

ANUALREPORT



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PRESIDENT'S MESSAGE

I am pleased to provide the introduction to National Association of EMS Physicians' 2009 Annual Report. It provides a meaningful overview of the extent of NAEMSP®'s efforts to foster excellence in out-of-hospital emergency medical services and the extent to which a broad representation of our membership is engaged in these efforts. The year 2009 brought unprecedented opportunities and challenges for our organization, and we have met them with enthusiasm.

Our year started, as is our tradition, with our annual meeting, which was held in January in Jacksonville, Florida. There were many highlights, and the program committee ensured that new conference offerings were included. Once again, NAEMSP® benefited by being the sort of meeting venue where thought leaders and decision-makers come together to share ideas, generate new ones, and unveil new innovations and initiatives. Not among the highlights, however, was the actual venue. Our management team and the Board of Directors do not underestimate the importance of our meetings' locations and facilities to facilitate the sorts of education and networking that are synonymous with NAEMSP®. They worked expeditiously to evaluate options that would relieve us of an obligation to return to the same venue in two years. The result, as indicated in the future meetings listing, is that our plans for the 2011 Annual Meeting have changed to Bonita Springs, Florida.

We are all well-aware of global economic challenges. Of course, NAEMSP® is not immune, and this was a principal concern when the Board of Directors met in June to review our budget plans for the fiscal year that began in July 2009. With some wisdom and luck, NAEMSP® has fared better than many while still maintaining association priorities and making programmatic investments. A key priority for this year was to avoid membership dues increases, ensuring ongoing value for our members. In order to stay the course, we determined that small amounts of the association reserves were appropriate to be used. After all, that's what the funds are reserved for. Naturally, we look forward to and anticipate a return to growth in the near future.

One of NAEMSP®'s most important opportunities in recent years has been the development of a proposal to designate emergency medical services as a physician subspecialty. That work culminated early in the summer as the completed proposal was delivered to the American Board of Emergency Medicine. This truly was a momentous accomplishment that resulted from diligent and collaborative work by dozens of people, synergy between NAEMSP® and the American College of Emergency Physicians, and sage guidance from the staff of ABEM. Along the way, NAEMSP® spent considerable human and financial resources to ensure the proposal's quality. For so many reasons, this represented a natural opportunity for investment. So far, the investment seems to be having its desired effects. Every major emergency medicine organization offered its support for the proposal. The proposal then became the basis of an application from ABEM to the American Board of Medical Specialties to sponsor the new subspecialty. As 2009 draws to a close there is much work left to be done, but we expect the appropriate ABMS committee to provide its first review of the application during its winter 2010 meeting.

Earlier this decade NAEMSP®, with the National Association of State EMS Officials, was a founding partner of Advocates for EMS. The sponsoring organizations now also include the National Association of EMTs and the National Association of EMS Educators. Many other organizations, groups, industry partners, and individuals support Advocates. From my perspective, Advocates serves an incredibly important role in at least two ways. It represents a unified voice for EMS issues, and it helps to ensure that EMS's issues are addressed in federal legislative agendas. During the past year, for example, Advocates, through its lobbying partner, helped ensure ongoing funding for NEMSIS, reporting of communicable disease contact by EMS personnel, and availability of public safety officer benefits to EMS providers employed by non-profit, but necessarily governmental, agencies. These are important initiatives related to EMS excellence in the form of quality and human resources. Also, during the past year, NAEMSP® has been part of crucial planning in terms of Advocates administration and how its sponsor organizations relate to each other. 2010 will start a new era as the organization's management and lobbying efforts will be consolidated with a new firm with a strong track record, Holland and Knight, LLP.

Throughout the year NAEMSP® has been invited to and represented at numerous meetings of other organizations and projects. The relationships we develop and maintain through meaningful collaborations allow our organization to further its goals of responsibly advocating and working toward excellence in EMS on many fronts. Further, it is gratifying to realize the extent to which NAEMSP® helps to serve as a collective voice for EMS medical direction and the people who provide it. Such a voice [at the table] is crucial to creating a future for EMS that best serves our communities.

The year 2010 is sure to be even more engaging. Again, we will lead off with the NAEMSP® Annual Meeting, which will be preceded by an ambulance safety summit. We will work toward a strategy for developing association chapters that can facilitate networking and innovation on regional bases that make sense. We will continue to ensure that opportunities for all members abound within NAEMSP® committees and task forces. As the rest of the report indicates, it is NAEMSP®'s members and their involvement in all facets of the organization's initiatives that gives NAEMSP® its vitality and its credibility.

Finally, NAEMSP® is indebted to our management team at Applied Measurement Professionals. Jerrie Lynn Kind, NAEMSP®'s executive director, and her entire staff make most of what we do possible. We thank them.

A N N U A L R E P O R T

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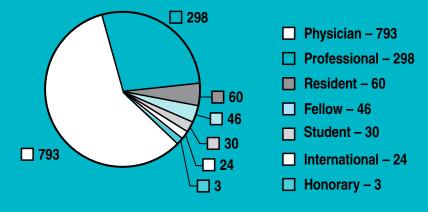
NAEMSP[®] YEAR IN REVIEW

During 2009, NAEMSP®:

- Celebrated its 25th anniversary of leadership in EMS.
- Held its annual Specialty Workshops, Scientific Assembly and Trade Show in Jacksonville, Florida with over 500 attendees.
- Offered complimentary six-month membership to potential members.
- Board of Directors implemented our new investment policy with our new investment managers, HL Zeve Associates, Inc..
- The Board published four new organization position statements and approved two more.
- Worked with ABEM to draft the application for EMS as a subspecialty of Emergency Medicine. Based on this draft, ABEM has moved forward with a subspecialty application to the American Board of Medical Specialties.
- Completed external financial audit and currently in good standing.
- Published its 13th volume of Prehospital Emergency Care, including 560 pages. The January issue included a record of 135 abstracts.
- Elected, via electronic Internet voting, three physician members-at-large, and one professional member who commence office in January 2010.
- Published our new, four volume textbook: Emergency Medical Services: Clinical Practice and Systems Oversight.
- Conducted one regional NAEMSP[®] Medical Direction Overview Course[™].
- Conducted a modified NAEMSP[®] Medical Direction Overview Course[™] as a pre-conference to the Asian Conference on Emergency Medicine (ACEM).
- Provided liaisons and representatives to dozens of organizations and EMS-related activities and conferences.
- Presented our first ever NAEMSP[®] Advanced Topics in Medical Direction[™] Pre-Conference.
- Negotiated contracts for the 2011 and 2013 Annual Meeting at the Hyatt Regency Coconut Point in Bonita Springs, Florida.
- Negotiated Contracts for the 2012 and 2014 Annual Meeting at the JW Marriott Starr Pass Resort and Spa in Tucson, AZ.

MEMBERSHIP

NAEMSP®'s membership has been stable over recent years. As of June 30, 2009 there were 1254 members. The following graph details the various membership categories.



MISSION STATEMENT

The National Association of EMS Physicians[®] is an organization of physicians and other professionals partnering to provide leadership and foster excellence in out-of-hospital emergency medical services.

A N N U A L R E P O R T



■ Air Medical Service Ad Hoc Committee Douglas J. Floccare, MD, MPH - Chair Lynthia B. Andrews Steve Andrews Jonathan D. Apfelbaum Craig Bates David Ben-Eli Eric Bentlev Michael Clark M. Riccardo Colella Thomas E. Collins, Jr. Craig W. Cooley Jack B. Davidoff Jean-Claude Deslandes Harinder Dhindsa Melissa J. Doherty James Fitch Douglas J. Floccare R.J. Frascone David French **Gregory Fuller** C. Wayne Gallops Garth A. Gemar Robert B. Genzel Robert T. Gerhardt Jay M. Goldman Glenda Grawe Mark Greenwood Daniel G. Hankins Jeff Hillesland **Bill Hinkley** Joseph E. Holley Alexander P. Isakov Vimal S. Kapoor Jan R. Kornilow Michael J. Leicht George Lindbeck Jeffrev Lubin Russell D. MacDonald John F. Madden Dawn M. Mancuso Sarah Nafziger Todd A. Nelson David A. Petrie Frank S. Pettyjohn Anthony M. Raffino James J. Rifino, Jr. Ritu Sahni David J. Schoenwetter Lalainia M. Secreti Charles W. Sheppard Harry Sibold Irvin E. Smith Sunil Sookram David F.E. Stuhlmiller Eric R. Swanson David P. Thomson Stacy N. Weisberg Howard Werman

Ken Williams Garv Winarove Roy K. Yamada Scott P. Zietlow Dale Yeats

Asian Relations Ad **Hoc Committee** Sang Do Shin, MD, PhD and Marcus Ong, MD,

MPH - Co-Chairs Hyung Sub Won (Korea) Won Chul Cha (Korea) Kyoung Jun Song (Korea) Chris Knutsen Ju Ok Park Chris Martin-Gill Kyung Won Lee (Korea) Chrissy Vandulen Seung Chul Lee (Korea) Colleen Buono Jae Kwang Kim (Korea) David Hirsch Dai-Hai Choi (Korea) Derek Cooney Hideharu Tanaka (Japan) Derek Isenberg Kentaro Kajiho (Japan) Frank Guyette Matthew Huei-Ming Ma Jason Carter (Taiwan) Jason Liu Chih-Hao Lin (Taiwan) Jay Reich Nik H. Rahman (Malaysia) Jeff Ferguson William, Wina-Keuna Jeff Lubin Woo (Hong Kong) John Brown Sonchai Kanchanasat John Lyng (Thailand) John Serra Pairoj Khruekarnchana Jonnathan Busko (Thailand) Jose Cabanas Benjamin Leong Mazeu El Sayed (Singapore) Melissa White Francis Mencl (USA) Mike Millin Trace Skeen (USA) Noel Wagner David C. Cone (USA) Paul Barbara Steve Murphy (USA) Roger Stone Ron Pirrallo (USA) Ron Pirrallo Darren Walter (UK) Ron Roth Ritu Sahni (USA) **Rosalyn Reades** Sonia Chacko

- Canadian Relations Stacy Weisberg Ad Hoc Committee William Gilmore Andrew H. Travers, MD, MRc, KRCPC Emergency
- Communications Committee James M. Cusick, MD and Cai Glushak, MD -**Co-Chairs**

■ Education Committee Carin M. Van Gelder. MD - Chair

Beth Adams Jonnathan M. Busko Debra Cason Ritu Sahni Robert Swor Laura L. Walker

C O M M I T T E E S

Committee Participation

Drew Dawson

Tasmeen Singh

Richard Bradlev

Lawrence Brown

International Affairs

Darren Walter, FRCS,

FCEM, DipIMC - Chair

Ad Hoc Committee

Jane Brice

■ EMS Fellow and Fellowship Graduates Dan Kavanaugh Ad Hoc Committee Jeff Lubin, MD, MPH -Chair Alix Carter

Andreia Maraues-Baptista Ben Lawner Bob Gerhardt Brian Clemency Brian Walsh Carin Van Gelder

Membership Committee Michael Curtis, MD Operational EMS Ad

Hoc Committee

- Chair Sonia Chacko

Kathy J. Rinnert Andreia Marques-Baptista **Richard Schwartz** Marc Restucci **Bethany Cummings** Marc Gautreau **Bill Fales** Andrew Robert Kathryn Brinsfield Sandy Bogucki Carin Van Gelder Michael Millin William Hauda, II Jason Liu Anaelo Salvucci David Sole David Schoenwetter Curtis Sandy Steve Andrews Christopher Dong Phillip Coule Michael Hunter Allen Yee Paul Rostykus **Richard Kamin** Dave Hostler Chris Knutsen

Tony DeMond Gregg Lord William S. Gilmore Diana Neubecker Heather Coombs Alex Isakov Steve Bauer Kermit Heubner Charles Lane **Donald Phillips**

Pediatrics Ad Hoc Committee Andrew Garrett, MD -

Chair Teri L. Sanddal Tommy Loyacono Melissa Sally-Mueller Robert K. (Bob) Waddell Tasmeen Singh Holm Hennes Steve Andrews Catherine Young Ann Klasner Randy Geldreich Jim Callahan Brian Clothier Toni Gross

David K. Tan, MD, EMT-T Program Committee Kevin E. Mackey, MD,

FACEP - Chair **Beth Adams** Christopher Dong Colleen Buono Darren Walter David Slattery Francis Mencl Frank Guyette Jon Rittenberger Jose Cabanas Justin Malonev Manish Shah Marc-David Munk Paul Rostykus Sandy Bogucki Steve Andrews Susan McHenry Teri Sanddal

■ Public Health Ad Hoc Jan Jensen Committee James V. Dunford, MD, FACEP - Chair

Richard A. Bissell Jonathan L. Burstein Ka Wai Cheung Craig W. Cooley Arthur Cooper James V. Dunford Jay M. Goldman Jonathan S. Halpert Vimal S. Kapoor Christian Knutsen Ross E. Megargel Pan Shu Ming Marc-David Munk Ira Nemeth Anthony T. Ng Gina M. Piazza Carolyn A. Rinaca Paul S. Rostykus Chelsea C. White, IV

■ Research Committee Dave Owens Jon Studnek, EMT-P -Chair

Juan Acosta

Dug Andrusiek

Melissa Bentley

Morgen Bernius Colleen Bhalla Ian Blanchard Dan Bledsoe Scott Bourn Richard N. Bradley James Brewer Jane Brice Lawrence Brown Todd Brown Paula Burgess Jose Cabanas David Cheng **Brian Clemency** David Cone Alan Craig Kelly Curry Michael Dailey Judith Domanski **Bob Domeier** Nicholas Eschmann Terry Fairbanks Antonio Fernandez John Garrett Alex Garza Jack Gough Glenda H. Grawe Randal Gray Toni Gross Amy Gutman Attila Hertelendy Aaron (Zach)Hettinger David Hostler Jeff Jensen Dan Kavanaugh Dan Lemkin Brooke Lerner Jason Liu **Russell MacDonald** Ronald Maio Clay Mann Juan March Grega Margolis Susan McHenry Jason McMullan Francis Mencl Paul Middelton Aaron Monnia Brian Moore Vincent Mosesso Jeff Myers Peter Nagele Diana Neubecker Williams Northington Robert O'Connor **Richard Orr**

Daniel Patterson Prasanthi Ramanujam David Rand **Rosalyn Reades** Erik Rueckmann Angelo Salvucci Joshua G.Salzman

Rural EMS Ad Hoc Committee Teri L. Sanddal, EMT-B -Chair

Standards & Clinical **Practice Committee** Michael Millin, MD -Chair **Beth Adams** Steve Andrews Brvan Bledsoe Daniel Bledsoe Sandy Bogucki James Brewer Chuck Cady Jeff Clawson Ricardo Colella David Cone Derek Cooney Mike Dailey **Bob Domeier** Francis Guyette **Rick Hunt** Jan Jenson Doug Kupas Nadine Levick Ross Megargel Michael Millin Jeff Myers Diana Neubecker Jay Reich Kathy Rinnert Ron Roth Ritu Sahni Jeffrey Salomone Brian Schwartz Lars Threstrup Darren Walter Henry Wang Keith Wesley Arthur Yancey Ryan Jacobson

Technology Ad Hoc Committee Ian B. Greenwald, MD -Chair

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Preparedness Ad Hoc Randy Geldreich Sandy Boaucki, MD,

Saussy, MD – Co-Chairs ■ Finance Committee Ritu Sahni, MD, MPH -Development Ad Hoc Craig Warden E. Brooke Lerner, PhD -Susan McHenry

Committee

PhD and Jullette

Committee

Chair

Chair

Allen Yee



OMMITTEES

Committee Highlights

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

Asian Relations Ad Hoc Committee

- Korean Society of Emergency Medicine and the National Association of EMS Physicians co-hosted the EMS medical direction overview course in 5th Asian Congress on Emergency Medicine in Busan Korea.
- Thirteen instructors (from USA, Japan, Taiwan, Singapore, Thailand, Malaysia, and Korea) lectured and there were 48 participants. This was the first EMS direction overview course was the first one in Asia.
- Formed the Asian EMS Council (AEMSC), consisting of individual-based, communityfocused physicians actively involving in EMS and prehospital care medicine. The following were elected to the inaugural board: Chair: Sang Do Shin, Vice Chair: Marcus Ong, Secretary: Jae Kwang Kim, Board members: Pairoj Khruekarnchana, William Woo, Nik H Rahman, Matthew Ma, Hideharu Tanaka; and advisory members: Dr. Ron Pirrallo, Dr. Ritu Sahni, and Dr. David Cone
- Proposed a comparative study of Asian EMS.
- Discussed planning a Pan-Asian Resuscitation Outcome Study. (PAROS) To enhance collaboration. The kick-off meeting of PAROS will be held in 2010 annual meeting of NAEMSP®, committee meeting in Phoenix AZ.
- The AEMSC will take part in the 2010 International Finalized resource document in support of Congress on Emergency Medicine (ICEM) in Singapore, and the 6th ACEM in Thailand in 2011.

EMS Fellow and Fellowship Graduates Ad Hoc Committee

- Updated the NAEMSP[®] web site listings of EMS fellowship programs.
- Recruited participants to help in the review of a prehospital trauma textbook and advanced medical life support text that NAEMSP® was asked to endorse.
- Began initial work to create an "EMS Essentials" book for EM residents to use during their EMS rotations.

Program Committee

- 1st ever membership survey assessing what our NAEMSP® members would like presented at the annual conference. This survey resulted in the creation of the "Member Select" series of presentations at the 2010 NAEMSP® Annual Conference.
- Designed the 2010 Annual Conference complete with presentations by five of the world's leading EMS investigators; concurrent sessions focusing on EMS Management, Research and Thinking

Outside the Box; and five exciting preconference activities including research, medical directors courses, an Ambulance Safety seminar, and back by popular demand, Operational EMS 101!

Education Committee

- Initial meeting held January, 2009
- Coordinating course offerings by NAEMSP[®]
 - EMS Medical Directors Course (3-day)
 - Advanced Topics in EMS Medical Direction (1-dav)
 - Medical Director Overview Course .
 - **Research Course** •
 - Others
- Ongoing responsibilities
 - Interface with Program Committee to identify redundancies and gaps in educational content
 - Target faculty and attendees appropriately
 - Improve content of products
- Developed EMS Curriculum for presentation at 2010 CORD meeting in conjunction with Special Operations

Operational EMS Ad Hoc Committee

- Developed the 2010 pre-conference workshop Operational EMS 101 hosted by the Phoenix Fire Dept.
- new position statement: Medical Direction of Operational EMS Programs. The new statement will be reviewed by the NAEMSP® Board of Directors for approval.
- Developing new position statement on resuscitation of cold water submersion victims.
- Received Board permission to develop EMS liaison with the International Association of Chiefs of Police (IACP).
- Worked in conjunction with the Education Committee in developing standardized EMS curriculum for residency programs. This work has been accepted for presentation at the March 2010 Council of Residency Directors (CORD) conference in Florida.

Public Health Ad Hoc Committee

- Advocated for the inclusion of sudden cardiac arrest (SCA) as a reportable public health event.
- Recommended that Healthy People 2020 incorporate the Cardiac Arrest Registry to Enhance Survival (CARES) so communities can measure and benchmark their survival from SCA.
- Suggested the inclusion of a session on "frequent" users of EMS" to the Planning Committee for the 2010 Annual Meeting.

Air Medical Ad Hoc Committee

- Provided input to the development of a HEMS Industry Risk Profile by Aerosafe Risk Management, as published by Flight Safety Foundation.
- Provided input to the FAA in the development of a training module for First Responders on Special Hazards in Response to Small Aircraft/Helicopter Crashes.
- Initiated a review of existing NAEMSP[®] position papers relating to Air Medical Services with regard to need for updating or reaffirmation.
- Initiated a dialogue with the ACEP EMS Committee, the AMPA Board, and the ACEP Air Medical Section to develop a unified physician voice in the development of auidance for utilization of air medical resources.
- Held a mid-year committee meeting at the Air Medical Transport Conference in San Jose.

Standards and Clinical Practice Committee:

Position statements published in PEC: 2009

- Equipment for ambulances
- Expert witness qualifications and ethical guidelines for issues related to emergency medical services litigation
- Prehospital resuscitated cardiac arrests: role for induced hypothermia
- On-site helipads

Position statements approved but not yet published

- Medical direction for operational EMS programs
- Role of EMS in disaster response (resource document)

Position statements in development

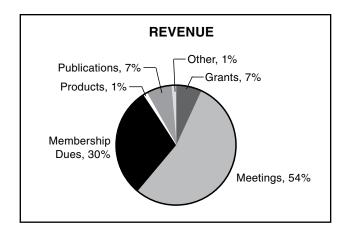
- Non-invasive positive pressure ventilation
- Medical direction for operational EMS programs (resource document)
- Management of hemorrhage
- Emergency transport
- Management of cervical spine injuries
- Patient restraint
- Numerous air medical papers
- Ambulance diversion and ambulance off load
- Infection control
- Appropriate use of epinephrine for anaphylaxis and asthma
- Transportation safety
- Implementation of field triage for trauma protocols

ANNUAL RFPORT





The following charts indicate sources of revenue and expenses for NAEMSP® through the fiscal year that ended June 30, 2009.

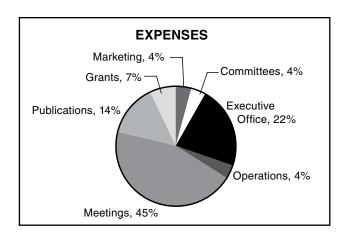


The economy. That has been the topic of discussion over last couple of years. The economy has affected NAEMSP® as well. For the first time in memory, the NAEMSP® ended the year with a net loss. How did this happen? Revenue for the 2009 Annual Meeting came in lower than expected. In addition, the Board of Directors made the decision to use reserves to fund the workgroup that developed the first draft of ABEM's application for an EMS subspecialty. This was a key investment for the future of EMS Physicians and our Association. Finally, although we keep our investments in reserve, unrealized gains and loss make their way onto our operations report. The good news is that our management team from Applied Measure Professionals (AMP) was able to work hard and keep expenses down. The net result was a year that saw just over \$11,000 in the red. While disappointing, NAEMSP® clearly did better than similar organizations.

Moving forward, we have a prepared a budget that plans for a lean year, but are optimistic that we will see growth. We are entering our second year with our investment partner, H.L. Zeve Associates and have been impressed with their responsiveness and expertise.

The 2009 Annual Meeting in Jacksonville, Florida was well attended and strong meeting management meant that the meeting was still financially successful. The Board was able to use the experience from Jacksonville to be released from the property in 2011 and negotiate a new contract at the Hyatt Coconut Point for 2011 and 2013. Membership revenue actually came in slightly above budget. To this end, NAEMSP[®] has not raised dues for many years and 2010 will be no exception; your membership dues will remain the same. We hope this serves as further proof that membership in NAEMSP[®] remains valuable.

Identifying opportunities for revenue is very important. Chief among them has been a number of grants and contracts that NAEMSP® has completed. While each has associated expenses, it still makes a positive contribution to the bottom line. Further, there are many intangible benefits, including opportunities for member involvement in meaningful and rewarding projects which builds NAEMSP®'s reputation and furthers its credibility.



Statements of Financial Position June 30, 2009 and 2008		
ASSETS		
Current Assets:	<u>2009</u>	<u>2008</u>
Cash	\$453,645	\$ 82,675
Certificate of deposits		393,349
Investments	370,684	392,573
Accounts receivable – general	11,437	8,397
Accounts receivable – grants	25,082	29,907
Due to/from AEMS	3	
Inventory	9,214	7,747
Prepaid expenses	9,603	9,300
Total Current Assets	\$879,668	\$923,948
Property and Equipment:		
Office equipment and furniture	10,899	10,899
Less accumulated depreciation	(10,614)	(10,399)
Net Property and Equipment	284	500
Total Assets	<u>\$879,953</u>	<u>\$924,448</u>

NAEMSP® benefits tremendously from the expertise of its management firm, AMP. The organization is starting its fourth year of a 5 year long-term contractual relationship with AMP. The result has been association management that is stable and costs less than 25% of NAEMSP®'s expense budget. At this time, we have entered into an agreement to continue our partnership with AMP for another 5 years.

NAEMSP®'s financial health is sound even in this current recession. The financial position and records of NAEMSP® as of June 30, 2009, 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 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.

> A N N U A L R E P O R T



GRANTS AND CONTRACTS

FEDERAL GRANT CONTRACTS/COOPERATIVE AGREEMENTS Terrorism Injuries: Information Dissemination and Exchange (TIIDE 2):

Identifying & Disseminating Best Practices by Collaboration of Public Health & the EMS

In 2007, NAEMSP[®] was awarded a cooperative agreement by the Centers for Disease Control and Prevention in the amount of \$70,000 that continues the work of the first TIIDE project. The total project period of the cooperative agreement runs from September 1, 2007 to August 31, 2010. NAEMSP[®] was awarded \$70,000 again in 2008 for work on year two of this cooperative agreement and has also been approved for \$70,000 to fund the upcoming work for year three.

Principal Investigator, Richard Schwartz, MD, along with Co-Principal Investigator Brooke Lerner, PhD and Robert O'Connor, MD, MPH completed work on the first two years of this project.

The objectives of this project are to: (1) identify at least two model communities, (2) develop evidence-based, user friendly products to address model community recommendations, mass triage review findings, and blast lessons learned findings, (3) develop additional products as directed by the CDC, (4) develop a system for disseminating timely and evidence-based information related to injuries resulting from terrorism and mass casualty events, (5) develop, disseminate, and evaluate at least one training course, and (6) develop a minimum dataset for disseminating information on mass casualty incidents for the purpose of evaluation and sharing lessons learned.

To date, the following has been accomplished on this project:

Mass Casualty Triage Project Update

The primary focus this year has been on mass casualty triage. Work in previous years led to the development of a proposed national guideline for mass casualty triage which is called SALT Triage. This year we have worked to provide information on SALT to the emergency care community, provide SALT Triage training materials, worked toward better national consensus and development of Model Uniform Core Criteria for mass casualty triage.

The Mass Casualty Triage Project that developed the proposed national guideline for mass casualty triage was always considered a start but our goal for this funding period was to achieve wider national consensus. We continued to work with our partners at the CDC and other endorsing and non-endorsing organizations to clarify and further develop our next steps for obtaining wider national consensus. What we determined is that we needed to develop what will be called "Model Uniform Core Criteria for Mass Casualty Triage." The Model Uniform Core Criteria will be a list of standards that would allow any existing triage system to be brought up to the level of our proposed national guideline. That is we would identify the key components that a triage system should include to meet the proposed national guideline.

This year we solicited members for a second workgroup whose mission will be to develop the core criteria list and another position paper. Building on the work that has already been completed and resulting in more organizations endorsing the national guideline concept. The members of the original workgroup were invited to participate again along with the endorsing organizations, current TIIDE partners, and NASEMSO, NAEMT, NAEMSE, NAEMSM and AAP to provide representatives for the workgroup. We now have a 28 member workgroup that represents 11 national organizations. We also have identified a liaison from FICEMS to oversee and participate in the process. Our first meeting will be in October 2009.

Publications: This year we contributed to a number of publications regarding SALT triage. The publications include: Position Paper:

SALT Mass Casualty Triage. Disaster Medicine and Public Health Preparedness. 2008; 4(2):245-246.

Background Paper:

Lerner EB, Schwartz RB, Coule PL, Weinstein ES, Cone DC, Hunt RC, Sasser SM, Liu JM, Nudell N, Wedmore IS, Hammond J, Bulger EM, Salomone JP, Sanddal TL, Lord GC, Markenson D, O'Connor RE: Mass Casualty Triage: An Evaluation of the Data and Development of a Proposed National Guideline. Disaster Medicine and Public Health Preparedness 2008, 2 Suppl 1:S25-34

Chapters:

- Kahn CA, Lerner EB, Cone DC: "Disaster Triage" Koenig's Disaster Medicine (in press)
- Lerner EB, Schwartz RB, McGovern JE, Prehospital Triage For Mass Casualties In Cone DC, O'Conner RE, Fowler R (Eds.): Emergency Medical Services: Clinical Practice and Systems Oversight. Vol.4, 2009: National Association of EMS Physicians. pg. 11-5
- Schwartz R, Lerner EB: Part 1: Operational Issues: Triage in Mass Casualties (MASCAL). In Special Operations Forces Medical Handbook 2nd Edition. 2008: U.S Government Printing Office section 1, pg. 4-7
- Lerner EB, Schwartz R: Principles of Disaster Triage. In Reilly M, Markenson (Eds.): Healthcare Emergency Management: Principles and Practice (In Press)
- Core Disaster Life Support Provider Manual, American Medical Association (in press)





GRANTS AND CONTRACTS

Letters to the Editor:

Lerner EB, Schwartz RB, Coule PL, Weinstein ES, Cone DC, Hunt RC, Sasser SM, Liu JM, Nudell N, Wedmore IS, Hammond J, Bulger EM, Salomone JP, Sanddal TL, Lord GC, Markenson D, O'Connor RE:Response to Letter from Mr. Oleg Zaslavsky. Disaster Medicine and Public Health Preparedness 2009; 3(2):71-72

Cover photo with caption

Disaster Medicine and Public Health Preparedness (in press)

Development of SALT Training Materials: The training slides have been presented to a number of organizations for feedback and were updated accordingly. They have also been pilot tested during two Basic and two Advance Disaster Life Support Courses. We have also used them as the basis for providing educational training to the National Disaster Life Support Educational Consortium, NASCAR, Milwaukee County EMS, the Michigan statewide Homeland Security Conference, Society for Academic Emergency Medicine Annual Meeting, and many others. We have provided the slides freely to all interested party and have received numerous requests from across the country. We also have assisted Milwaukee County in implementing SALT triage across the county by assisting them in developing educational materials for their providers and incorporating SALT into their standard protocols.

Model Communities Project

NAEMSP® has led the Model Communities Project for the TIIDE partners. We worked with the TIIDE partners to widely distribute a call for model communities and received 15 model community applications. The applications were reviewed and 7 communities were selected because they were models of collaboration between public health and the emergency care community and demonstrated unique approaches to leveraging funds and resources across agencies. The 7 selected communities participated in a facilitated panel discussion at our annual meeting in January 2009. The workgroup developed a list of questions for the panel, which were discussed and answered during the meeting. The workgroup is now in the process of developing a manuscript on the discussion so the findings on communities' financial leveraging can be shared with a broader audience. This information will be useful to other communities so they can learn about how other communities are able to leverage funds and resources among their different agencies

Ambulance Safety Project

In 2009, NAEMSP[®] was awarded an unrestricted educational grant by Zoll Medical in the amount of \$62,000 and an unrestricted grant from Physio-Control in the amount of \$10,000. The total project period of the grant runs from July 1, 2009 to May 1, 2010.

Principal Investigator, Jane H. Brice, MD, MPH

The objectives of this project are to: (1) develop a writing team, (2) review the current literature, (3) conduct a conference of expert and stakeholders, (4) write a "white paper" on the safety of caring for and transporting patients by ambulance.

To date, the following has been accomplished on this project:

- The work has been divided into three content areas and a pair of content experts for each section of the work has been assembled. The writing team consists of:
 - 1) Jane H. Brice MD, MPH, Lead
 - 2) Catherine Custalow, MD, PhD Vehicle and driver safety
 - 3) Christopher Martin-Gill MD Vehicle and driver safety
 - 4) Jonathon Studnek PhD Provider Safety
 - 5) Eric Hawkins MD Provider Safety
 - 6) Laurie Morrison MD Patient Safety
 - 7) Blair Bigham MSc Patient Safety
- A complete review of the current literature has been prepared.

Upcoming activities include:

- A two-day conference will held January 5 and 6, 2010.
- A White Paper document will be completed within six months of the conference.



PUBLICATIONS

Prehospital Emergency Care (PEC)

Editor Report

- 2009 saw the completion of Volume 13 of Prehospital Emergency Care. The volume had 560 pages. The January issue contained a record number of abstracts, which were presented at the NAEMSP® Annual Meeting (135 abstracts).
- In April, the Spanish-language translation celebrated its first anniversary of publication. While PEC *Edicion Espanola* is presently only being distributed in Spain, plans to pursue distribution in other countries continue.
- In July PEC received its first **Impact Factor**, an impressive 1.248. This Impact Factor placed PEC as the **6**th most oft-cited Emergency Medicine journal out of the 13 that are rated by the ISI Web of Knowledge. PEC placed ahead of such well-established journals as American Journal of Emergency Medicine, Journal of Emergency Medicine, Pediatric Emergency Medicine, Journal of Emergency Nursing, and Emergency Medicine Clinics of North America. Our strategic plan is to move up one place in each of the next three years. In order to accomplish this, we will need the continued support of NAEMSP[®] members via submission of their best work to PEC.
- In September, PEC launched *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. In terms of peer-review, PEC now boasts an average time to first decision of 18 days.

Some of the highlights of Volume 13 included:

Special Contributions

Explosions and Radioactive Material: A Primer for Responders

Focus Sections

- Focus on STEMI
- Focus on the EMS Workforce
- Focus on Airway Management
- Focus on Cardiac Arrest (Twice)
- Focus on Trauma
- Focus on Helicopter EMS

Position Papers

- Equipment for Ambulances
- Expert Witness Qualifications and Ethical Guidelines for Issues Related to EMS Litigation

Collective Reviews

- The Hazards of Providing Care in Emergency Vehicles
- On-Site Helipads Resource Document
- Prehospital Resuscitated Cardiac Arrest Patients: Role for Induced Hypothermia

Case Conferences

For the first time in several years, each issue in the volume contained Case Conferences. 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.

NAEMSP® News

Under the direction of Cai Glushak, MD, NAEMSP®'s bi-monthly newsletter provides members with timely information and updates. In 2009, *NAEMSP® News* began publishing strictly online. It is available for download through our website.

Emergency Medical Services: Clinical Practice and Systems Oversight

Senior Editors David Cone, Raymond Fowler, and Robert O'Connor presented NAEMSP®'s textbook "Prehospital Systems & Medical Oversight" debuting at the 2009 conference in Jacksonville. The new title for the text highlights the substantial increase in clinical material, while maintaining the focus of the prior three editions on medical oversight. The text consists of four separate volumes:

Volume 1: Clinical Aspects of Prehospital Medicine. Section Editors: Henry Wang, Brian Schwartz, Ritu Sahni, and Jon Krohmer. This volume highlights the unique clinical body of knowledge that makes up EMS, with several updated chapters from the third edition of the text, plus a number of entirely new chapters on clinical topics such as head injury, stroke, infectious diseases, and domestic violence.

Volume 2: Medical Oversight of EMS. Section Editors: Bob Bass, Ted Delbridge, Mic Gunderson, and Jane Brice. This volume contains updated material from many of the chapters in the third edition of PSMO, as well as a number of new chapters on topics such as provider wellness, ambulance safety and crashes, and education of the EMS physician.

Volume 3: Evaluating and Improving Quality in EMS. Editors: Bob Swor, Ron Pirrallo, Brooke Lerner, and Lynn White. This volume includes all of the material from the existing second edition of "Improving Quality in EMS" (edited by Swor and Pirrallo), updated material from the "Research in Prehospital Care" supplement to the April 2002 issue of *Prehospital Emergency Care* (edited by Lerner and White), and a new chapter on performance indicators.

Volume 4: Special Operations Medical Support. Editors: William Hauda, Craig DeAtley, Sandy Bogucki. This entirely new volume contains material regarding the medical support needed for a variety of special operations fields, such as mass gatherings, urban search and rescue missions, and hazardous materials operations.

The complete four-volume set is available through our publisher, and serves as the textbook for the NAEMSP® National EMS Medical Directors Course & Practicum®. A searchable CD-ROM is available with each volume.

RFPORT



MEETINGS

2009 Annual Meeting

The 2009 NAEMSP[®] Annual Meeting: Specialty Workshops, Scientific Assembly and Trade Show was held at the Hyatt Regency in Jacksonville, Florida January 22-24, 2009. The meeting was chaired by Laura Walker who was assisted by all of the members of the Program Committee.

- Pre-conference sessions included the NAEMSP® National EMS Medical Directors Course and Practicum®, Research Course, a session on education and presenting and the first-ever NAEMSP® Advanced Topics in EMS Medical Direction.
- Faculty members provided more than 16 hours of didactic content and more than 5½ hours of research presentations.
- Guy Haskell, PhD, JD presented the C.J.Shanaberger Memorial Lecture and Keynote Address on the topic of Street Ethics.
- Over five hundred members, guests, and exhibitors attended the 2008 meeting
- Sixty-one exhibitors provided financial support for the association's education program by attending the Annual Meeting and purchasing exhibit space.

BOARD OF DIRECTORS

President Theodore R. Delbridge, MD, MPH

Term through January 2011

President-Elect

Ronald G. Pirrallo, MD, MHSA Term through January 2011

Secretary/Treasurer Ritu Sahni, MD, MPH Term through January 2011

Immediate Past President David C. Cone, MD Term through January 2011

Physician Members-At-Large Kathy Rinnert, MD Term through January 2010

Henry Wang, MD, MPH Term through January 2010

Charles E. Cady, MD Term through January 2010

Jane H. Brice, MD, MPH Term through January 2011

LTC John G. McManus, MD, MCR Term through January 2011 **Brian Schwartz, MD** Term through January 2011

During Fall 2009 the NAESMP membership elected the following individuals to the Board of Directors, each for a two-year term beginning January 2010:

Kathy Rinnert, MD Physician Member at Large;

Term through January 2012

Brent Myers, MD Physician Member at Large; Term through January 2012

James V. Dunford, MD, FACEP Physician Member at Large; Term through January 2012

David Hostler, MD Elected Professional Member at Large through January 2012

2010 elections will be held during the fall for three Physician Member-At-Large positions, President-Elect and Secretary/Treasurer positions.

Board of Directors Mid-Year Meeting

The Board of Directors held its mid-year meeting at NAEMSP® Global Headquarters in Olathe, Kansas.

Other Meetings

During 2008-09, NAEMSP® played important roles in sponsoring, planning or participating in other major meetings, including:

NAEMSP[®] Medical Direction Overview Course™

- Presented the NAEMSP[®] Medical Direction Overview Course[™] as a regional workshops in Maine.
- Presented a modified version of the course at the 2009 Asian Conference of Emergency Medicine (ACEM)

Liaisons Meetings

- SAEM Annual Conference
- ACEP Annual Symposia
- EMS Expo
- NASEMSO Annual Conference
- Asian Conference on Emergency Medicine
- CDC: In a Moment's Notice: Surge Capacity for Terrorist Bombings
- Disaster All-Hazards Training Core Competencies
- HEMS Industry Risk Reduction Plan
- Disaster Core Competencies Task Force (ACEP)
- ACS-COT Meeting
- EMS Workforce Stakeholders Meeting
- COPEM Meeting

Future NAEMSP® Annual Meetings

January 7-9, 2010	<u>Pointe Hilton Tapatio Cliffs Resort</u> Phoenix, Arizona
January 13-15, 2011	<u>Hyatt Regency Coconut Point Resort and Spa</u> Bonita Springs, Florida
January 12-14, 2012	<u>JW Marriott Starr Pass Resort and Spa</u> Tucson, Arizona
January 10-12, 2013	<u>Hyatt Regency Coconut Point Resort and Spa</u> Bonita Springs, Florida
January 9-11, 2014	<u>JW Marriot Starr Pass Resort and Spa</u> Tucson, Arizona

Executive Office Staff Listing

The NAEMSP® Executive Office and staff email address information is listed below for your reference.

General email address to reach staff: <u>Info-naemsp@goAMP.com</u> Executive Director: Jerrie Lynn Kind

Grants Project Director/Association Manager: Stephanie Newman

Association Manager: Monica Evans-Lombe Meeting Manager: Joyce Miller, CMP Administrative Assistant: Liz Paulk





REPRESENTATIVES AND LIAISONS TO OTHER ORGANIZATIONS

AAP Pediatric Education for Prehospital Professionals (PEPP) ACEP Task Force on Alternative Health Care Providers in Emergency Departments

Advocates for EMS (AEMS) - Founding Member Air Medical Physicians Association (AMPA) Air & Surface Transport Nurses Association (ASTNA) American Academy of Emergency Medicine (AAEM) American Academy of Pediatrics (AAP) American Ambulance Association (AAA) American Board of Emergency Medicine (ABEM) American College of Emergency Physicians (ACEP) American College of Surgeons (ACS) American Heart Association (AHA) Emergency Cardiovascular Care Committee (ECC) AMPS Air Medical Transportation Conference Association of Air Medical Services (AAMS) Brain Trauma Foundation (BTF) Basic Trauma Life Support International (BTLSI) Centers for Disease Control and Prevention (CDC)

Center for Medicare and Medicaid Services (CMS) ComCARE Alliance

Commission on Accreditation of Ambulance Services (CAAS) Commission on Accreditation of Medical Transport Services (CAMTS) Continuing Education Coordination Board for EMS (CECBEMS) E-911

Emergency Nurses Association (ENA) ENA Task Force on Interfacility Transfer Federal Emergency Management Agency (FEMA) Federal Interagency Commission on EMS (FICEMS) Health Resources and Services Administration (HRSA) International Association of Fire Chiefs (IAFC) International Association of Fire Fighters (IAFF) NAEMT Advanced Medical Life Support Course NATA Task Force on C-Spine National Academies of Emergency Dispatch (NAED) National Association of EMS Educators (NAEMSE) National Association of EMTs (NAEMT) National Association of State EMS Officials (NASEMSO) National Athletic Trainers' Association (NATA) National Fire Protection Agency (NFPA) National Flight Paramedics Association (NFPA) National Heart, Lung, and Blood Institute (NHLBI) National Highway Traffic Safety Administration (NHTSA) National Institutes of Health (NIH) National Reaistry of EMTs (NREMT) NSA Brain Attack Coalition Society for Academic Emergency Medicine (SAEM) United States Fire Administration (USFA)



NAEMSP® was pleased to recognize the following individuals at our awards luncheon in Jacksonville in January 2009:

Ronald D. Stewart Award

William W. Jermyn, DO (Awarded Posthumously)

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Keith Neely Outstanding Contribution to EMS Award Robert E. O'Connor, MD, MPH

Friends of EMS Award

Susan McHenry, MS – National Highway Traffic Safety Administration (NHTSA)

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NAEMSP-ZOLL EMS Resuscitation EMS Fellowship for 2009-11 has been awarded to: Brian Suffoletto, MD

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EMS Fellowship Recognition Awards

Saleh Aal-Ali – University of Toronto Alix Carter – Yale University Lincoln Cox – New York City Fire Department William Ray Dennis – University of Pittsburgh Robert Mabry – Brooke Army Medical Center William Ellis Northington – University of Pittsburgh David Schoenwetter – New York City Fire Department Abel Wakai – University of Toronto

2009 Abstract Awards

Best Scientific Presentation

THE EFFECT OF EMERGENCY MEDICAL SERVICE PERSONNEL STAFFING PATTERNS ON PATIENT SURVIVAL FROM OUT-OF-HOSPITAL CARDIAC ARREST. Nicholas Eschmann, Ronald G. Pirrallo, Tom P. Aufderheide, E. Brooke Lerner, *Kenosha Fire* Department

Best Student/Resident/Fellow Research Presentation

HOW MUCH FORCE IS REQUIRED TO DISLODGE AN ALTERNATE AIRWAY? Jestin Carlson, James Mayrose, Henry Wang, University of Pittsburgh

Best EMS Professional Research Presentation

PRE-HOSPITAL IDENTIFICATION OF STEMI: AN EVALUATION OF INDEPENDENT ECG INTERPRETATION BY PARAMEDICS John P. Trickett, Richard Dionne, Justin Maloney, Peter Kelly, Ian Stiell, *Ottawa Hospital*

Best Poster Abstract Presentation

THE RELATIONSHIP BETWEEN EMT-BASIC EXAM SCORE AND SUCCESS ON THE NATIONAL PARAMEDIC CERTIFICATION EXAM Antonio R. Fernandez, Jonathan R. Studnek, National Registry of EMTs

Best Cardiac Arrest Presentation

Sponsored by ZOLL

BYSTANDER CPR AND SHOCKABLE RHYTHMS OCCUR LESS OFTEN DURING OUT-OF-HOSPITAL CARDIAC ARREST IN SOUTHERN ONTARIO NEIGHBORHOODS WITH LOWER SOCIOECONOMIC STATUS Joseph Choi, Laurie

J. Morrison, Steven C. Brooks, University of Toronto

Best Disaster Research Presentation

Sponsored by National Disaster Life Support Foundation MILWAUKEE ARE YOU READY? PERSONAL PREPAREDNESS AMONG EMERGENCY DEPARTMENT PATIENTS Steven W. Zils, E. Brooke Lerner, Ronald Pirrallo, Medical College of Wisconsin



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Further your Career: If you are not currently a member, apply online at <u>www.naemsp.org</u>. 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.