

AS THE AMBULANCE ROLLS

Grand County EMS

**Special All Staff Meeting:
June 20, Station 1 @ 1800**

May 2018

Inside this issue:

EMS Week	2
Naloxone Info	3
Reminders	4
Employee Of The Month	
New Pumps!	
Peer Support Group Birthdays	4
Mental Health First Aid	5
3 Healthy Meals	6
Summer Survival	7
Hospital Pre-Arrival Check-in	8
Uniform Policy	
Thank You's!	9
Clean Stations	
ThanMission Statement	10

Caught in action



Left: An official 'Farewell' to Brian Gourdin who was unable to join us at the staff meeting. Brian will be missed and we wish him the best of luck as he begins his new job at Union Pacific, working in the Kremmling area. Thanks for all of your hard work and dedication to Grand County Brian!

Below-Left: Charity helping out at the 13th annual kids fair at Granby Elementary

Below-Middle: Safety is ALWAYS at play at Grand County EMS! Click it or ticket!

Below-Right: Sometimes you just have to get down and dirty to help people out.



If you have any pictures and stories that you would like highlighted in the MONTHLY Newsletter, please email them (high resolution) to Christian at chornbaker@co.grand.co.us along with a brief description. The more pictures the better!

Thanks for making GCEMS a respected organization out in our community!

Events and Announcements

- April 28 Kremmling Health Fair
- May 8 CPR & FA at Grand River Ranch
- May 21, 24, 28, 31 & June 1st EMT Class
- May 25 HS EMT NREMT skills practical
- May 20-26 EMS Week!
- May 31 Granby Elem School Bike Rodeo



County Manager Coming to EMS

Wednesday evening at 1800 on June 20th, 2018, County Manager Lee Stabb will visit with GCEMS staff to provide information and answers questions on the proposed “NEW” Healthcare Plan being introduced and offered to all employees of Grand County. This special event will provide an exclusive opportunity for GCEMS to have questions answered on how the healthcare coverage plan will affect each individual.

This is a mandatory meeting so make the appropriate changes in your schedules to attend.

EMS Week is May 20-26

We're starting to plan and prepare for the 2018 EMS week and need your help! Chief is asking for ideas on this year's celebration, so please reach out to Allen with any and all suggestions! Was the picnic fun last year? Are there ways we can improve upon it and help recognize all of you that deserve it? Ambulance obstacle course? Family activities? Cornhole, washers, and other games to play?

History of EMS Week

The American College of Emergency Physicians (ACEP) was instrumental in establishing EMS Week when President Gerald Ford declared November 3 – 10, 1974 as the first “National Emergency Medical Services Week.” This annual observance continued for four more years and was then reinstated by ACEP in 1982. Around this time the observance of EMS Week was moved to September. In 1992 EMS Week was again moved to be the 3rd week in May. The move was made to separate EMS Week from Fire Prevention week in October. The rationale for the move was the majority of fire and EMS services felt having the two events back to back hurt the effectiveness of each program so EMS Week was moved to May.

ACEP began collecting and distributing ideas and information for EMS Week in the early 1980's. Professionally printed and prepared EMS Week Planning kits were developed starting in the late 1980's. Today 25,000 EMS Week Planning Guides are distributed free of charge to EMS services, fire departments, rescue squads, volunteer groups, and emergency departments across the country. The 48 page guide contains ideas for local EMS Week activities and highlights EMS Week programs held by EMS services during the previous year.

The following excerpts were taken from the official Surgeon General's Advisory on Naloxone and Opioid Overdose:

*I, Surgeon General of the United States Public Health Service, VADM Jerome Adams, am emphasizing the importance of the overdose-reversing drug naloxone. For patients currently taking high doses of opioids as prescribed for pain, individuals misusing prescription opioids, individuals using illicit opioids such as heroin or fentanyl, health care practitioners, family and friends of people who have an opioid use disorder, and community members who come into contact with people at risk for opioid overdose, **knowing how to use naloxone and keeping it within reach can save a life.***

The Opioid Epidemic

Over the past 15 years, individuals, families, and communities across our Nation have been tragically affected by the opioid epidemic, with the number of overdose deaths from prescription and illicit opioids doubling from 21,089 in 2010 to 42,249 in 2016.¹ This steep increase is attributed to the rapid proliferation of illicitly made fentanyl and other highly potent synthetic opioids. These highly potent opioids are being mixed with heroin, sold alone as super-potent heroin, pressed into counterfeit tablets to look like commonly misused prescription opioids or sedatives (e.g., Xanax), and being mixed (often unknowingly) with other illicit drugs like cocaine or methamphetamine. The resulting unpredictability in illegal drug products is dramatically increasing the risk of a fatal overdose. Another contributing factor to the rise in opioid overdose deaths is an increasing number of individuals receiving higher doses of prescription opioids for long-term management of chronic pain. Even when taking their pain medications as prescribed, these patients are at increased risk of accidental overdose as well as drug-alcohol or drug-drug interactions with sedating medications, such as benzodiazepines (anxiety or sleep medications).

The Overdose-Reversing Drug Naloxone

Naloxone is an opioid antagonist that is used to temporarily reverse the effects of an opioid overdose, namely slowed or stopped breathing. Expanding the awareness and availability of this medication is a key part of the public health response to the opioid epidemic. Naloxone is a safe antidote to a suspected overdose and, when given in time, can save a life. Research shows that when naloxone and overdose education are available to community members, overdose deaths decrease in those communities.² Therefore, increasing the availability and targeted distribution of naloxone is a critical component of our efforts to reduce opioid-related overdose deaths and, when combined with the availability of effective treatment, to ending the opioid epidemic. In most states, people who are or who know someone at risk for opioid overdose can go to a pharmacy or community-based program, to get trained on naloxone administration, and receive naloxone by "standing order," i.e., without a patient-specific prescription.³ The Centers for Disease Control and Prevention advises health care providers to consider offering naloxone to individuals when factors that increase risk for overdose or concurrent benzodiazepine use are present.⁴ Furthermore, most states have laws designed to protect health care professionals for prescribing and dispensing naloxone from civil and criminal liabilities as well as Good Samaritan laws to protect people who administer naloxone or call for help during an opioid overdose emergency.^{3, 5} Naloxone is increasingly being used by police officers, emergency medical technicians, and non-emergency first responders to reverse opioid overdoses. There are [two FDA-approved naloxone products](#) for community use that are available by prescription, but too few community members are aware of the important role they can play to save lives.

If you or someone you know meets any of the following criteria, there is elevated risk for an opioid overdose.

- Misusing prescription opioids (like oxycodone) or using heroin or illicit synthetic opioids (like fentanyl or carfentanyl).
- Having an opioid use disorder, especially those completing opioid detoxification or being discharged from treatment that does not include ongoing use of methadone, buprenorphine, or naltrexone.
- Being recently discharged from emergency medical care following an opioid overdose.
- Being recently released from incarceration with a history of opioid misuse or opioid use disorder.

It should be noted that, in addition to the above patient populations, patients taking opioids as prescribed for long-term management of chronic pain, especially those with higher doses of prescription opioids or those taking prescription opioids along with alcohol or other sedating medications, such as benzodiazepines (anxiety or insomnia medications), are also at elevated risk for an overdose.

REMINDERS

- **Official communication and notification at Grand County EMS is through email.** Remember, it is your responsibility to check your email to stay up to date on information. If you are not getting emails from Command Staff, talk with Allen ASAP
- We appreciate all of your help in getting all of your paperwork in promptly so we can all get paid! Thanks to Nadine and Robin for their great work!
- There is still a lot of cleaning that can happen around the stations. Take a little bit of time each shift and help make the place look great!
- Don't forget to get your timecard in and on time in order to get paid promptly!

EMPLOYEE OF THE MONTH



Melissa has been working tirelessly since becoming the new shift captain and has helped to implement (or soon to implement) some positive changes at GCEMS. She's worked to get a Peer Support Group set up and has changed the way that Variko is being used as well. She's done a great job on the uniforms (love that sweatshirt right???) and has done some great CEs too!

Don't forget to drop off your nomination for employee of the month in the day room at station 1. This is a great chance to let the Command Staff know of things we may not always see and is a great way to show your peers some love that we all need for outstanding work.

New pumps in operation next week!!



Expect to see the new pumps in all of the ambulances next week. Make sure that you've familiarized yourself with their operations. If you have any questions, talk to your shift captain. Thank you to Audrey for getting these set up to make your job easier and more efficient.

Peer Support Group

We all experience times of stress in our lives and in EMS our stress level is much higher than the average person. For the most part we learn to manage this stress and it doesn't overly impact our lives or mental state. Sometimes it does become too much and we need external help and assistance. Needing help is nothing to be ashamed or reserved about. We all go through it at some point whether it's due to work, home, finances, relationships, etc. When we don't seek help is when problems arise. Holding in your thoughts and feelings can be detrimental and what may not seem like a big deal at first can quickly become tragic.

To help with this need we are starting a peer support group. The group is a safe, confidential and nonjudgmental place to go when you need assistance. This group is available to you 24/7 and is here to listen, provide additional resources and advice if you request it. You can contact the group anytime you need help; a bad call, tension with your partner/captain, problems at home, problems at school etc. Anything that becomes too much for you to handle on your own – reach out. No problem is too small of a problem to seek help with. Many times the small problems built into the big ones which make us overwhelmed and lead us down a path we don't want.

Your contact with the group will be confidential and nonjudgmental. The only exception to this would be something that falls under mandatory reporting which would have to be reported. Nobody except the person you contact will know that you have reached out! If you don't need assistance yourself, but see someone struggling please reach out to us as well. We will delicately reach out to that person keeping your information confidential with no finger pointing going on. In addition if you know of something going on that affects multiple people and think a group meeting (debriefing) would be beneficial let us know.

I'd also like to start utilizing the discussion board on Vairkko for peer support and interaction. We can post links to information and support, idea's, topics to have conversations about – just keep it professional and courteous. If you don't know how to access this let me know and I'll walk you through it.

In addition to myself I have 3 volunteers who have made themselves available to you. They are:

Jeanne Power 970-846-9112 jpower@co.grand.co.us power.jeanne@gmail.com

Dustin Barbee 970-238-0019 dbarbee@co.grand.co.us

Cory Ziegler 970-531-8856 ziegler@co.grand.co.us ziegler0504@gmail.com

If you would like to volunteer please let me know and I'll get you added to the list. Please don't hesitate to contact any one of us at any time!

Melissa 970-324-5181 mwrightlewis@co.grand.co.us

MAY BIRTHDAYS

- 2 - Logan Price
- 3 - Ryan Gallagher
- 4 - Cory Ziegler
- 9 - Alan Gonano
- 12 - Chris Zettlemoyer
- 19 - Erich Barber
- 27 - Kristina Ekren
- 27 - Derrick Pavlisin



MENTAL HEALTH FIRST AID

Certification Course

Learn to identify, understand & respond to the signs of mental illness in adults.

Monday

MAY 7th

8:00am – 5:00pm

Winter Park Resort

Children's Center Building, Third Floor
Blue/Green Rooms
145 Parsenn Road, Winter Park, CO 80482

Cost: \$20 per participant

Participants will be given a one hour
break for lunch. Lunch not provided.

To register please contact:
Tom Gangel at 970-819-2625



The adult Mental Health First Aid course is for those wanting to focus on intervention with the adult population and is appropriate for any adult who wants to learn how to help a person who may be experiencing a mental health related crisis or problem. Topics covered include anxiety, depression, psychosis, and addictions. Common audiences include community members, business owners, first responders, health and human agencies, human resources, or supervisory staff.



3 Healthy On-The-Go Meals For Paramedics and EMTs

These planned meals will help you stay healthy and full between EMS calls

We often make nutrition too difficult and complicated. When yours truly was on the street in a busy urban system, I would prepare meals the day before a long week of running calls. While it takes some planning, I was able to eat well, save money and control myself from the high-sugar and low-health foods that seem pervasive in our world.

1. Fit responder bars

This is a homemade protein meal-replacement bar that you can modify to fit your taste.

- 2 cups oatmeal
- 4 scoops of vanilla egg white powder (use the scoop in the tub, and egg whites taste best when cooked)
- 1 cup almond meal
- 1 cup raisins
- ½ cup diced nuts of your choice
- 2 tbsp. almond or peanut butter
- 1 cup almond milk and 1 cup water
- 2 tbsp. apple sauce

Preheat oven to 295 F. Combine ingredients in a bowl, and mix well to desired consistency. More moisture is better than less. Bake in a round cake pan for 16 to 18 minutes. Do not over cook. Cut into equal pieces; each piece will contain roughly 12 grams of protein. Keep the bars in the refrigerator until your shift, and bars will be fine unrefrigerated for at 12 to 14 hours.

2. Responder wraps

Here's a gluten-free, spinach or whole wheat wrap for a tasty and healthy meal on the go.

- 4-5 slices of reduced-sodium turkey breast (tuna or chicken works too)
- Mustard
- Cheese such as provolone or cheddar
- Loose leaf spinach or kale
- Spinach or whole wheat wraps

Make two wraps and cut each in half after rolling them. These are easy to eat between calls no matter where you are. One wrap will keep you going for at least two hours, and will help to control your portions. Drink water as you eat each wrap to feel full and stay hydrated.

3. Basic protein base

Every good meal needs a good base to enhance it. With this combination you can add any protein you like and it will always taste good. Plus it can be eaten hot, cold or in-between, depending on when the tones go off.

- 2 cups brown rice
- 1 can black beans
- 2-3 diced tomatoes
- Loose leaf spinach
- Any protein you want

Cook rice according to directions on package. When rice is done, immediately add the beans and tomatoes. Season to taste. Once cool, place the mix in a storage container and throw it in the fridge. Before your shift, combine the rice mix with loose-leaf spinach and a protein source.

Consider pre-cooking three to four chicken breasts and adding ¾ of a breast (diced) into the mix. A salad dressing like Newman's Own honey mustard can really add some flavor.

Summer Survival Kit

Be ready to take care of yourself first!! You can't help anyone if you're sunburnt and dehydrated....you never know where you will end up!

Ball Cap or Wide-brimmed Hat: Helps reduce glare and will provide added protection against the sun's UV rays, or an afternoon rain shower. Adds extra warmth on windy or cooler days and can be soaked in a stream or lake to provide temporary relief from the heat on warmer days.

Winter hat: It gets cold up here no matter what time of year!

Sunscreen: It's important to protect your skin from harmful UV radiation if you're spending a considerable amount of time outdoors. Choose lotions that offer a sun protection factor (SPF) of 15 or higher. Reapply continuously throughout the day no matter what the SPF rating because all sunscreens will lose their effectiveness when exposed to water or your own sweat.

Sunglasses: A good pair of sunglasses are a must for most outdoor activities. Prolonged exposure to the sun's harmful UV rays can lead to cataracts and other eye diseases. During the winter you are at risk of contracting snow-blindness, a temporary condition that can be very debilitating not to mention extremely painful. Some manufacturers offer frames with interchangeable lenses so you can swap out lenses depending on the conditions. Look for sunglasses that offer 100% UV protection.

Pocket Knife: A pocket knife is one of the most important tools you can carry into the backcountry. Just ask Bear Grylls. This is *the* essential survival tool. There are a myriad of sizes and shapes but a single edged folding or fixed blade that is 3 to 5 inches in length is ideal. They can be attached easily to hip belts and sternum straps for easy access.

Insect Repellent: You understand the importance of carrying a bottle of bug juice. Mosquitos and biting flies can be overwhelming in some areas and they will have you sprinting back to the car if you forget to pack it. Although there are some health concerns associated with DEET it's the only ingredient that really works against biting insects.

Basic First-Aid Kit: First-aid kits come in a variety of sizes and configurations and some include basic survival items. Your first-aid kit should be tailored to the length of your trip and the size of your group. It may be necessary to carry more than one when traveling with a large group. You may find it easier to purchase or build a first-aid kit specifically for day hikes and keep a second one handy for your overnight or extended backpacking trips. Don't forget to replace any items that were used during a trip so you're not missing anything on your next outing.

Map: Choose a quality topographic map with plenty of detail and familiarize yourself with your planned route beforehand. Most backcountry trails in Yellowstone are easy to follow but carrying a good map will provide you with relevant information about your location as you're traveling through the wilderness.

Compass: Another very essential navigational tool. When used in conjunction with your topo map these two items will prevent you from getting lost. A simple baseplate compass is all you need for most outings. An orienteering class can be an enjoyable way to learn new skills or improve upon your existing navigational capabilities.

Water Bottle or Hydration Bladder: Make sure you stay well hydrated and carry enough water to last for the duration of your hike. For longer outings or backpacking trips you should carry a water filter so you can replenish supplies as needed. Check your topo maps and with park rangers to determine if reliable water sources will be available along your route. Visit our section on **backcountry water purification** for more information on microfiltration systems.

Butane Lighter and/or Matches (Carry both): A lighter and matches. Easy to carry. Simple to use. In hot and dry conditions be sure to check with rangers regarding backcountry fire restrictions. Fire starter kits are available and compact.

High Energy Snacks: Your body needs a continuous supply of energy during periods of heavy exertion. Energy bars and energy drinks are a great way to keep your body fueled when you're on the trail. There are a multitude of flavors and options available and we highly recommend you try them first because they may not be as tasty as they sound.

Rain Gear: A lightweight waterproof jacket will offer protection from the wind, rain and snow. Choose one with a hood to prevent rain-water from entering at the neck and shoulders. This is your best defense against the elements and hypothermia if you get caught in bad weather.

Extra Clothing: An extra shirt, a lightweight fleece jacket and a warmer hat can be a real life saver if conditions take a turn for the worse. The weather in Yellowstone is often unpredictable so we recommend packing a few extra items just in case. Check the forecast before you head out and be prepared for any kind of weather, including the possibility of snow during the summer. It happens more often than you would expect.

Toilet Paper and/or Tissues: This goes without saying.

Hospital Pre-Arrival Call In:

Please try and give the receiving facility ample notice of your pending arrival - especially at night. 10-15 minutes head time is appropriate. If your scene is less than 5-10 min away call in prior to transport to give them enough time to be ready for you. If you cannot hail the ER on their radio call in your report via phone if service is available:

MP- Granby is 970-887-5810

MP-Kremmling 970-724-313

DHEG 303-602-5960.

To review, your hospital call in should be short and give pertinent information so they can prepare for your arrival. You don't have to give a full report via the radio as you will do this when you arrive. Your call in should only take a few seconds and should not go over 30 seconds. A basic guideline of what they would like to know from your pre arrival call in is:

Hail to Hosp: MP-G/K or DHEG

Who you are: Your name and Medic #

How you are coming: Emergent vs Routine (Non-emergent)

What you are bringing: Age, M/F, chief complaint, MOI, your main clinical findings, vital signs, pertinent treatments (no need to go over every little complaint/finding if the pt has many, just the main one or two you feel most important. For example if it's a major trauma saying "multisystem trauma with significant head, chest, etc" is appropriate instead of trying to list every injury you see.)

How far away you are: Ideally 10-15 minutes out

An example of this would be:

"Middle Park Granby ER" (wait for reply) "This is Melissa with Medic 1. I'm enroute to your facility with an 18 year old female complaining of right lower leg pain from a mechanical fall. She is alert and oriented at this time and has deformity to her right tib/fib. Vitals are 120/80, HR 88 sinus rhythm, pulse ox 96% on room air. I have an IV established and she has received 50 mcg fentanyl and 4 mg Zofran. I'm 10 minutes from your facility."

Uniform Policy

Policy 67.0 UNIFORMS

EMS staff are required to wear the designated uniform as determined by the department. The department uniform shall be worn as prescribed and determined by the Command Staff. No other garments shall be worn unless permission has been granted by the Command Staff.

67.1 The daily uniform is as prescribed and provided by the department:

1. Navy Uniform pants
2. Black belt with a simple buckle. (Employee provides)
3. Radio loop
4. Uniform tee shirt
5. Uniform Polo shirt
6. Uniform hat or uniform knit hat (optional)
7. Uniform coat as needed
8. Employee purchased uniform pullover shirt

67.2 The daily allowed footwear by department:

1. Black athletic shoes
2. Black boots
3. White or black socks

67.3 During the day the staff shall remain in the daily uniform and allowed footwear from 0700 hours until 1900 hours. During the work day the staff is allowed to remove the polo shirt while continuing to wear the daily uniform tee shirt while completing tasks at the station. At any time prior to leaving the station the complete uniform shall be worn.

67.4 The EMS staff is required to wear the daily uniform in its entirety at paid or sponsored training sessions at the station or away from the station. Failure to comply will result in no pay for the time and will disqualify the employee from being allowed to attend paid or department sponsored trainings away from the station. This policy will be enforced unless otherwise allowed by the EMS Chief or Deputy Chief.

67.5 The EMS staff is required to wear the daily uniform in its entirety to receive compensation at staff meetings or other designated EMS functions as prescribed by the EMS Chief.

67.6 Other uniform considerations maybe allowed as prescribed by the EMS Chief or Deputy Chief. Such circumstances for consideration may include bike patrol or special events.

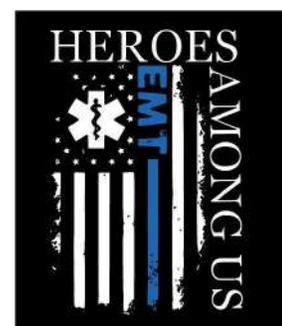
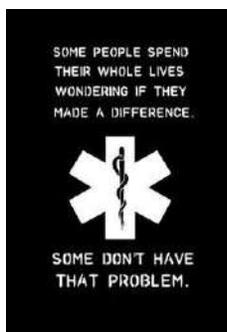
Thank You!!

Sometimes the biggest or smallest act that many of you do can go unnoticed by Command Staff and your fellow EMTs and Paramedics. We always want to hear from you about what YOU have seen that should really be recognized in our daily lives. Please do not hesitate to send us this as we want to make sure they're shared with others!

The following people have been recognized for doing an outstanding job in saving a life on Easter Sunday with a CPR call at MPMC-G. The gentlemen you saved came in last Sunday and wanted to thank everyone involved!

Karla Whitcare, Erica Mentzer, Justin Wildeboer, Dustin Barbee, Logan Price, Chris Zettlemoyer and Allen Pulliam. We appreciate your professionalism!

Jesse Gatewood and Meghan Woods are also being recognized for their additional assistance after the all-staff meeting and sticking around to help with cleanup as the on-duty crews tended to paperwork and duties. Sometimes it's the small acts that make people truly appreciate our efforts.



National Association of Emergency Medical Technicians Of The Year Awards

Nominations for the NAEMT "Of The Year Awards" are open and we would love to see any of our staff nominated along with GCEMS overall. Christian Hornbaker will be working on these nominations but will need assistance from you if you'd like to nominate one of your co-workers. This would be a huge honor and we want you to be recognized both internally and externally. Please see Christian **IMMEDIATELY** if you are thinking of anyone in particular. The categories we would look at are **EMT**, **Paramedic**, **Educator**, **Medical Director** (new this year!), and **EMS Service**.

Station Cleanliness and Thoughts

A reminder as we hope spring is finally here. The outside of the stations are very important to take care of. Station 1 includes everything from the Library to Mesa Street and Jasper Avenue to Agate Avenue, especially the front! **Is anyone interested in doing flowers in the front??** Station 2 includes the area completely around the station buildings. Do not let the weeds get ahead of you or that makes for even more work. The front and east side of Station 2 has some wild flowers but needs to be weeded on a regular basis. Station 4 again includes the area completely around the property, the entire length of Eagle Avenue, our side of 11th Street from Eagle Avenue to the alley right of way, and all along the north side of the property at least 4 feet from the fence.

The areas at all stations need weed control, trash clean up, and generally kept in a very pleasing visual condition. It is the responsibility of all staff to care for these areas.

Thank you for complying with these duties as they have an immediate reflection on us!

Mission Statement

It is the mission of Grand County Emergency Medical Services to provide life saving point of care services, emergency pre-hospital care during transport, and emergent & non-emergency medical transportation, with the highest standard of professionalism, the most advanced training, and a deep sense of caring for our patients and their families.

Consistent with a commitment to excellence, Grand County EMS focuses a strong emphasis on quality emergency medical care, treating the professional EMS staff with dignity and respect as well as the citizens we serve.

Grand County Emergency Medical Services continually works to maintain excellence by investing in training and technology that enhances our professional EMS staff ability to provide the highest quality of emergency patient care, increase community awareness, and increase the value of our service.

Grand County Emergency Medical Service is Committed to the Community today and for the changing future.

Thank you for all that you do!