IEMSA

April – June 2008

A VOICE FOR POSITIVE CHANGE IN IOWA EMS



New Member Welcome 5 | Continuing Education 6 | Iowa EMS Cruise 10



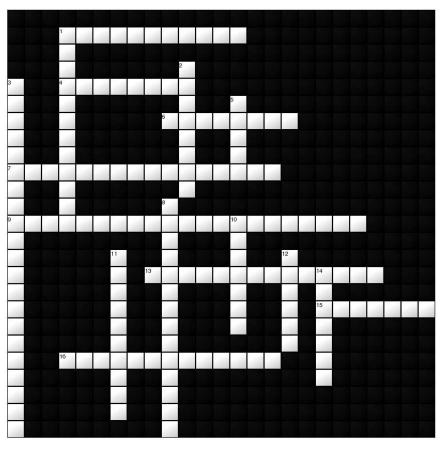


Iowa Emergency Medical Services Association Newsletter is Published Quarterly by:

IOWA EMERGENCY MEDICAL SERVICES ASSOCIATION

2600 Vine Street, Suite 400 • West Des Moines, IA 50265

IEMSA CROSSWORD PUZZLE Challenge



ACROSS

- **1** The presence of air in the veins, which can lead to cardiac arrest if it enters the heart.
- 4 The bones that form the upper jaw on either side of the face; they contain the upper teeth and form part the orbit of the eye, the nasal cavity, and the palate.
- **6** The bone of the lower jaw.
- 7 The eardrum, which lies between the external and middle ear.
- **9** The ear canal; leads to the tympanic membrane.
- **13** The prominent bony mass at the base of the skull about 1' posterior to the external opening of the ear.
- 15 Pulled or torn away.
- **16** The large opening at the base of the skull through which the brain connects to the spinal cord.

DOWN

- **1** The firm prominence in the upper part of the larynx formed by the thyroid cartilage.
- 2 The collection of blood in a space, tissue, or
- organ due to a break in the wall of a blood vessel. **3** A characteristic crackling sensation felt on palpation
- of the skin, caused by the presence of air in soft tissues.
- **5** The external, visible part of the ear.
- **8** A branch of the internal auditory canal that connects the middle ear to the oropharynx.
- **10** The most posterior portion of the skull.
- 11 Layers of bone within the nasal cavity.
- 12 The small, rounded, fleshy bulge that lies immediately anterior to the ear canal.
- 14 The skull.

Crossword puzzle solutions printed on page 22. Reprinted with permission from Jones & Bartlett Publishers.



Board Meetings:

The IEMSA Board of Directors will meet, either in person or via teleconference, on the following dates. All meetings, with the exception of the Annual meeting, will be held at 1:00 p.m.

2008

- May 15 **WDMEMS**
- June 19 Teleconference
- July NO MEETING
- August 21 **WDMEMS**
- September 18 Teleconference
- October 16 **WDMEMS**
- November 13 ANNUAL MEETING Polk County Convention Complex
- December 18 **WDMEMS**

To participate in the teleconference meetings, call the IEMSA office for instructions.

Additional Important Dates:

November 13 - 15, 2008 Annual Conference & Trade Show Des Moines, Iowa

March 15 - 22, 2009 Iowa EMS Cruise

Departs from Miami, Florida

A Message from the President



John Hill, EMT-PS **IEMSA President** Board of Directors

mergency Medical Services (EMS) Week is from May 18 to May 24 this year. EMS Week is a week of celebration dedicated to the achievements of the men and women who daily are on the front lines within the EMS community. These men and women who are First Responders, Emergency Medical Technicians, Paramedics, Emergency Medical Dispatchers, and other team members like Emergency Room Physicians and Emergency Room Nurses deliver life saving skills to people every day.

PARAMEDIC SPECIALIST

Answering over 350 calls each year, Stuart Rescue is a volunteer ambulance service that functions at the Paramedic level. Currently the only full-time position is the Director of Operations. Due to the increasing number of calls, this aggressive service is in the process of hiring a second full-time Paramedic Specialist.

This will be a full-time position that includes an excellent benefit package with health care coverage and a competitive salary.

OUALIFICATIONS INCLUDE

- At least one year of experience at the Paramedic Specialist level
- Current Iowa PS certification
- Current drivers license, class D
- Current ACLS
- Current BLS

Applicants will be required to submit to a drug screen, oral interview and a background investigation.

Resumes need to be received by June 1, 2008. The hire date will be July 1, 2008.

SEND RESUME TO

Stuart Rescue Attn: Jeff Howard, PS Box 370 211 E. Front St. Stuart, IA. 50250 stuartrescue@mchsi.com

This year's theme, "Your Life is Our Mission," reflects the powerful commitment that EMS providers, both volunteer and career, and their services and community partners have made in order to render care in their communities.

I would like to begin by saying "Thank You" to all EMS providers for being there when your community calls, and to your families and employers who support you in your very important work. Delivering quality emergency care has always presented challenges. Our world today brings many new ones to EMS providers and their services. Systems and people have surmounted extraordinary times in the history of EMS. Each of you has demonstrated that extraordinary accomplishments can be achieved when we all work together toward a common mission.

The Iowa Emergency Medical Services Association Board of Directors would also like to thank each and every one of you for the many hours you spend training and delivering care to those in need. The same recognition goes to your loved ones for the sacrifices that they also make in the support of your work. It takes an exceptional person to choose a career or to become a volunteer in EMS. You are entrusted with the responsibility of providing medical care in urgent situations, and you work tirelessly to respond with swiftness, professionalism, and compassion in the face of a crisis.

Today's EMS is more than just an ambulance. With advances in modern technology, exciting new medical procedures, and dedication to countless hours of skilled training, the emergency room on wheels will arrive at any scene of an emergency incident prepared to provide essential life saving skills and treatment. EMS Week also provides an opportunity to educate the public on safety and what it is you all do so well. We at IEMSA are committed to providing a voice and promoting the highest quality and standards of Iowa's Emergency Medical Services.

EMS Week is also a time to honor and remember those who have gone before us. This year on May 17 IEMSA added nine names to the EMS Memorial. Nothing can erase the grief and sorrow many of you have felt over your loss, but I hope and pray you can take comfort in knowing that there was abundant meaning in their lives. Take heart in knowing that they were engaged in an endeavor that is a measure of human greatness, and that they will always be remembered for their courage, honor and selfless dedication. Always remember that they made a difference in this world because they died doing something that mattered.

God bless you all and please be safe!

IOWA EMERGENCY MEDICAL SERVICES ASSOCIATION BOARD OF DIRECTORS 2008

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Reflecting on EMS Week



Azeemuddin Ahmed, MD, FACEP IEMSA Medical Director

MS Week serves as time to honor the wonderful service provided by EMS personnel every day across our great state. This year's theme of "Your Life is Our Mission" is quite poignant and allows for reflection on who we are, and who we want to be for the rest of our careers.

The EMS professional, regardless of paid or volunteer status or whether you are a

first responder, EMT, paramedic, nurse or physician, has committed to a lifetime of care of the sick and injured, which still stands as one of the most noble pursuits in society. Very few professions provide comfort, compassion and service without regard to the patient's color, creed, socioeconomic status or political views. Granted, there are economic pressures on all of us and medical care is a business, but what we aim to achieve is still quite pure at the core. When I fly with my crews, I see their dedication, professionalism and attention to detail that makes them a credit to their chosen field. It is exciting to be a part of helping people and improving the quality of their lives. That is one of the reasons I chose Emergency Medicine as a specialty and continue to work in the field as an EMS provider.

Let us not forget our patients who can be grateful, angry, agitated, or comatose, among other things. They depend on us the help them in times of crisis (when they cannot help themselves), and we must honor that commitment. No one wants people to become ill or injured, but if that should happen, then the public knows that they are in safe hands. They are in our hands. Let us not forget our families who support us during shift work, or during that 2:00 AM call for EMS service. Without them, our jobs would be even more difficult and I truly feel that they should also be recognized during EMS Week as their encouragement and resolve helps us care for others. Give them a hug when you get home.

As the Medical Director of IEMSA, I congratulate and honor the service of all EMS providers. It is an honor to work with you. Best wishes for a safe and comfortable summer!

Apply for an

IEMSA EDUCATIONAL SCHOLARSHIP

The Iowa EMS Association is offering a scholarship for persons wishing to pursue or further their EMS education. Scholarships will be offered as follows:

First Responder
 EMT-Basic
 EMT-Intermediate
 EMT-Paramedic
 Paramedic Specialist
 \$150.00
 \$750.00
 \$750.00
 \$1000.00

To be eligible, applicants must meet the following criteria:

- Current lowa resident
- Current IEMSA member or parent, child or spouse of a current IEMSA member
- Enrolled or enrolling in an Iowa-based EMS Training Program
- At least 17 years of age if enrolling in a First Responder or EMT-Basic program
- At least 18 years of age if enrolling in an Intermediate,
 Paramedic, or Paramedic Specialist program
- Financial need (limited or no other financial aid or grants available)
- Completed and submitted application form
- Agree to participate in publication about the IEMSA scholarship if requested

IEMSA members and direct family of IEMSA members will be given preference. Scholarship recipients will be contacted individually and announced in the IEMSA Newsletter.

For a complete list of eligibility requirements and an application, download the guidelines from the EMS Training page at www.iemsa.net.

Remember to pass the word on to others you know, who have their sights set on a career in EMS.

Welcome New IEMSA Members

JANUARY - MARCH, 2008

AFFILIATES:

Boyden Ambulance Service Des Moines Fire Department Essex Fire & Rescue

INDIVIDUALS:

Dirk Albaugh
Cindy Blake
Karen Bosma
Lori Chia
Dennis Cochran
Ralph Dicesare
Elaine Ferin
Tom Ferin
Jim Fox
Janice Gavin
Bob Gavin
Dan Gonner
Holly Helmle

Adam Hoffman Lindsey Johnson Mark Mahler Amy McCasland Shane Mell Terry Mueller Deanne Normann Tom Patava Staphanie Penniston Dan Perkins Carla Pester

Dennis Petesch

Jefferson County EMS Association Lenox Ambulance MacEdonia Fire & Ambulance

Jay Rhoten
Dean Rodriguez
Matthew
Schlichting
Kelly Schubert
Mike Smith
Ryan Sutcliffe
Joe Wilgenbusch

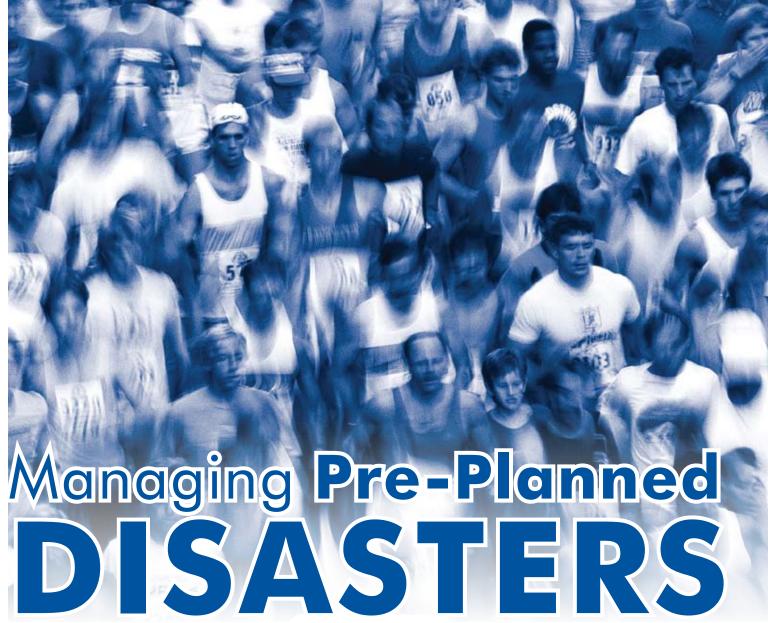
STUDENTS:

Andria Allsup Kyle Arnold Tonya Austin Peg Back Nate Baggett
Jerry Behrens
Melinda Bruecken
Joe Dougherty
Cory Feltner
Kimberly Fiebiger
Sarah Fiebiger
Beth Fleming
Charli Giberson
Alexandra
Gleason
Kody Hamburg
Greg Heine
Randy Hoover

Monticello Ambulance Runnells Fire Department St. Mary's Fire Department

Tonya Johnson
Michele Keiser
Carolyn Kleckner
Kirstee Kruse
Matthew Lohrman
Matthew Lunn
Cindy Maynard
Mary Alice
Mcatee
Cory Mcfarland
Patrick Mooney
Marcelle Murray
Justin Murray
Devin Nemec

Nathaniel Nielsen Heidi Nye Nate Overturf Jeremiah Pratt Abigail Rice Russell Roser Mike Saylers Stacey Scheetz Ashley Seehusen Jane Story Darren Tooley Eric Wallace Carmen Winkel Andrew Winter



CHUCK GIPSON

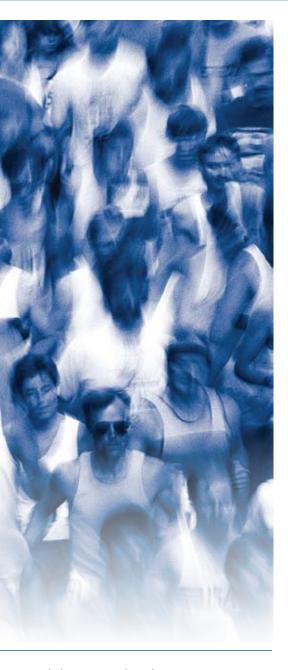
The event is the Bix 7 road race. Upwards of 20,000 people will gather to travel the seven-mile course, while several thousand others join in as spectators on what will most likely be one of the hottest days of the summer. As EMS providers we can sit back and wait for the chaos of this event to happen or we can enter this event as a well-prepared crew ready for the events to unfold. Ambulances are staffed and stocked with extra supplies at the ready. Other nearby services have been contacted and have committed to help along side ALS, first responders and first aid volunteers. With an event as large and complex as the Bix 7 it is important to plan well in advance, and to hold planning meetings

for all of the departments involved. You need to brainstorm the many scenarios that can happen with such an event. In this case, injuries, heat emergencies or other medical conditions will likely be the most common problems. With careful planning you will be able to treat these medical emergencies on a large scale and finish the event successfully.

The first step in any event is planning. You must first know what you have to work with and what other resources you have at your disposal, and where and how to acquire them. Knowing this, you will need to start with the race course. How large is it? Is it shady or sunny, flat or hilly? In the mass chaos planning you need to figure out the

"worst case scenario" and work backwards. What are the potential problems? Where will you station crews? Will your crews be on foot, bikes, or golf carts? In the case of the Bix 7 all of these resources are deployed. Whichever your position on the course after the gun goes off, the runners come streaming by with great speed and agility, then runners at a steady jog, followed by the final groups of walkers, whether pushing themselves or supporting their cause and finally... Hey was that Elvis walking on stilts wearing a white jumpsuit and a cape?

When the runners register for the race, they are given a race number that is linked to a database containing their medical history and demographic information, which



helps immensely in beginning treatment for these participants. All of the local hospitals take their turn in rotation for receiving patients from the race, unless they are trauma patients, in which case the state trauma protocol is to be followed. Some years as many as 70 race-related patients have been transported within a two-hour time frame in addition to the daily 911 calls and transfers. Other years it has been as few as a handful. Several others are seen for a quick cool down and sent on their way without being treated or transported. The course is seven miles of ups and downs winding its way through the downtown area that can cause all types of emergencies to participants. As responders this causes a need to layout access routes into and out of the course area since major streets are now blocked with thousands of people.

A few runners call it quits with injuries along the race way and need medical attention, but the vast majority of the patients that are transported come from one of two places. Immediately after crossing the finish line there is a medical tent to welcome those unable to make it another step. From here they can be seen by volunteer nurses and doctors to get them back on their feet or be transported if their condition warrants. The second gathering point is at the party after they funnel through the finish chutes. Here complimentary snacks, fruit and beverages are served to participants as a celebration. By this time it is getting really hot and humid with usually a blistering sun. This location is where a majority of patients are found and transported.

Heat-related emergencies are most common among the issues that EMS providers face during an event like this. There are several chances to grab water along the course as well as residents setting up lawn sprinklers to attempt to offer runners a brief cooling along their journey, but seven miles of exertion takes a toll on the athletes. Heat and humidity diminish the ability for the body to cool itself off by reducing evaporation of perspiration. As the body continues to perspire in an attempt to reduce temperature, dehydration begins to set in. Without taking recovery time to rehydrate and cool off, the heat exhaustion rapidly progresses into heat stroke, which has a 50% chance of being a fatal condition. During heat stroke the natural cooling mechanisms in the body fail to cool it down properly and perspiration ceases causing a rise in temperature and progressively grave condition if not treated. Treatment of heat-related emergencies includes cooling the body rapidly without causing shivering, which is also counter productive by causing increased heat production along with reduced cooling abilities. In an attempt to cool large numbers of people, the fire department brings in large electric fans with water misting heads to allow cool water to be blown onto passers by, causing widespread temporary cooling. As electrolytes become imbalanced with dehydration muscle groups begin to cramp, causing additional physical stress to patients already borderline with shock symptoms and compensating to

the best of their ability. With compensated shock you would expect to have vital signs beginning to change resulting in tachycardia, hypertension, and tachypnea progressing into decompensated shock where vital signs change again with heart rate slowing down and blood pressure dropping to the point of hypotension. Care for hyperthermia should include cardiac monitoring, large bore IV access with fluid replacement therapy, high-flow oxygen through a nonrebreathing mask, pulse oximetry, and wave form capnography if available. With all of the high technology equipment it can be easy to forget the simple treatments such as removing the patient from the environment and removing clothing followed by gentle but rapid transport to a hospital. IV fluid replacement should be given carefully as to not flood the vascular system with crystalloid solutions without closely monitoring vital signs and lung sounds. Oral fluids are a good choice for fluid replacement for a conscious patient with heat exhaustion as long as they are non-alcoholic and caffeine free. Sports drinks are a good choice as long as they are consumed along with water.

Another medical condition that can cause a challenge to runners in the hot and humid conditions is respiratory difficulties such as exercise-induced asthma or aggravation of other obstructive diseases. Many runners do not have any pockets or packs in which to carry metered dose inhalers for treatment of respiratory emergencies. Some runners and walkers develop their difficulties during the course and seek medical attention, but others are strong-willed and goal-oriented enough to push themselves to the extremes of finishing the race. Respiratory emergencies are compounded when paired with the body being compromised by a hyperthermic condition. Cardiac conditions can also be precipitated by increased physical demands on a body that is not properly conditioned for the annual seven-mile pilgrimage. Patients have been transported in previous events with bouts of ventricular tachycardia and cardiac arrest. One thing to keep in mind is that you do not have to take a physical to sign up and participate in the road race.

Another large event that creates a planned mass casualty event that will cause stress to many services all across Iowa is RAGBRAI. During this event, thousands of bicyclists start on the western side of the

state and ride the three hundred miles across the state, ending on Iowa's eastern side at yet another celebration where large groups of people have met their goal and pushed themselves to their limits. These riders of all ability levels spend a week of riding during the day and camping in the evening, slowly but surely making their way from the Missouri river to the Mississippi river. Participants flood communities along the way with celebrations revenue along with the possibility of overwhelming EMS systems and hospitals of smaller communities with surge volumes of patients. Those that have the route scheduled to run through their town more than likely have plans for extra crews and staff well under way in preparation for the event.

Both of these events can easily push the limits of even the highest performance EMS systems with the best laid plans. We are very fortunate to have both of these events happening in our community this year. The ultimate test of plans, teamwork, and community support for a planned mass casualty incident with more than one location and operational phase will happen as both of

these events happen in our community on the same day.

Most likely all of us have some type of event that visits our community that can stress the emergency services beyond our capabilities, whether it be a county fair, air show, or summer concert event. Setting up for any of these events can be a challenge to any community as it can rapidly consume the available resources from all of the surrounding communities. Double scheduled events such as the Bix 7 and RAGBRAI on the same day could be a great reason to open an emergency operations center and set up an incident command center before the events even get under way. Attending training sessions on incident management and calling on other communities that may have done these events in the past could be a great resource for your planning. Having mutual aid agreements with surrounding services is a must in this type of preplanned disaster. Having the knowledge of a disaster before it happens is the ideal way to address one, making sure all of your equipment, supplies and staff are at the ready.

References

Quad City Times, Bix 7 www.bix7.com

Kevin J. Lange, NREMT-P Planned Chaos Iuly 11, 2006 **RAGBRAI** www.ragbrai.com

NIMS ICS www.fema.gov

> Chuck Gipson is the ADM/Education Manager for MEDIC EMS in Davenport Iowa. Chuck has been a paramedic for 14 years, 10 of which have been at MEDIC EMS. Chuck has been an educator for Eastern Iowa Community College and sits on the Education Committee for the NAEMT.

> Chuck can be reached by email at gipson@medicems.com.

FIREFIGHTER/EMT-B

The City of Cedar Rapids Fire Dept. is seeking qualified applicants for the position of Firefighter/EMT-B.

REOUIREMENTS

- EMT-B certified by the state of lowa by the date of the written exam (Wednesday, June 11, 2008)
- Residency Requirements 50 miles from Central Fire Station
- Valid Driver's License
- No Felony Convictions
- Must be at least 18 years of age
- Must possess a high school diploma or equivalent

APPLICATIONS MAY BE OBTAINED FROM

The City of Cedar Rapids Human Resources Dept. 51 1st Ave Bridge/City Hall Cedar Rapids, Iowa 52401 (319) 286-5000

The Cedar Rapids Fire Dept. 222 3rd St NW

Cedar Rapids, Iowa 52405

(319) 286-5200

Open for Applications Monday, May 5, 2008 Application Deadline 4:30 P.M. on Friday, May 23, 2008 (Please allow ample time to return completed packet)

\$15 fee to participate in the written Firefighter Exam PRE-EMPLOYMENT DRUG SCREENING REQUIRED / EOE

Assistance provided to disabled individuals upon request



10 QUESTION POST-ARTICLE UIZ

1) What should be included in planning for a large scale event?

A) Staffing

- **C)** The environment
- B) Resources
- **D)** All of the above

2) The most common medical emergency related to summer time events is:

- **A)** Traumatic injuries
- C) Heat exhaustion
- B) Anaphylaxis
- **D)** Respiratory emergencies

3) Preparation for large scale events may include:

- A) Planning meetings
- **C)** Disaster drills
- B) Mutual aid agreements
- **D)** All of the above

4) What percentage of patients with heat stroke will potentially develop into a fatal condition?

- **A)** 25% **B)** 50% **C)** 75% **D)** 100%
- 5) Heat and humidity impair the body's ability to effectively cool itself down.
 - Δ1 True
- **B)** False

6) The best choice for fluid replacement for a patient with dehydration if they are unresponsive is:

- A) Sports drinks
- C) Iced tea
- B) Cool water
- **D)** IV fluid therapy

7) It is important to contact other agencies in your area for assistance before the event begins as part of your preparation.

- A) True
- B) False

8) In patients experiencing compensated shock, what would you expect their vital signs to be?

- A) Increased pulse with increased blood pressure and a normal respiratory rate
- B) Decreased pulse with decreased blood pressure and a decreased respiratory rate
- C) All vital signs will be normal
- **D)** Increased pulse with a decreased blood pressure and agonal respirations

9) Since all large scale events are the same, it is not necessary to carefully look at every aspect of each event to make sure all possible scenarios have been well thought out.

- A) True
- **B)** False

10) With preparation for a large scale event it is better to:

- A) Prepare months in advance with meetings
- B) Assume you have it covered
- C) Have a meeting the night before
- **D)** Take vacation that week

NEWS TO SHARE

Are you working on an exciting program that needs to be shared with the membership of IEMSA? Do you know of an EMS-related educational program that needs to be showcased? Has your service won an award or done something outstanding? Do you want to honor a special member of your staff or community? Do you have an EMS story you want to share? If so, you can submit an article to be published in the IEMSA newsletter! In order to do this, just prepare the article (and pictures, if appropriate) and e-mail it to administration@iemsa.net by the following dates: **July 1** (to be mailed by August 18) and **November 15** (to be mailed by December 15).

The Newsletter Committee will review all articles submitted and reserves the right to edit the articles, if necessary.

IEMSA continuing education answer form

CLI	P AND	RETUR	N						
(Please print legibly.)									
Name									
Addr	ess								
City									
State ZIP									
Daytime Phone Number/									
E-mail									
lowa EMS Association Member # EMS Level									
1.	A.	В.	C.	D.					
2.	A.	B.	C.	D.					
3.	A.	В.	C.	D.					
4.	A.	В.	C.	D.					
5.	A.	В.							
6.	A.	В.	C.	D.					
7.	A.	B.							
8.	A.	В.	C.	D.					
9.	A.	В.							
10.	A.	В.	C.	D.					

IEMSA Members completing this informal continuing education activity should complete all questions, one through ten, and achieve at least an 80% score in order to receive the one hour (1 CEH) of optional continuing education through Indian Hills Community College in Ottumwa, Provider #15.

For those who have access to email, please email the above information along with your answers to: administration@iemsa.net.

Otherwise, mail this completed test to:
Angie Moore
IEMSA
2600 Vine Street, Ste. 400

West Des Moines, IA 50265

The deadline to submit this post test is JUNE 30, 2008



The FIRST DON HUNJADI, EMT-I

et ready for one offering from the Iowa EMS Association that you will not want to miss! For the first time ever, IEMSA has announced they will host their first EMS Cruise, sailing March 15-22, 2009 from Miami to Grand Cayman, Roatan, Belize and Cozumel.

Imagine the fun that comes along with cruising with fellow EMTs, Paramedics,

First Responders, Firefighters and other EMS providers just like you. That's what the Iowa EMS Cruise is all about! More than 5,000 emergency services providers have taken part in other EMS and fire cruise events throughout the Nation. More

than 11 million people will take a cruise in 2009. Now here is your chance to take part in the very first Iowa EMS Cruise, where you are sure to have the vacation of a lifetime!

The Iowa EMS Cruise will take place aboard the Carnival Valor - the largest Carnival "Fun Ship" based at the Port of Miami. The Carnival Valor features the fitting theme of Heroes and Heroics, which is particularly appropriate for our first EMS cruise. Featuring endless entertainment options, duty-free shopping, a friendly casino and Spa Carnival, it's the Carnival Valor's unforgettable onboard experience that makes it the best vacation value around. Come aboard and see for yourself. In fact, you can take a virtual tour of the ship right now by visiting www.iemsa.net.

If this is your first cruise, you simply won't believe how much fun you will have. If you have cruised before, you are still in for a treat because taking an EMS Cruise is like no other.

To begin with, the Iowa EMS Association has used its negotiating power to obtain cabin rates that are hundreds of dollars below what nearly everyone else

> will pay for this same cruise. Go ahead. Check and compare our pricing of an inside, oceanview or balcony cabin against other sellers for the same cruise. But the value doesn't end there because booking your cabin as part of the

Iowa EMS Cruise provides a host of additional amenities that are not available to the general public. All Iowa EMS Cruisers will receive a complimentary subscription to the EMS Cruisers News. This newsletter will be published four times prior to the cruise and mailed to the main person listed for each cabin. It contains all sorts of information to help you plan for the event, including information on the ports of call, on-board cruise events, schedules, special offers and more.

On the first or second evening all EMS Cruisers are invited to attend the welcome aboard cocktail party. Reserved exclusively for the EMS Cruise, you'll enjoy complimentary cocktails, soft drinks and hot and cold appetizers. Plus, you'll be able to meet everyone else that is traveling with

you on the EMS Cruise. We'll also host a final farewell party on the last night of the cruise that will include complimentary food, drinks and prizes. During the week there will be several other get togethers including a group photo that will be taken and offered for sale at reduced prices both on the ship and at even greater discounts after you return home. You'll also be able to book your cruise and travel with complete confidence by using the services of the EMS Cruise staff as well as representatives from Magic Carpet Travel, the official EMS Cruise travel agency, both prior to the cruise and throughout the event. Their staff will help you with anything that you may need assistance with.

Like all cruises, your booking includes all meal functions on-board the ship, juice,



THE FIRST IOWA EMS CRUISE **PRICING**

Inside 4A

\$380 \$500

Ocean View 6A

\$670

Balcony 8A

- All prices listed are per person
- All cabin requests are subject to availability

 For single occupancy, the cabin price is double the per person rate
- 3rd and 4th passengers in Inside Cabin \$270
- * 3rd and 4th passengers in Ocean View Cabin \$300
- * 3rd and 4th passengers in Balcony Cabin \$350 * Please note that triple and quad cabins are very limited



lemonade, coffee and other non-alcohol and non-soft drink beverages. All meals, awardwinning entertainment, onboard activities and accommodations are also included. There is no charge to go to shore, but various shore excursions are extra.

We are sure that you will enjoy a comfortable traveling experience aboard the Carnival Valor. Every Carnival guest is assured of spacious, comfortable accommodations. All staterooms have carpeting, ample drawer and closet space, private facilities (shower, basin and toilet), telephone

PORTS OF CALL						
Sunday	Miami					
Monday	Day at Sea					
Tuesday	Grand Cayman					
Wednesday	Roatan Island					
Thursday	Belize					
Friday	Cozumel					
Saturday	Day at Sea					
Sunday	Miami					

and color television showing first-run films. The Carnival SuperLiners all feature staterooms above ocean level for a more comfortable cruise.

Best of all, cabin pricing starts at just \$380 per person. Like we said earlier, check and compare and you'll find these rates far below everyone else's. Here are the cabin prices: Inside 4A, \$380; Ocean View, 6A, \$500; and Balcony, 8A, \$670. A limited number of suites may also be available. These luxurious cabins start at about \$1,200 per person.

Flights will be available from a variety of airports. Putting it all together, and depending on your cabin selection, we are certain you can go on the Iowa EMS Cruise for less than \$1,000 per person, complete! That's right - get everything you will need to enjoy your seven days at sea for less than a grand! Talk about an awesome vacation deal and an incredible value.

The Iowa EMS Cruise will also offer precruise package options for those who would like to fly to Miami a day or two prior to the cruise. Because this information is not yet available, we are not able to provide any of the details or pricing. We will have this information together in a couple of months.

Speaking of booking your cruise, a nonrefundable deposit of \$25.00 per person is all that it takes to hold your cabin space. Final payments for the EMS Cruise will be due December 1, 2008. All Lead Cruisers will be sent an invoice detailing the final charges for the cruise.

So just what are you still waiting for? You can be among the very first to book the Iowa EMS Cruise. Don't forget, your friends and family members can participate too, even if they are not involved in EMS. To book your cruise, simply visit www.iemsa.net. Then follow the cruise link to get all of the information and then to book your Iowa EMS Cruise. You may pay your \$25 deposit by major credit card, check, or money order. Cabins are very likely to sell out quickly, so don't wait to reserve yours. We can only guarantee this fantastic price on our original block of cabins. When they are gone, they are gone. The price could go up after that.

Talk it over with your family. Call up your friends. Go ahead and get a group together to go along. Either way, you are sure to have the time of your life and memories that will last forever from the first ever Iowa EMS Cruise.

EMS Competition Team

embers of the West Des Moines EMS Competition Team traveled to Baltimore, Maryland in March to participate Lin the annual JEMS Games competition. The team, composed of Lee Thomas, Mark McCulloch, Malcom Cortner and Ben Knudson - though delayed by their airline - arrived in time to finish in the top five in the preliminary competition and progress to the finals. Over 25 teams from throughout the country participated and only five were chosen to move on to the finals.

The final competition was a simulation of an earthquake with building collapse and a multi-casualty incident involving several patients and scenarios. The team did a superb job in handling the situation and represented the great EMS providers we have here in Iowa by finishing fourth in the final competition. FDNY was the winner of the overall competition.

"This was a great opportunity for us to showcase our service and Iowa EMS," stated Chief Jeff Dumermuth. "Beating teams like Miami-Dade, San Diego and Reno demonstrates that we have great talent here in Iowa and can compete with the best of the best."

The Iowa EMS Association is planning on sponsoring an IOWA EMS GAMES competition this year during our annual convention. Services should consider putting together a team and watch the association website for further information.

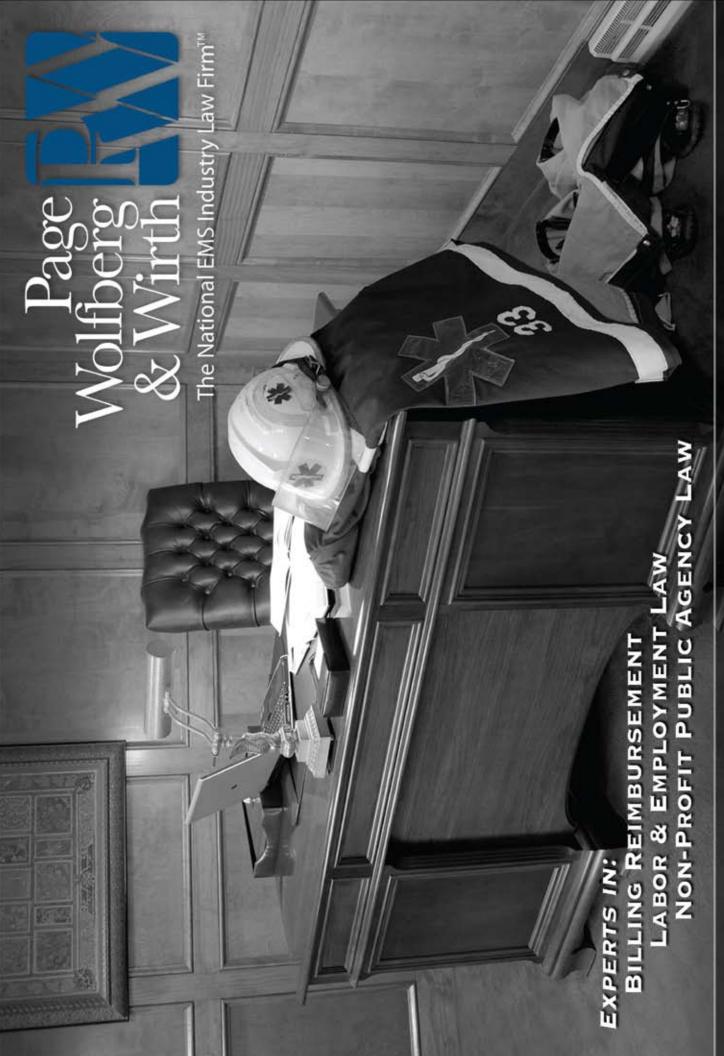
Honoring Our Own 2008

TOM SUMMITT, COMMITTEE CHAIRMAN

lease join us for Honoring Our Own 2008, a moving service honoring volunteer and career EMS and fire personnel from Iowa who are no longer with us.

If you know of someone who has died within the last 10 years and was part of our "family," please consider including them in this year's presentation. Please indicate whether or not the death was in the line of duty. Also, please remember that the death does not have to be line of duty death in order to be included in this presentation. Any service interested in being featured in the Honoring Our Own video can also email Tom to discuss the details. Please mail a photo and the information listed above to Tom Summitt, Honoring Our Own, 1718 Timberline Drive, Muscatine, Iowa 52761. You may also scan and email the photo to tcsummitt@machlink.com. Please note "Honoring Our Own" in subject line. If you have any questions, please contact Tom at 563-506-0103.

If you have never seen our presentation at the Iowa EMS Conference, please plan to attend the next one at the 2008 Annual Conference. It is a beautiful remembrance of a precious life that once served Iowa EMS.



RESPONDING... HOWEVER AND WHENEVER YOU NEED US

What's New with the Bureau

ANITA J. BAILEY, PS

Iowa EMS System Standards Grant Awards

t was a very difficult selection process because the bureau received many Lexceptional proposals to provide data for the development and implementation of a statewide EMS system delivery model. The selected counties will work locally to develop the eight critical areas of EMS systems as defined in "Iowa EMS System Standards, What Every Iowan Can Expect From Emergency Medical Systems." To ensure statewide representation, the Bureau is funding the following jurisdictions:

- Rural EMS systems serving counties of less than 20,000 - Calhoun County
- Urban EMS systems serving counties of more than 50,000 - Woodbury County
- EMS systems serving counties of greater than 20,000 and less than 50,000 - Des Moines and Jones Counties

Each county will collect evidence that will illustrate the effectiveness, impact and costs that minimum standards have on their system. Phase One consists of a six-month evaluation of their existing EMS system to identify what the community has currently in place to meet the Iowa EMS System Standards. During Phase Two, the next 18 months of the project, the sites will utilize an evaluation tool to determine if further implementation of the minimum standards is valid for their system and whether the expected outcomes are realistic given the necessary investment of time and money as determined by the evaluation. According to Gene Haukoos, PS, Emmet County EMS Director and EMS System Standards Taskforce member, "System standards appears to be the vehicle local EMS will drive into the future. The goal is to develop some minimum guidelines to build systems that make good use of the less that is available here in rural Iowa. We have less people with less time. We have less money yet demands are growing on all fronts. That isn't going to change. This means we have to dig in and work with our neighbors to share limited resources."

National Scope of Practice Model

The Quality Assurance, Standards and Protocols (QASP) subcommittee of the Iowa EMS Advisory Council has recommended that the bureau seek public comment on the Iowa implementation of the National Scope of Practice Model. The document that explains the history, timelines and impact of each of the options will be posted at the Bureau of EMS website at www.idph. state.ia.us/ems from April 16 through June 25, 2008. Bureau of EMS Chief Schmitt explained, "It is important that we actively seek comments from the entire EMS community to help make these complex decisions. I encourage everyone, including providers, services, medical directors and educators to read the documents and let your voice be heard."

Grants are posted on the Grants, Bids and Proposals page at www.idph.state.ia.us.

County EMS system coordinators, please note that the RFA for the EMS System

Development Grants Fund to promote training (Part A) and system infrastructure support (Part B) is posted. Bureau of EMS grants coordinator Stephen Poole encourages counties to file early as the posted deadlines are firm.

And Finally...

"Your life is our mission" is the slogan for EMS Week May 18-24, 2008. This is the 35th year the American College of Emergency Physicians has spearheaded a week-long celebration to raise community awareness and promote injury and illness prevention. Iowa Governor Chet Culver has signed an EMS Week proclamation that provides special recognition to the 300 EMS Physician Medical Directors and nearly 800 Iowa businesses that allow EMS providers to respond to calls during work hours.

IOWA EMS SYSTEM STANDARDS PILOT PROJECT County Demographics									
COUNTY	County De	Des Moines	Jones	Woodbury					
Region	NW	SE	NE	NW					
Population	10,571	40,857	20,646	103,113					
Square Miles	571	408	585	871					
Medical Directors	3	5	4	10					
AUTHORIZED SERVICES	6	8	7	20					
Type Air Ambulance	0	1	0	1					
Ambulance	4	4	5	1					
Ambulance / TA	2	0	1	12					
Nontransport	0	3	1	6					
Level EMT-B	1	2	2	6					
EMT-I	3	1	1	6					
EMT-P	2	0	1	2					
Paramedic Specialist	0	5	3	6					
Staffing Volunteer Type	4	4	5	14					
Paid	0	4	1	6					
Volunteer and Paid	2	0	1	0					
EMS PROVIDERS	65	126	103	385					
First Responders	3	4	8	35					
EMT-B	51	68	53	200					
EMT-I	4	7	14	101					
EMT-P	3	7	8	9					
Paramedic Specialist	4	40	20	37					
Legacy Cert (i.e., EMT-A)	0	0	0	3					



ow, that was fun. Well, it was interesting. Okay, it was frustrating. No, it was fascinating. Following the legislation at the statehouse was all this and more. Could you imagine being in the pit attempting to write and pass bills of your own and then going out and getting reelected? I know, it happens

I am very pleased that EMS providers were included in the committee bill from IPERS which allows for us to be included in the

University of Okoboji EMS Conference

Spirit Lake, Iowa • September 20-21, 2008



Speakers: Frank Prowant, Bill Justice, A.J. Heightman, Jamie Temple

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protected class. On Friday, April 25 the bill was brought to the floor of the house for consideration with several amendments of the senate version. This meant the bill had to go back to the senate after passage in the house. The session was due to end on this day, so we were under the gun. At 5:50 Friday evening, the house version passed the senate to send the bill to the Governor's office for his signature.

This affects those EMS providers who work for city or county owned services not affiliated with a fire service. The total rate of contribution increased from 9.95% to 14.11%. The break down for employees goes from 3.9% to 5.64%, and employer from 6.05% to 8.47%.

Other benefits include changing retirement rule from "88" down to "72" plus disability benefits changes. For a complete list of changes, go to the IPERS web site (www.ipers.org) and look in the protected class benefits area.

Please do not call them yet, as the bill must be signed by the Governor and will not go into effect until July 1, 2008. Also, benefits are not retroactive but take effect on that date forward and a blend of benefits will be used to calculate your actual numbers.

Another bill we watched closely was the Emergency Response pilot project proposal. This bill passed to the Governor and creates a pilot project for a county-wide fire district. On its merits, this is a great idea for many areas, but it also creates many concerns including definitive boundaries for response, which may mean the closest department may or may not be the responding department. This project places all responsibility for financing EMS under a fire chief if the EMS service is affiliated with a fire service. Also, Iowa Fire Service is the lead agency of the project as the supervisors of the county approve the program. Many good ideas and many concerns.

Other bills we hoped to pass this year included four different proposals for tax credits for volunteers. Each one advanced to committees but did not make it to the end of the legislative session. We will be looking forward to next year and make this a

If you have any suggestions for next year's legislative session, please contact me through the IEMSA web site.



CELEBRATING IEMSA



Iowa Donor Network would like to thank the Iowa Emergency Medical Services
Association and your members for your continued partnership
to help us save and enhance lives throughout Iowa.

Over the last four years EMS providers have referred:

480 scene deaths

resulting in

57 tissue donors

saving and enhancing the lives of

5,700 people!

You play an important part in offering the option of donation when Iowans die outside of the hospital setting. To ensure all Iowans have the opportunity to donate, please make all scene death referrals to:

(800) 831-4131



We provide free donation education to paramedics and EMS providers throughout the Iowa.

Please contact Michelle Kelsey with your donation questions.



ercy Emergency Transport Services is a combined effort of the Mercy ONE Helicopter, Mercy Ambulance Service, and Mercy Communications Center. Together the three entities employ more than 60 people. Mercy ONE operates as a Nurse/Paramedic crew consisting of 17 medical crew members, three pilots, and two mechanics. Mercy Ambulance operates at both the EMT-PS/ CCP and EMT-B levels with 24 staff members, and the Mercy Communication Center consists of 14 EMS certified staff members.

Mercy ONE, formerly Mercy Air Life, was established in September 1986 and began taking flight requests in November of that same year. The communication center also began operation in 1986 for the purpose of dispatching the aircraft and flight following.

The Mercy Ambulance began service in 2003 with two ambulances operating from 0900 to 1700 hours. The ambulance department has now grown to contemplate adding a fifth ambulance in summer 2008. With that, we are also anticipating 24 hour coverage seven days a week by July 1, 2008. The ambulance currently has coverage Monday through Friday 0700-2300 and Saturday / Sunday 0700-1900.

The Mercy Communication Center has experienced much transition as their responsibilities continue to evolve. They now dispatch calls for not only three Mercy helicopters in Des Moines, Mason City, and Sioux City, but for the four, soon to be five, Mercy Ambulances. In-house they are the central hub for alerts such as a Level I Cardiac, Acute Strokes, Traumas, and Rapid Response Teams within the hospital. They process many other requests from Mercy Main Campus and also Mercy Capitol. This is not even to mention that they receive patient care reports from more than 15,300 inbound EMS agencies annually coming into the Mercy ER. All told they process over a minimum of 32,000 calls every year and the number shows no sign of decreasing.

2008 is becoming the year of change for our entire Emergency Services line. With the above mentioned and anxiously anticipated changes for the ambulance services, our communication services will soon be moving from their 100 square foot "closet" to a new state of the art 261 square foot communication center. The center will be located on the second floor of the new ambulance garage next to 10 new ER rooms, including a three-bay Trauma Suite. On the third floor of the addition will be the primary Heli-Pad for Mercy ONE, now landing in their new interim EC-135 helicopter. Then, by year's end, Mercy ONE is expected to move into their new permanent aircraft that is currently being built by Bell Helicopter and Air Methods Inc. This new Bell 429 will once again lead Mercy ONE in the aero-medical industry by being the fastest air medical helicopter with the latest technologies in flight and medical configuration in the state of Iowa.

Mercy Emergency Services remains committed to the community it serves through numerous community service projects and education. These projects range from Drunk Driving Prevention Programs in local and area high schools to Outreach Education Seminars held in surrounding communities presented to EMS, Nursing, and Physician healthcare providers. Other projects include Ground Safety Schools for

hrough the Years MERCY ONE HELICOP







EMS, Fire, and Law Enforcement personnel; annual appreciation lunch during National EMS Week; EMS "Wall of Fame"; school tours of the helicopter and ambulances; ACS updates held quarterly with local EMS; Public Relations visits to benefit entities of EMS; Youth Emergency Shelter Services; WDM's Learn-a-palooza, and many others. We have also been requested for fly-bys during services honoring those in our professional community whom

We have enjoyed much success over the years working with our Healthcare Partners and focusing on our Emergency Transport Services. Aside from the critical and routine transfers that all private helicopter and ambulance services are familiar with, we have been given many opportunities for new and exciting growth. The ambulance service has expanded its scope to include 911-response in certain areas, as well as change of quarters with surrounding municipal agencies when all of their resources are on active calls. This has been established in an attempt to assure consistent EMS ambulance coverage to those communities.

At many events in and around Des Moines, stop by and say hello to our EMS Staff as we provide coverage at many venues. To name a few: Iowa Cubs, Stars Hockey, Des Moines Arts Festival, and as the "Official Medical Provider" at the Iowa Speedway, providing helicopter, ambulance, physician, and urgent care services.

Mercy Emergency Services is a part of Mercy Medical Center in Des Moines, Iowa, a not-for-profit, 917 bed acute care medical center, that is a part of Catholic Health Initiatives, with the highest ER patient volume in the state. Founded in 1893 by The Sisters of Mercy, it is Des Moines' longest continually operating hospital and one of the

MERCY EMERGENCY SERVICES STATISTICS

15,300 in-bound ambulances in 2007, up from 13,500 in 2005.

3,904 Mercy Ambulance calls completed in 2007, from 4,412 actual requests, 1,400 in 2004.

734 Mercy ONE flights in 2007, from 1,375 actual requests.

Over 32,000 calls and reports answered by the Mercy Communication Center.

Over 67,000 patients seen in the adult and pediatric **Emergency Departments.**

state's largest employers with more than 6,800 employees and a medical staff of 900 physicians and allied health professionals.

In conclusion, Mercy **Emergency Transport** Services believes strongly in our combined mission statements. Simply stated, "We set out to provide the safest and highest quality of patient care both in the air and on the ground through cooperation and collaboration, with full respect towards patients, family members, medical personnel, the community, and fellow air and ground team members." This all being guided by our CORE Values of Reverence, Compassion, Integrity, and Excellence.

In Action MERCY EMERGENCY TRANSPORT SERVICES











nkeny Fire Department was estab-

lished in 1910 to meet the community's need for a fire department and emergency ambulance service. Since that time the department has continued to grow with the community and meet its needs for fire suppression, rescue and emergency medical services. The department initially provided ambulance service with nominal training and has progressively advanced the training of its personnel and the equipment utilized by the service. The department became one of the first services in Iowa to complete EMT-Ambulance training and was one of the pilot services for the University of Iowa, EMSLRC's manual, EMT-Defibrillator program. Ankeny Fire Department is proudly authorized at the Paramedic Specialist level by the Iowa Department of Public Health, Bureau of EMS.

The mission of our department is to deliver to our residents and neighbors the highest quality fire, medical and emergency services. The Ankeny Fire Department provides EMS coverage to the cities of Ankeny, Alleman and Elkhart, and rural areas of Polk County – a response area of approximately 100 square miles in northern Polk County. Our EMS department exists to meet the needs of our customers, providing quality emergency medical and rescue services 24 hours per day, seven days per week.

Ankeny has experienced significant population growth with a current estimated population of 41,000. EMS and fire responses have increased along with the population growth by 70 percent over seven years. Ankeny strives to meet a response time benchmark of arriving on scene with a staffed ambulance within eight minutes, 80 percent of the time. The department responded to 2,673 calls for service in 2007 and has noted that 18 percent of the time our department is responding to multiple calls for service. Our current response system utilizes first responder service from the Ankeny Police Department, Polk County Sheriff's Department and the Elkhart Fire Department. Our department has partnered with Polk City Fire Department for the provision of change of quarters ambulance, mutual aid and tiered, paramedic level response. This partnership has been mutually beneficial, providing daytime paramedic coverage for Polk City and paramedic and multiple ambulance response coverage for the City of Ankeny. A dual response zone has also been established along both service boundaries, further improving response times to those areas.

The department is staffed with 75 full-time and paid-on-call personnel who provide in-station staffing and call back response to multiple calls for service, fire alarms and assignments. For years, the department relied on paid-on-call personnel who responded to the station and then to the emergency call for service. In 1999, the department was experiencing increasing response times and lack of weekday paramedic coverage. In response, the city hired two fulltime firefighter/paramedics to provide coverage during the day, primarily for ambulance responses. To provide an immediate response 24 hours per day, an EMS First Response vehicle was placed into service. This unit was staffed at the Paramedic level when available, and at the EMT-B or Intermediate level when a paramedic was not available. This unit provided immediate EMS response while awaiting paid-on-call personnel to respond with the ambulance.

Elected officials and city management continued to recognize the need to improve staffing levels for the department. While paid-on-call personnel continued to provide call back staffing, over the course of five years the number of hours apparatus was staffed in station gradually increased. Initially, partial staffing of the ambulance and rescue engine provided immediate response for 12 hours per day, advanced to 16 hours per day and finally to 24 hours per day.

In July of 2006, four additional full time firefighter/paramedics were hired to supplement paid-on-call personnel. This addition of full-time personnel allowed the department to staff an ambulance and rescue engine 24 hours per day, seven days per week.

Currently, the department's full-time and paid-on-call personnel provide staffing for six personnel 24 hours per day. This provides paramedic level staffing for one ambulance and a four-person rescue engine. Call back of paid-on-call personnel and chief officers provide additional staffing for multiple EMS responses. While not required, all 62 of the department's paid-on-call personnel reside within Ankeny, providing a tremendous resource for call back situations.

The need for an expansion of the current fire station was identified in 2005. In 2006, Ankeny voters overwhelming approved a \$27 million dollar bond referendum to expand the current fire station, construct a satellite fire station and a new police headquarters. Improvements to the existing fire station include the addition of living quarters, workout facilities and expanded administrative and training areas. The current fire station expansion is scheduled for completion in July of 2008. Construction of the satellite station is anticipated to be completed by July of 2009.

Training plays an integral part of the department's quality improvement programming. An active training division directed by Division Chief Rob Chiappano provides daily, weekly and specialized training to maintain and improve the quality of service provided by our personnel. Job Performance Requirements (JPRs) are utilized to provide skills maintenance and training. Personnel are required to attend 75 percent of scheduled weekly training sessions and participate in daily training when they are on duty.



Medical Director Dr. Alan Heberer has been instrumental in the development of the department's EMS service over the past 20 years. Dr. Heberer is actively involved in the department training program, service development, protocol revision, review of patient care reports, quality improvement programming and development of a clearance program for personnel. Dr. Heberer

is also currently working with the training division to develop benchmarks for personnel specific to certification levels.

Highlights of our department's EMS procedures and equipment include:

- Physio-Control Lifepak 12 monitors with 12 lead ECG, NIBP, ETCO2 and SPO2
- STEMI and Stroke Alert Protocols
- Medicated Assisted Airway Procedure with paralytics
- Intraosseous Needle insertion for adult and pediatric patients
- Carboxyhemoglobin monitoring for firefighters and patients
- Chaplain program for responses and personnel

Ankeny Fire Department is an active partner in the community providing services and programs aimed at prevention, education and risk reduction. Our success is based upon the program coordination provided by firefighter/paramedic Karen Peters, who is the department's Public Education Coordinator. Public Programs initiatives include:

- Annual Fire Department open house. This function provides information on fire safety, CPR, first aid and an overview of the department's capabilities and resources.
- Monthly Community CPR Programs. The department offers the American Heart Association's "CPR for Friends and Family" program at no charge to members of the community on a monthly basis. The department also provides training referrals for businesses or industries in need of professional rescuer level CPR or First Aid programming.
- The Children's Life Safety House is utilized annually and during our open house to teach children about fire safety and the EDITH program (Exit Drills In The Home). Annually, every third grade class is offered the opportunity to participate in this program at their school. The department impacts approximately 550 to 600 students during this program.
- Fire extinguisher training for businesses in the community.
- Fire Prevention Week Activities that involve the schools and the community.
- Public speakers available to community groups upon request to discuss services provided by the department and life safety initiatives.

Ankeny Fire Department is proud of our 98-plus year tradition of providing fire suppression, emergency medical services, rescue, fire prevention/public education and other related services to the residents, property owners and visitors in our community. We have an incredibly diverse and talented membership of many skills and areas of expertise, and our personnel is truly the secret of our success. We are very appreciative of their dedication and service to our community. Our people are our best asset and greatest strength!

In Action ANKENY FIRE DEPARTMENT







Iowa Training Program Update

There are 12,580 EMS providers in Iowa. How do they all get trained? In Iowa, there are 19 authorized EMS training programs. All EMS training programs in the state of Iowa are required to be authorized by the Bureau of EMS in order to offer initial EMS training. EMS certification training in First Responder, EMT-Basic, EMT-Intermediate, Iowa Paramedic and Paramedic Specialist courses are offered throughout Iowa through EMS training programs. Training programs may offer all levels of initial EMS training, or only specific levels.

All training programs, regardless of the level of EMS training they offer, are held to standards set by the Iowa Department of Public Health, Bureau of EMS, and are also regulated by Iowa Administrative Code Chapter 131 for meeting requirements in order to be authorized to provide EMS training.

Quarterly, EMS Training Programs meet to network and to keep appraised of current and upcoming issues affecting EMS on a state and/or national level. The association also works on a variety of tasks that develop, enhance or build upon current training standards and methods that help to maintain consistency in training throughout the state.

Standing task force committees identified are:

- Education
- Finance
- Research
- By Laws
- Standards and Best Practices
- Public Information and Education

IEMSA has two board positions assigned from the Iowa Training Program Education Association. Those two board positions are currently held by Kristi Brockway and Cheryl Blazek. Kristi is the EMS Training Program Director at Northeast Iowa Community College in Calmar, and Cheryl is the EMS Training Program Director at Southwestern Community College in Creston. Please feel free to contact either of these board members regarding your EMS educational questions.

Hawaii EMS Association

While vacationing in Hawaii in February, Immediate Past President Jeff Dumermuth had the opportunity to meet with a very determined group of EMS providers who are working toward starting a Hawaii EMS Association and developing a memorial, much like we have, to honor those Hawaii EMS Providers who were killed in the line of duty.

Jeff reports that the group was impressed by the work that we had accomplished here in Iowa and are very eager to get their project started. The group is working on establishing a 501C-3 organization so that they can begin soliciting donations for their project. They have identified a place for the memorial in a park-like setting on the campus of a medical school in Honolulu.

"Having the Iowa EMS Association and our many projects as a model for other organizations is something that both the Board of Directors and our members should be very proud of," Dumermuth said.

We wish the Hawaii group the best of luck and will be eager to see their memorial project develop.

EMS RECOGNITION WEEKEND AT Adventureland

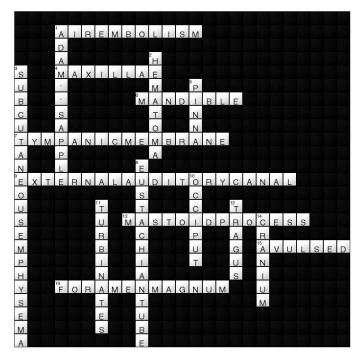
LORI REEVES, INDIVIDUAL MEMBERSHIP CHAIR

EMSA and Adventureland Park is pleased to announce EMS Recognition Weekend at Adventureland! Adventureland Park in Altoona recognizes the contribution you and your family make to EMS in Iowa - you for your direct service, and your family for the support they provide to you. In appreciation of this, on Friday, July 4 through Sunday, July 6, 2008 every EMS provider going to Adventureland will receive free daily admission to the park! Just show your state EMS certification card at the front gates. In addition, you can purchase up to six tickets that same day for friends or family joining you at \$10 off the regular or child daily admission price. This could mean tremendous savings for you and your family. So, pat yourself on the back for a job well done, plan to spend some quality time with friends and family at Adventureland, and be sure to take advantage of this wonderful opportunity!

EMS Educators!

EMSA is in need of authors for its quarterly continuing education articles in this newsletter! Please consider sharing your expertise with the IEMSA membership through this venue. All you will need to provide is an article on a topic of your choice (with appropriate references), a 10-question post test, and a biographical sketch of your background. Contact Angie Moore at administration@iemsa.net regarding your interest in this project.

CROSSWORD SOLUTIONS



THANKYOU for the work you do every day! EMS Week 2008



Mercy Medical Center would like to thank all EMS providers for the work they do every day. We are proud to partner with you to provide pre-hospital Stroke Alert and Level One Heart Attack Protocols for our patients.

We will continue to provide you with the best medical services in central lowa:

- Mercy Medical Center is the first hospital in central lowa to be certified as a Joint Commission Primary Stroke Center and earn its Gold Seal of Approval™ for health care quality and safety.
- The Chest Pain Center, located in the Mercy Emergency
 Department, is the only accredited center in central lowa
 offering a dedicated area for chest pain patients that provides
 rapid evaluation, intervention and treatment.
- 24/7 Pediatric Emergency department.

We thank you for your service and your patience during our Emergency Department renovation—we look forward to unveiling our new facility to you in June!





IOWA EMERGENCY MEDICAL SERVICES ASSOCIATION

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