



# WEMSA 2020

## VIRTUAL CONFERENCE

### NOVEMBER 9<sup>TH</sup>-11<sup>TH</sup> & 13<sup>TH</sup>-14<sup>TH</sup>

**Monday, November 9th**

**3:30 PM**

WEMSA Stream

**4:00 PM**

***If I Only Had a Brain [Cardio/Trauma/Neuro] (AEMT or Higher) – Michael Frakes***

Every hour, more than 100 Americans suffer either a stroke or traumatic brain injury. Proper post-event management can preserve at-risk brain tissue, while mistakes can worsen outcomes. EMS and Emergency Department teams are ideally positioned to help optimize outcomes with aggressive, appropriate care in the first hours after the event, but are challenged by constantly changing guidelines and state-of-the-science interventions. This session will review brain injury physiology, describe physical and CT-scan findings for acute intracranial processes, and highlight clinical best practices and commonly made errors in the care of patients with ischemic stroke, hemorrhagic stroke, and brain trauma.

***Not Your Mother's Ventilation Course: Better Patient Care for all Providers [ARV] (EMR-EMT) – Tim Redding***

This class will discuss the assessment and management of the airway. We will cover common pitfalls in airway management and various methods and devices used to better control the patient's airway and ventilation.

***Alzheimer's Association Presentation [Medical/Operations] (All Provider Levels EMR-Paramedic) – Jennifer McAlister***

Participants will learn more about Alzheimer's disease, other causes of dementia, and the physiology occurring in the brain. Communication strategies will be shared, with participants having the opportunity to practice strategies and approaches. Information about the supportive services and educational classes offered by the Alzheimer's Association will be discussed as well as referral mechanisms. This workshop will include and incorporate a brief educational video followed by participant discussion, a hands-on demonstration of communication strategies and techniques, and an opportunity for questions and answers.

***Communicating with Children in Times of Stress [Special Pops/Operations] (All Provider Levels EMR-Paramedic) – Jamie Moran***

During this session, EMS providers will learn strategies to communicate with children during heightened times of stress. EMS providers learn how to use distraction, child-friendly terminology and stress point preparation to support pediatric patients.

**5:00 PM**

***Special K [Medical] (AEMT or Higher) – Chris Ebright***

What is the difference between hypokalemia and hyperkalemia? Should prehospital providers even care? Absolutely! Ever run a code or treat a dialysis patient, and despite everything done correctly the patient does not improve? Remember the H's and T's? By paying attention to the history of the illness and some of the more subtle signs and symptoms, EMS providers can provide a more detailed report to emergency department personnel, alerting them to the possibility of an electrolyte imbalance emergency. Come participate...and we will discuss physical presentation, ECG changes and other things to consider.

***Pop, Lock and Drop It [Trauma] (EMR-EMT) – Mandy Krekora***

It's all in the hips! Pelvic injuries are more common than you'd think. Learn why these injuries can be so easily missed and how we can improve patient care and outcomes in the future.

***What is Normal? Review of Current Recommended Pediatric Assessment Guidelines [Special Pops/Operations] (All Provider Levels EMR-Paramedic) – Christopher Ford***

This discussion is for learners of all backgrounds providing emergency care to children. A basic approach to a pediatric patient's initial assessment will be covered. Discussion points will include a breakdown of the pediatric assessment triangle, decision and action points, brief airway assessment overview, and the "AVPU" approach. Case presentations will be utilized towards the end of the discussion to help learners solidify concepts.

***Refresh Your Refresher: Teaching Report Writing Using Research-driven Strategies [Operations] (All Provider Levels EMR-Paramedic) – Dr. Liz Angeli***

EMS practice is informed by evidence and data, but one area that is not informed by research is report writing education. This workshop will teach EMS educators how to create report writing training that is driven by EMS writing research (yes, that's an actual thing). Before the workshop, please email materials you use to teach report writing, including training schedules and syllabi, to [liz@thereportdoc.com](mailto:liz@thereportdoc.com). Have those documents with you during the workshop. You'll have an opportunity to re-build your training with hands-on activities.

## **6:00 PM**

### ***Help! I'm Drowning in My Own Lungs: Understanding the Pathophysiology of Pulmonary Edema [Cardiology/ARV] (AEMT or Higher) – Reuben Farnsworth***

If you think you know pulmonary edema, think again. Sure you give nitro and some positive pressure ventilation, but do you really know why? Join the discussion as we turn what you think you know about pulmonary edema upside down. Get ready for a wild ride.

### ***Spinal Trauma Management: A Skeptic Examines the Evidence [Trauma] (Basic Life Support EMR-EMT) – David Dalton***

When prehospital management of suspected spinal trauma victims began to shift away from the use of the long backboard, were you skeptical? Having suffered a near-fatal cervical spine fracture himself, Captain David Dalton was greatly distressed when his agency announced that the backboard was being removed from the spinal trauma protocol. He set out to learn all he could about the supposed science behind these changes. But rather than finding flaws in the research, he came to the inescapable conclusion that traditional immobilization can contribute to a patient's death. And more recent research suggests that even more changes may be on the horizon.

### ***Special Teams: Winning on Airway Gameday [ARV] (All Provider Levels EMR-Paramedic) – Mike Brown***

The stress related to critical skills has little to do with the skill itself but is greatly affected by the mental road we have taken to that moment in time. Perceived threats impair cognition, interrupt communications, and degrade skill performance. Effective teams must manage threat perception to win on game day. This lecture will explore how we can leverage our own human factors to better navigate complex situations and manage tempo. Clinicians will leave with an improved understanding of how our brain functions under stress and empowered with proven techniques for managing their most challenging events.

## **7:00 PM**

### ***A Tracheostomy Train Wreck [ARV] (AEMT or Higher) – Brian King***

Tracheostomies can bring anxiety to even the most experienced providers, being prepared on how to manage complications when they arise can determine the patient's outcome. This lecture will discuss the indications of tracheostomies, the assessment and management and troubleshooting of tracheostomy complications including obstruction, decannulation and bleeding.

***Medical Disorders of the Comic & Cartoon World [Medical] (EMR-EMT) – Chris Ebright***

Who doesn't love cartoons or comic books? We all have our favorite characters, from the darkest, fastest, and strongest to the ones with their goofy mannerisms, weird antics and wacky physical movements. They always have us in splits, making us long for more. But, what would it be like for a real person to have their traits? Dig a little deeper, and it actually looks like these characters have certain medical disorders. This presentation will look at some of our beloved characters and describe their physical and psychological disorders.

***Footsteps [Operations] (All Provider Levels EMR-Paramedic) – Jeffrey Nichols***

We all entered this occupation with a vision of what EMS encompasses, but the longer we are in this wacky world of EMS, the more we realize how far we have come and how diverse it is. But we could not have gotten here if it hadn't been for those who came before us that made it possible to be where we are today. Pioneers of their time, they changed medicine and the way someone can receive medical care in the prehospital environment, like Vivien Thomas, the Mayo's, Elizabeth Blackwell, Mary Seacole, Eugene Nagel, James "Red" Duke et al. Now, here we are, in the year 2020, with things like Balloon pumps and talking about things like prehospital ECMO and REBOA. But we are also dealing with technology, social and generational issues, such as simple social interaction and connectivity. In this talk, we will discuss not only the histology of EMS, but ways to solve modern day difficulties in communication, leadership, and training of the leaders of tomorrow. We walk in the footprints of those who walked before us, not only in human progress, but humanity (jn).

**8:00 PM**

WEMSA after hours networking event! Put the kids to bed, grab a beer, and join the conversation!

- ***TOO: Training Officer Opportunities***
- ***Trauma Junkies***

## Tuesday, November 10th

**3:30 PM**

WEMSA Stream

**4:00 PM**

***Toxicology for EMS: It's the Dose that Makes the Poison [Medical] (AEMT or Higher) – Dr. Aurora Lybeck***

We will discuss toxidromes and presentations of common toxic ingestions. Along with antidotes used in emergency medicine and we will review interesting cases in toxicology and “pearls” of knowledge.

***Perils of Suspension Trauma [Trauma] (Basic Life Support EMR-EMT) – Chris Ebright***

Those who work at heights on scaffolds and other structures higher than six feet often wear safety harnesses. The technology of safety harnesses has progressed in recent years, but even with the best designs in safety gear, those who fall in an upright position are at risk of death. This can happen even after a relatively short and effective rescue. This presentation will explain the physiological consequences of suspension trauma and what EMS professionals need to consider during recovery and treatment.

***Traumatic Brain Injury: How to Avoid Adding Insult to Injury [Trauma] (All Provider Levels EMR-Paramedic) – Dr. Thomas Grawey***

The wheel house of EMS surrounds time sensitive illness and injury with STEMI, stroke and hemorrhage control being the hot topics over the past decade. Traumatic brain injury (TBI) is an often overlooked but equally important diagnosis. Prevention of further brain injury by rapid stabilization of this patient population in the first few hours after the initial insult needs to occur quickly and efficiently in the prehospital setting, with the majority of required skills being at the BLS level. In this presentation, the learner will hear about an aggressive, evidence based approach to assessment and management of this patient population that will improve outcomes in the TBI population.

***An Innovative Approach to Dementia Care [Medical/Operations] (All Provider Levels EMR-Paramedic) – Charles Butler & Mary Pitsch***

What is dementia and why does it require a unique response? What role can EMS play in improving the care for these persons? How did one community come together to focus specifically on dementia crisis? This unique session is being co-presented by the State's Dementia Specialist and members of the Dementia Crisis Care Task Force of Sheboygan County. In the first part of this session, presenters will provide attendees a realistic picture of dementia care in Wisconsin as well as provide an overview of dementia from a physiologic perspective. We will also discuss the importance of understanding dementia in any EMS response and

especially in the context of dementia crisis.

The second part of this session will focus specifically on dementia -related crisis. Presenters will share background information on how a grassroots group of professionals convened to improve dementia crisis care in Sheboygan County. Presenters will share real life case examples demonstrating the new countywide paradigm shift. While it is important to learn about large and attainable community changes that are, in fact, attainable, this presentation will also provide attendees with effective interventions and approaches that EMS providers can start using immediately. These applied knowledge and skills will help to provide the most compassionate care to those coping with dementia.

## **5:00 PM**

### ***It's NOT always Sepsis: A common sense approach for ALS and BLS Providers*** ***[Medical] (Advanced Life Support AEMT or Higher) – Rommie Duckworth***

Sepsis is an emergent medical condition that kills more people annually than prostate cancer, breast cancer, and AIDS combined. For every two heart attack patients cared for by EMS, five patients are hospitalized by sepsis. EMS transports 60% of patients with severe sepsis arriving at the ED and yet EMS providers are often unaware of its presence or what they should do if they find it. This presentation discusses new sepsis criteria along with expert commentary as to how they can be applied in the field. This program includes real-world, practical methods for EMS identification, assessment and field treatment of life-threatening sepsis and looks at the current state of sepsis critical care as well as what we can anticipate in the coming months and years.

### ***Current Trends in Pediatric Trauma*** ***[Operations/Trauma] (Basic Life Support EMR-EMT) – Ben Eithun***

This course will address the current trends in pediatric trauma as well as provide a refresher of the hallmarks of pediatric trauma care. This course will cover the most common mechanisms of injury, the physiological response to trauma and highlight pitfalls of pediatric trauma. Current research will be used to discuss hot topics in pediatric trauma. Case reviews will be used to demonstrate salient points.

### ***Often Wrong, Never in Doubt: Confirmation Bias*** ***[Operations] (All Provider Levels EMR-Paramedic) – Tim Redding***

How good are you at CPR? BVM ventilation? This class will take a tough look at our current EMS practice, how we measure our performance and how we can improve our skills and provide better care for our patients.

## **6:00 PM**

### ***One Pill Killers: Pediatric Calcium Channel Blocker & Beta Blocker Overdose***

#### ***[Operations/Medical] (Advanced Life Support AEMT or Higher) – Adam Joseph***

EMS Providers will learn the epidemiology of adult and pediatric overdose, This course will help develop an understanding of human and developmental factors of pediatric overdose. Will we focus on the difference between adult and pediatric overdose and how this helps determine what was ingested.

This class will also review pathophysiology and pharmacology of calcium channel blockers and beta blockers, review poisoning, overdose, ingestion, and exposure resources.

### ***Little Mo' PEEP [ARV] (Basic Life Support EMR-EMT) – Mandy Krekora***

When it comes to breathing, how well do we really understand pressure? Take an in depth look at the physiology of breathing, and why something as simple as a little pressure can significantly improve patient condition.

### ***You Can't Touch This: How NOT to Screw Up a Crime Scene [Operations] (All Provider Levels EMR-Paramedic) – Janet Taylor***

First Responders are often involved in treating a victim of a crime, but we were never formally taught how to help out the Crime Scene staff in gathering evidence that would help in identifying and prosecuting the assailant. Many times, as it is reported by Law Enforcement, EMS and Fire actually make their jobs a lot harder, without even realizing it. Safety is always first, patient care is second, but being able to help out other agencies while still providing patient care should be a priority also. In this session we will look at some simple things we can do to ensure evidence collection isn't compromised and how to handle evidence we come across while caring for a patient when Law Enforcement isn't available.

## **7:00 PM**

### ***Breaking Bad: Pelvic Fractures [Trauma] (Advanced Life Support AEMT or Higher) – Brian King***

Pelvic fractures can carry a high morbidity and mortality which makes their recognition and management paramount in having a positive outcome. This lecture will cover the orthopedic and vascular anatomy of the pelvis along with the types of fractures that can be most life threatening. Both pre hospital and the initial in hospital management will be covered utilizing case studies.

### ***Neurology Conundrums: A Potpourri of Neurological Complaints [Trauma] (Basic Life Support EMR-EMT) – Russ Brown***

This dynamic lecture will cover some common and not so common neurological complaints the EMS provider may run on. Learn to distinguish when a headache is

not so benign. Learn the red flags of dizziness and when it points to a more sinister cause and how to perform a proper neurological assessment that is specific to your patient.

***Shake N Bake: Pit Crew Mentality [Cardiology] (All Provider Levels EMR-Paramedic)***  
**– Dr. Thomas Grawey**

Cardiac arrest is more than just chest compressions, ventilations, drugs and defibrillations. Besides coaching your team through the AHA algorithm, an effective team leader must understand the limitations of what the human mind can handle under stress in order to best navigate everyone through the rocky waters of a resuscitation. This hour-long presentation will discuss basic topics in the science of the mind and how they apply to management and teamwork during a cardiac arrest. I've heard of multi-tasking, but how many things can I actually do at once? How do I prevent my team from getting task overloaded and regroup a code that is going off the rails? How can I maintain situational awareness throughout it all? There is more to team leadership than effective communication. If you've ever been in a disorganized resuscitation this talk is for you.

**8:00 PM**

WEMSA after hours networking event! Put the kids to bed, grab a beer, and join the conversation!

- *Where My Providers At? Calling all BLS and ALS*
- *Leader of the Pack*

**Wednesday, November 11th**

**3:30 PM**

WEMSA Stream

**4:00 PM**

***Pulmonary Hypertension and the Failing Right Heart [Cardiology] (Advanced Life Support AEMT or Higher) – Dr. Scott Kunkel***

EMS providers are very familiar with left-sided heart failure and we manage this all the time; however, what happens when the right side of the heart fails? This scenario is becoming increasingly common through advancements in right heart failure treatment, but the implications of mismanagement are high. This lecture will introduce the concept of right sided heart failure, will take the audience on pathophysiology tour of the right heart and will discuss management techniques and implications for EMS care.

***Trauma Martini on the Rocks [Trauma] (Basic Life Support EMR-EMT) – Reuben Farnsworth***

You are toned to respond to a local gravel quarry for..... (Use your imagination and insert your favorite mining trauma here.) If you want to know more about crazy trauma, look no further. Whether you crave crushing injuries by 30 ton machines, falls, explosions, or just a good fracture, this is the class for you. We will delve into the many unique injuries and mechanisms of injury that occur in mining operations. And don't forget scene safety. Let the mayhem begin!!!!

***Pediatric PNB: Chance Favors Those Prepared and Educated [Operations/ Cardiology] (All Provider Levels EMR-Paramedic) – Dr. Michael Kim***

Description Coming Soon!

**5:00 PM**

***Implementation and Barriers to POCUS [Operations] (Advanced Life Support AEMT or Higher) – Carl Lange***

The use of point of care ultrasound (POCUS) has been rapidly expanding throughout medicine including in EMS. POCUS is quickly becoming a standard of care. It can be used for a wide range of complaints and has been shown to improve patient outcomes, patient satisfaction, and even patient understanding of their condition. This valuable tool is no longer limited to hospitals and clinics given the decreasing costs, portability, and improving access to training. However, there are still many obstacles to overcome. We discuss why POCUS should be utilized, how agencies can address barriers to implementing POCUS, and how to effectively integrate POCUS into clinical practice.

***Frozen: The Cold Hard Truths about Hypothermia in Trauma Patients [Trauma] (Basic Life Support EMR-EMT) – Janet Taylor***

A spin-off from "Chill Out" we take a look at the negative effects of hypothermia specifically in the trauma patient. From vasoconstriction to cold diuresis and the trauma triad of death, we will look at ways of preventing hypothermia and the detrimental effects it has on the body.

***Pre-Planning: Perseverance (All Provider Levels EMR-Paramedic) – Chris Ackley & Amanda Bates***

Description coming soon!

**6:00 PM**

***More Than Medicines: The Thinking Person's Guide to RSI [ARV] (Advanced Life Support AEMT or Higher) – Michael Frakes***

Medication-assisted airway management can save a life or it can cost a life. Approaches to the airway are often viewed as individual technical skills, based

on individual preferences, and focused on the drugs. The better approach is to view optimal airway management as a complex team process that is rooted in... facts. This presentation will take a look at airway management, from patient exam through post-procedure management. It will use science and scientific literature to identify best practices, bad practices, and things that may not matter in medical and technical performance, and will also identify individual and team considerations that may have a greater effect on outcome than the medical factors you thought were key.

***Current Topics in Child Abuse and Neglect – What to Look For and What to Do When You Find It [Operations] (Basic Life Support EMR-EMT) – Ben Eithun***

This course will provide an overview of the most common types of child abuse and neglect that are seen in Wisconsin. This presentation will cover what to look for and what to do when you have concerns. Topics covered will include: Physical abuse, sexual abuse, neglect, medical neglect and human trafficking. Case reviews will be used to highlight salient points.

***Life & Limb: LifelinkIII [Trauma] (All Provider Levels EMR-Paramedic) – Hanna Thompson & Joshua Chan***

- Review the different life threatening traumatic musculoskeletal injuries.
- Recognition and control of life threatening hemorrhage from musculoskeletal injuries.
- Recognition and understand treatment of compartment syndrome in the field.
- Define the pathophysiology and manifestation of crush injuries.
- Discuss treatment modalities for traumatic near amputation and amputation.

**7:00 PM**

***Pressor Pressure! [Cardiology] (Advanced Life Support AEMT or Higher) – Jason Haag***

Your patient's blood pressure is low, and their mental status is altered. They are not responding to repeat fluid boluses. We will discuss different pressors and when they can be used and what other pressors they can be used in conjunction with. We will focus on both the pre-hospital and inter-facility settings with an emphasis on the later.

***Bubble Bubble Toil and Trouble: Management of the Patient in ARDS [Cardiology/ARV] (Basic Life Support EMR-EMT) – Kyle David Bates***

Encountering a patient experiencing dyspnea as the result of pulmonary edema is not unusual, we generally assume heart failure. However would your diagnosis change if they have been ill for days, without any cardiac symptoms? ARDS is non-cardiac pulmonary edema and can occur with any injury to the lungs. This case-based presentation will address the pathophysiology of ARDS as well the

assessment and treatment of the patient experiencing this condition.

- Given scenarios where the patients are experiencing shortness of breath, the student will be able to differentiate cardiogenic from non-cardiogenic pulmonary edema.
- Given the syndrome of acute respiratory distress, the student will be able to discuss its pathophysiology.
- Given scenarios where the patients are experiencing ARDS, the student will be able to discuss the prehospital and hospital management plans.

***“Sick vs Not Sick” is Harming Patients. How Can We Do Better? [Operations] (All Provider Levels EMR-Paramedic) – Dr. Thomas Grawey***

EMS providers are taught early in their training to place patients into one of two categories, “sick or not sick,” in an effort to determine who has acute life threatening injuries. While this tool has its role in EMS, relying too heavily on this piece of the assessment easily leads to missed diagnosis, inadequate prehospital assessments and medical error. In this talk, the speaker will discuss science behind how medical providers make clinical decisions, teaching the audience how to avoid medical error related to this age old paradigm in EMS.

## **8:00 PM**

WEMSA after hours networking event! Put the kids to bed, grab a beer, and join the conversation!

- *Let's Talk: Job Town and The Baggage We Carry*
- *Rural EMS: Not For The WEAK*

## **Friday, November 13th**

### **8:30 AM**

- *Opening Address*
- *Honor Guard Opening Program*
- *LODD Memorial*
- *Featured Speaker Dr. M. Riccardo Colella*

### **9:00 AM**

***Poison! An EMS Introduction into Toxicology Nerdiness [Medical] (Advanced Life Support AEMT or Higher) – Dr. Jill Theobald & Dr. Matthew Chin***

In this session, you will take the first steps into toxicology nerdiness! We will discuss common and uncommon toxidromes and the management thereof. From common exposures to emerging issues, we will hit all the highlights. We will also explain the inner workings of the mecca of information known as the Wisconsin Poison Center.

***BLS – Not Just ‘Basic Lifting Service’ [Medical] (Basic Life Support EMR-EMT) – Nancy Magee***

As EMS matures as a profession, increasing evidence shows that many of the critical lifesaving interventions are BLS procedures. From bleeding control to oxygen administration, assessment to cardiac arrest resuscitation, aspirin, naloxone and epinephrine administration, interventions that were once the sole province of paramedics are now performed by EMT's. In today's world of prehospital care, EMT means far more than "Empty My Trash", and BLS is far beyond a "Basic Lifting Service".

***COVID-19: A Wake Up Call [Medical] (All Provider Levels EMR-Paramedic) – Dr. Salim Rezaie***

Description Coming Soon!

***Mindfulness (Provider Well Being) – Kristen Herreid***

Description Coming Soon!

**10:00 AM**

***Preterm Birth: In the Field [Medical] (All Provider Levels EMR-Paramedic) – Dr. Aurora Lybeck***

After this course EMS Providers will be able to understand preterm birth, risks, morbidity and mortality of early preterm infants, and discuss resuscitation considerations for out of hospital preterm births. Providers will also be able to understand neonatal resuscitation and discuss palliative and comfort measures for non survivable preterm baby and family.

***What a Wonderful World It Would Be [Medical] (Basic Life Support EMR-EMT) – Brian Donaldson***

What do a well-known major metropolitan career EMS agency and a respected rural volunteer EMS agency have in common? They both saw the same adult onset seizure patient, multiple times, and both watched the patient refuse treatment and transport. Not a big deal, right? It happens every day, right? Join Brian for this patient's journey through our healthcare system. It starts with EMS and continues to surgery and beyond. What are the differential diagnoses for adult onset seizures? Do you consult with a medical control physician on all refusals? Could sharing health information among providers, including EMS agencies, improve patient outcomes? Join Brian for a rollercoaster ride and find the answers to these questions and more.

***What's in a Name? An Ally Approach to Patient Care [Operations] (EMS Operations/Management) – Katherine Contreras***

Calling 911 can be a very stressful experience, and that stress may be compounded when the patient does not follow social constructs based on gender-conformity. Many providers are uncomfortable or unsure of how to approach patient care on a person who may be gender-expansive. This presentation will cover the terms common to the LGBTQ community, discuss the importance of using preferred pronouns, and explore the threats prevalent in the LGBTQ community. We will also discuss the potential challenges (and overcoming them) associated with performing a hands-on assessment on a gender non-conforming person, ending with a review of the legal position on gender markers and how that may affect transfer of care and the EMS PCR. As the LGBTQ community grows, it is important that EMS providers understand, and are comfortable with, providing care to those who may be gender non-conforming, while further understanding the potential for unconventional presentation of injuries or illness.

***Getting the Job DONE (Provider Well Being) – Melinda Marasch***

EMS personnel have a difficult job: managing other people while managing their own reactions to difficult situations. The task often includes calming someone down enough to get information and give directives. This workshop explores how to get the job done while maximizing the compassion effect on efficient and effective services. We'll explore how to navigate stress/trauma responses of others, as well as ourselves. Stress, Trauma, Secondary Trauma, Burnout and Compassion Fatigue are part of the job. Learn ways to manage these inherent difficulties, along with techniques to get the job done.

**11:00 AM**

***Use Your Words (and More): Communication Skills for EMS Providers [Operations] (All Provider Levels EMR-Paramedic) – Dr. Drew Anderson***

Effective clinical practice requires good communication between the patient and provider. Unfortunately, the nature of EMS can make good communication difficult, and poor patient-provider communication can result in poor clinical care. This presentation focuses on teaching communication strategies, verbal and nonverbal, that can have a powerful impact on patient-provider interactions. Participants will have the opportunity to learn and practice these skills and can expect to leave with practical skills they can put to use immediately.

***Stroke Center Designations: Why it Matters in the Field [Cardiology/Trauma] (Basic Life Support EMR-EMT) – Susan Fuhrman, Paul Vilar, and Nicole Bennet***

When a patient is having a stroke, up to 1.9 million neurons may be lost for each minute that the brain is not perfused. The establishment of stroke center certifications has greatly improved patient care and outcomes. Each

certification level has its own unique role within stroke systems of care. More complex interventions are only available at a small number of designated sites, necessitating strong collaboration between the levels of stroke certification. Recent advancements in stroke treatments have also highlighted the need for expedited stroke triage protocols in the field with the use of novel EMS stroke screening tools. This panel presentation will provide a broad overview of stroke center certifications and their integration within systems of care and also address the role of the EMS provider in ensuring rapid stroke detection and transport from the field.

### ***Where Are We At? A FirstNet Discussion (EMS Operations/Management) – Brent Williams***

High speed, dedicated and reliable mobile broadband communication is now available in your ambulance or other public safety vehicle. How to get it, use it to benefit your patient, and how it differs from the traditional voice only communication systems we have used for years will be explored in this session. Mobile Broadband communication gives you the capability to diagnose and treat patients in the field, with solid medical support on -line, and brings tremendous new benefits and support to rural EMS providers. "Telehealth" is now a reality, with major benefits to rural areas to allow for assessment and treatment, safely and effectively, at the patients home.

### ***Strong Mind, Strong Body (Provider Well Being) – Aaron Zamzow***

Building a resilient mind starts with building a resilient body. In this seminar, Aaron Zamzow will explain the correlation between physical and mental health.

Attendees will learn:

- What the research shows on mental health and its relationship with fitness and nutrition.
- How to use proper nutrition to build a more resilient mind.
- What are the "best" steps to help build a resilient body and mind

## **1:00 PM**

### ***What the Heck is a Fascicular Block? [Cardiology] (Advanced Life Support AEMT or Higher) – David Brenner***

For ALS Providers. Students must be able to read ECG rhythm strips (not taught in this presentation).

Vectors and axis are the foundations of understanding the 12-Lead ECG. Although we generally don't have protocols for patients with fascicular blocks, these folks deserve special attention. Business as usual may prove harmful to our patients. These topics are presented in a highly interactive format. Participants will have lots of practice.

***Let's Talk About Dibeetus: Endocrine Disorders [Medical] (Basic Life Support EMR-EMT) – Kelly Grayson***

"Hello, I'm Kelly Grayson, and I'd like to talk to you about dibeetus."

Don't worry, he's not going to sell you diabetic testing supplies from Liberty Medical, and he really doesn't have the mustache to be a convincing Wilford Brimley. But he will talk about Type I and Type II diabetes, hypoglycemia and diabetic ketoacidosis, as well as serious but lesser known endocrine emergencies like hyperosmolar hyperglycemic nonketotic coma (HHNKC) and diabetes insipidus. Join Kelly Grayson as he delves deeper into recognition and emergency care of one of the most common chronic diseases in the world.

***Not All Superheros Wear Capes! Reigniting Your Passion for Medicine! (Provider Well Being) – Russ Brown***

Burnout is prevalent in emergency and prehospital medicine today. This dynamic and inspiring lecture will help reignite that passion you once held for medicine. Covering three take-home points the attendee will learn how to cultivate a growth mindset over a fixed mindset, how to prevent burnout and why sometimes superheroes do not always wear capes!

Objectives:

- The attendee will learn the difference between a growth mindset and a fixed mindset and how to incorporate this into their practice.
- The attendee will learn how to perform a personal SWOT analysis and how to use this to combat burnout.
- The attendee will be able to discuss how learning is paramount for our growth as medical providers.

***Legal Proofing Your PCR [Operations] (EMS Operations/Management) – Greg West***

Patient care reports (PCRs) are not only vital to maintaining continuity of care for your patients, but they are also important legal documents that can prove to be your best friend or worst enemy in the unfortunate event of litigation related to your care. In this session, we will evaluate actual PCRs submitted by the attendees to identify good practices as well as shortcomings that could be improved to help ensure your PCRs are as helpful as possible if ever used in court.

*Upload Request:*

Attendees are asked to upload copies of redacted PCRs to <https://forms.gle/Qep7tqBuGgEwrrfz5> for review at this session. Please ensure ALL protected patient, service, and provider information is removed from any uploaded PCRs. (The narrative section, in particular, will be of particular interest in this session. If an attendee would like, it is okay to provide a copy of only the narrative section from a PCR for review.) As this session will be identifying best practices along with some

documentation shortcomings, please feel free to submit examples of PCRs that you believe are both “good” as well as “bad” examples of effective documentation. Submissions will be accepted anonymously and no individual providers or services will be identified during the session. (Again, please ensure any patient, service, or provider identifiers are removed from any submitted PCRs. Information regarding the patient's age and gender should be included. The only information needed related to the EMS agency and providers from the run should be the level of care [EMT, Paramedic, etc.] provided or available.)

## **2:00 PM**

### ***Vasopressor Intravenous Push to Enhance Resuscitation (VIPER) Study What Have We Learned So Far? [Cardiology] (Advanced Life Support AEMT or Higher) – David Olvera***

We all want to know what push dose pressors we should use for patients, and if we should even implement them. When we look at the data, we find 3 things use in the OR, use in the OB units and sometimes in the ED and we heard it on a podcast. This presentation will go over the identification of when we should consider push dose pressors, what medications should we look at and if there any medications that we can also use outside of the push dose pressor world. VIPER looks at the use of Phenylephrine and Vasopressin as the main arms of medication for the push dose pressor and evaluates the pros and cons to these and other medications for the peri-intubation arrest. By the end of the lecture, the learner will be able to understand the use, and implementation of Push Dose Pressors in the prehospital, peri-intubation arrest setting.

### ***The Top 10 Trauma Myths and Legends: Seeking the Science Beyond the Textbooks [Trauma] (Basic Life Support EMR-EMT) – Rommie Duckworth***

We've all heard the legends of trauma care. "ABCs vs CABs!", "Mechanism of Injury Matters!", "Never remove a dressing!", "Hyperventilate that head injury!" But what happens when what you were taught no longer matches what science says? Taking a look at the Top Ten Trauma Myths and Legends this program evaluates the strength of the science behind each recommendation as well as how they might be implemented in different EMS systems. Getting past "we've always done it this way", attendees will return home well-equipped to open up discussions about trauma care in their systems beyond, "This is what I was taught in class." and "I read this study once".

### ***2050 Called- Answer the CEMS Call [Operations] (EMS Operations/Management) – Brian Randall***

The best part of MIH/CEMS is that it's developed and designed based on a specific state or county's requirements and therefore no two programs are exactly the same. This makes them unique, and when they are built to support the gaps found

in the county or city, they are operating in, incredibly successful. Come learn about different models and what will work best. MIH/CEMS program design can make and or break your program. Got questions on policies, best practice, or documentation?

***I'll Sleep When I'm Dead: Sleep Loss and Fatigue in EMS (Provider Well Being) – Amy Eisenhauer***

Fatigue and poor sleep hygiene are so commonplace in EMS that we accept it as the norm. Increased public awareness of fatigue related accidents, medical errors, and first responder mental health, challenge providers and leaders to examine the priority of sleep in their lives and agencies. Amy will discuss the importance of quality and quantity of sleep, related physical and mental comorbidities of poor sleep hygiene, and tools for providers to improve their sleep methods and environment.

**3:00 PM**

***POCUS As a Benefit to EMS [Operations] (Advanced Life Support AEMT or Higher)– Carl Lange***

More clinicians are using point of care ultrasound (POCUS) in their practice. However, others remain skeptical or uncertain of its potential benefit and role in EMS. This session discusses how POCUS can be used in a variety of settings and how it can result in improved patient outcomes. We review a series of cases of how POCUS identified occult pathology, changed management, and resulted in positive outcomes. These cases range from the typical chest pain or sick patient all the way to cardiac arrest management. POCUS is a valuable tool that can benefit a wide range of patients which is highlighted throughout this session.

***EMS on the Fireground: Complacency and Inaction Can Be Deadly [Operations] (Basic Life Support EMR-EMT) – Travis Howe***

It is true; firefighter LODD's have decreased over the past decade, but in many ways, present day structural fires are more dangerous than ever for those on the fireground. Firefighters are still dying of cardiac arrest, harmful carcinogens are making a name for themselves, and victims are always a possibility. This is why EMS must be proactive and ready on the fireground. Complacency kill instantly or over time. Join Travis as he dives into the why's and how's of fire scene readiness, safety, firefighter mortality, high quality incident monitoring/rehabilitation models, and how to build positive relationships with the fire departments in your service area.

***COVID Reflections: a Medical Director's Perspective [Operations] (EMS Operations/ Management)– Dr. Ben Weston***

Join Dr. Ben Weston, Medical Director for MFD and Milwaukee County and he discusses COVID-19 and where we go from here.

## ***EMT's Behaving Badly- Am I My Brother's Keeper? (Provider Well Being) – Nancy Magee***

News stories continue to surface reporting EMT's and paramedics demonstrating onerous and downright dangerous behaviors. Refusing to respond to a baby in cardiac arrest, dumping a patient on the ER floor, sexual harassment of a female paramedic/ FF to the point of her committing suicide, disparaging of addicts on social media-these are just a few of the \*highlights\* of the EMS news seen by the public.

At the same time, the rate of addiction and suicide among EMS providers has become recognized as the collateral damage suffered because of the cumulative stressors of PTSD, fatigue, and failure to seek help due to the stigma the industry often demonstrates towards addicts, system abusers and the mentally ill.

Yet- none of this happens in a vacuum. Somebody knows there is a problem, yet says nothing. What's going on? Is "compassion fatigue" a real thing? Is this a kind of "bystander apathy" where diffusion of responsibility causes inaction? How do we fix it? Can we?

## **4:00 PM**

### ***Why Your Patient Want You to Know How to Recognize BBB [Cardiology] (Advanced Life Support AEMT or Higher) – David Brenner***

Although we generally don't have protocols for patients with bundle branch blocks, these folks deserve special attention. Business as usual may prove harmful. This is presented in a very unique, highly interactive format. Participants will have lots of practice. Most attendees achieve Bundle Branch Block identification mastery by the end of this lecture.

### ***Hemodynamics 101 [Cardiology] (Basic Life Support EMR-EMT) – Jason Bazelow***

This presentation is designed as an introduction to hemodynamics and the forward flow of blood through the patient's body. At the completion of the lesson, students will be able to describe how blood flows through the heart to the rest of the body. The student will be able to identify normal pressures throughout the system, and what affects disease processes like Shock, AMI and sepsis have on blood flow throughout the body.

### ***Beep! Beep! Someone Just Got Run Over By a Bus: Continuity of Operations Planning [Operations] (EMS Operations/Management) – Jason Haag***

This program will focus on agency continuity plans. What happens if a key person (Director, Treasurer, President, etc.) become incapacitated, or worse, dies? Are there others in your agency capable of filling that role? Is the agency account accessible by more than just that person? Are passwords accessible? We will discuss all these

problems are more at this session. This topic is one we don't like to think about, but one that is necessary for agencies to continue to do the good work they do when the unthinkable happens.

***Saving Your Own Life: True Confessions of a Clinically Depressed Medic (Provider Well Being) – Kelly Grayson***

Depression, PTSD, mental illness. We deal with their effects every day. They're the patients that often challenge our skills and our sense of compassion the most. We dislike dealing with them so much that we often ignore those symptoms in ourselves until it drives us from the career we once loved, or we read the obituaries of our brothers for whom help came too late. Join Kelly Grayson as he describes his battle with depression, and explores strategies for recognizing and dealing with those issues in ourselves. It's time to erase the stigma of provider mental illness, because even the healers need healing now and then.

**5:30 PM – Happy Hour Round Table**

- *Innovative Rural EMS System Design – Brian Donaldson*
- *Resiliency – Stacey Zellmer*
- *I Got the Nasty On Me: Ways to Prevent Infection in the Prehospital Setting*
- *Ranty Round Table – Amanda Bates & Dr. Drew Anderson*

Join WEMSA's own Education Director Amanda Bates, and WEMSA Favorite Dr. Drew Anderson for a Ranty-Roundtable of Q&A!

**Saturday, November 14th**

**8:00 AM**

Saturday Opening Session

- *WEMSA Awards*
- *President Address – Brian Donaldson*
- *Losing What You Love: How to Rewire My Brain from Resuscitation to Comfort Care – David Olvera*

Description Coming Soon!

**9:00 AM**

***Do You Know TIM? Working Safe on the Roadway [Operations] (Advanced Life Support AEMT or Higher) – Kyle David Bates***

The roadway is one of the most treacherous locations where we work. Every year numerous responders are struck, with 18% of fatalities occurring as the result of secondary collisions. Responders need to take actions beyond "shutting down the road" to make their work area safe. Join us for this lively and interactive presentation where we will discuss making the work area safer through proper traffic incident management, or TIM.

- Given a motor vehicle crash scenario, the student will be able to identify the associated dangers of working on and alongside the roadway.
- Given a motor vehicle crash scenario, the student will be able to discuss traffic incident management.

***The Good, The Bad, and the “What the %#@ \$ is that?” – Basic Cardiology [Cardiology] (Basic Life Support EMR-EMT) – Brandon Heggie***

Everyone knows cardiology to be a challenge, the goal of this lecture is to make it easy to understand as well as implement in your day-to-day life as an EMS professional. From understanding the pathophysiology of the heart to appropriately reading a 12-lead ECG and much more. We will assist you in gaining that knowledge-based confidence you need to make educated decisions for your cardiac patients. If you are an EMT basic who wants to know more or a paramedic who just wants a basic refresher, you will benefit from this course.

***It's Your Island: Developing a Vibrant Organization Through Recruitment and Retention [Operations] (EMS Operations/Management) – James Small***

Your agency is an Island. How you populate it and keep it populated matters. This program suggests a strategy of recruitment and retention that helps a leader identify and hire great people and develop them into an engaged team with high employee retention that further improves the ability to recruit great people.

***10 Best Exercises for First Responders (Provider Well Being) – Aaron Zamzow***

Firefighters EMTs and Medics must approach their fitness like an athlete. The “10 Best Exercises” presentation places emphasis on this fact and teaches attendees specific movements and exercises that will enhance their performance, reduce injury and prolong careers. Each attendee will walk away with the 10 Best Exercises for Firefighters (fire rescue athletes) and learn how to incorporate them into simple workouts. Attendees will also gain an understanding and rationale about the best fitness equipment for first responders and the importance of integrating fitness into their daily schedules.

This presentation is targeted to any EMT, paramedic and/or firefighter concerned with improving their level of fitness to not only prolong their career but to be physically ready to meet the demands of the job. Training officers and chiefs are also encouraged to attend to get a better understanding of the fitness equipment needs of the department along with ways to motivate members to improve their level of fitness.

## **10:00 AM**

### ***Gases Gone Wild: Decompressing Dive Medicine [Medical] (Advanced Life Support AEMT or Higher) – Michael Brown***

Join your colleagues for a dive into the underwater world and gain an enhanced understanding of dive medicine and ideal gas laws. All of this framed within a real-world scenario experienced during a dive incident. Regardless of the presenting illness, you will leave with an enhanced understanding of how gases behave at different pressures and locations in the body. This can easily help to better understand multiple pathologies.

Objectives:

- Discuss gas laws relevant to diving emergencies
- Outline different types of diving and basic terminology
- Understand pathophysiology of dive related injury/illness
- Discuss case study of a diver suffering from decompression sickness

### ***Hooked- Compassionate Response to Addicts, Addiction and the Opioid Crisis [Medical] (All Provider Levels EMR-Paramedic) – Nancy Magee***

According to the CDC, an average of 130 people in the US died of an opiate overdose in 2019. Unfortunately, commentary in workplaces, classrooms and on social media reflect a significant number of EMTs displaying an alarming amount of vitriol directed towards victims of addiction, often reflecting disdain, anger and even resentment at being called to respond to overdoses. Whether it is caused by ignorance or compassion fatigue, this attitude cannot go unaddressed by our profession. In this presentation we will review the physical, behavioral and social effects of the opioid epidemic on our loved ones, friends, and neighbors in our communities, and as a nation. Treatment both immediate and long term will be discussed along with the role of local EMS in education and prevention with a focus on humanizing addiction and pursuing advocacy, empathy, and compassionate professional response from the EMS providers on the front lines of the crisis.

### ***Racial Bias in EMS and What We All Can Do About It [Operations] (EMS Operations/Management) – Mandy Krekora***

This one is gonna be H.O.T! Listen as two leaders in critical care education discuss the challenges we face in today's race debates. Have we been conditioned to think a certain way? Subconsciously has our past experiences influenced the way we perform? EMS plays an integral role in shaping perceptions of our patients as well as those around us.

### ***Stress Management for Fire and EMS (Provider Well Being) – Kristen Herreid***

First responders are trained to utilize tactical strategies in crisis situations, so they can quickly protect lives and property. However, some critical incidents can overwhelm normal coping mechanisms and trigger significant signs and symptoms

of distress. In this class you will learn and practice coping skills that you can put into practical use for yourself and can bring back to your department to share with others. Each skill learned will be written up so you can take it home with you.

## **11:00 AM**

### ***PEA? A More Pragmatic Approach to Care Than ACLS [Cardiology] (Advanced Life Support AEMT or Higher) – Kyle David Bates***

Pulseless Electrical Activity is a code rhythm met with much angst. If we could only get a pulse to match that complex! Perhaps the problem is the approach to resuscitation. Rather than take the standard ACLS H's and T's approach, it may be more advantageous to separate causes based on ECG complex!

- Through an interactive discussion, the student will be able to describe the limitations of the current ACLS approach to PEA management.
- Given a motor vehicle crash scenario, the student will be able to discuss traffic incident management.

### ***Legal Lessons in EMS Leadership and Management [Operations] (EMS Operations/Management) – Greg West***

Join us in this interactive session (computer or mobile device required) to test your knowledge of legal principles that apply to EMS leaders, managers, and providers. Participants will utilize polling software on their own mobile devices (or computers) to answer real-life, scenario-based questions provided in a quiz show format. Topics covered will include employee pay, social media, negligence, civil liability, medical malpractice, patient privacy and confidentiality, state licensure requirements, provider wellness, disability accommodations, employment of military service members, and more!

### ***EMS: A Family Business (Provider Well-Being) – Melanie Jorgenson & Brad Jorgenson***

Join WEMSA's own Board of Director Melanie Jorgenson and her son Brad as they share with you what working with family in a high-stress, high-acuity "business" is really like.

### ***Helping Kids Cope: Trauma Informed Responses [Operations] (Basic Life Support EMR-EMT) – Kim Eithun Harshner***

Medical experiences can be frightening and confusing for children, especially in emergency situations. Applying a trauma informed framework can help acknowledge, address, and mitigate the traumatic stress a child may be experiencing. The workshop will provide practical tips for emergency medical technicians and health care workers to address a child or youth's reactions as well as tips to engage families to help reduce the stress for children.

## **1:00 PM**

### ***ECMO [Cardiology] (Advanced Life Support AEMT or Higher) – Dr. Andrew Cathers & Dr. Daniel McCarthy***

After years of relative stagnation, ExtraCorporeal Membrane Oxygenation (ECMO) is currently one of the most interesting and fast-moving fields of medicine. Due to this, there currently exists some ambiguity about terminology and the type of patients who would benefit from this incredible therapy. By providing historical context and the current state of the technology, we aim to clarify the options available to our medical centers. In addition, we will differentiate between Interfacility ECMO retrieval and ECPR/ECLS treatment for patients in cardiac arrest, and discuss some of the challenges inherent in transport of ECMO patients.

### ***Fluid Resuscitation Without an IV: EMT's Treating Shock [Trauma] (Basic Life Support EMR-EMT) – Kenneth Navarro***

Aggressive out-of-hospital fluid administration to patients suffering from traumatic injury increases blood loss and mortality. Recently, researchers developed an easy to use device that will increase blood return to the heart thereby increasing cardiac output and cerebral perfusion, while simultaneously lowering intracranial pressures (ICP). This new therapy requires no IV, no advanced airway, and in fact, no advanced skills of any kind. This presentation will examine how rescuers can provide beneficial fluid therapy without ever having to spike an IV bag.

### ***All Jacked Up (Provider Well Being) – Brandon Heggie***

"All Jacked Up" will hit home with almost all of the audience. This not just an educational talk about the effects of energy drinks on our patients. This is also a talk about how it affects YOU! First Responders chronically use energy drinks to power through their shifts, but what is the consequence? Are there any benefits? Let's find out as we go through the physiologic effects of the drinks/supplements and how to mitigate them appropriately.

## **2:00 PM**

### ***Chemical Restraints: Pro's, Con's, Options and Calculations [Medical] (Advanced Life Support AEMT or Higher) – David Dalton***

When the need for behavioral restraint arises, physical restraint alone is often inadequate, and for some patients, it can even prove fatal. On the ambulance, having chemical restraint as an option should be considered just as essential as having an oxygen tank or defibrillator. Whether it's Ketamine, Versed, Valium, Ativan, or Haldol - no single drug can serve as the magic bullet, right for every occasion. But some are more appropriate for prehospital use than others. This session presents a side-by-side comparison of the 5 most-commonly-used chemical restraint agents, the latest field data on Ketamine and steps for recognizing, preventing, and managing Emergence Reactions; videos of patients with excited

delirium, and an introduction to the Richmond Agitation Sedation Scale (RASS) and how it could be used to provide safer, more effective restraint.

***Beyond AVPU: Using Mental Status Exams in the Prehospital Environment [Medical] (Basic Life Support EMT-EMT) – Dr. Drew Anderson***

Aggressive out-of-hospital fluid administration to patients suffering from traumatic injury increases blood loss and mortality. Recently, researchers developed an easy to use device that will increase blood return to the heart thereby increasing cardiac output and cerebral perfusion, while simultaneously lowering intracranial pressures (ICP). This new therapy requires no IV, no advanced airway, and in fact, no advanced skills of any kind. This presentation will examine how rescuers can provide beneficial fluid therapy without ever having to spike an IV bag.

***Learning To Fly: Leaving Linear Thinking Behind to Embrace Critical Thinking [Operations] (EMS Operations/Management) – Brian Donaldson***

It's been said by many that the EMS educational system turns out providers who are heavy on the skills and light on the thinking. Look around you, is there some truth in that statement? Do you resemble that remark? This session examines the perils and pitfalls associated with linear thinking and helps you to understand the importance of critical thinking skills. Some case studies help to drive home the point. It's time to get past that cookbook approach to paramedicine and paramedicine management. Join Brian for this fast-paced session and spread your wings.

***If We Don't - Who Will? It's What We Do! Right? (Provider Well Being) – Ken Cerney***

Without knowing it we can easily talk ourselves into a fatal situation. We as a group take risks daily that others can't appreciate all in the name of helping others. Using data from research comparing Fire, Law Enforcement, EMS and Air medical risk tolerance, we will discuss and learn about our willingness to take risks, what type of risks those are, and how the stress we are placed under can prevent us from following standard procedures and protocols. You may also discover something interesting about yourself and the culture you work in, both good and bad. Bring your smartphone to class.

**3:00 PM**

***Oops! Pain Assessment and Treatment: How We're Getting it Wrong [Medical] (Advanced Life Support AEMT or Higher) – Tim Redding***

In this class, we will tackle some not-so-well accepted topics such as why paramedics do not treat pain, what some hurdles are for paramedics treating pain and how we assess pain and why it needs to change.

***Medical Considerations for Technical Rescue Incidents [Trauma] (Basic Life Support EMR-EMT) – Doug Hexel***

Technical rescue incidents present a unique set of challenges to medical providers. Whether assessing and treating suspension injuries at a rope rescue or crush injuries at a structural collapse, special knowledge and skills are required from the provider. Modern medicine now requires medical treatment to begin during the rescue phase, rather than waiting for the victim to be rescued. This presentation focuses on kinematics of trauma, rescue techniques, treatment priorities, and special considerations to result in the best possible patient outcomes.

***Protecting Your Agency from Ransomware, Viruses, Phishing and Cyber Threats in the Information Age [Operations] (EMS Operations/Management) – Dan Greenhaus***

Baltimore's Ransomware infection cost \$18 Billion to fix. The City of Riverside's Police and Fire department has been hit by a ransomware twice, crippling their computer systems. New Orleans needed to declare a state of emergency after citywide cyberattack. A coordinated ransomware attack hit 23 Texas government agencies. Do you know what can be done to minimize your exposure to a cyber threat? And of course, while remaining compliant with the HIPAA regulations that EMS providers need to follow.

***In Another's Eyes: Patient Advocacy & How We Leave Impressions in Our Patients Experiences (Provider Well Being) – Jeffrey Nichols***

Patients come and go, sometimes too fast to even remember all the details. But we as prehospital providers, or in-hospital for that matter, can leave an incredible impression in the lives of our patients. It is up to us as to what that equates to. Does that mean the patient being assessed, packaged, and processed like a Amazon special, with no human connection? Does this leave the patient uninformed, scared, and forever jaded in future healthcare interactions? Simple things that we can do with our patients' can go a long way. We have things like AIDET et al., but whether it's telling the patient he or she may have cancer, telling the wife of 65 years that her husband cannot be resuscitated, telling the family member that their loved one has died of an overdose, it's a memory that we can play an incredible role in how that will be ingrained for the rest of their lives. In this talk, we will discuss simple human compassion, dignity, body signals, and speech can help make the best possibility of worst situation. But also how we need to do a better job of looking after each other's, and strategies to do so.

**4:00 PM**

***Redesigning EMS: Everything We Know Is Wrong [Operations] (All Provider Levels EMR-Paramedic) – Kelly Grayson***

Paramedics save lives. Response times matter. Trauma patients must make it to the operating room within the Golden Hour. ALS ambulances are the highest standard

of care we can offer a community. All patients who call 911 should be transported to the Emergency Department. Most prehospital providers assume these statements are true, and systems are designed accordingly, but current medical research is challenging many long-held assumptions about prehospital emergency care. This presentation will examine how we might redesign EMS in the future, based on the premise that everything we know is wrong.

***Capnography: Not Just for the Airway [ARV] (Basic Life Support EMR-EMT) – Kenneth Navarro***

Arguably, capnography is one of the most important advances in modern EMS medicine. While most medics are familiar with the importance of using waveform capnography for airway management, the technology provides a reliable glimpse into the patient's metabolic state. This presentation will review the physiology that produces a capnography waveform and use a case-based format to explore the value of capnography in a patient suffering from a drug overdose.

***Fully Involved: When You're a Hammer, Everything is a Nail [Operations] (EMS Operations/Management) – Mark Von Appen***

Description Coming Soon!

***LIFE AFTER PTSD. Reinventing Yourself After Psychological Trauma (Provider Well Being) – Kyle Wilkinson***

In 2019, I was privileged to present my personal story of Post Traumatic Stress Disorder to the attendees of WEMSA Expo. It was about myself and my career, how I went from a once enthusiastic firefighter/paramedic; to a person I didn't even recognize. Depressed and suicidal. A conversation ensued about how we can recognize and help our coworkers who may be suffering a similar fate.

I struggled for quite some time to come to grips that I would never lace up my boots or don an SCBA again. This was tough. It was everything I'd known my entire adult life.

I will talk about career pathways, continuing psychological care, wellness and diversification. How to become an advocate for your own care can be lifesaving. We will explore how I have turned a negative life event into one of great positivity.

As First Responders, we are all only one call away from "the one" that breaks us.