Prehospital/Disaster Medicine

• What Do You Do? Controversial Protocols in EMS
  MO - 51/ 0.5 Hour(s)
  Faculty: Sabina A Braithwaite, MD, FACEP

  When EMS protocols publicly available on the internet are analyzed, many differences are noted. This group discussion, in rapid sequence, will focus on controversial EMS protocols that are handled by EMS medical directors throughout the country, such as ketamine for pain or excited delirium, RSI, and field termination of resuscitation.

Prehospital/Disaster Medicine

• Evolving Concepts in EMS
  MO - 7/ 1 Hour(s)
  Faculty: Sabina A. Braithwaite, MD, FACEP

  The prehospital environment is continually evolving to optimize patient care. Paradigms change and technology improves. This continued evolution requires us to stay abreast of the most current concepts. Is the cervical collar an ancient relic? Are prior relics, like tourniquets now high tech? What other strategies are proven to be useful to help reduce the trauma patient’s morbidity and mortality? Join this expert in a high-yield review of hot topics in EMS care.

Prehospital/Disaster Medicine

• Global Health Initiatives: First Do No Harm
  WE - 236/ 1 Hour(s)
  Faculty: Chris Courtney, MD, FACEP

  Altruistic global medical engagements are conducted under the idea that much needed health care services benefit underserved populations. Unfortunately, much of this care is delivered outside of evidenced-based practices based on performance versus impact measures whose outcomes are contrary to medicines first professional dictum of primum non nocere or “first, do no harm”. This discussion addresses the evidence and how to avoid those barriers such that these interventions improve health and avoid unintended harmful consequences
Prehospital/Disaster Medicine

- **Stop the Bleed: Tactical Field Hemorrhage Control Before the ED**
  
  TH - 350/0.5 Hour(s)

  *Faculty: Craig Goolsby, MD, MEd, FACEP*

  Battlefield-style injuries are becoming increasingly commonplace on our city streets, especially during mass casualty events. The speaker will introduce audience members to the Stop the Bleed campaign – a White House initiative to increase survival from exsanguinating hemorrhage by engaging laypeople as responders. The discussion describes the science underlying the campaign’s battlefield roots, the program’s creation and roll-out, and research efforts to identify optimal education methods to teach laypeople to provide lifesaving trauma care before professional help arrives.

Prehospital/Disaster Medicine

- **Personal Preparedness: Protecting Yourself So That You Can Save Others**
  
  WE - 244/0.5 Hour(s)

  *Faculty: Kathryn Kellogg, MD MPH*

  Are you personally prepared for a disaster? Hospitals run disaster drills and departments have detailed plans, but are YOU prepared? In a situation where your health and safety are at risk, how can you take the best care of your patient? The speaker will discuss personal preparedness for both major disasters and smaller, inconveniences like power outages and winter storms. The speaker will also address force protection – caring for your hospital staff’s wellbeing, and legal and ethical responsibilities healthcare workers face during a disaster.

Prehospital/Disaster Medicine

- **Cool, Calm and Collected in Chaos: How Learned Psychological Skills Enhance Performance Under Pressure**
  
  TU - 118/1 Hour(s)

  *Faculty: Kathryn Kellogg, MD, MPH*

  Many professional athletes, business executives, and elite military special operations teams use comprehensive psychological skills and techniques that allow them to remain calm, think clearly, and stay focused in very challenging and stressful situations. Data from psychology, cognitive science, and human factors analysis will be utilized to present novel performance enhancing psychological skills that can aid the emergency physician in optimizing cognitive function and in the retention of fine motor skills during both typical and the most extraordinary and uncommon stressful ED situations.
Prehospital/Disaster Medicine

• **Break Glass in Case of Disaster: How the Single Coverage ED Physician Can Manage in the First 30 Minutes**
  
  TU - 139/ 0.5 Hour(s)
  
  *Faculty: Torree M. McGowan, MD, FACEP*

  When faced with a local disaster who can you count on to help? Regional, state, and federal resources can all be mobilized. The cavalry will be there, eventually. At first it will only be you. Community physicians often have more questions than answers in disaster situations. How do I prepare? Are there symptoms and signs of an impending disaster I can look for? How do I deal with all these patients? How and where do I call for help now? What about help after I’ve exhausted my local resources? How quickly can you expect those resources to be available to you?

Prehospital/Disaster Medicine

• **MASCAL Every Day: Wartime Lessons for Successful Disaster Response**
  
  TU - 199/ 0.5 Hour(s)
  
  *Faculty: Torree M. McGowan, MD, FACEP*

  Mass casualty events strain the resources of emergency departments, but most EDs will never have to respond to such an event outside of disaster drills. Drawing on real-life experience while deployed to Iraq and Afghanistan, the speaker will describe MASCAL strategies that can be implemented by your ED to improve your disaster response readiness.

Prehospital/Disaster Medicine

• **A Historical Look at a "Modern" Problem: Lessons Learned from Active Shooter Incidents**
  
  TU - 194/ 1 Hour(s)
  
  *Faculty: Howard K Mell, MD, MPH, CPE, FACEP*

  The speaker will review the mass casualty response today with historical perspectives and future response practices.