

two thousand sixteen

2016

National Association of EMS Physicians®

A N N U A L

R E P O R T



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The National Association of EMS Physicians® is healthy, growing, and energized.

Shortly, I will be handing over the reins of this amazing organization to Dr. Brent Myers. He will set out a new agenda and course for us for the next two years and I can't wait to see what he has in mind. My two goals were 1) to work on developing new leaders within our organization recognizing those who give of themselves and their talents to make NAEMSP® the strong progressive organization that it is and 2) to develop international initiatives designed to grow our specialty across the world.

NAEMSP® has recognized several new and upcoming leaders providing them with opportunities for growth and development over the last two years. You are extremely important to us and are the life blood of our organization. You have terrific ideas and can lead our specialty and organization to new heights. Please consider joining a committee or speaking to a Board member about how to further your involvement.

Our international program is fantastic. We have delivered our international medical director's course in Cuba, Taiwan, Mexico City, and Sri Lanka. We have an upcoming course in the Dominican Republic. If leading change internationally interests you, we are seeking members to deliver these courses.

NAEMSP® is fiscally sound thanks to the hard work of David Tan and the Finance Committee. The pages that follow detail the progress and work product of the organization. Many mistakenly believe that the work of the organization occurs at the level of the Board of Directors. This could not be further from the truth. The real work of the organization occurs at the committee level. This is why it is so critical that each and every one of you make time to attend at least one committee meeting. We need your energy, your ideas and your passion to further the work of the organization.

Highlights from 2016

- The 2016 Annual Meeting was a huge success. Counting members, guests, vendors and staff, there were nearly 1,000 people who attended our meeting. We broke yet another record.
- We delivered our international medical directors course in several locations across the world.
- This fall, the membership held its annual election:
 - The newly elected physician members-at-large are Alex Isakov, Peter Taillac and Jeff Lubin
 - Michael Levy will be your new Secretary/Treasurer
 - David Tan has been selected as President-Elect
 - The Board of Directors has appointed Julie Houle to serve in the remaining year of Michael Levy's director term.

2016 has been a terrific year for NAEMSP®. This organization thrives on the energy and passion of its members. Thank you for all you do. I also want to extend my thanks to all the committee chairs who have worked tirelessly this year. You may have thought I wasn't watching but I was. Thank you for your hard work. I also need to thank the unsung heroes of our organization who work behind the scenes – our amazing Executive Director, JerriLynn Kind, and her incredible staff. Without their support, NAEMSP® would not be able to implement even a small portion of its dreams and aspirations.

I will see you in New Orleans.

Jane H. Brice, MD, MPH
NAEMSP® President

B O A R D O F D I R E C T O R S

President

Jane H. Brice, MD, MPH
Term through January 2017

President-Elect

J. Brent Myers, MD
Term through January 2017

Secretary/Treasurer

David K. Tan, EMT-T, FAAEM
Term through January 2017

Immediate Past President

Ritu Sahni, MD, MPH
Term through 2017

Physician Members-at-Large

Jeff K. Beeson, DO
Term through January 2018

Jose Cabanas, MD, MPH
Term through January 2018

Alex Garza, MD, MPH
Term through January 2017

Alex Isakov, MD, MPH
Term through January 2017

Michael Levy, MD, FACEP, FACP
Term through January 2018

Jon C. Rittenberger, MD, EMT-B
Term through January 2017

Professional Member-at-Large

P. Daniel Patterson, PhD,
NREMT-P
Term through January 2018

Program Committee Chair

Paul S. Rostykus, MD, MPH
Term through January 2017

Standards and Clinical Practice Committee Chair

John Lyng, MD, FF/NREMT-P,
FACEP
Term through January 2017

Committee Highlights

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

Advocacy Committee

- Continued working with our lobbyists towards the passage of the Protecting Patient Access to Emergency Medications Act (PPAEMA).
- Provided our first NAEMSP® Government Relations Academy in March.
- Had significant attendance at EMS on the Hill and successful “lobbied” to have the PPAEMA as the major “ask” for lobby day.
- Developed a long-term set of legislative priorities.

Air Medical Services Committee

- The committee continues to accrue best practices and protocols on the communities share point site. Please consider submitting protocols to the site.
- We completed revisions of policy statements on Transport Physician Training and Air Medical Director qualifications.
- We are currently working on a daughter document on Air Medical Direction that will support a larger revision to the Standards and Practices committee’s policy statement on Prehospital Medical Direction.
- We will also begin working with ACEP and AMPA to revise a statement on Air Medical Utilization.

Canadian Relations Committee

- The Canadian Relations Committee successfully hosted their 5th annual “Distinctly Canadian Preconference”, in 2016 and it was a great success.
- The first part of the session was presenting Dr. Justin Maloney with the distinguished “Ronald D. Stewart Award” for his professional accomplishments in EMS, amidst of all his Canadian peers. Dr. Jane Brice presented the NAEMSP® award to Dr. Maloney.

- The preconference focused on a panel discussion around two topics: “Treat & Release Protocols” and “Palliative Care in EMS”. This scientific portion of the meeting featured a panel-led discussion with great audience participation and great Pro’s & Con’s discussion. The enrollment for this event was nearly 100 attendees and included a multi-disciplinary group of Physicians, Paramedic Chiefs and Operations leaders, Educators, Paramedics & Allied Health Professionals. Planning is well underway for the 2017 installment of this popular pre-conference.
- The Business meeting portion was a nationwide update on multiple topics: Paramedics Chiefs of Canada, EMS Fellowship Committee, Canadian Safety & Security Program, as well as the CAN-ROC initiative for Resuscitation Research.
- Many of the Canadian Relations Committee members also will meet in June at the Canadian Association of Emergency Physicians (CAEP) meeting in June, in Quebec City, Canada.

Community Paramedicine/Mobile Integrated Healthcare Committee

- Held first ever CP/MIH preconference workshop during 2016 NAEMSP® conference.
- Planned a full day CP/MIH Preconference for the 2017 meeting.
- Participating in MIH Measures Group Consortium developing quality metrics in three areas:
 - Community health intervention
 - Alternative destinations
 - Nurse advice lines
- Participating in EMS 3.0 initiative with representatives from NAEMT, NASEMSO, NEMSMA, NAEMSE among others.
- Participated in writing of “Promoting Innovations in EMS” document funded by NHTSA, HHS-ASPR and Homeland Security.

- Continuing to work on improving awareness about CP/MIH with nontraditional EMS stakeholder groups like primary care physicians and public health researchers.

Communications Committee

- Continued production of the *PEC* Podcast, which has a continued large following.
- Hosted an initial PEC Twitter journal club was successful and had a great reach of participants.
- Assisted NAEMSP® in moving toward an outside agency to improve the web presence for social media and accessibility. We look forward to working with them in the coming months.

Council of EMS Fellowship Directors

- After extensive discussion and voting, the EMS Fellowships are not going to enter into the NRMP Match process for the 2017-18 academic year. Programs who choose will continue to honor the “Gentleman’s Agreement” for requiring applicant responses. Three programs have chosen to no longer participate in the agreement. The earliest date for requiring responses has been changed to the second Wednesday in November to avoid weekend conflicts. The CEMSFD webpage has been updated to reflect this date and more accurately report participating programs.
- An ad hoc subcommittee was formed and being led by Jeff Lubin to develop a standardized evaluation tool for evaluating EMS fellow competencies. After the tool has been approved by the CEMSFD, it will be presented to the ACGME for acceptance as a best practice and distributed to fellowship directors.

COMMITTEES

Committee Highlights continued

Council of EMS Fellowship Directors, cont.

- The CEMSFD has created its first preconference on Faculty Development, including teaching methods, evaluation techniques, and use of the EMS milestones. This was arranged by Deb Perina and will be presented before the 2017 Annual Meeting. This preconference will also meet the ACGME requirements for faculty development.
- A second year of EMS Esoterica will be presented at the 2017 Annual Meeting and will cover four new topics that are important EMS concepts that are infrequently encountered, including IDLH events, perimortem c-sections, prehospital termination of resuscitation, and field amputations.
- Several EMS Fellowship Directors were concerned that application numbers were decreasing for the upcoming academic year. A recent survey supports these suspicions. Therefore, future plans include developing a needs assessment for EMS medical directors across the country and then discussing recruitment methods to encourage residents to study EMS and increase application numbers.

Education Committee

- Working with membership to identify possible writers for content for EMS1.com website. Served as reviewer for Innovations in Education posters.
- Expanded NAEMSP role in International Medical Director Programs
- Collaborated with Communications Committee to put introduce Twitter journal club
- Working closely with NASEMSO on rewriting the Scope of Practice Guidelines from 2007

Emergency Preparedness Committee

- In May of 2016, the Chair of the Emergency Preparedness (EP) Committee resigned due to other commitments, and Gerald (Wook) Beltran, DO was appointed to interim Chair. Dr. Jason Liu, MD was appointed interim Vice-Chair.
- During 2016, the EP Committee supported the efforts of the S&P Committee in developing a Mass Gathering Medicine Checklist document. Members of the Committee reviewed and rendered feedback on this document.
- Additionally, the Emergency Committee provided support to ASPR on its 2017 document on Health Care Preparedness and Response Capabilities. Members of the EP Committee, reviewed and provided feedback on several drafts of this document.

- A disaster preconference was proposed for the Annual NAEMSP® Meeting, but was not submitted in time for consideration for the 2017 conference. Discussion for the 2018 conference was initiated to ensure submission early in the process for the 2018 conference. This work will be ongoing into 2017.

In 2017, the committee will:

- Continue to support the Board on review of internal and external documents on topics related to Emergency Preparedness.
- Continue discussion on a preconference disaster activity for the 2018 NAEMSP Annual Conference.
- Initiate discussion on inclusion of the new and revised BDLs and/or ADLS course as a preconference option for the 2018 annual conference.

EMS Fellows and Fellowship Graduates Committee

- Developed EMS LLS Programming for 2017 NAEMSP Annual Meeting
- Developed Critical Care Cadaveric Procedure Lab for the 2017 NAEMSP Annual Meeting
- Provide a resource for EMS Fellows and Fellowship Graduates in their career search
- Serve as the voice of EMS Fellows and Fellowship Graduates to the NAEMSP BOD and other EMS organizations

Executive Office Staff Listing

The NAEMSP® Staff is listed below. Please feel free to contact us at any time.

Executive Director

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COMMITTEES

Committee Highlights continued

Membership Committee

- Creation of the NAEMSP® fellowship designation. Worked with NAEMSP® staff to realize the vision of the Board: created an application process and vetted 204 applicants with the help of the Fellows and Fellowship Graduates Committee.
- Set up a liaison with the Communication and Education Committees to find combined opportunities and communications strategies to enhance benefits to members. No hard results yet but the cooperative spirit is good and ideas are coming.

Operational EMS-Fireground/Hazmat/TEMS Committee

- Manage discussion groups and folder on the online communities.
- Submitted plan and budget for Adv. Hazmat Life Support education program for Annual Meeting.
- Submitted proposals for educational tracts for 2016 Annual Meeting.
- Gathered topic lists for 2017 Annual Meeting.
- Posting of resources and information to Communities.
- Discussed antidote alternatives discussed and posted resources to the online community.
- Started an Interest Group for Cyanide Antidotes Therapy project.

Pediatrics Committee

- Representation and participation in the following groups/meetings
 - NEMSAC
 - Pre-Hospital Evidence Based Guideline Consortium
 - Peds Ready Steering Committee
 - NASEMSO EMS Model Guidelines Workgroup
 - NASEMSO Safe Transport of Children Committee
 - AAP Committee on PEM (COPEM)
 - EMS COMPASS Steering Cmte
 - EMS-C HRSA Strategic Planning Meeting
- AAP/ACEP/ENA/NAEMSP/NAEMT Policy Statement on Pediatric Prehospital Readiness - Work in progress, on schedule
- EMS education for the PEM provider online modules—completion expected Jan 2017
- Online Med Control Course <http://www.denverems.org/realdirectionems>
- Completed NAEMSP® position statement on Role of a Pediatric Coordinator

Public Health Committee

- Completed ACEP Human Trafficking Position Statement
 - EMS specific information uploaded to share site
 - Currently working on:
 - Need to develop EMS protocol / legal requirements
 - Audit of State EMS Rules
 - Develop EMS presentation w/DHS
- Population bio surveillance for disease & injury
 - Transmission/communication of data information to Public Health at the following levels:
 - EMD electronic data translation to information
 - EMS on-scene
 - ED clinical findings

- The role of EMS in end of life care
 - Presentation at Annual Meeting 2017
 - Publish best practice models for managing end of life EMS response / POLST
- Developed potential policy position on potential positive impacts of EMS on population health (National Health Security Strategy 2015-2018)
 - Document Uploaded
 - Conversation with DHS/ HRSA
- Assessing integration of public health with emergency disaster preparedness—improve resilience
- Develop linkage list and recommended strategies for EMS organizations to work with local/ regional Offices of Public Health.
- Work with CP/MIH Committee and Standards and Practice Committee to assess development of potential position papers, support materials, and funding for program assessments to improve integration of EMS with care of vulnerable populations.
- Continue pushing out work on Mass Gathering Medicine Papers.
 - Paper in final review.

Quality and Safety Committee

Definition of Quality in EMS:

- Draft definition to set the standard for what represents quality in EMS, and expands on what the approach to quality should be.
- Plan for position paper to partner with vision statement which provides a roadmap for the “how” to translate that broad vision and approach to the agency and street level as well as provide tools to do so.

Committee Highlights continued

Quality and Safety Committee, cont. *National Assessment of Clinical QA in EMS:*

- Evaluation of and the current state of QI in EMS. Data was received from a broad range of agencies and states, the final papers are being drafted to further describe the role of medical direction, types of metrics being tracked, and methods for QI in use.

NAEMSO EMS Performance Measure Project/EMS Compass

- Pursuing selection of evidence based measures to consider pushing forward for validation with appropriate partners, and to provide guidance as a “starting point” of core measures for an EMS physician or agency getting started with QI.
- EMS Compass measures available at <http://www.emscompass.org/ems-compass-measures/>

Research Committee

- A banner year for the Research Committee! On August 5th, 2016, we received more than 300 research abstract and innovation in education abstract submissions. The committee accepted n=230 total research abstracts for presentation at the 2017 annual meeting. Thirty abstracts will be presented as oral (the most ever presented at NAEMSP®), and n=200 as moderated posters.
- The committee used a novel approach to scoring abstract submissions by combining the ratings of a small group of senior reviewers (who reviewed all abstracts) with the scores of junior reviewers. The process and results were used to stimulate debate and proposals for updating our association’s process for abstract screening, scoring, and rating. The committee will consider new procedures for 2017/2018 that will improve reliability in scoring, and reduce burden on committee members, while at the same time improving the opportunity for member participation.

- The committee looks to engage the entire NAEMSP® membership in scoring/ranking the quality of oral presentations and poster presentations during the 2017 annual meeting. This will be made possible by introducing a novel, real-time, text-message enabled scoring system. We’re excited about this opportunity to engage the membership at large. More details in the coming months on the technology, and how it will be used during the meeting.

Rural EMS Committee

- The Rural Committee continued with its efforts to expand NAEMSP® presence in rural EMS.
- Julie Houle presented “Barriers to Research in Rural EMS” at the ACEP Advanced EMS Practitioners preconference.
- Members of the committee are serving on the planning committee for the 3rd Rural EMS Conference, this year to be held in Fargo on April 16-17. Several committee members will be attending this event to advance this collaboration with multiple rural partners.
- We continue to support the development of a Center for Rural and Tribal Prehospital Medicine at University of New Mexico, headed by Dr. Chelsea White, more to follow in the future of this very exciting opportunity.
- A presentation on Alaskan Rural and Frontier Medicine is included in the 2017 NAEMSP® conference.
- Members of the Rural Committee will continue serving on the Program and Advocacy Committees to ensure rural representation at these important forums.

Standards and Clinical Practice Committee

Building upon a successful 2015, 2016 continued to be a busy year for the Standards & Clinical Practices Committee. Our committee members continued the important work of developing, reviewing, and revising the vital documents that our organization uses to communicate our understanding of clinical science and to recommend or establish community standards of care in the field of EMS Medicine.

New Standards & Clinical Practices Position Statement and Resource Document Online Index

One of the biggest projects we completed this year was a total overhaul of the Position Statement webpage hosted on the NAEMSP.org website. Not only did the overhaul include a thorough review of all of our existing position statements to ensure they were represented in the electronic index, but a new system for indexing and cross-referencing documents that cover several content areas was implemented. Now users can more easily find what they are looking for! Additionally, open-access web links have been incorporated into the indexed documents so users can more easily access items published by NAEMSP in *Prehospital Emergency Care*. Documents published elsewhere are also web linked, but may require additional access rights gained through a user’s home institution or personal account access to a specific journal (for example, *Annals of Emergency Medicine*).

The new electronic home for our Position Statements and Resource Documents is:

<http://www.naemsp.org/Pages/Standards-and-Clinical-Practices.aspx>

This page can also be found by clicking on the “Resources” tab in the masthead of the NAEMSP.org website and selecting “Standards & Clinical Practices.”

Standards and Clinical Practice Committee, cont.

Review of Aging Documents and Recommended Actions

As part of our indexing process, many members of S&P reviewed existing documents that are showing their age, some dating back over 20 years! Following the processes outlined in the *NAEMSP Position Statement and Resource Document Lifecycle and Stewardship Policy* (also available electronically on the new webpage), committee members performed reviews of documents and recommended various document fates that S&P intends to take in the coming months. Some of the recommendations include repealing, retiring, revising, or replacing many of the out-of-date documents. Keep your eyes open for opportunities to help put those recommendations into action, as S&P will soon be recruiting authors for workgroups. There's certainly no shortage of work ahead!

New Position Statements

In addition to our indexing and website revision project, S&P also marshaled the production of several new position statements that will soon be published:

- Physician Oversight of Emergency Medical Services
- Physician Oversight of Pediatric Care in Emergency Medical Services
- Treating Patients with Immediately Life Threatening Conditions Requiring Previously Prescribed Medications Not Routinely Carried by EMS

New or Revised Joint Position Statements

And the following Joint Position Papers were also developed with input from S&P, have been approved by the NAEMSP® Board, and are in various stages of publication:

- Clinical Credentialing of EMS Providers
 - Joint project between NAEMSP® and NREMT
- Physician Medical Direction of Emergency Medical Services Education Programs
 - Joint project between NAEMSP®, ACEP, and NAEMSE

- Guidance Document for the Prehospital use of Tranexamic Acid in Injured Patients
 - Joint project between NAEMSP®, ACS, and ACEP
- Naloxone Access and Utilization for Suspected Opioid Overdoses
 - Joint project between NAEMSP®, ACEP, and ACMT (American College of Medical Toxicology)
- Role of the State EMS Medical Director
 - Joint project between NAEMSP®, ACEP, and NASEMSO

Active Works in Progress

Work continues to move ahead on documents discussing the following important topics:

- Restraints in EMS
- Clinical Field Supervisors of EMS Providers
- Spinal Motion Restriction (collaborative venture to establish a Joint Position between NAEMSP®, ACS, and ACEP)

Revisions to the Mass Gathering Checklist

Together with members of the Disaster Preparedness Committee, S&P provided an in-depth review of the most recent revision of the Mass Gathering Medical Care Planning: The Medical Sector Checklist. Thanks to the hard work and dedication of Drs Yancey, Luk, Milsten, and Nafziger as the primary writing and revision team, this latest revision should become available in various print or electronic formats sometime in early 2017!

New Organization-wide Position Statement Guidance Plan

Finally, in continuation of previous work to better define NAEMSP®'s document development and revision processes, the S&P Committee developed a new *Position Statement Guidance Plan*, that was approved by the Board of Directors in June 2016. This plan now provides a formalized structure that will be used to collect, review, sanction, and ratify Position Statement topic and writing project proposals from all NAEMSP® committees and external parties. In a letter sent to committee chairs in October, NAEMSP® President Brice and S&P Committee

Chairman Lyng further explained that this new guidance plan is intended to:

- Ensure, *early in the proposed project work cycle*, that the core document message(s) proposed by the project writing team are not in conflict with NAEMSP®'s current and future strategic priorities and values,
- Ensure that appropriate approval is obtained from the NAEMSP® Board of Directors before collaborative work begins on proposed joint-projects with other organizations
- Provide a tracking process to follow a project from idea conception to final ratification and publication
- Provide a mechanism for the Board of Directors to maintain a comprehensive view of works-in-progress that will allow for more effective prioritization and resourcing of critical projects

Wilderness Committee

- Launched and is currently managing a national-scale Delphi method inquiry into establishing definitions and scopes of practice for Wilderness EMS certifications.
- Building an "Orientation to Wilderness EMS" fact sheet for new medical directors who are tasked with providing medical oversight for wilderness, remote, austere or resource-deficient services.

Committee Member Participation

■ **Advocacy**

Ritu Sahni, Chair

Jane H. Brice
Avery L. Callahan
Theodore R. Delbridge
Jeffrey M. Goodloe
Paul R. Hinchey
Julie Houle
Jacob B. Keeperman
J. Brent Myers
David K. Tan

■ **Air Medical Services**

Frank Guyette, Chair

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■ **Canadian Relations**

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■ **Community Paramedicine/MIH**

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Michael Gary Guttenberg
Troy Hagen
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James Howard
Leo Hsu
Johanna Innes
S. Marshal Isaacs
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Jason R. Johnson
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Conrad T. Kearns

Committee Participation

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Dennis Laudon
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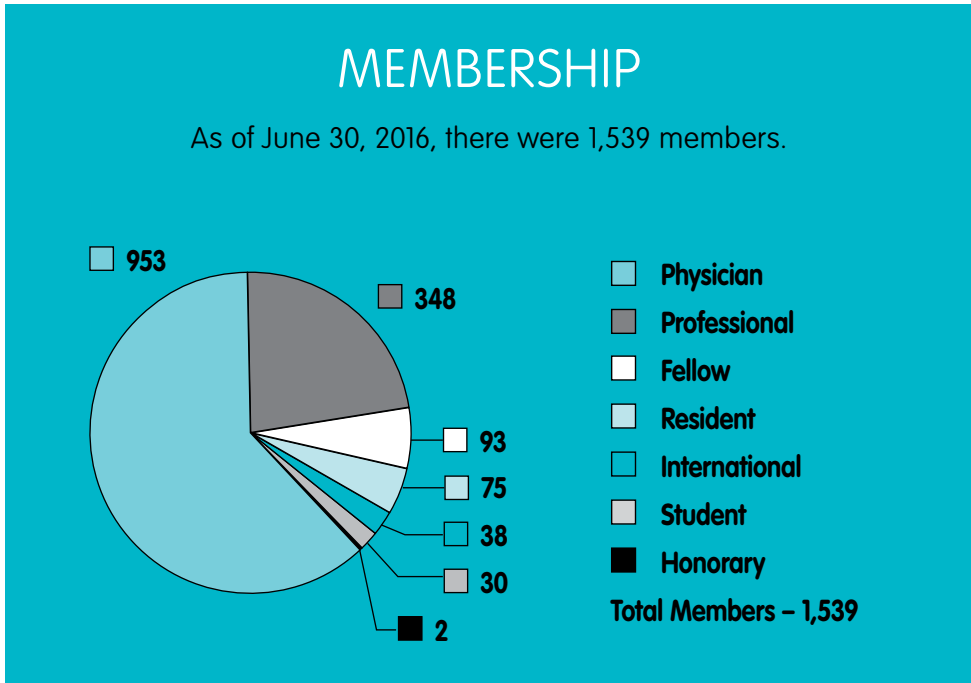
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During 2016, NAEMSP®:

- Held its Annual Specialty Workshops, Scientific Assembly and Trade Show in San Diego, California at the Manchester Grand Hyatt. We continue to grow each year and attendance was nearly 1000 attendees.
- Held our annual NAEMSP® National EMS Medical Directors Course and Practicum® as a pre-conference workshop as well as the following workshop offerings: Advanced Topics in Medical Direction™, Airway Management, Building a Quality Improvement Program, MIH/Community Paramedicine and Resuscitation Academy.
- Recognized the EMS subspecialty Board certified physicians at our conference for the third year in a row; to date, 462 ABEM diplomates are EMS Medicine certified. The next test administration is September 25, 2017.
- Awarded the third NAEMSP/Physio-Control EMS Medicine Medical Director Fellowship to Andrew Latimer, MD.
- Completed a review of our finances and are currently in good standing.
- Published our 20th volume of *Prehospital Emergency Care* including 844 pages.
- Elected, via electronic voting, three physician members-at-large, president-elect and secretary/treasurer to the Board of Directors who take office in January, 2017.
- Provided liaisons and representatives to dozens of organizations and EMS-related activities and conferences.
- Held its mid-year Board of Directors meeting in Atlanta, Georgia at the Kellen Executive Office including a strategic planning session.
- Participated in the seventh annual EMS on the Hill Day in Washington, DC
- Continued contract with Holland & Knight to provide exclusive governmental affairs efforts to the organization.

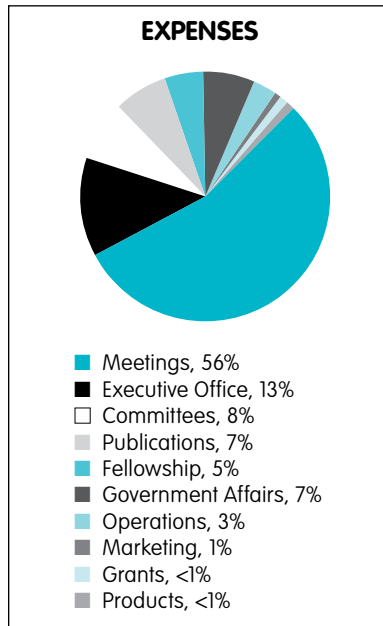
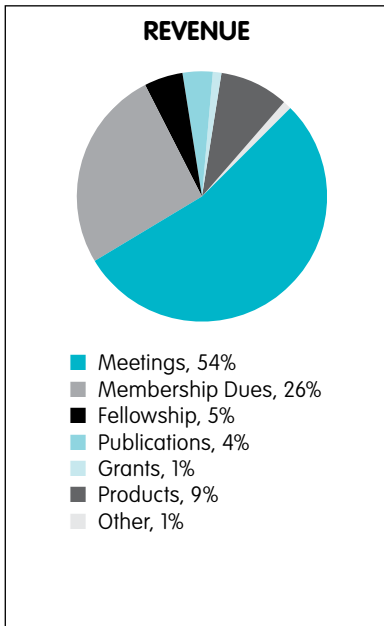


MISSION STATEMENT

NAEMSP® is an organization of physicians and other professionals providing leadership and fostering excellence in EMS.



The following charts indicate sources of revenue and expenses for NAEMSP® through the fiscal year ending June 30, 2016.



Statements of Financial Position June 30, 2016 and 2015 Assets		
	2016	2015
Current Assets:		
Cash	\$517,589	\$532,737
Investments	1,108,473	1,106,945
Accounts receivable – general	27,067	85,949
Inventory	18,281	14,518
Prepaid expenses	8,803	26,868
Total Current Assets	\$1,680,213	\$1,767,017
Property and Equipment:		
Office equipment and furniture	11,646	11,646
Less accumulated depreciation	(11,313)	(11,113)
Net property and equipment	333	533
Intangibles: Trademarks	863	863
Total Assets	\$ 1,681,409	\$1,768,413

Financial Report: 2015-16 Fiscal Year

As we have been reporting to you since late 2014, our investment portfolio had been victim to market downturns causing quarterly losses. During these troubled and volatile times, the Board of Directors received continually updated reports directly from our managers at JFS Wealth Advisors who counseled we stay the course and not overreact to market conditions. At the June 2016 Board of Directors meeting, senior advisors sat down face-to-face with the Board to discuss investment options, and it was decided to avoid major changes in the portfolio and to heed the advice of our consultants to keep steady on the course. I am pleased to report, at the time of this writing, we have recovered much of the losses incurred during the market downturn, and our investments have shown a gain in value for three consecutive quarters. We will continue to watch the market conditions closely, consult regularly with our professional investment advisors, and keep our long-term organizational and membership goals in mind when making budgetary and asset management decisions.

Consistent with our Mission Statement to provide leadership and foster excellence in out-of-hospital medical care, NAEMSP® has increased its participation and impact in far-reaching state, national and international endeavors on behalf of its members and the advancement of our subspecialty. Such efforts are

accompanied by expense, and last year’s reductions in certain low-yield expenses and streamlining of Association costs combined with the modest increase in dues and conference registration has helped accomplish our mission. We have augmented the overall value to membership by introducing incremental upgrades in benefits (such as the new textbook series, diverse metropolitan meeting venues, and additional upcoming issues of PEC) and heightening our legislative advocacy influence (more powerful representation on The Hill).

At the end of this fiscal year, members may remain confident that NAEMSP® is financially healthy with proactive strategies to maintain a flexible, yet stable, posture. While our investment accounts have not grown as steadily compared to prior years, that market trend is changing favorably, and we anticipate recovering most, if not all, of our investment value to begin building worth once again. We remain in a moderately conservative position watching the markets closely and keeping a percentage of our assets liquid to maintain a nimble starting point for unanticipated projects or issues that would be worthy of funding to benefit the association.

Please feel free to speak with any of your representatives on the Board with further questions or comments.

— David K. Tan, MD, EMT-T, FAAEM

E M S M E D I C A L D I R E C T O R S
W O R K F O R C E A S S E S S M E N T

In September 2016, NAEMSP® was awarded a cooperative agreement by the National Highway Traffic Safety Administration (NHTSA) in the amount of \$172,988 that will run through September 2019. Christian Knutsen, MD, MPH is serving as the Principal Investigator for this project.

The EMS Medical Director Workforce Assessment (EMS MDWA) will investigate and define key attributes of EMS and 911 medical directors across the United States in order to create a national picture of prehospital medical direction. Key individuals and organizations across the spectrum of the EMS and 911 communities and healthcare system will be involved to establish the EMS MDWA.

The EMS MDWA will be designed to provide the first description of the physicians providing medical direction for prehospital services across the nation. No other detailed description of EMS medical directors at the local level has been previously created.

The objectives of the EMS MDWA are to:

1. Identify the demographic make-up and experience of medical directors,
2. Define the professional qualifications of medical directors,
3. Describe the EMS, fire, police, aeromedical, and medical dispatch systems that EMS physicians support,
4. Classify the financial support provided to medical directors for their efforts,
5. Outline the legal protections and source of these protections provided to medical directors,
6. Describe the involvement that medical directors provide their agencies in terms of education, quality improvement, and policy or protocol development.

To date, Dr. Knutsen has participated in a kick-off meeting with NHTSA and has begun work on the survey instrument.

PREHOSPITAL GUIDELINES CONSORTIUM

In September 2015, NAEMSP® completed a cooperative agreement by the National Highway Traffic Safety Administration (NHTSA) to engage national EMS organizations in the development of a National Strategy on Prehospital Evidence-Based Guidelines (EBGs). This Strategy aimed to promote the development, implementation, and evaluation of prehospital EBGs and was published in *Prehospital Emergency Care* (2016;20:175-83).

The first action item of the Strategy was to create a Prehospital Guidelines Consortium that would facilitate the ongoing involvement of national EMS and related organizations in activities that support and promote prehospital EBGs. In January 2016, the Prehospital Guidelines Consortium had its first meeting in San Diego, CA and established itself as an organization of organizations with the common goal of promoting evidence-based medicine in prehospital care. NAEMSP® facilitated this initial meeting and has supported the creation of this new entity, which has the potential to facilitate the efforts of individual organizations who develop prehospital EBGs. Its own projects aim to improve research into EBGs, facilitate dissemination and implementation of EBGs, and promote education and funding for ongoing projects.

The Prehospital Guidelines Consortium is currently comprised of representatives from 31 member organizations and has liaisons with 11 additional Federal and research entities. Christian Martin-Gill, MD, MPH, serves as the Chair of the Consortium, with representatives of the following national organizations serving on its Executive Committee:

- Air Medical Physicians Association (AMPA)
- American Academy of Emergency Medicine (AAEM)
- American Academy of Pediatrics (AAP)
- American College of Emergency Physicians (ACEP)
- American College of Surgeons Committee on Trauma (ACS-COT)
- American Heart Association (AHA)
- National Association of EMS Educators (NAEMSE)
- National Association of EMS Physicians (NAEMSP)
- National Association of EMTs (NAEMT)
- National Association of State EMS Officials (NASEMSO)
- National Registry of EMTs (NREMT)
- Society for Academic Emergency Medicine (SAEM)

The Consortium is currently comprised of committees on:

- Research
- Development
- Education
- Dissemination, Implementation, and Evaluation
- Funding

The next meeting of the Prehospital Guidelines Consortium will be held on January 24-25, 2017 in concert with the 2017 NAEMSP® annual meeting.

Prehospital Emergency Care

Editor's Report 2016

2016 saw the completion of Volume 20 of *Prehospital Emergency Care* (PEC). It was a very exciting year for PEC, as the journal went from quarterly to bimonthly publication. The six-issue volume had a record 844 pages. The January/February issue included 156 abstracts which were presented at the 2016 NAEMSP® Annual Scientific Assembly.

In July PEC received its 2015 **Impact Factor**, which for the first time rose above two to 2.104. As a measure of the journal's stability, the five-year Impact Factor went up to 2.091. PEC is now ranked **6th of the 24 Emergency Medicine journals** that are currently rated by the ISI Web of Science (with the sixth highest 5-year Impact Factor in Emergency Medicine). PEC ranked 62/172 in the Public, Environmental, & Occupational Health category. PEC is 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 the only measure of a journal's influence. 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 **4th out of the 72** emergency medicine journals that are ranked by SCOPUS. We continue to strive 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.**

As of this writing, PEC was again on pace to receive a record number of submissions. PEC received 320 submissions in the first 300 days of 2016. The number of manuscripts submitted to PEC has increased every year since its inception. In 2016 we received submissions from forty-three different countries. In terms of peer-review, PEC has an **average time to first decision of 18 days.** The acceptance rate of papers submitted to PEC in 2016 was **25.6%**. This is indicative of the health of the journal quality-wise, as it has become increasingly difficult to get published in PEC.

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 20 included:

Special Contributions

Guidance Document for the Prehospital Use of Tranexamic Acid in Injured Patients

2015 Pediatric Research Priorities in Prehospital Care

National Prehospital Evidence-Based Guidelines Strategy: A Summary for EMS Stakeholders

Focus Sections

- Focus on Trauma
- Focus on Cardiac Arrest (two)
- Focus on Pediatric EMS (two)
- Focus on Opioid Overdose
- Focus on EMS Transport
- Focus on Pain Management (two)
- Focus on Stroke
- Focus on STEMI
- International EMS (two)
- Education and Practice: A record 19 publications

Position Statement

National Association of EMS Physicians® Position Statement on Emergency Incident Rehabilitation

Case Conferences

There were only four Case Conferences published in this volume of PEC. 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 2016 NAEMSP® Scientific Assembly
- NAEMSP® Fellow Education Abstracts – Innovations in EMS Fellow Education

2016 Annual Meeting

The 2016 NAEMSP® Annual Meeting: Specialty Workshops and Trade Show was held at the Manchester Grand Hyatt in San Diego, California. The meeting's program was chaired by Paul Rostykus with the assistance of members of the Program Committee. Nearly 1000 attendees, guests, and exhibitors attended the 2016 Annual Meeting; many exhibitors provided financial support for the association's education program.

Specialty workshops offered included the NAEMSP® National EMS Medical Directors Course & Practicum®, Advanced Topics in Medical Direction™, Airway Management, Building a Quality Improvement Program, MIH/Community Paramedicine and Resuscitation Academy.

Oral, poster and electronic research presentations took place during several sessions on Thursday and Friday. NAEMSP® committee meetings took place Wednesday evening, during lunch on Thursday and Friday, and at breakfast on Saturday.

The new member reception and Distinctly Canadian meeting were both held on Wednesday evening.

The conference was opened by NAEMSP® President Jane Brice, MD, MPH and Program Chair Paul Rostykus, MD. The day began with a well-received presentation titled "Identifying Human Trafficking in America" by former trafficking victim Rebecca Bender. This was followed by talks on the IOM Recommendations for Cardiac Resuscitation, an Update on the EMS Subspecialty Exam, EMS Mythbusters and the Impacts and Successes of the Resuscitation Outcomes Consortium.

Friday (Day 2) began with a discussion of the Promotion of Innovation in EMS. This was followed with short sessions on Pediatric Medical Direction and Hypotensive Resuscitation for Trauma Patients. The afternoon concurrent sessions covered TXA for Head Injury, Training for Bariatric Patients, the Everest Base Camp MCI, Prehospital Care of the Spinal-Injured Athlete and Real-World EMS Training on a Budget. "EMS Experts in the Hot Seat" with 4 experienced EMS medical directors asked by the moderator to answer questions from the audience was a new and well-received addition to the program. "EMS Esoterica, covering Wilderness EMS, Aeromedical transport, Occupation Medicine and TEMS, was a new program aimed at covering some of the EMS Core Content for EMS Fellows & Practicing EMS medical directors. The day ended with an enlightening session titled, "Electronic Dance Music, Designer Drugs & Teen Death".

Saturday, the 3rd and final day, focused on take home messages, began with Top Innovations for 2016 by NAEMSP® President-elect Brent Myers. The morning was rounded out with sessions on Congenital Adrenal Hyperplasia/Adrenal Crisis & Patient Advocacy, the EMS Compass Initiative for Performance Measures and the Successes & Challenges of Prehospital Evidence-Based Guidelines. The noon awards luncheon honored many NAEMSP® members – details on page ?. The afternoon was led off with a discussion of the TEMS Response to Civil Unrest in Ferguson, an update on EMS DEA issues, a recap of the 2015 AHA ECC Guidelines and finished with a review of the Top 5 Articles in EMS That Should Change Your Practice. This was followed by relaxation and farewells at the closing reception before the next annual meeting in January 2017 in New Orleans.

Board of Director Mid-Year Meeting

The NAEMSP® Board of Directors held its mid-year meeting in Atlanta, Georgia in June.

Future NAEMSP® Annual Meetings

January 24-26, 2017
Hyatt Regency New Orleans
New Orleans, Louisiana

January 11-13, 2018
Manchester Grand Hyatt
San Diego, California

January 10-12, 2019
JW Marriott Austin
Austin, Texas

January 9-11, 2020
Manchester Grand Hyatt
San Diego, California

January 14-16, 2021
JW Marriott Austin
Austin, Texas

January 13-15, 2022
Manchester Grand Hyatt
San Diego, California

Liaison Meetings

- American College of Emergency Physicians Conference (ACEP)
- Asian Conference on Emergency Medicine
- Brain Attack Coalition
- Bystander Preparedness
- Developing EM
- Commission on Accreditation of Ambulance Services (CAAS) Meeting
- Committee on Accreditation of Educational Programs for the EMS Profession (CoAEMSP) Meeting
- Commission on Accreditation of Allied Health Education Programs (CAAHEP)
- Commission on Accreditation of Medical Transport Systems (CAMTS)
- Commission on Accreditation for Pre-Hospital Continuing Education (CAPCE)
- Committee on Military Trauma Care
- EMS on the Hill Day
- EMS Today
- HHS/CDC EMS Stakeholder Meeting
- High Threat Emergency Casualty Care Task Force (HTECCTF)
- National Association of EMS Educators (NAEMSE) Conference
- National Association of State EMS Officials (NASEMSO) Conference
- NATA Meeting
- National Fire Protection Agency Meeting
- Pediatric Life Support Collaborative Meeting
- Special Operations Medical Association's Scientific Assembly (SOMSA)
- Transportation Safety Advisory Group Meeting

■ NAEMSP®/Physio-Control EMS Medicine Medical Director Fellowship

The 2016-2017 Physio-Control Fellow was Dr. Andrew Latimer. Andrew is completing his residency in Emergency Medicine at the University of Cincinnati and will conduct his EMS Fellowship at the University of Washington in Seattle.

■ President's Awards

This year we presented a new award. The President's Award is an honor bestowed on a member or members of NAEMSP® who have demonstrated exceptional commitment to our organization in creating new initiatives or furthering the work of the organization. This award recognizes individuals for work completed in the previous year.

Dr. Darren Walter and **Dr. Jose Cabanas** worked together to create a brand new effort for our organization. Over the last year, they have attended innumerable conference calls and toiled late into many nights to create our International EMS Medical Director's Course. This is the beginning of a rapidly expanding international outreach effort and we could not have gotten it off to a better start.

Dr. Julie Houle developed creative partnerships and new initiatives to further our efforts in rural EMS.

Ronald D. Stewart Award – Drew Dawson and Dr. Justin Maloney

This award is given annually to a person who has made a lasting, major contribution to the national EMS community. This year there were TWO recipients of this award.

Drew Dawson is no stranger to NAEMSP®. His decades of leadership in EMS both at the state as well as the federal level have created enormous change in the practice of EMS medicine. As a former EMT, as a state EMS director, and as director of Office of EMS for NHTSA, he was instrumental in working with federal partners to provide coordinated support to the EMS community, both at the state and local level. When he recently retired, he said: "Our job here as one of the Federal agencies focused on EMS is to work on major projects to improve the care of patients throughout the nation. I never forget that the patients are at the center of everything we do."

Dr. Justin Maloney is one of the true pioneers and visionaries of EMS in Canada. Over his 25+ years as a medical director, his involvement in the creation of the Ontario 911 system, community PAD and CPR programs, specialty EMS teams, high school CPR programs, and promotion of cutting edge research he has driven lasting change not only in Canadian EMS but across the globe as well.

■ Keith Neely Outstanding Contribution to EMS Award – Dr. Alex Isakov

This award is presented to an active or past member of NAEMSP® who has provided significant leadership to the association and is named after the late Keith Neely, the first non-physician member to serve on the NAEMSP® Board of Directors.

Dr. Alex Isakov was recognized for his tireless work to improve the EMS community's preparedness and competency to manage and transport patients with serious communicable diseases and for his leadership at NAEMSP and nationally on this subject.

■ Friends of EMS Award – National Association of Emergency Medical Technicians (NAEMT)

The Friends of EMS award is presented to an individual or organization that has been an advocate in furthering NAEMSP's mission through influencing or implementing national public policy. This year's recipient was recognized for dedication and efforts to NAEMSP® and the EMS community.

NAEMT has been a leader for decades representing EMS providers, providing creative and much needed education, advocating with our political leaders, and creating the vision for the future of EMS. This organization has been a valued partner to NAEMSP® in furthering our mission of providing leadership and fostering excellence in the subspecialty of EMS Medicine.

2016 Abstract Awards

■ Best Scientific Presentation

COMPARISON OF THE PERFORMANCE OF PREHOSPITAL SYSTOLIC BLOOD PRESSURE VERSUS CALCULATED MEAN ARTERIAL PRESSURE IN PREDICTING MORTALITY IN MAJOR TRAUMATIC BRAIN INJURY

Daniel W. Spaite, *Arizona Emergency Medicine Research Center, University of Arizona*; Chengcheng Hu; Bentley J. Bobrow; Vatsal Chikani; Duane Sherrill; Bruce Barnhart; Joshua B. Gaither; Kurt R. Denninghoff; Chad Viscusi; Terry Mullins; Rogelio Martinez; P. David Adelson

■ Best Student/Resident/Fellow Research Presentation

EVALUATING THE COST AND UTILITY OF MANDATING SCHOOLS TO STOCK EPINEPHRINE AUTO-INJECTORS

Chelsea Steffens, *Chicago Medical School*; Benjamin D. Clement; William Fales; Robert Swor

■ Best EMS Professional Research Presentation

CAN PARAMEDICS DRAW UNCONTAMINATED BLOOD CULTURES PRIOR TO PREHOSPITAL ANTIBIOTIC ADMINISTRATION?

Jason G. Walchok, *Greenville County EMS*; Martin E. Lutz; Colt F Shope; Greta Gue; Douglas Furmanek; Ronald G. Pirrallo; Aaron C. Dix

■ Best Poster Abstract Presentation

TRUE PUBLIC ACCESS DEFIBRILLATOR COVERAGE IS OVERESTIMATED

Christopher L. F. Sun, *University of Toronto*; Derya Demirtas; Steven C Brooks; Laurie J. Morrison; Timothy C. Y. Chan

■ Best Cardiac Arrest Presentation – Sponsored by 

EFFECT OF AN IMPEDANCE THRESHOLD DEVICE ON ETCO2 IN OUT-OF-HOSPITAL CARDIAC ARREST IN A SYSTEM USING MODIFIED MINIMALLY INTERRUPTED CPR WITH CONTROLLED RATE

David G. Chase, *Ventura County Fire Department, Ventura County Medical Center, Ventura City Fire Department*; Chad Panke; Robin Shedlosky; Scott Zeller; Angelo A. Salvucci

■ Best Disaster Presentation

Sponsored by National Disaster Life Support Foundation



SERIOUS PLAY: FEEDBACK TO IMPROVE A DISASTER TRIAGE VIDEO GAME

Thomas P. Aviles, *Yale University*; Marc Auerbach; Mark X. Cicero

■ Best Pediatric Presentation

PREHOSPITAL INTUBATION IN THE PEDIATRIC PATIENT ACROSS AN ENTIRE STATE

Christopher T. Higgins, *Wake Forest Baptist Medical Center*; Robert Nelson; Simon Mahler; Stacie Zelman; James Winslow; William Bozeman



Chapter Report

Oregon NAEMSP® Chapter

Oregon NAEMSP Chapter Officers:

Erin Burnham, MD - President

William Reed, MD - Vice-President

Paul Rostykus, MD - Immediate Past President

Jonathan Chin, Paramedic - Secretary-Treasurer

2016 Activities/meetings:

- Resuscitation Academy - May 12 – 13th, 2016 – Hood River, Oregon
- Oregon EMS Conference
September 22 – 23, 2016 – Bend;
EMS Medical Directors Forum and ONAEMSP Chapter meeting. Topics of discussion included:
 - Clinical
 - C-spine immobilization protocols
 - Prehospital use of Ketamine
 - Compression Only CPR in EMS
 - Airway Issues:
 - Impedence Threshold Device
 - Alternate airways including I-Gel, LMA & King
 - Peds airways
 - Video Laryngoscopy in EMS
 - Sepsis Protocols
 - Administrative
 - Setting up statewide Non-trauma systems of care - Stroke, STEMI, Sepsis, Cardiac Arrest
 - Legislative advocacy for EMS issues
 - Oversight of out-of-state agencies - eg Wildland Fires, Dams
 - Public Access AED
 - OMB Advisory committee - recommendations regarding scope of practice
 - Medical Director Issues
 - Pay
 - Workload

2017 meetings:

- Oregon Medical Directors Forum and ONAEMSP Chapter meeting - Thursday March 9 - Friday March 10th, Ashland, OR
- Oregon EMS Conference – September 22-23, 2017 – Bend, OR; EMS Medical Directors Forum and ONAEMSP Chapter meeting.

Questions regarding the Oregon Chapter should be directed to:

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The Dalles, OR 97058
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SAVE THE DATE



2018 ANNUAL MEETING

January 8-13, 2018
Manchester Grand Hyatt
San Diego, CA



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www.NAEMSP.org

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.