

Time is just going by entirely too fast. It is hard to believe I have already been the Interim Director for OEMS for a year. I apologize that I did not get a new column posted for February. There has been so much activity with response efforts related to water issues in some of our southern counties, legislative hearings, continuing preparedness/planning efforts related to Ebola, getting protocols prepared to continue the EMT-I certification level, continuing with progress toward the stroke designation program, and the everyday issues that arise. There is never a boring day in EMS!

There are 5 agencies that have prepared for and agreed to provide transportation for an Ebola patient if such a need should arise in our state. I want to thank those agencies for investing the time and resources necessary to provide this service for our state. Although the numbers of cases in West Africa seem to be decreasing and it is projected that the outbreak may be ending in the near future, emerging infectious diseases are something that we always need to be prepared for. If any other agencies have an interest in becoming a designated transportation provider in such cases, please contact me via email at: [Melissa.j.kinnaird@wv.gov](mailto:Melissa.j.kinnaird@wv.gov).

The trauma system requires that EMS providers follow Special Operational Policy and Treatment Protocol - 9103. However, if the patient requests to be transported to another facility, it is the EMS agency and paramedic decision whether or not to do so. This decision is based on the patient's condition, safety concerns, travel time and conditions to get to the alternate facility, etc. Each EMS agency is to have policies and waiver forms for use in such situations. Please be sure that you are aware of your agencies policies related to such a patient request.

Ambulance drivers are required to have training to serve in this capacity. It is not just as simple as getting in a vehicle, turning the key and heading down the road. Drivers must also successfully complete a WVOEMS approved MCI Awareness and Operations or higher one time requirement in addition to those items listed annually. The hazmat training is a requirement of the Chemical Safety Board in response to the explosion at Ghent several years ago. Responders were not appropriately trained for that situation resulting in injury and death. Drivers are required to have First Aid and CPR training in case the EMT or paramedic you are driving for needs assistance or becomes incapacitated in some way. Drivers are required to obtain EVOC certification. This provides training on driving an emergency vehicle in a safe manner (i.e., proper use of sirens and lights, etc).

The Pediatric Symposium recently was a huge success. There was good attendance at this event. The speakers were very interesting and informative. Thanks to all of you who participated. We apologize that the S.T.A.B.L.E. training had to be cancelled due to the weather. I am sure the EMS-C program will get additional training opportunities advertised in the near future. We have received federal funding for this program to continue for another year. This program seems to be a huge benefit to you and always receives rave reviews. Thank you for supporting the EMS-C program events/activities.

Finally, be on the look-out for the revised recertification policies that are being posted to this website for your review and comment. These policies are based on the agreed upon parameters of EMSAC and OEMS/BPH that were published last September. Also, the EMT-I protocols (series 5000) are being posted. Dr. Mills will be doing training on these new protocols since there are so few EMT-Is. Just a reminder that these protocols will carry the EMT-Is through to the end of this certification level on 3/31/16. No new EMT-Is are currently being certified/recertified with this end date so near. EMT-Is not transitioning to paramedic certification can recertify at the EMT-B level.