

35th ANNUAL

NEMSA

NEMSA
NEBRASKA EMERGENCY MEDICAL SERVICES ASSOCIATION

**CONVENTION
2018**

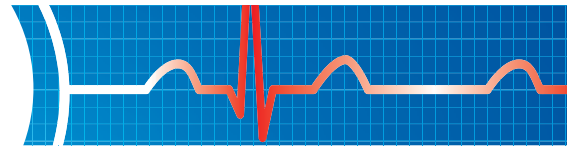
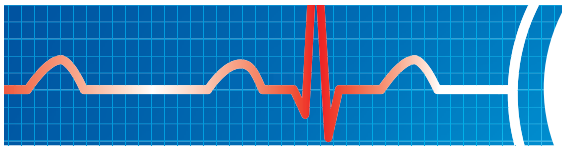


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MARCH
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Ramada Inn
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WELCOME to the 35th Annual NEMSA Convention!

Welcome back to Columbus! On behalf of the NEMSA Convention Committee and the NEMSA Board, we would like to thank you for your support of our convention year after year. Your support is helping us with our mission to provide high quality pre-hospital care to the citizens in Nebraska by serving the educational needs of our members. We strive to provide the best education from not only national, but local Nebraska instructors as well. With this, we hope to continue to grow and reach as many EMS providers as we can. Your support helps us to continue to grow and reach each and every provider in our state.

Your opinions matter! Every evaluation is read, and your feedback is helpful. We listened and made a few changes this year to improve your educational experience. It is our hope that we have made changes to your benefit. We wish for you to gain the knowledge you desire, network with fellow EMS personnel, make new friends, and enjoy the weekend. We also ask that you please share what you have learned from the convention with your fellow providers and community members. Please continue to provide us with your opinions and comments on your evaluations.

If any of you are interested in learning more about NEMSA, please speak with a Board Member or stop by the NEMSA booth. We would love to visit with you. Our general membership meeting will be held Saturday during the last session. Please make sure to attend the meeting to receive one hour of continuing education. We welcome your feedback about how NEMSA is serving you. We also encourage you to visit the vendors who have come to support our convention. They are huge contributors to our convention and look forward to visiting with you.

We are happy to see all of you here! We want you to feel invigorated and knowledgeable when you leave, and look forward to coming back for years to follow.

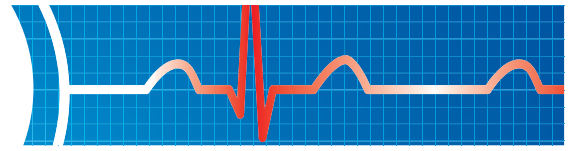
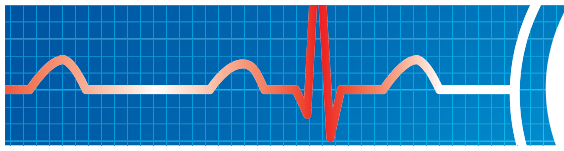
NEMSA Convention Committee and Board Members

PURPOSE STATEMENT:

The purpose of this 2 1/2 day conference is to provide emergency medical services personnel and nursing care providers the opportunity to identify new practices and review current approaches in patient care.

Who Should Attend?

- Emergency Medical Responders
- EMTs
- EMT-Intermediates
- AEMTs
- Paramedics
- LPNs/RNs



GENERAL INFORMATION

Registration Hours

All convention attendees (pre-registered and walk-ins) must stop at the registration booth to pick up your packets and name tags.

Registration hours are as follows:

Thursday 6:00pm to 9:00pm

Friday 7:00am to 7:00pm

Saturday 7:00am to 10:00am

The registration booth is located in the commons area.

Continuing Education

Students that attend the entire conference will be awarded up to 19 hours. Attendance at sessions must be verified by being scanned out at the end of the session. Name badges will have bar codes on them to be scanned out at the end of the session. Anyone arriving 10 minutes late after the start of each session will not be allowed into class. Participants will receive a email with a link to a survey, once that is completed you will be able to print your certificate.

No Smoking Policy

There is a no smoking policy in the hotel. Smoking is permitted outside in designated areas only. Thank you for your consideration.

Exhibitors

The Exhibitors will be set up on Thursday afternoon and exhibit through the end of the conference. They sponsor many of our events, classes, and prizes for the convention. Please take time to stop by their booths. As you look at what they have to offer, thank them for their participation and support.

Considerations for Dress

To ensure the comfort level of everyone, please dress in layers to obtain your personal preference. Room temperatures will fluctuate!

Uniform Day

Feel free to wear your squad uniforms on Friday. Everyone is encouraged to wear your shirts or squad identification proudly all day.

Cell Phones, Pagers, and Radios

Please make sure to turn off your electronic devices during each convention session. No laptops are allowed in the classrooms. Please no texting while class is in session. We thank you for being courteous to all the attendees and to the speakers.

NEMSA General Membership Meeting

This meeting will be held Friday night at 5:30pm in the courtyard. You will receive one hour of CE for attending the meeting.

Friday Night Events

There will an Exhibitor Meet and Greet from 7:00pm to 10:00pm. This is sponsored by Firefox with snacks and drinks provided. Also the Hotel will have Karaoke in the bar starting at 9:00pm.

Saturday Awards Banquet

The banquet will be MC by Eric Johnson, announcer from Max Country and Kool Radio. One ticket to the Banquet is provided with your registration and extra tickets are available at the registration table. The social time will begin at 6:30 with a cash bar, and the banquet will commence at 7:00. Our memorial service will be held at the banquet with awards to follow. We will have two comedians from the Funny Bone for entertainment, this will start directly after the Banquet.

Live from the.....

Richard Reese



James Johann





EMS Instructor Workshop
Ramada Columbus Hotel and Convention Center
265 33rd Avenue, Columbus, NE 68601



Keynote Speaker
Dennis Edgerly & Jess Fulkerson

Registration Fees
NIS Member: Free Non-Member \$75

Thursday - MARCH 15, 2018

Agenda:

- 0800 – 0830 **Registration**
- 0830 – 1000 **Facilitated Student Cases (Dennis Edgerly)**
- 1000 – 1015 **Break**
- 1015 – 1145 **In Your Mind's Eye (Jess Fulkerson)**
- 1145 – 1230 **Lunch**
- 1230 – 1400 **Tests as Teaching Tools (Dennis Edgerly)**
- 1400 – 1415 **Break**
- 1415 – 1545 **Flying, Drumming, Cooking, Paramedic...ing - Multi-tasking in EMS (Jess Fulkerson)**

Objectives:

Facilitated Student Cases

1. Describe the role of case based learning in EMS.
2. Describe the process of Problem Based Learning.
3. Create a case that can be used in a Problem Based Learning format to facilitate student learning.

In Your Mind's Eye

1. Identify why/how Imagery works and how, as an instructor one can utilize it to teach and reinforce key EMT concepts.
2. Understand how, as instructors, we are not preparing our students to prevent or deal with stress, and we need to teach them techniques to do so.
3. Demonstrate the two different “perspectives” to Imagery (First person and Third person) perspectives - and how to best assist a student through imagery exercises.

Tests as Teaching Tools

1. Discuss the importance of a well-crafted test item.
2. Discuss the role of exams in helping instructors and students identify areas of weakness.
3. Describe methods using exams to help foster student critical thinking and encourage self-directed learning.

Flying, Drumming, Cooking, and Paramedic...ing-Multi-Tasking in EMS

1. Define multi-tasking and what is happening neurologically.
2. Discuss how to maximize our students' brain function through approaches to teaching them “switching”, “deleting”, and “prioritization.”
3. Identify opportunities in EMS education where navigating an overwhelming situation can be done better through creating better practices in the psychomotor realm of education.



NEMSA Spring Convention 2018 Schedule

FRIDAY - MARCH 16, 2018

8:00 - 9:00	General Session Jason Dush How to Expect the Unexpected				
	Track 1 Platte	Track 2 Loop	Track 3 North Bank	Track 4 South Bank	Track 5
9:15 - 10:15	Kirk Mittelman Suicide; Our Dirty Little Secret	Jess Fulkerson A Long Way To Go and A Short Time To Get There	Dennis Edgerly Legal Highs	Scott Crawford Event Horizon: Childbirth in the Prehospital Setting	
BREAK					
10:45 - 11:45	Jason Dush (ALS) Capnography: Valued or Undervalued	Jess Fulkerson All Aboard The Mentor Ship	Dennis Edgerly Heart Failure, Left or Right and What Do We Do	TJ Williams Assisting with ALS Intercepts	
LUNCH					
12:45 - 1:45	Kirk Mittelman Adam Lost A Rib, Was it A Life Threat?	Jess Fulkerson Pull The Trigger - Decision Making in Airway Management	Dennis Edgerly (ALS) Shock, What About It?	Scott Crawford Strip EM, Flip Em, Ship Em: The Seward School Bus Crash and High Impact Incidents	
BREAK					
2:00 - 3:00	Jason Dush Managing the Special Needs Patient in your Community	Kim Brandenburg Blunt Abdominal Trauma	Laine Stahr Helicopter Emergencies	TJ Williams Assessing, Maintaining Airway and Ventilation	
BREAK					
3:15 - 4:15	Kirk Mittelman Friday Night Lights: EMS Response to Hight School Sports	Jess Fulkerson So... You Want to be a Swat Medic?	Matt Ruhner Motor Vehicle Accidents- Uncagged	Scott Crawford Seizures: Recognition and Management for EMS Providers	
BREAK					
4:30 - 5:30	Scott Crawford Venom: Bites, Stings, and Other Things for EMS	Dennis Edgerly Just Another Drunk	Kim Brandenburg Interactive Trauma Case Studies from the Golden Hour	TJ Williams BLS 12-Lead Refresher (Hands On)	
BREAK					
5:30 - 6:30	NEMSA General Membership Meeting				
6:00 - 7:30	Jason Dush Who'd a Thought? The New Trends of Chemical Suicide	Kirk Mittelman I Missed The Warning Signs, Will You?	Exhibitor Appreciation Event 7:00 - 10:00 pm Sponsored by Firefox		



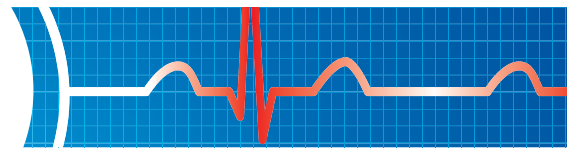
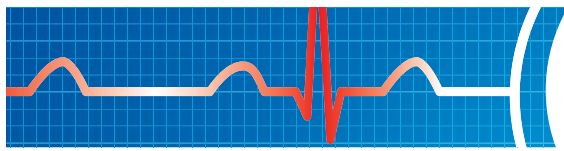
NEMSA Spring Convention 2018 Schedule

SATURDAY - MARCH 17

8:00 - 9:00	General Session Scott Crawford The Art of Medicine: Communication Concepts for EMS Providers				
BREAK					
	Track 1 Platte	Track 2 Loop	Track 3 North Bank	Track 4 South Bank	Track 5
9:15 - 10:15	Jason Dush When Disaster Strikes, Is Your Family Prepared?	Jess Fulkerson Gimme Some Sugar	Dennis Edgerly Introduction Into Pharmacology	Kirk Mittelman Buring Desires, A Look At Burns	
BREAK					
10:45-11:45	Jason Dush It's In Our Backyard: Domestic Terrorism on the Rise	Jess Fulkerson (ALS) What The Heck is Rhabdo?	Dennis Edgerly Advanced Pharmacology	Kirk Mittelman Is That Croup Or Just A Cough?	
LUNCH					
12:45 - 1:45	Scott Crawford Respiratory Anatomy: A Users Guide for EMS	Kim Brandenburg Collar or No Collar - The Breakdown	Matt Ruhrer He not Heavy He's my Brother	TJ Williams Behavioral Emergencies	
BREAK					
2:00 - 3:00	Jason Dush Stomped, Trampled, and Tosses: Rodeo Trauma Case Studies	Jess Fulkerson I've Arrived at an MCI...Now What?	Dennis Edgerly 12 Lead Cardiac Case Studies	Kirk Mittelman I Wanna be on your team! A look at Building EMS Team Building	
BREAK					
3:15 - 4:15	Scott Crawford Pain In The Glass: Strategies for Living Well in EMS	Eric Jensen, RN BURNS, St. Elizabeth Burn Center	Laine Stahr Helicopter LZ	TJ Williams Extrication on the EMS Side	
BREAK					
4:30 - 5:30	Jason Dush The Golden Hour: STEMI and Stroke	Jess Fulkerson Are You The Widow Jones?	Dennis Edgerly Ripping, Tearing, Things That Go Pop	TJ Williams Rodeo Injuries	
6:30 - 9:00	Banquet. This is included with your registration.				

SUNDAY-MARCH 18

9:00 - 10:00	General Session Dennis Edgerly Am I Having A Heart Attack
BREAK	
10:15 - 11:15	General Session Jess Fulkerson In Your Mind's Eye
BREAK	
11:30 - 12:30	General Session Kirk Mittelman Love What You Do, Do What You Love



FACULTY



Kimberly R. Brandenburg MSN, RN, CEN, CPEN has worked in trauma and ED nursing for the last 19 years. She is currently the Trauma Program Manager, Injury Prevention Coordinator, and Concussion Management Nurse Educator at Columbus Community Hospital. Kimberly is an ad hoc professor at Nebraska Wesleyan University in the MSN education program and active member of ENA, STN, ATS, and TQIP. Kimberly has presented at the state and national level, most recently speaking in LA at the National ENA Conference. She is an advocate for trauma in Nebraska and currently serves on the Statewide Advisory Board for Region 1.

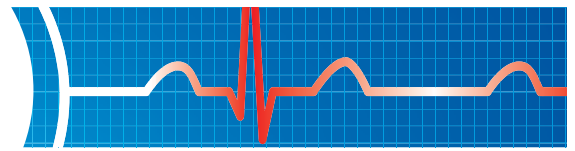
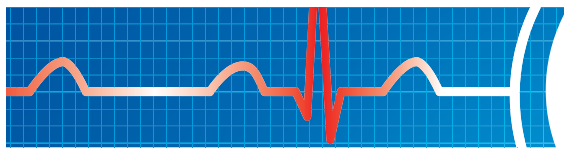


Jason Dush FF, NR/CCENT-P, FP-C serves as the EMS Manager for the Texas Department of Public Safety, Division of Homeland Security and Emergency Management, Office of the Chief of Staff. Prior to working for DPS, he was the Chief Operating Officer for MedicOne Medical Response which is a national ambulance transport company where he was previously the National Vice President of Clinical Services. He previous worked as full-time Firefighter Paramedic for the Arlington Fire Department for 10 years where he also served as the EMS Clinical Coordinator for 3 years. Jason's resume includes 22 years of paid EMS/Fire with 2 different large metropolitan departments and 13 years as a Critical Care flight paramedic. Jason has been an active commissioned police officer and Tactical Paramedic since 1997, currently commissioned as a sheriff deputy in Williamson County, TX. Jason is passionate about EMS education and is a known speaker locally and nationally over the last 14 years for bringing a sense of humor, passion, energy, leadership, and practical experience to his audience.

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FACULTY

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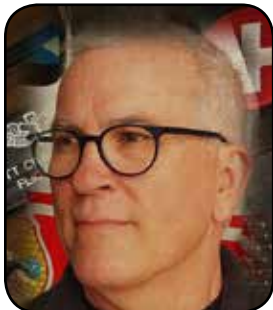
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Dine

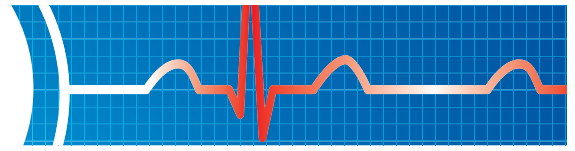
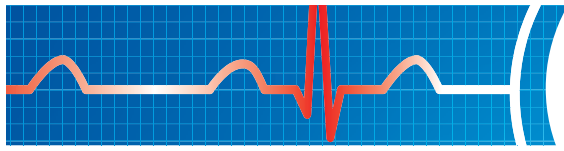
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Scott Crawford began his EMS career in 1988 as a member of the Ralston Volunteer Fire Department and Rescue Squad. He completed his paramedic education and training in 1994 at Creighton University in Omaha, Nebraska. In 2009, he completed the critical care paramedic program at Creighton University. For 29 years as a Nationally Registered EMS provider, he has dedicated himself to those activities that positively influence returning patients to the quality of life they enjoyed prior to their medical or traumatic event. These activities include many years of experience in direct patient care and in the classroom as an EMS educator and trainer. Scott has 19 years of service as a firefighter/paramedic with the Omaha Fire Department in Omaha, Nebraska. 10 years of this service was spent providing lead instruction for the paramedic program and EMS continuing education for all department personnel. He also served as a certified flight paramedic with Air Methods LifeNet of the Heartland program. Scott is a dynamic educator with proven ability to present complex concepts in a way that is entertaining and promotes retention of the subject matter. He has presented locally, regionally and nationally at many conferences and symposiums. In 2010 he received the Instructor of the Year award from the Nebraska EMS Association and The Unsung Hero's award from the National Association of EMS Educators for educational excellence. Scott and his wife Carrie live with three of their eight children in Scribner, Nebraska. Carrie is also a practicing paramedic. Together they served the people of Scribner, Nebraska for 10 years as members of the Scribner Fire Department and Rescue Squad.



FACULTY

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Dennis Edgerly has Field experience in a high call volume, 911 service. Ambulance structure worked one paramedic with one EMT Basic per unit. He taught and coordinated classes at the EMT Basic, Intermediate, and Paramedic levels. He is currently the Paramedic Education Coordinator for the HealthONE Paramedic Education program. His teaching experience includes refresher classes on Paramedic and Basic levels. He participates in continuing education for all levels of certification for many agencies in the State of Colorado. Opportunities to speak at conferences in Colorado, Wyoming, Texas, Utah, California, Arkansas, New Mexico and Canada have helped to expand his repertoire of topics. He has had the opportunity to participate as conference staff with the EMSAC and CTI conferences.

He functioned as an expert writer for the National Educational Standards committee. Responsibilities are to help prepare a set of educational standards for EMS education to replace the current DOT objectives.

Dennis worked with the State of Colorado on revising the EMT Intermediate curriculum. This included a curriculum style that resembles the current EMT Basic curriculum, and included albuterol and I.O. content. He implemented the new EMT Intermediate curriculum at HealthONE EMS through a state grant. He began implementing the new DOT EMT Paramedic Curriculum at HealthONE EMS in July 2000.

Over twenty five years have been spent in Emergency Medical Services with several years in EMS management along with an additional four years management in a semi-related field. He has experience with routine and dynamic scheduling to provide diverse and comprehensive pre-hospital coverage. Other responsibilities included review of hours worked with completion of bi-weekly payroll submission, dispatching and CAD operations, assisting with billing and accounts receivable. Recent experience includes the teaching and managing of education programs including primary and continuing education programs. Time has been spent developing and incorporating curriculum.



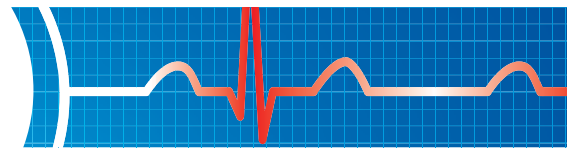
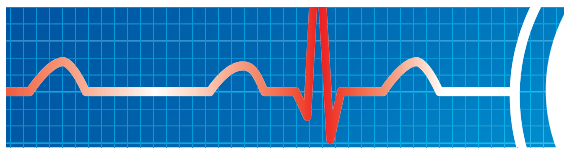
Jess Fulkerson currently lives in Olympia, WA, working for the North Mason Regional Fire Authority, as a Firefighter/Paramedic/Acting Lieutenant. He also serves as a Reserve Deputy on the Mason County SWAT Team as a Tactical Medic. He has a B.A. in Education (Minor in Biology) from Concordia College in Moorhead, MN. Jess has served as either a volunteer or paid EMT/Firefighter since 1998.

Jess thinks of himself a teacher or educator, even before that of a Firefighter or Paramedic. He uses his experience of over 15 years in Emergency Services to bring topics to people in areas of interpersonal communication, personal and instructor development, treating EMS patients, conflict resolution, scene management/ICS, and tactical EMS (TEMS).

Jess has a dynamic speaking style, incorporating candor, humor, energy and enthusiasm, which highlight his passion for EMS and firefighting. Jess enjoys public speaking and presenting a wide range of topics to a wide range of audiences. In addition to teaching EMS at his home agency and at neighboring fire departments, he's been a speaker at local EMS conferences and at internationally attended EMS Conferences.



Eric Jensen, with 19 years of experience is continuing to provide high quality care to patients with burn injuries through education, research and direct patient care in the inpatient and outpatient setting. As a nurse on the floor he has been a part of many admissions and critical patients care along with 10 years experience in the burn outpatient managing the long term care of patients. As part of the speaker bureau, Eric has helped to educate the community, EMS, Nurses, and Physician's about burn care.



FACULTY

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Kirk Mittleman is the Owner/Instructor of Mt. Nebo Training in Utah. His business was started in 1992, they teach EMT-B and EMT-I classes and wilderness medicine. His company is a State recognized training agency. Kirk has been a member of various Fire Departments since 1981. Kirk was also the Director of Professional Programs for the University of Utah. Kirk now works to utilize and enhance his skills in the field on Emergency Services in a leadership position.

Matt Ruhrer has been involved in the fire and emergency medical services for over 27 years. He is currently a Fire Protection Engineer with HDR Inc. in Omaha and continues to serve his local community of Wahoo, Nebraska as a volunteer fire fighter and EMT. Matt began his EMS career as an EMT-A in Fremont, Nebraska in 1990 while still attending college. In 1995 he took his first BLS Instructor course and began teaching for the Fremont Hospital and the community. In 1998 with the changes in EMS he completed an EMT-B transition course and again passed the National Registry while continuing to practice in Fremont. Then in 2001 while volunteering for both the City of Fremont and the Nickerson Rural Fire Protection District, he completed his EMS Instructor course through Central Community College. He has served on the EMS side of these departments in positions ranging from EMT to Rescue Captain and Instructor. Matt continues to work in many aspects of the fire and emergency medical services and also has certifications in Fire Inspections, Fire Investigations, Hazardous Materials, Confined Space Rescue, High Angle Rescue, and Wildland Firefighting.

MedAir Pilot **Laine Stahr** went to Centennial High School in Utica, Nebraska. After graduating High School in 1992, Laine joined the United States Army as an 88M (Wheeled Vehicle Operator). Duty stations included Ft. Leonard Wood, Missouri, Ft Eustis, Virginia, Camp Casey, Korea, Manheim, Germany and Fort Riley, Kansas. After 13 years and a tour Saudi Arabia and two 12-month combat tours in Iraq, he applied for Warrant Officer Candidate School and a transition to Army Aviation.



Laine attended Flight School at Ft Rucker, Alabama and received training in Bell 206, Bell OH-58 Kiowa, and Sikorsky UH-60 Blackhawk helicopters. He was then assigned to the 101st Airborne Division (Air Assault) at Ft Campbell, Kentucky where he served 2 combat tours in Afghanistan as a UH-60 Blackhawk Pilot in Command.

In 2011 Laine was sent to Fort Rucker, Alabama to attend the Instructor Pilot Course in the OH58 Kiowa. He trained US and Foreign flight school students in tactical flight training and Basic Warfighting Skills. He then retired in 2013 after 21 years and 3 months of Active Duty Army Service. Laine then became a Pilot in Command with Midwest MedAir in the Eurocopter EC-135P2+ at their air base in Hastings, Nebraska. He has now been with Midwest MedAir for over three years.

TJ Williams started training for his career during his senior year of high school. EMS has been a passion that he truly enjoys. TJ started his EMS career working as an EMT for a service providing both 911 and inter-facility transports. During his career he credits his mentors for teaching him to not only excel at your career but help others around you do the same. TJ is a State of Nebraska EMS instructor, NAEMT instructor, AHA instructor, Mid-Plains Community College instructor and continues to teach all levels of EMS providers in initial and continuing education. In 2000 TJ moved to North Platte to begin a career with North Platte Fire Department where he worked as a Captain Paramedic for 17 years. TJ completed his Critical Care Paramedic training through Creighton University and has worked as a Flight Paramedic since 2010. TJ continues to work with Great Plains Health Life Net as a flight paramedic. TJ has since retired from North Platte Fire Department and is currently the Clinical Director/Paramedic for Priority Medical Transport. TJ and his wife Lynnsey have one son and reside in North Platte.





2018 NEMSA CONVENTION OBJECTIVES

FRIDAY - MARCH 16

I Missed the Warning Signs, Will You?

The call comes out, 'Shots Fired!' from your partner. You are one that has been shot, what now? During your career facing death will be part of everyday life. But we commonly think of it in terms of someone else dying. What if you are facing an armed patient, how will you react? Will you see the warning signs of a violent patient? If you miss them it could mean your life. Join Kirk as he uses his unique brand of humor and candor to share his personal experience with being shot and what to do if things go wrong.

At the conclusion of this session the student will be able to:

1. Discuss three hazards of dealing with a dangerous patient
2. Discuss at least three warning signs of a dangerous patient and scene
3. Discuss at least two methods of egress and defense when placed in a hazardous/dangerous scene
4. Identify three methods to evaluate a scene for potential dangers.

Friday Night Lights; EMS Response to High School Sports

Friday Night Lights, we have all been there, EMS duty at the local football game. There is nothing like a hamburger and drink from the High School Snack Shack. Until it is interrupted by the banging of helmets and mud flying in the air, when it settles the coach is motioning for EMS personal to help quick. No matter the time of year sports are abundant and kids of all ages are subjected to forces beyond belief. What can we do as EMS professionals? The answer is simple; come to Kirk's session on High School Injuries and learn about the anatomy, physiology and mechanism of injury possible during high school athletic events. Kirk will use scenarios and case studies to discuss and demonstrate methodologies used to treat athletes participating in sporting events. Leave the hamburger at the snack shack and come work on an injury with us.

At the conclusion of this course the student will be able to:

1. Recognize the mechanism of injuries associated with high school sports.
2. Demonstrate methods of dealing with patients of high school age.
3. Discuss treatment and pain management of high school athletes.
4. Demonstrate the skills needed in the removal of helmets and other protective gear.

Adam Lost a Rib, Was it a Life Threat?

The call comes out; 'Engine 251, ambulance 251, Rescue 252 respond to Lou's Bar 35 East Union on a 45 year old male experiencing difficulty breathing and chest pain.' As you respond to the scene you begin to go through the chest pain protocol in your head. As you arrive you find that indeed the patient is S.O.B. and experiencing chest pain but it is from a pool cue to the chest and the cue is lodged in the patients chest. The actions you take next will determine the patients outcome, are you ready for thoracic trauma and all it brings. In this session Kirk will bring the light to dynamics of thoracic trauma and how to manage the needs of the patient who has experienced chest trauma. Come listen and help Kirk breath some new life into this important topic.

At the conclusion of this session the student will be able to:

1. Discuss the importance of Mechanism of injury in thoracic trauma.
2. Discuss the types of injuries possible in thoracic trauma.
3. Discuss the need for critical thinking in thoracic trauma.
4. Discuss the need for rapid recognition and transport of thoracic injuries.
5. Recognize and diagnose hidden thoracic injuries.

FRIDAY-MARCH 16 2018 NEMSA CONVENTION OBJECTIVES

Suicide; Our Dirty Little Secret

Have you ever wondered what drives people to suicide? Have you ever thought maybe you could have done more to help? In this session we will look at suicide and the effect it has on family members and providers. We will discuss the warning signs of suicide and how to deal with someone who is threatening suicide. Kirk asks that you come with an open mind to this session and be prepared to face your deepest fears to help us all solve a growing problem

At the conclusion of this session the student will be able to:

1. Evaluate the warning signs of suicide.
2. Discuss ways to deal with those thinking of suicide.
3. Determine if EMS could make a difference on a suicide call.
4. Evaluate who is the real victim of suicides and how to help them.

Who'd a Thought? The New Trends of Chemical Suicide

There is no longer a routine call. Mixing household chemicals to create toxic vapors in a confined space and inhaling them has become a new trend in the United States. Over the past several years we have seen a steady climb in calls that have involved this process. We are also seeing a new trend of people ingesting 'bath salts' which has also led to a rise in overdoses and suicides. This session will take a look at the history of both practices and the dangers first responders' face through literature and case studies.

How to Expect the Unexpected

It happens so fast you don't have time to think about it until later. How do we perform under pressure? Who's the right person for the crisis on hand? How do we prepare for the 'what if' call or situation? Crew Resource Management known as CRM has been mastered in the airline industry. Have we really taken a look at how CRM applies to EMS calls, Emergency department, fire ground operations, and MCI's? This lecture will take an in depth look at how we as clinicians and public servants can apply the same concepts on the ground that are used at 35,000 feet in the air.

Capnography: Valued or Undervalued?

Capnography has become the golden standard and is being used by paramedics primarily to aid in their assessment and management of the intubated patient in the prehospital environment. So how does monitoring of ETCO₂ really help steer the management and treatment of the intubated and non-intubated patient? With the technology of waveform capnography, how valuable it is in the assessing the hypoperfused patient? This session will look at the overall uses of waveform capnography and how paramedics can better assess and manage their patients.

Managing the Special Needs Patient in Your Community

Although every special-needs patient is different and every family is unique, there are some common concerns that link these patients together. Maintaining appropriate care and management in the prehospital setting can be a challenge when not properly trained and prepared for these unique cases. With newer and updated equipment, it has become more common and practical for patients once cared for in the hospital setting to be cared for at home. Specialized equipment, chronic conditions, communications, management, and transport of these patients can be a challenge for prehospital providers. This session will review some of the latest and greatest devices, management, and transport considerations.

SEIZURES: Recognition and Management for EMS Providers

Seizures can be a frightening experience for the patient and all who witness seizure activity. You will be called to bring calm to the typically stressful situation. In this session, you will learn to recognize the features of different types of seizures, identify several causes of seizures and subsequently manage this common disorder. Several case studies will be presented to improve your skill and confidence with seizure patients.

1. Differentiate between primary and secondary seizures.
2. Recognize components of a grand mal seizure.
3. Identify general physiology associated with seizures.
4. Assess and manage a patient presenting with seizure activity.

FRIDAY-MARCH 16 2018 NEMSA CONVENTION OBJECTIVES

Venom Bites, Stings, and Other Things for EMS

This session will provide an overview of what to do when our patient, or us have an unfortunate encounter with critters. We will take an in depth look at bugs, bats, snakes, spiders and other venomous creatures. Emphasis will be placed on identification of venomous animals safety for patient and provider, assessment and efficient treatment. Differentiate between endogenous and exogenous species.

1. Identify features of venomous and non-venomous snakes and spiders.
2. Identify the four methods of toxic poisoning.
3. Describe the issues associated with anti-venom serum administration.
4. Describe assessment and treatment of a patient with a snake bite.
5. Describe assessment and treatment of a patient with a spider bite.

Motor Vehicle Accidents - Uncaged

Most departments and personnel routinely respond to motor vehicle accidents involving normal passenger vehicles. This program will discuss the statistics of motorcycle accidents and how these accidents differ from traditional motor vehicle accidents. It will cover the unique mechanisms of injury that are involved in motorcycle accidents, the transport decisions that need to be considered when dealing with this type of accident, and review of primary and secondary assessments for the trauma patient. It will cover treatment considerations for the motorcycle accident victim and present a case study of an actual event.

Upon completion the participant will :

1. Be able to perform a Primary Assessment
2. Be able to perform a Secondary Assessment
3. Define the Kinematics of Motor Vehicle Accidents
4. Understand Kinematics Unique to Motorcycle Accidents
5. Differentiate between a priority and non-priority trauma patient.
6. Appropriately respond to a given scenario.

Assisting with ALS Intercepts

1. Discuss when an ALS intercept is needed.
2. What is available for advanced care in your area.
3. Review assessment techniques that may reveal need for ALS.
4. Assist/Demonstrate skills that ALS may request help with during transport.

Assessing, Maintaining Airway Ventilation (ALS and or BLS)

1. Discuss that anatomy of adult and pediatric airways.
2. Review assessment of the airway & respiratory system.
3. Review pathophysiology of respiration.
4. Basic and Advanced airway control.
5. Mechanical ventilation.
6. Treatment of mechanically ventilated patients during transport.

BLS 12 Lead Refresher

1. Review monitors and their functions.
2. Discuss when a 12 lead should be applied.
3. Review placement of limb and precordial leads.
4. Discuss treatments for patients with chest pain.
5. Discuss transporting a STEMI patient.
6. Hands on practice applying a 12 lead and transmitting.

Legal Highs

1. Not cocaine, Not LSD. This stuff is legal to possess, but people are using it to get high.
2. We will discuss some of these substances, to include gasoline, aerosols and others.

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FRIDAY-MARCH 16 2018 NEMSA CONVENTION OBJECTIVES

Heart Failure: Left or Right, What Do we Do?

1. This course will look at heart failure.
2. We will discuss the causes of heart failure.
3. We will look at the presentation of heart failure and establish treatment plans.
4. This course is for all level of providers.

Shock, What About it? ALS Class

1. We will take a advanced level look at shock.
2. We will look at the classification and different levels.
3. We will look at specific treatment for each type of shock.

Just Another Drunk

1. This class looks at patients who have not been treated or mistreated based on the preconceived assumption of being 'Just Another Drunk'

A Long Way to Go and A Short Time to Get There

In rural EMS the 'platinum ten' and 'golden hour' are concepts that can seem like fantasies. As a rural EMS provider, you always know you've got a long way to go, and a short time to get there. Most times theres plenty to do! But what exactly are you doing during that time? What principles guide your care on those ling transports? Do you care differently for a critical patient vs. a stable patient? What do you do when "there's nothing left to do? This session talks about the fulfilling nature of EMS systems where long transports are the norm, and their unique challenges in providing care. We'll also talk about how current EMT curriculum ignores this issue, and how to train to be most effective in this environment. This class is for all levels of providers.

1. Identify the challenges/rewards in rural EMS when in comes to long distance transports.
2. Discuss how to maximize the time spent en-route.
3. Identify some training techniques for this unique set of EMT skills.

Pull the Trigger - Decision Making in Airway Management

Airway management is a skill even the newest EMT needs to master. But even to the most seasoned EMS professionals, HOW to best accomplish airway management can be difficult. This class will discuss the DECISION MAKING needed in order to evaluate a patient and decide to employ aggressive techniques, vs. using more conservative skills. It is about patient evaluation, and applying your skills to those patients that need you the most. We could just intubate everybody, but is that really necessary? This class is for all levels of care.

1. Define "difficult airways" and explore options for management.
2. Understand critical facets of patient assessment, pertinent to airway maintenance.
3. Discuss assessment tools currently used by EMS and how to best employ them.
4. Explore the attitude and judgment necessary to be confident and competent.

So You Want to be a Swat Medic

A lot of people think that being a SWAT Medic is as easy as simply putting on a different uniform and a gun. Nothing could be further from the truth. This is especially true if you're considering starting a TEMS program where one doesn't exist right now. Where do you start? Who do you talk to? What protocols do you use? This presentation will start with discussing all the facts of a TEMS program beyond just serving warrants. It will delve into many things to consider when creating a TEMS program from scratch. There will also be plenty of discussion about the mission of a TEMS medic, and the mindset needed in order to succeed. This class is intended for all levels of providers.

1. Scope and facets of a complete TEMS program.
2. Where to start in creating a program.
3. Pros and Cons of Fire/EMS based vs. Law Enforcement Agency- based programs.
4. Mindset of a Tactical Medic.
5. Protocols and Equipment.

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Event Horizon: Childbirth in the Prehospital Setting

Nothing seems to strike fear in the hearts of EMS provider as childbirth specifically and obstetric emergencies generally. Even though childbirth is a natural process that has taken place millions of times over thousands of years with relatively few complications. Scott will discuss and demonstrate several aspects of obstetric issues in the field including a unique method he developed for preparing and conducting delivery in an out-of-hospital situation.

1. Discuss the anatomy and physiology of the female reproductive system.
2. Demonstrate assessment considerations specific to the pregnant patient.
3. Demonstrate preparation for an out-of-hospital childbirth.
4. Discuss all aspects of postpartum care for the neonate and mother.
5. Recognize the need for and performance of neonatal resuscitation.

Strip Em, Flip Em, Ship Em: The Seward School Bus Crash and High Impact Incidents

In the blink of an eye, mass casualty or high impact incidents can overwhelm and EMS system. This was the case in 2001 in Omaha. A school bus, with 31 high school students on board, careened over a guard rail of a bridge landing on its side across a creek, 60 feet below. In this session, we will use actual scene and patient information to mitigate this mass casualty incident including triage of all patients. With relatively little opportunity to manage actual MCI and high impact situations, this session will be an education and training opportunity you won't want to miss.

1. Define a high impact EMS incident.
2. Identify key components of the Incident Management System.
3. Differentiate between primary and secondary triage.
4. Demonstrate triage of multiple patients in a mass casualty incident.
5. Understand the value of after incident reviews on future operations.

Helicopter Emergencies: Utilizing a Helicopter Air Medical Service

1. Learn when to activate a helicopter.
2. Who can activate a helicopter.
3. Day or night how does this affect a helicopter.

Blunt Abdominal Trauma

Blunt abdominal trauma is a common cause of hemorrhagic death. Unknown history, distracting injuries, and altered mental status make these patients difficult to diagnose and manage, victims frequently have other concurrent injury. Prehospital caregivers need to be able to recognize and treat hemorrhagic shock secondary to abdominal trauma.

1. Recognize and respond appropriately to a patient with hemorrhagic shock.
2. Assess via bedside methods the source of hemorrhage.
3. Respond appropriately to evidence of intra-abdominal hemorrhage with regards to initial management and disposition.

Interactive Trauma Case Studies From the Golden Hour

This course will review trauma cases in an interactive environment. Case studies include trauma throughout the human lifespan addressing significant injury, common injury patterns, and unique trauma cases.

1. Review basic physiology and management of multiple trauma injuries.
2. Discuss trauma cases in a frank and open manner.



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2018 NEMSA CONVENTION OBJECTIVES SATURDAY - MARCH 17

Behavioral Emergencies

1. Define Behavioral Emergencies
2. Discuss causes of Behavioral Emergencies
3. Steps to effective scene size up.
4. Discuss Safety Procedures when responding.
5. Approaching a Behavioral Patient.
6. Identify treatment procedures for a suicidal patient.
7. Identify treatment procedures for anxiety and panic attack.
8. Discuss the specific Behavioral disorders including assessment and treatment.
 - Bi-polar
 - Schizophrenia
 - Manic Episodes
 - Post traumatic Stress Disorder
 - Excited Delirium
9. Discuss drug overdose and the effects with or without history of Behavioral Emergencies.

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SATURDAY-MARCH 17 2018 NEMSA CONVENTION OBJECTIVES

Collar or No Collar, The Breakdown

This course will review the current literature related to cervical collar use, debatable practice changes and future implications. We will follow the evidence, trends, and data in an interactive classroom format.

1. Discuss the implications of improper cervical collar application.
2. Review current evidence of cervical collar use.

I've Arrived at an MCI, Now What?

This presentation takes you past how to do S.T.A.R.T Triage. It teaches the responder how to establish the supervisory positions of Incident Command, Medical Command, Triage, Treatment, Transport, and Safety with the first two or three arriving units. The EMT will walk away with knowledge in how to provide a size-up, how to effectively staff staging areas, and incorporate Air Medical into an effective Incident Management Plan. We will talk about how to manage the MCI when staffing is limited, as well as balancing patient care vs. scene management when EMS is overwhelmed. Interactive demonstrations and a "get out of your seat and try it" atmosphere are the way we learn in this presentation. Approx 1 hour powerpoint presentation with student interaction. Intended for all levels of EMS.

1. Identify what positions need to be filled and their roles, in order to successfully manage an MCI.
2. Identify the actions of the people on the first two arriving units and how they can fill the initial supervisory positions.
3. Review the ICS of a Mass Casualty Incident, and apply it practically to your area and resources.

The Art of Medicine: Communication Concepts for EMS Providers

Communication will be the first skill that a patient, family and bystanders will realize that you either do or do not possess. Volumes will be spoken before you even get a chief complaint, which can alter the affect and outcome of the call. This fast paced session will introduce key elements necessary to establish early rapport and meaningful dialogue. Both you and your patient must be in the comfort zone before you can enter the communication zone. This session will give you a foundation to consistently achieve both goals.

1. Appreciate the therapeutic value of effective communication in a patient encounter.
2. Differentiate between interpersonal and intrapersonal communication.
3. Identify the key components of the communication feedback loop.
4. Recognize and use non-verbal messages to enhance communication.
5. Recognize and minimize barriers to effective communication.

The Golden Hour: Stemi and Stroke

The "Golden Hour" is a brief window of time, in which critically injured patients are delivered to definitive care at a Trauma Facility. Years of applying this concept to practice has drastically improved the outcome for traumatic injuries. This same concept can be applied to the care of certain medical conditions as well. Delivering ST Elevation MI to a Chest Pain Center and Acute Non-Hemorrhagic stroke to a Stroke Center in a timely manner is becoming a standard of care. The same principles applied to traumatic injuries can be utilized for STEMI's and CVA's to decrease morbidity and mortality. Rapid assessment and decision making by EMS and Emergency Department Personnel upon initial patient contact are imperative to this principle of rapid transport to definitive care.

When Disaster Strikes: Is Your Family Prepared?

Have you ever thought to yourself, "What would I do if" as you watch the news about a natural disaster? Jason will discuss real world disaster events and the challenges faced by citizens and emergency workers. He will also show you some basic concepts for planning, making home ready kits, sheltering and much more that will help your entire family be better prepared.

It's In Our Back Yard: Domestic Terrorism on the Rise

Domestic Terrorism has become a big challenge for public safety and the health care industry facing everything from deadly mass shootings to bombings. Since 9/11, the number of state side incidents that are related to international terrorist groups to individuals acting alone are on the rise at a fast pace. The question remains, "What are we doing to be proactive vs. reactive?" Active shooter drills have become the norm for training law enforcement and first responders. Mass shooting protocols are starting to become a frequent policy addition for most agencies. Intelligence units within law enforcement are working more with federal assets to keep our communities safer. However we have to ask additional questions about whether we're paying enough attention to domestic terrorism following the September 11, 2001 attacks. This session will evaluate numerous domestic terrorism events and address ways to improve situational awareness and challenges we continue to face.

- continued

SATURDAY-MARCH 17 2018 NEMSA CONVENTION OBJECTIVES

Stomped, Trampled and Tossed: Rodeo Trauma Case Studies

Rodeo is similar to Spanish bull fighting in that it is considered a true test of a man's masculinity. The range and type of injuries typically sustained by Rodeo Cowboys is broad. A comprehensive 20- year study of rodeo injuries concluded the most dangerous event was Bull riding, causing over 50% of the injuries, followed by Bareback Riding and Saddle Bronco Riding. Timely clinical assessment, integration of the mechanism of injury into the plan of care is vital for improvement of patient outcomes. This lecture will take an interesting but in-depth look at an unusual national sport and the injuries associated with it.

Safe Utilization of Air Medical Helicopters, Landing Zones, Operations & Communications

1. Know the methods of activations.
2. Know the elements of preparing and controlling a safe landing zone.
3. Know all the methods of communicating with the aircrew
4. Identify hazards to EMS, patients, and aircrew.
5. Learn how to protect your landing zone.

I Wanna be on Your Team! A Look at Building EMS Team Building

Have you ever thought that if you could just have your staff working on the same page how much more you could accomplish? In this session we will look at a variety of team building exercises and how to integrate them into both the workplace and teaching programs. Through a variety of exercises and examples we will show how to enhance teamwork within the workplace with both supervisors and the line workers. During the session the concept and benefits of working with as a team will be discussed along with methods to improve teamwork. The participants of this program will have real solutions to take back to their agencies to improve team work and gain an understanding of the importance of team exercises in the classroom and the work environment.

At the conclusion of this session the student will be able to;

1. Discuss three methods to build teamwork within EMS and Fire Departments
2. Explain the benefits of using team exercises to build continuity within departments and training programs.
3. Discuss the benefits of using team exercises to build knowledge base and improve classroom learning in fire and EMS programs.



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SATURDAY-MARCH 17 2018 NEMSA CONVENTION OBJECTIVES

Extrication on the EMS Side

- 7 Step program to Extrication Basics
- Scene safety
- Scene size up
- Patient care
- Preparation for patient
- Extrication procedures
- Patient removal
- Scene clean up

Rodeo Injuries

- Ropes Riggins and safety gear
- Common types of injuries seen
- Mechanisms of injury associated with rodeo
- Approaching and treatment of the injured

Is That Croup or Just a Cough?

You respond on a 6 year old girl who has been ill for the past 3 days and her parents are not sure why she is not responding to them. How you handle the parents and child is imperative to the outcome of this patient. In this session we will discuss both common and not so common childhood illnesses and diseases, how you can easily recognize them and what to do when you see them. Croup to Whooping Cough, Kirk will review and renew your handling of childhood illnesses EMS faces on a regular and irregular basis.

At the conclusion of this session the student will be able to;

1. Discuss three common illnesses found by EMS on a pediatric call.
2. Discuss common treatment modalities for common childhood illnesses.
3. Differentiate between different childhood respiratory ailments.
4. Explain three methods to determine illness in a pediatric patient.

12 Lead Cardiac Case Studies

Put your assessment and treatment skills to the test as we look at several different cardiac case studies. Class will include interactive discussion. Participants should have good working knowledge of drugs and 12 lead interpretation skills.

Ripping, Tearing, Things That Go Pop

This talk discusses the pathophysiology of aortic aneurysms. We will discuss predetermining factors, signs and symptoms and formulate treatment plans. Some drugs will be discussed.

All Aboard the Mentor Ship

No matter where you go, or who you ask, anyone in EMS will tell you that mentorship is a good thing and we should be doing it. But what EXACTLY is mentorship? Well it depends on who you ask! This presentation is designed to get you thinking about mentorship outside the proverbial box. Well explore the spectrum of definitions of mentorship and where you fit along that spectrum. Discussion will be guided by the group with an interactive format. Who have been your mentors? Why do you think of them as mentors? How do You mentor others? Do formalized mentorship programs work? Can friends be mentors? Is that asking for trouble? All of it is intended to get your juices flowing and take a refreshed perspective back to your agency. Intended for all levels of EMS.

1. Define mentorship as best you can.
2. Explore the different kinds of mentorship and how they work vs. don't work.
3. Identify what traits that good mentors possess.
4. Discuss how to create an atmosphere of mentorship at your agency.

Respiratory Anatomy and Physiology: A Users Guide for EMS Providers

One of the most common dispatches of EMS systems today is complaints of difficulty breathing. In this fast-paced session you will be guided on a journey through the respiratory system. There will be a brief discussion of anatomy and a robust look at the dynamic physiology of one of the three body systems necessary to keep your patient alive. We will look at 'why' interventions are necessary instead of 'what' interventions are necessary. You will come away with an enhanced ability to give timely and effective treatment to patients with difficulty breathing.

1. Describe the gross anatomy of the respiratory system.
2. Understand the physiology of respiration and ventilation.
3. Identify assessment parameters for adequate respiration and ventilation.
4. Select and perform effective ventilation and respiratory support procedures.

SATURDAY-MARCH 17 2018 NEMSA CONVENTION OBJECTIVES

Introduction Into Pharmacology

This class starts at the beginning, and is at the BLS level.

1. Discuss basic pharmacokinetics.
2. Have a understanding the most common first line drugs used in the prehospital setting.

Advanced Pharmacology

This class will take a detailed look at many of the drugs we use or come in contact with. This is intended for ALS.

1. Classes, actions, interactions and signs of toxicity will be discussed.

Pane in the Glass: Strategies for Living Well in EMS

When your patient suffers a medical or traumatic emergency, at the moment their 'life window' is shattered and they will trust you implicitly to fix it. But, as a provider of patient care, who will fix your window. In this session Scott Crawford will discuss a nine step model that he has developed to help EMS providers maintain emotional, mental and physical wellbeing in both the short and long term.

1. Define stress and differentiate between eustress and distress.
2. Recognize features of acute and cumulative stress.
3. Identify resources to mitigate the effects of critical incident stress.
4. Implement techniques to minimize the effects of stress.

He's Not Heavy, He's My Brother - Bariatrics

Today's population is increasing in numbers but also size. Obesity today is one of the nation's largest health problems. This course will present information to assist the EMS professional in identifying a bariatric patient and recognize the signs and symptoms of health care issues common in the bariatric patient and provide innovative ways to care for and transport the bariatric patient to an appropriate facility.

Upon completion the Participant will;

1. Be able to define what is a bariatric patient.
2. Be able to identify health issues frequently seen in the bariatric patient.
3. Be able to describe the appropriate care measures for a bariatric patient.
4. Understand transportation issues unique to dealing with a bariatric patient.

Gimme Some Sugar

It's a common occurrence for EMS to respond to Diabetes emergencies. With the increasing prevalence of diabetes in our society, it's just going to get more common! Whether it's Type 1 or Type 2 diabetes, there can be more to these patients than meets the eye! In this presentation, we take both types of diabetes apart. We not only talk about what we see as emergency responders, but also about what's going on physiologically and psychologically from the perspective of the diabetic. We gain a greater appreciation of the complexities of diabetes care, as well as a simplifies approach for treating all types of diabetes-related emergencies. This class is intended for all levels of responders and is taught by a diabetic, with interactive discussion and first-hand examples, this lecture will have you walking away with all the mystery taken out of Diabetes Management.

1. Understand the physiology of diabetes, Both Type 1 and Type 2.
2. Physiologically distinguish diabetic coma from insulin shock.
3. Describe the signs/symptoms of each.
4. Discuss appropriate treatments.

What the Heck is Rhabdo?

Rhabdomyolysis: the breakdown of muscles due to trauma and the potential fatal consequences. This session will talk about what "Rhado" is, where it comes from, how to identify it, and how to treat it in the prehospital setting. From fall patients who've been on the floor for a while to suspension injuries to inmates at prisons – it's more common than one might think, and you'll see it as an EMS provider. Will you know it when you see it? We discuss some case studies to illustrate how benign it might seem, but how lethal it can be. Designed for First Responders all the way to Paramedics, we'll shed light on a condition which often lurks in the shadows.

1. Define Rhabdomyolysis, and what creates this condition in the body.
2. List mechanisms of injury, as well as signs and symptoms of "Rhabdo" in order to more quickly identify it in the field.
3. Create a working knowledge of treatments for Rhabdo at the BLS through ALS level, in order to increase the chances of survival for prehospital Rhabdo patients.

Pre-Hospital Burn Care

This class will help you identify emergent care for burn patients.

1. Define depth of burns.
2. Assessment of a burn patient.
3. Fluid resuscitation for a burn patient.
4. TBSA calculation.
5. Understand Transfer Criteria.



2018 NEMSA CONVENTION OBJECTIVES SUNDAY - MARCH 18

Love What You Do, Do What You Love

One of the most common dispatches of EMS systems today is complaints of difficulty breathing. In this fast-paced session you will be guided on a journey through the respiratory system. There will be a brief discussion of anatomy and a robust look at the dynamic physiology of one of the three body systems necessary to keep your patient alive. We will look at 'why' interventions are necessary instead of 'what' interventions are necessary. You will come away with an enhanced ability to give timely and effective treatment to patients with difficulty breathing.

1. Describe the gross anatomy of the respiratory system.
2. Understand the physiology of respiration and ventilation.
3. Identify assessment parameters for adequate respiration and ventilation.
4. Select and perform effective ventilation and respiratory support procedures.

Am I Having A Heart Attack

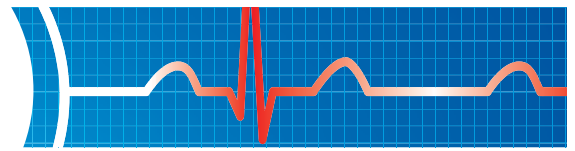
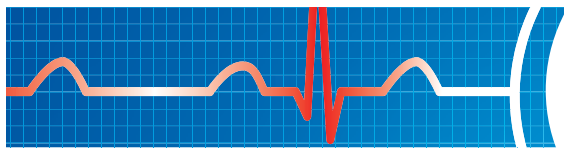
Is it cardiac, is it pulmonary, maybe muscular skeletal? Differential diagnosis of chest pain can be crucial in establishing a treatment plan. This class looks at differential diagnosis of chest pain and helps providers determine cause and helps formulate a treatment plan.

In Your Minds Eye

This course focuses on how to mentally prepare for calls through the use of imagery (visualization). During a call, the effects of stress can decrease our effectiveness and even paralyze us in our efforts to render assistance. The presentation talks about how to pre-empt stress by giving responders tools to inoculate themselves ahead of time. They will see results in decreased anxiety before calls, lower stress response during incidents, increased success while on-scene, and positive attitude formation. We talk about visualization success in bad situations, positive self-talk and even using imagery as a teaching tool for new or inexperienced providers.

1. Identify why/ how Imagery works and the two different perspectives to Imagery.
2. Identify why/how Imagery is applicable to EMS providers.
3. Grasp the usage of pre-emptive stress reduction techniques, which one can call on during an incident.
4. Complete an Imagery sequence as an example.

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- ✖ Hero Award
- ✖ NEMSA Emergency Medical Responder of the Year Award
- ✖ NEMSA EMT of the Year Award
- ✖ NEMSA Advanced Provider of the Year Award
- ✖ Chuck Woll Memorial NEMSA Instructor of the Year Award
- ✖ Nebraska EMS Association Hall of Fame

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Are you currently a NEMSA member? ☐ Yes: ☐ No

Field not required

Service Affiliation (If Applicable) _____

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| <input type="checkbox"/> NEMSA Non-member Full Convention | \$275 |
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☐ Yes I am attending the NEMSA Awards Banquet?

Extra Banquet Tickets for guest ____ x \$35

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If mailing your registration, please print the registration form and complete it. Make checks payable to NEMSA and mail your registration and check to : NEMSA, PO Box 1858, Fremont, NE 68026-1858

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NEMSA - All refunds must be requested in writing and sent to the NEMSA Coordinator at coordinator at coordinator@nemsa.org, or NEMSA, PO Box 1858 Fremont, NE 68026-1858. If granted, a \$50 administration fee will be retained. NO Refunds on One-day registrations and/or requests received after **March 1, 2018**.



NEMSA Award Nomination Form

The deadline for these awards is December 31st for presentation at Convention in March.

☐ **Leo J O'Brien, Jr. Award**

This award is presented for outstanding Achievements that an individual has attained or accomplished in the emergency medical field.

☐ **Hero Award**

This award is presented for outstanding actions of a person rendering aid to an individual in medical crisis that warrants the person being called a hero. This can also be presented to an EMS provider that goes above and beyond the call of duty.

The following provider and instructor award nominations must be a current NEMSA Member.

☐ **NEMSA Emergency Medical Responder of the Year Award**

Awarded to the EMR who has demonstrated outstanding skills, training and services to their community and/or State of Nebraska.

☐ **NEMSA Emergency Medical Technician of the Year Award**

Awarded to the EMT who has demonstrated outstanding skills, training and services to their community and/or State of Nebraska.

☐ **NEMSA Advanced Provider of the Year Award**

Awarded to the Advanced Provider who has demonstrated outstanding skills, training and service to their community and/or State of Nebraska.

☐ **Chuck Woll Memorial NEMSA Instructor of the Year Award**

This award is given to the EMS Instructor who has made the greatest contribution to local or state EMS as an instructor. The person must be a State of Nebraska licensed EMS Instructor providing education for EMR, EMT or Advanced Provider personnel.

The Hall of Fame Award will be chosen by a unanimous vote by the the NEMSA Board of Directors.

☐ **Nebraska EMS Association Hall of Fame**

Nominations may be submitted at any time during the calendar year. This is not an annual award and may be given to several recipients or not at all during the calendar year. An awardee does not have to be an actual provider or NEMSA Member. They can be a spouse, political figure, etc. One who has been a steadfast supporter of individual providers, services or the profession as a whole. An awardee can be a provider of any level from an EMR to paramedic, nurse or physician. There is no year of service requirement. The individual must have made a significant impact on their individual service, statewide EMS or variety of services in their area or region. Some examples of this are direct patient care, quality assurance/improvement, training, professionalism, CISM, community awareness/education, legislation, political action, medical direction. An awardee can be an individual who has made significant contributions to the education of EMS providers through time, dedication and the amount of involvement with classes, Hall of Fame award may be presented posthumously. Award will be presented at Nebraska EMS Conferences. The Hall of Fame Award will be chosen by a unanimous vote by the the NEMSA Board of Directors.

The nomination form can be found on our web site, www.NEMSA.org under NEMSA Awards. Nominations are due by December 31st for presentation at Convention in March. You can also download and print your nomination and mail it to the address below.

NEMSA
PO Box 1858
Fremont, NE 68026-1858

or email to: coordinator@nems.org



Thank You

We appreciate your attendance at the 2018 NEMSA Convention, and we wish you the best convention ever! Enjoy the presenters, sessions, fellowship with friends, and your time in Columbus. If you have any questions while you are here, please do not hesitate to ask any of the Convention Committee Members for assistance.

*For further **Convention questions**, please contact:*

Darrin Kiger - convention@nemsa.org or Ryan Simpson - events@nemsa.org

*For **Registration questions** please contact: **Kim Clay - registration@nemsa.org***

*For **Vendor questions** please contact: **Darci Jeffres - exhibitor@nemsa.org***

2018 Convention Planning Committee:

Darrin Kiger, Ryan Simpson, Dave Huey, Anna Yates, Tony DeLong, Robin Dimmitt, Austin Tompkins, Josh Holmquist, Darci Jeffres, Kim Clay, Curtis Deremer, Matt Ruhrer, Arnie Higgins, Dan Slocum, and the Ramada Columbus and River's Edge Convention Center staff.

NEMSA



CONVENTION 2018