Prehospital/Disaster Medicine

Simple & Revolutionary Technologies for Hemorrhage Control

10/25/2021 | 8:00:00 AM - 8:30:00 AM

Trauma is the leading cause of death for Americans between the ages of 1-45, and the recent wars in Iraq, Afghanistan and elsewhere have ushered in a new era of treatment for life-threatening bleeding. The original US military Committee on Tactical Combat Casualty Care (TCCC) tourniquet recommendations were made in 2006, and a recent 2019 landmark review and guideline update has changed the treatment landscape. This session describes the latest technologies available for immediate hemorrhage control and the scientific findings and combat casualty care practice driving the recommendations.

- Contrast various types of tourniquets, junctional tourniquets, hemostatic dressings and other devices to treat for life-threatening external bleeding
- Discuss the latest Tactical Combat Casualty Care guidelines and products reviews for external hemorrhage control
- Describe the scientific literature underpinning the latest technology advances in bleeding control practice

Prehospital/Disaster Medicine

Teaching Everyone to Save Lives Until Help Arrives

10/25/2021 | 4:30:00 PM - 5:00:00 PM

Trauma is the leading cause of death for Americans between the ages of 1-45, and lessons learned from the recent wars in Iraq, Afghanistan have spurred a nationwide interest in “immediate responders” saving the lives of injury victims prior to professional help arriving. Dr. Craig Goolsby and the National Center for Disaster Medicine and Public Health (NCDMPH) helped create the Federal Emergency Management Agency’s Until Help Arrives curriculum that ACEP recently adopted. Now, NCDMPH and the American Red Cross are creating First Aid for Severe Trauma (FAST): a no cost program to teach high school students life-saving trauma skills. FAST will offer instructor-led and web-based learning options nationwide starting in 2021. This session will discuss the logistics of national education campaigns, the importance and science of teaching trauma skills to the public, and how emergency physicians can encourage trauma education by engaging in their communities.

- Discuss key scientific underpinnings of public trauma education
- Discuss essential contents of high school student trauma curricula
- List actions emergency physicians can take to educate the public and increase community resilience
Prehospital/Disaster Medicine  
*Controversies in Prehospital Care: The Evidence vs the Fad*  
10/26/2021 | 1:00:00 PM - 1:30:00 PM

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, & field termination of resuscitation.

- Discuss the evidence behind various EMS protocols.
- Discuss how to develop protocols based on new scientific information.
- Discuss the current research on these topics.

Prehospital/Disaster Medicine  
*Intersections: EMS Dispatch, Telemedicine, Community Paramedicine*  
10/26/2021 | 4:00:00 PM - 4:30:00 PM

With the changing face of health care and increasing Community Paramedicine/Mobile Integrated Health (MIH) is emerging as a healthcare delivery approach to reduce ED patient crowding and create new career pathways for EM and EMS physicians. In particular, with the new “ET3” funding model released by CMS and the federal government, there are opportunities to increase the sustainability of MIH programs and new avenues for development of emergency telemedicine. This session will explore the motivations providing impetus for developing alternate prehospital treatment and destination pathways, describes current and existing community paramedicine projects, and explores future research opportunities in this rapidly expanding area of EMS.

- Describe trends in population demand for emergency/unscheduled care and EMS call volume which have informed development of community paramedicine.
- Describe opportunities for, and concerns related to, development and expansion of MIH programs from within EM and the medical community.
- Review a program which has successfully integrated EMS and telemedicine to improve care for communities and decrease ED crowding.
Prehospital/Disaster Medicine

**2020 Disasters in Review: Is the Dumpster Fire Over Yet?**
10/27/2021 | 9:30:00 AM - 10:00:00 AM

This energetic lecture will discuss different 2020 disasters from the COVID-19 to wildfires, hurricanes and violence at mass gatherings through a disaster medicine lens.

- Discuss different 2020 disasters
- Understand the physician’s role in these disaster settings
- Examine the disaster medicine approach to each of these 2020 disasters

Prehospital/Disaster Medicine

**Termination of Resuscitation**
10/27/2021 | 1:00:00 PM - 1:30:00 PM

ED providers often have to make critical decisions about how long to continue cardiac arrest resuscitation, whether in the hospital or on the phone with prehospital provider. It is imperative to understand the medical and legal background as well as the appropriate interpretation of technology to make the best possible decisions. (this could fit in both prehospital and cardiac emergencies tracks)

- Explain the difference between death pronouncement and termination of resuscitation
- Understand the prognostic significance of capnography, ultrasound and cerebral oximetry during cardiac arrest
- Explain the difference between PEA and pseudo-PEA

Prehospital/Disaster Medicine

**Hot Topics in the Recent EMS Literature**
10/28/2021 | 10:00:00 AM - 10:30:00 AM

The speaker will review recent hot topics in EMS literature. In this fast-paced panel presentation, EMS experts will discuss the most important articles effecting patient care before they reach the hospital. This course is designed for EMS medical directors and for all emergency physicians who interface with EMS personnel in the emergency department.

- Explore key concepts from important EMS articles found in recent published literature.
- Discuss how these articles may be changing who arrives to the ED, how they arrive there, and with what prehospital treatments.
- Examine the need for future EMS research.