New Orleans
New Orleans, La.

January 14-16, 2016
Manchester Grand Hyatt
San Diego, Calif.

January, 26-28, 2017
Hyatt Regency New Orleans
New Orleans, La.

January 11-13, 2018
Manchester Grand Hyatt
San Diego, Calif.
NAEMSP® was pleased to recognize the following individuals at our awards luncheon in Tucson, Ariz., in January 2012:

**2012 Abstract Awards**

- **Best Scientific Presentation**
  
  #14 – EMS activation of the cardiac catheterization lab is associated with process improvements in the care of myocardial infarction patients
  
  David C. Cone, Christopher Lee, Carin Van Gelder

- **Best Cardiac Arrest Presentation**
  
  #10 – Pre-shock Pause Intervals and Re-arrest After Resuscitation from Out-of-Hospital Cardiac Arrest.
  
  Allison C. Koller, David D. Salcido, James J. Menegazzi

- **Best Disaster Presentation**
  
  #124 – Randomized trial comparing two mass casualty triage systems in a simulated pediatric mass casualty incident
  
  Nicole E. Jones, Marjorie Lee White, Nancy Tofil, Mekeisha Pickens, Amber Youngblood, Lynn Zinkan, Mark Bake

- **Best Student/Resident/Fellow Research Presentation**
  
  #34 – EMS-Initiated Community Intervention Can Reduce Lift Assist Calls
  
  John J. Ahern, David C. Cone, Dorothy I. Baker, Sandy Bogucki

- **Best EMS Professional Research Presentation**
  
  #134 – Transmission of EMS EKGs Increase Hospital MI Team Activation But Does Not Decrease Door to Balloon Time For EMS STEMI Patients.
  
  Aaron Cordova

- **Best Poster Abstract Presentation**
  
  #76 – Does EMS Perceived Anatomic Injury Predict Trauma Center Need?
  
  E. Brooke Lerner, Jennifer Roberts, Clare Guse, Manish N. Shah, Robert Swor, Jeremy T. Cushman, Alan Blatt, Gregory J. Jurkovich, Karen Brase

---

**2012-2014 NAEMSP-ZOLL EMS Resuscitation Research Fellowship**

Bryn E. Mumma, MD, Clinical Research Fellow

UC Davis, Department of Emergency Medicine

The project is to investigate the effect of treatment at a hospital with therapeutic hypothermia and primary percutaneous coronary intervention on outcomes following out-of-hospital cardiac arrest.
Further your Career: If you are not currently a member, apply online at www.naemsp.org. If you are a current member, let us know if you are interested in participating on a committee and/or being a liaison to an EMS-related project or organization.