

# EMSC Connects

VOLUME 7, ISSUE 3

May-June 2018

**Emergency Medical Services for Children  
Utah Bureau of EMS and Preparedness**

## A Word From Your EMSC Program Staff

### Special points of interest:

- *Communicable diseases*
- *Vaccinations myth and fact*
- *EMSC Day May 23rd*

May and June Greetings!!!

The month of May is a busy time in our lives but I trust that you are all enjoying the arrival of Spring!

Around this time last year we surveyed all Utah EMS Agencies. The goal of this assessment is to understand capabilities of Utah EMS agencies to treat ill and injured children, specifically the use of pediatric-specific equipment and the coordination of pediatric care.



From the survey, 36.5% of Utah EMS Agencies regularly have EMTs and Paramedics physically demonstrate the correct use of pediatric-specific equipment. The national goal is 30% by 2020. Although we currently exceed this national performance measure, more work must be done in the near future. Our next goal is to have 50% of our Utah EMS agencies performing pediatric skills checking by 2022. In the next four years, we will continue to conduct regional Pediatric Education for Prehospital Professionals (PEPP) courses, distribute our pediatric toolkits to EMSC County Coordinators and EMS Agency Training Officers, and will be providing a scene care checklist for EMS agencies to assist with skills evaluation. HAPPY EMS WEEK!

*Allan Liu*

EMS for Children Program Coordinator [aliu@utah.gov](mailto:aliu@utah.gov)

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## Pedi Points

Tia Dickson RN BSN

I have always been an advocate for immunization, as a long time pediatric nurse I almost had to be. But it wasn't until I was holding the consent forms for my own twins that my feelings surrounding vaccination came to a head. We are all influenced by the news reports, the mommy blogs and the information burying us in both sides of this debate but as health care providers we have a responsibility to promote health and protect children from diseases that are preventable.

*Childhood vaccines protect children from a variety of serious or potentially fatal diseases, including diphtheria, measles, polio and whooping cough (pertussis). If these diseases seem uncommon — or even unheard of — it's usually because these vaccines are doing their job. -Mayo Clinic*



Practice what we preach

*One of greatest challenges facing infant immunizations in Utah is the perception that vaccine-preventable diseases do not present a significant threat and there is no reason to immunize children. But, it is a fact that many children in our communities are not fully immunized and remain at risk for vaccine-preventable diseases. Vaccine preventable diseases also have a costly impact, resulting in doctor's visits, hospitalizations, and premature deaths. Sick children can also cause parents to lose time from work. Vaccines can protect both the people who receive them and those with whom they come in contact. - Utah Department of Health*

Check your facts and be prepared to advocate for your pediatric patients. Your opinion matters to the community you serve. Know what you represent on this issue.

## The Doc Spot

Catherine Qualls-Davis MD

**"AS HEALTH CARE PROVIDERS, IT IS OUR DUTY TO PROVIDE ACCURATE INFORMATION REGARDING VACCINES"**

### Protecting Our Children: The Importance of Vaccination

#### Background

The development of vaccines is one of the greatest medical achievements in history. In fact, availability of clean water is the only achievement that performs higher in regards to disease prevention. Over the years, vaccines have prevented countless illnesses and have saved millions of lives. Despite this fact, there still remains debate about vaccine safety, and many parents remain hesitant to vaccinate their children. As health care providers, it is our duty to provide accurate information regarding vaccines and to be champions of disease prevention by encouraging vaccination.

#### Why are vaccines important?

Many diseases that used to be common in our country and around the world can now be prevented by vaccinations. All diseases that we vaccinate against can have life threatening complications. These complications are particularly worrisome to our most vulnerable populations including children, the elderly, and those with chronic medical problems. Through vaccination we can prevent many dangerous illnesses and save countless lives.

#### Common Myths and Facts

Despite years of plentiful data and a multitude of studies that prove vaccines safety and effectiveness, many parents are hesitant to vaccinate their children. Many of these hesitations come from widespread false information regarding vaccine safety. Below are common concerns about vaccines, and facts that you can use to debunk these myths to promote vaccination and disease prevention.

**Myth:** Too much, too soon. Many parents worry that vaccines may overwhelm their child's immune system

**Fact:**

- Babies are exposed to many more antigens (the parts of germs that make us sick) on a daily basis than the amount of antigens given in vaccines.
- Every time a baby eats, puts a toy in their mouth, or plays on the floor they are being exposed to more antigens than are in vaccines



## Emergency Medical Services for Children

- Theoretically, a baby's immune system would have the capacity to handle 10,000 vaccines at once!

**Myth:** It is safer to spread vaccines out over a longer period of time

**Fact:**

- The recommended schedule of vaccines is designed to protect children when they are the most vulnerable
- Getting vaccines as an older child means that the child is not protected against serious diseases when they are most at risk

**Myth:** Vaccines contain toxic ingredients. Many parents will express concern about ingredients such as aluminum or thimerosal.

**Fact:**

- Aluminum salts have been used safely in vaccines for more than 70 years
- Aluminum is in our food, air, and water. It is also found in formula and breast milk.
- The amount of aluminum in vaccines is similar to the amount in 33 ounces of formula. A baby will have more exposure to aluminum through their food in one day than from one set of vaccines!
- Today, most vaccines do not contain thimerosal. It is sometimes used in the manufacturing process but is then removed, leaving only a trace amount.
- Many scientific studies have shown there is no link between thimerosal and autism.
- Even though thimerosal has been removed from vaccines, the rate of autism has continued to rise

**Myth:** Vaccines cause autism

**Fact:**

- In 1998, Dr Andrew Wakefield published a paper about 8 children who reportedly developed autism after receiving the MMR vaccine.
- Over the past decade, 10 of the 13 authors have retracted the findings. In 2010, The Lancet retracted the study, because of ethical misconduct on the part of Wakefield.

### The Influenza Vaccine

Some parents question the need for the yearly flu vaccine. Many people see the flu as a relatively mild disease because they (or someone they know) has had the flu and survived. However, influenza is a very serious disease. In an average year, the flu causes 49,000 deaths and leads to 200,000 hospital admissions. As of March 2018, state health departments reported 128 children have died from influenza. Also as of March 2018, vaccine effectiveness is estimated to be 36% overall, but 59% effective for children 6 months to 8 years of age. Even with lower effectiveness than other years, the influenza vaccine can still prevent serious complications including death or having to be admitted to the hospital, particularly for children!

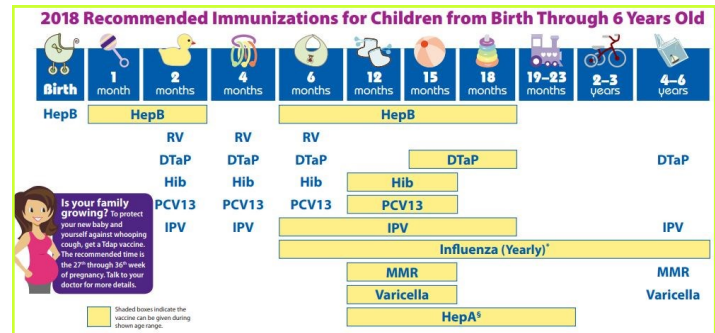
### Resources:

For more resources regarding vaccine safety, schedules, and efficacy you can visit the AAP, CDC, or WHO websites.

<https://www.aap.org/en-us/advocacy-and-policy/aap-health-initiatives/immunizations/Pages/Immunizations-home.aspx>

<https://www.cdc.gov/vaccines/vac-gen/howvpd.htm>

<http://www.who.int/topics/vaccines/en/>



### Data Details

Yukiko Yoneoka MS, Specialty Care Data Analyst Bureau of EMS and Preparedness Utah Department of Health

If you would like to track communicable diseases and immunization coverage in Utah follow these links. They have a list of Utah disease case reporting stats including Pertussis (weekly, monthly, annually).

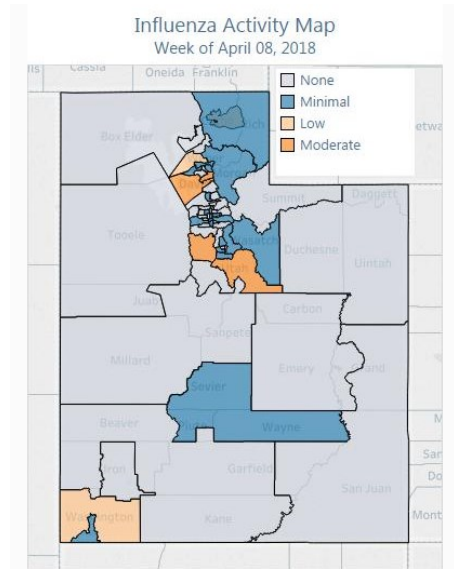
<http://health.utah.gov/epi/data/>

Vaccine preventable disease and immunization coverage reports are here

[http://health.utah.gov/epi/diseases/vaccine\\_prev](http://health.utah.gov/epi/diseases/vaccine_prev)

<http://ibis.health.utah.gov/indicator/view/Imm4313314.html>

Intermountain and Primary Children's Hospital have a great website focused on Germ Watch and education <https://intermountainhealthcare.org/health-information/germwatch/germ-school/>



## Happenings

EMSC staff and many of our Coordinators participated in the EMS track of the Zero Fatalities Safety Summit in April. We conducted 3 [Stop the Bleed](#) sessions and sponsored a presentation on Opioid Epidemic and [Utah Naloxone](#). The EMSC program was honored with the Outstanding Traffic Safety Program Award for our Bicycle Skills Rodeo Trailer Program (accepted by Allan Liu). Our EMSC Coordinator Kris Shields was honored with the Emergency Medical Service Injury Prevention Advocate of the Year Award.



## Emergency Medical Services for Children

**2018 National EMS Week**  
**May 20-26**

**Wednesday, May 23<sup>rd</sup>**  
**EMS for Children Day**

**EMS STRONG**  
**STRONGERTOGETHER**

**HRSA EMERGENCY MEDICAL SERVICES FOR CHILDREN PROGRAM**

### May 23rd is EMSC day during EMS Week.

National EMS for Children Day places a spotlight on the delivery of high-quality emergency medical care for children, focusing on the unique needs of critically ill or injured pediatric patients and the challenges faced by EMS professionals in meeting those needs. The EMS for Children program is working with EMS leaders nationwide to ensure that all children - no matter where they live, attend school, or travel, receive the best care possible in an emergency situation.

Our partner **Primary Children’s Hospital** would like to **thank Utah’s EMTs with a breakfast** to be served in their parking lot on May 23rd from 0700 to 1030.

We are excited to announce that we have received a declaration from Governor Gary Hebert and May 23rd is officially EMSC Day in the state of Utah!!!



**Gary Richard Herbert**  
**Governor**  
**Declaration**

*Whereas*, more than 50 million children receive emergency medical care each year due to illness or injury;

*Whereas*, in medical emergencies, the needs of children are often different than the needs of adults;

*Whereas*, the goal of emergency medical services for children is to help states and communities prepare for a medical or traumatic emergency involving a child by providing properly trained emergency personnel, sufficiently equipped ambulances, pediatric-ready emergency departments, and well-defined pediatric treatment protocols and procedures;

*Whereas*, emergency medical services for children relies on its established partnership within the emergency medical services (EMS) community, as well as physicians and nurses who provide pediatric emergency care, to help states and communities reduce child disability and death due to severe illness or injury; and,

*Whereas*, emergency medical services for children, the tens of thousands of EMS providers and acute care professionals it serves, and the more than 25 professional organizations in which it partners with are committed to improving the quality of emergency care that children receive;

*Now, therefore*, I, Gary R. Herbert, Governor of the great State of Utah, do hereby declare May 23, 2018, as

**Emergency Medical Services for Children Day in Utah**

*Gary R. Herbert*  
 Gary R. Herbert  
 Governor

# May 2018

Sun	Mon	Tue	Wed	Thu	Fri	Sat
		1	2	3 PETOS/PGR	4 Iron Man →	5
6	7	8	9 EGR	10 PGR/ EMSC Advisory Board	11	12
13	14	15	16	17 PGR	18	19
20 	21 EMS WEEK	22 →	23  EMSC DAY	24 PGR	25 →	26 
27	28  Memorial Day	29	30	31 PGR		

**The Pediatric Emergency and Trauma Outreach Series (PETOS)** Pediatric lectures for EMS, face time with PCH Physicians, these lectures are monthly on the 1st Thursday from 3-4p. To be held at the Salt Lake Public Safety Bldg 475S 300E SLC Ut 84111

You can attend live or watch the webinar. It will qualify for pediatric CME. Access at <http://www.primarychildrens.org/petos>

May 3 Howard Kadish MD *Pediatric Head Injury*

June 7 TBA

**Pediatric Grand Rounds (PGR)** are educational/CME offerings webcast weekly (Sept-May) you can watch live or archived presentations. It is geared towards hospital personnel but will qualify for BEMSP CME Access at <https://intermountainhealthcare.org/locations/primary-childrens-hospital/for-referring-physicians/pediatric-grand-rounds/>

**EMS Grand Rounds (EGR)** This is offered monthly at 2 pm, it is geared towards EMS. Live viewings qualify for CME credit.

There are 2 ways to watch

1. Live real time viewing via the internet at: [www.emsgrandrounds.com](http://www.emsgrandrounds.com) If you would like to receive CME for viewing this presentation live, email Zach Robinson ([Zachary.robinson@hsc.utah.edu](mailto:Zachary.robinson@hsc.utah.edu))
2. Delayed viewing at your personal convenience, a week after the presentation at: [www.emsgroundrounds.com](http://www.emsgroundrounds.com)

May 9 *What's Hot in Burn Care* Annette Matherly RN, CCRN

**Project ECHO Burn and Soft Tissue Injury (ECHO)** has a pediatric and adult component. CME/CEU and MD CME available <https://crisisstandardsofcare.utah.edu> click request access and follow instructions.

### Upcoming Peds Classes, 2017

For PEPP and PALS classes throughout the state contact Andy Ostler [Aostler@utah.gov](mailto:Aostler@utah.gov)

For PALS and ENPC classes in Filmore, Delta and MVH contact Kris Shields at [shields57@gmail.com](mailto:shields57@gmail.com)

### Save the Date

May 23 **EMSC Day 07-1030** Primary Children's Hospital will be hosting a breakfast for EMS crews in their parking lot.



# June 2018

Sun	Mon	Tue	Wed	Thu	Fri	Sat
					1	2
3	4	5	6	7 PETOS	8	9
10	11	12	13	14	15	16
17 Father's Day	18	19 Juneteenth	20	21 EMSC Workshop	22 →	23 →
24	25	26	27	28	29	30

## Emergency Medical Services for Children Utah Bureau of EMS and Preparedness

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WE ARE ON THE WEB

[HTTPS://BEMSP.UTAH.GOV/](https://bemsp.utah.gov/)

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**The Emergency Medical Services for Children (EMSC) Program aims to ensure that emergency medical care for the ill and injured child or adolescent is well integrated into an emergency medical service system. We work to ensure that the system is backed by optimal resources and that the entire spectrum of emergency services (prevention, acute care, and rehabilitation) is provided to children and adolescents, no matter where they live, attend school or travel.**

## Save the Date

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EMSC Coordinators our EMSC Workshop is June 21-23rd. Mark your calendars and please get your registration in to Allan Liu ([ALiu@utah.gov](mailto:ALiu@utah.gov)) ASAP. We look forward to spending time with you and enhancing your knowledge of the pediatric patient! You will also have the chance to meet our new EMSC Lead Course Coordinator.

