

THE ALABAMA OFFICE OF EMERGENCY MEDICAL SERVICES



EMS QUARTERLY NEWSLETTER

From Mobile to Huntsville and Everywhere In-Between



Volume 19, Issue 1-2 – January – June 2026

SELF CARE IN EMS.

William Elwin Crawford, MD, NRP, FACEP

EMS Medical Director, State of Alabama

I got an email from some of my physician friends several weeks ago talking about physician wellness and the importance of taking care of yourself. They had kicked off some podcasts about physician wellness. I really did not think much about it until I had the opportunity to talk with one of my sons about working a lot.



He is a law enforcement officer and also an advanced EMT who works an awful lot. I told him that I thought he should take a day off every now and then. He then proceeded to tell me that he had just watched me over the years work an awful lot as well. As I contemplated our conversation, I realized that I had been really blessed over the years to have my job and my hobby intertwined. I have always considered EMS as a passion but also as a hobby that I really enjoy. Now don't get me wrong, I still have other hobbies such as hunting and fishing, but EMS is something that I really enjoy doing.

With all of this being said, I still have reached the conclusion that we all must find time to slow down and take some time to recharge our batteries. Clinician wellness is important if we are to continue to care for others. We must take time to make sure we are healthy if we are to continue in the physically and mentally demanding arena of EMS. I would encourage everyone to find something away from work that you enjoy doing and make it a priority to do this new hobby, task, etc. We owe it to our patients to be mentally sharp and to make a habit of focusing on our own wellness.

I appreciate what you all do day in and day out!! Reach out to me if I can help you.

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NOTES FROM THE DIRECTOR:

The Weight We Carry

Jamie Gray, BS, AAS, NRP, TP-C

State EMS Director



In Emergency Medical Services, we are called to carry the weight of other people's worst days. As you all know, we respond to tragedy, witness grief, comfort the scared, and often make life-changing decisions in moments of chaos. We carry the emotions of our patients, the worries of families, and the responsibility of doing everything possible to help those in need and unfortunately have a tendency to continue to carry those things even after the call is over, and sometimes even after the shift ends. Over time, that weight adds up.

Many EMS professionals experience compassion fatigue, which is the emotional and physical exhaustion that comes from continuously caring for others who are hurting. It can leave us feeling detached, irritable, emotionally drained, or simply "running on empty." Burnout often follows, bringing feelings of exhaustion, cynicism, and a loss of the passion that first drew us to this profession in the first place.

The truth is that you cannot continually pour from an empty cup. As caregivers, we often place our own needs at the bottom of the list. We skip meals, lose sleep, work extra shifts, and push through difficult calls without taking the time to process what we have seen and experienced. While this dedication speaks to the heart of who we are, it can also come at a significant personal cost.

Taking care of yourself is not selfish, it's essential.

Protect your physical health by getting adequate sleep, eating nutritious meals, staying hydrated, and making time for exercise. Equally important is caring for your mental and emotional well-being. Talk to someone you trust. Lean on your coworkers, friends, and family. Take time away from work when needed. Participate in activities that bring you joy and help you reconnect with yourself outside of EMS.

Most importantly, give yourself permission to be human. You are not expected to carry every burden alone. It is okay to feel tired. It is okay to be affected by what you see. It is okay to ask for help.

Every day, EMS professionals step forward to care for complete strangers during some of the most difficult moments of their lives. That work matters. Your compassion matters. But remember that you matter too.

The communities we serve need healthy, resilient caregivers. Remember that while we answer the call to care for others, we must also answer the call to care for ourselves. The weight we carry is heavy, but it becomes lighter when we share it, acknowledge it, and make our own well-being a priority. Take care of yourself and be safe!

TOPICS ON TRAUMA & CARES

Sara Matthews, RN

Acute Health Systems - Trauma Registrar, CARES Coordinator

Consider Participating in the CARES Program



The Alabama Office of Emergency Medical Services has been invited by the American Heart Association to join their newly formed Sudden Cardiac Arrest Task Force in Alabama. The task force was developed to strengthen community readiness and improve survival from sudden cardiac arrest across the greater Birmingham metropolitan area. The goal of the task force is to expand and improve response and survival rates across Alabama, while expanding the Cardiac Arrest Registry to Enhance Survival (CARES) is a main priority.

“We’re honored to join the American Heart Association’s Sudden Cardiac Arrest Task Force and collaborate with partners across Alabama who share a commitment to improving survival from sudden cardiac arrest,” said Jamie Gray, State EMS Director. “By strengthening community readiness, expanding participation in CARES, and improving coordination between emergency responders, healthcare providers, and the public, we can make meaningful progress in saving lives across our state.”

According to Kim Baldwin, Vice President of Community Impact with the American Heart Association, “The data shows Birmingham has some of the greatest opportunity for improvement in the nation when it comes to cardiac arrest survival. While that highlights a serious public health challenge, it also represents an incredible opportunity. The Sudden Cardiac Arrest Task Force is mobilizing healthcare, public safety, and community leaders around a shared belief that every person has the power to save a life. Together, we’re strengthening every link in the chain of survival and building a model that can improve outcomes not just in Birmingham, but across Alabama.”

Task force members were selected for their expertise, experience and shared commitment to increasing the community’s cardiac arrest resources and improving outcomes. Membership includes community stakeholders and CPR advocates as well as leaders of the public and private sectors.

The task force has identified three priority focus areas for the first year: 1) improving CARES reporting and participation by hospitals and EMS; 2) creating additional community CPR training hubs; and 3) supporting local schools, student athletics, and in the community by promoting awareness and planning around Cardiac Emergency Response Plans, education and resources.

“Findings from our local CARES data have been the driving force behind the development of the Alabama Sudden Cardiac Arrest Task Force. Through this data, we have identified critical gaps in bystander response to cardiac arrest, including the provision of CPR and the use of AEDs,” said Ryan Coute, D.O., Assistant Professor of Emergency Medicine at the University of Alabama at Birmingham and Task Force chairperson. “We have also pinpointed the highest-risk locations, allowing us to implement targeted community interventions. Our group recognizes the power of CARES and has prioritized expanding participation throughout the region as one of our initial goals. We are excited about the path forward and remain committed to saving lives across Alabama through impactful, data-informed initiatives.”

For more information, visit <https://newsroom.heart.org/local-news/american-heart-association-launches-sudden-cardiac-arrest-task-force>.

For more information about participating in CARES, contact Sara.Matthews@adph.state.al.us.

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ACUTE HEALTH SYSTEMS UPDATE

Alice B Floyd, BSN, RN, EMT-P

Acute Health Systems Manager



Trauma System

In recent weeks there has been discussion between ATCC Leadership and OEMS regarding the 11th Edition Alabama EMS Treatment Protocol for Acute Health Systems. Under Trauma System Anatomical Criteria, #11 states “The patient meets burn criteria set forth in the Burn Protocol.” Upon further assessment it was found that the burn criteria was omitted from the protocol. A limited number of Trauma System Quality Assurance (QAs) were generated when burn patients were not entered into the trauma system under the protocol criteria, though they were entered under EMSP Discretion. Until the Burn Protocol or EMS Operational Guidelines can be updated to include the omitted burn criteria, EMSP may still enter put the patient in the trauma system under EMSP Discretion or provide assessment findings to ATCC Communicators for specific criteria clarification to enter into LifeTrac.

Trauma System Trivia - The Southeast Region was the last EMS Region to join the Alabama Trauma System. Their activation date was August 21, 2014, The total number of trauma system entries for 2024 was 10,274. There have been fluctuations in the annual totals but most years show an increase in volume including 2025 which had 16,471 trauma system entries.

Joke below was contributed by Acute Health Systems staff member Melissa Tolar.

RURAL SOUTHERN MEDICAL DICTIONARY

ARTERY	The Study of Fine Painting	NITRATE	Lower Than The Day Rate
BARIUM	What You Do When CPR Fails	NODE	Was Aware Of
CAESAREAN SECTION ..	A District In Rome	ORGANIC	Church Musician
COLIC	A Sheep Dog	OUTPATIENT ..	A Person Who Has Fainted
COMA	A Punctuation Mark	POST-OPERATIVE	A Letter Carrier
DILATE	To Live Longer	PROTEIN	In Favor Of Young People
FESTER	Quicker	SECRETION	Hiding Anything
G.I. SERIES	Baseball Game Between Teams Of Soldiers	SEROLOGY ..	Study Of English Knighthood
GRIPPE	A Suitcase	TABLET	A Small Table
HANGNAIL	A Coathook	URINE	Opposite Of You're Out
MEDICAL STAFF	A Doctor's Cane	VARICOSE VEINS ..	Veins Which Are Very Close Together
MINOR OPERATION	Coal Digging	BENIGN ...	What You Are After You Be Eight
MORBID	A Higher Offer		

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Alabama EMS Week

May 17-23, 2026

The tradition of National EMS Week was initiated in 1974. EMS developed over decades, varying from place to place, culminating in what we have today. The National motto for this year's EMS Week is "Improving Outcomes, Together." The one thing that connects all of the thousands of providers of EMS for all of those decades is the willingness to help their fellow human beings. EMS Week is a yearly celebration of that willingness and of the practitioners who demonstrate it.

It is in the nature of humanity to age, become ill, become injured, and experience unfortunate circumstances. It should be in the nature of all human beings to help one another, although that is not the case. Certain human beings respond to the call to help others and those are the individuals who end up in Emergency Medical Services. EMS is difficult to enter, requiring training, competence testing, and licensure. It is difficult to perform, requiring sacrifice of time, family, comfort, and patience. It is difficult to stay in because of the demands placed upon the practitioner which do not often balance with any meaningful level of financial compensation or appreciation from the public. Despite the negative aspects, however, thousands of otherwise normal people continue their unthwarted dedication to the profession of EMS.

The reason why is as specific as each individual in our profession. Humanity is shaped around cooperation and respect for the individual as well as our species. We all study the history of caregiving in our introduction to EMS as we begin our training. We do that in celebration of those pioneering providers and to learn about professional evolution. We observe EMS week to celebrate those persons who choose to serve their fellow man, either as volunteers or paid providers, in a professional endeavor. Society cannot ever adequately thank or acknowledge people dedicated to EMS, but we try to do what we can to do so. Governor Kay Ivey signed the Proclamation at the State Capitol in Montgomery on May 14, 2026, designating May 17-23 as EMS Week in Alabama. Pictured below are Governor Ivey and EMS officials attending followed by this year's signed Proclamations.



Pictured from right to left;

Sean Gibson, SEAEMS Region

Michael Minor, BREMSS

Travis Parker, WAEMS Region

John Blue, EAEMS Region

Jordan NeSmith, AERO

Kimberly Coley, AGEMSS Region

Jamie Gray, Alabama State EMS Director

Dr. Shea Deurring, Asst. State Medical Director

Dr. Elwin Crawford, State Medical Director

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Proclamation

By the Governor of Alabama

WHEREAS, emergency medical services (EMS) are a vital public service; and

WHEREAS, the members of EMS teams are ready to provide lifesaving care to those in need 24 hours a day, seven days a week; and

WHEREAS, access to quality emergency care dramatically improves the survival and recovery rate of those who experience sudden illness or injury; and

WHEREAS, emergency medical services have grown to fill a gap by providing important out-of-hospital care, including preventative medicine, follow-up care and access to telemedicine; and

WHEREAS, the EMS system in Alabama consists of first responders, licensed EMS personnel, emergency medical dispatchers, EMS educators, EMS agency administrators, emergency physicians, trained members of the public and other out-of-hospital medical care providers; and

WHEREAS, the members of EMS teams, whether career or volunteer, engage in thousands of hours of specialized training and continuing education to enhance their lifesaving skills;

NOW, THEREFORE, I, Kay Ivey, Governor of Alabama, do hereby proclaim May 17 through 23, 2026, as

EMS Week

in the state of Alabama in recognition of these individuals and their contributions to our citizens. I encourage all Alabamians to join in this special observance in honor of the EMS profession and the essential service it provides.



Given Under My Hand and the Great Seal of the Office of the Governor at the State Capitol in the City of Montgomery on the 14th day of May 2026.

Kay Ivey
Kay Ivey, Governor



EMS WEEK

May 17-23, 2026

IMPROVING OUTCOMES, TOGETHER



Proclamation

By the Governor of Alabama

WHEREAS, emergency medical services (EMS) personnel serve on the front lines of public health and safety, providing lifesaving care, compassion and comfort to individuals in times of crisis; and

WHEREAS, these dedicated professionals respond without hesitation to emergencies, often placing themselves in harm's way to protect and preserve the lives of others; and

WHEREAS, Alabama solemnly recognize those emergency medical services personnel who have given their lives in the line of duty, having made the ultimate sacrifice in service to their communities; and

WHEREAS, their unwavering commitment, courage and devotion to duty exemplify the highest ideals of service and leaves a lasting legacy of honor and dedication within the emergency medical services profession; and

WHEREAS, I express deep gratitude for their service to EMS and for the care, compassion and lifesaving interventions they provided to their patients; and

WHEREAS, it is fitting and proper that we set aside a day to remember these fallen EMS professionals and to honor their families, who carry forward their memory with strength and pride;

NOW, THEREFORE, I, Kay Ivey, Governor of Alabama, do hereby proclaim May 23, 2026, as

Emergency Medical Services Remembrance Day

in the state of Alabama. I encourage all citizens to join together in honoring the memory of those who have given their lives in the service of others through meaningful acts of remembrance, including memorial ceremonies, moments of silence, Walls of Honor and recognizing the families and coworkers of fallen EMS personnel.



Given Under My Hand and the Great Seal of the Office of the Governor at the State Capitol in the City of Montgomery on the 14th day of May 2026.

Kay Ivey
Kay Ivey, Governor

LICENSURE SECTION

Vickie Turner, BS, NRP
Licensure Coordinator



Yea!!!!

We made it through another license cycle.

It was a bumpy road, but we made it through. Here are some changes you need to know about:

- We are no longer charging for reclassifications (this includes endorsements).
- Just as a reminder, you must submit an endorsement application, an original signed application (first page only), and your IBSC certificates with all initial endorsement requests.
- Every time you renew your license you must upload your current IBSC certificate/card to the web page.
- You can now reclass, request a name change, request a reprint, and complete an expired-renewal online.
- Please do not send in your social security card or any original paperwork of any kind. Please only send copies of your required documents.
- If you are doing anything besides initial and the endorsement you just must send the first page of the application to our office if you are doing it on paper, but I would strongly suggest doing it online.
- Please keep in mind that if you complete an application of any type online, that is not received by our office until the following business day.
- Any questions pertaining to Education or National Registry need to be addressed with Mr. Chris Hutto.
- Any questions pertaining to criminal records, convictions, impairments, disabilities or diagnoses, or reinstatements should be addressed with Mr. Steven Stringer.
- Provider license and questions need to be addressed with Mr. Chris Hutto and/or Ms. Kempley Thomas.

The current license renewal cycle (for the ones of you that did not just renew) ends on March 31, 2027. That may seem in the far distant future, however, it will arrive before you know it. As always, we suggest that you complete your necessary continuing education as early as possible to assure that you are National Registry of Emergency Medical Technicians recertified by the beginning of March at the latest. Budget your time and plan ahead to make your next relicensing less hectic and less stressful.

As always, please call our office with any questions or concerns you may have.

Thank you for your dedication to patient care.

Vickie Turner

Editor's Note:

Vickie Turner has served the State of Alabama and its citizens for many years. She began her career in the Office of EMS in the Compliance Section as an EMS Specialist and through hard work found her way into the Licensure Section. We appreciate her continued efforts and her dedication to the Office of EMS.

REGIONAL OFFICE FOCUS

SOUTHEAST ALABAMA EMS REGION (Region 5)

Regional Director Sean Gibson



Oddly enough, my EMS journey began in South Korea, during my second US Army tour. I was in the process of working toward a promotion as well as achieving “Soldier of the Month.” Well, one of the certifications I needed was CPR...so, I took a CPR class. It was a typical late 80s CPR class that was honestly not very rememberable. Now, let us go forward a year or so.

As my military journey ended, I fell back on my “old” school skills and took a job at a metal diecast company in Enterprise. As the months rolled by, I began doing some true career research. I was focused on a position with GTE that would build on my military education and experience. Then one day, I was reading the newspaper, yes, this is pre-internet, you had to hold a piece of paper to read it. Low and behold, I found an advertisement for Firefighter. I was not exactly sure what Firefighting entailed, but I was definitely intrigued. Long story short, I applied, received an interview, and it was my CPR certification that gave me the opportunity at a career of Firefighting.

Back in those days (1992), Enterprise Fire Department was not engaged in EMS. The only time we responded to a medical emergency was if Enterprise Rescue (ERI) requested assistance. My first EMS response was a head-on collision with major injuries. Enterprise Rescue performed the extrication while we firefighters were directed into the vehicle to hold C-Spine and administer oxygen. What an exciting incident...the EMS seed was planted.

In 1993 the department worked on a deal with Enterprise State Jr College (ESJC) to teach an EMT class, on shift, to all Enterprise Firefighters. Our instructor was the one and only, Chuck Crawford. Chuck absolutely blew my young mind with his knowledge and wisdom. This was the most difficult education I had ever undertaken. I remember walking out of ESJC after taking national registry and swearing I had just failed the test. Well, I was wrong...my EMS seed just got watered.

In the years to follow, the fire department slowly eased into the EMS pond by initiating MVC response only. As time went on and our view changed from tactical EMS to strategic EMS, we as a department went all in. As far as Enterprise Fire is concerned, the rest is history...they now operate as an ALS non-transport service, supporting the citizens of Enterprise and the team at Enterprise Rescue.

I enrolled in the Intermediate EMT program and eventually in the Paramedic program. Truth be known, while I enjoyed EMS, my passion was actually firefighting. My decision to become a paramedic was hinged on applying for the Dothan Fire Department. Everyone said, if you want to be a Dothan Firefighter, you need to become a paramedic. Like CPR in Korea, I was willing to do what was necessary.

In 2001, I was hired in Dothan and completed paramedic in 2002. As the years went by, my EMS experience continued to grow. I served with three different engine companies and the truck company before being promoted to EMS Captain and moved to Fire/EMS Administration. Another truth...I was promoted into the Technical Rescue Captain position; however, after three months, I was assigned to EMS to shadow a soon to be retiring Captain.

In the meantime, after Intermediate EMT, I began working with Enterprise Rescue. Going from supporting ERI to working as Enterprise Rescue was an exciting change for me. When all you know is “treat and release”, the transport world was a brand-new experience. After a few years, I became a member of the organization, then a member of the leadership team. During my time at Enterprise Rescue, I honed my understanding of EMS management...from a transport service lens. This time in my career will by far become my most memorable. The challenges, relationships, and accomplishments are memories that I often return to. There is something about employee-owned organizations that I cannot quite put into words...but, if you ever have

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the opportunity to serve one, take the plunge. Shortly after being promoted at the Dothan Fire Department, I had to make the most difficult career decision of my life. I was challenged by giving 100% at two very demanding jobs. I felt my performance slipping in both places. I was working 12-14 hours a day just to tread water. After six months, I made the decision to resign my position at Enterprise Rescue and dig into my new position in Dothan. As hard as this was, I found comfort in my successor, Chris Davis. Chris and I have been colleagues and friends since the beginning, and I was at peace handing him the reigns.

My career at the Dothan Fire Department continued to challenge me professionally. I never stopped being “a student of my trade”, therefore, always in school, always learning. I worked with some incredible people that will remain friends forever. I retired from the Dothan Fire Department with many experiences and friends that I will never forget.

During my career, I served on many committees, boards, and workgroups. One of which was the Southeast Alabama EMS Council. While at one of our quarterly meetings in Troy, Denise, SEAEMS Executive Director, dropped a bombshell on us. She announced her intention to retire and said she had me in mind as her planned successor. I remember leaving the meeting shaken and in disbelief. I immediately called my wife, and we talked the entire hour drive back to Dothan. We met with the Retirement Systems of Alabama (RSA) to see if this could work, we talked about it, and we prayed about it – a lot. After a month or so, I made the decision to retire from the Dothan Fire Department, at the end of the year, and assume the position of Executive Director of the Southeast Alabama EMS Council in January. Folks, there has not been a single day of regret. I do miss the fire service immensely; however, my new role has brought me such joy. The opportunity to serve you, the EMS provider, is a wonderful job to come to - day in and day out.

Throughout my EMS career, I have been extremely fortunate to be befriended and mentored by some of the greatest hearts and minds in EMS. I learned so many things along the way that enhanced my leadership style as well as those things to remove from my leadership style. I have had the opportunity to participate in many large-scale events; however, it is the countless lives touched during those single patient events that I hold dearest. Of all the things we see and do throughout our career, it is the relationships that we make while on the journey that sustain us to the very end.

On a more personal note...my family. I am happily married to a wonderful, very professional, wife, Nichole. We have four children and two grandchildren who live near and far. Some are here in Dothan, and we have others in Birmingham and Singapore. We are those grandparents yelling from behind the t-ball fence to “run” or “pick up your glove”! I will try not to take this article into a mushy bog, so one last thing. Nichole was that person that opened my eyes to the importance of family. My career had robbed me of direction and without her consistent support, whispers, and ultimatums, I would be writing this article wondering why...why did I work so hard in life...to have nothing to show for it.

I want to leave you with this...never forget to love your Savior, love your family, love your team, love yourself, and love your patients. The loves of your life will become the seasoning that will slowly bring out the best in you. Without those loves, your dish will be ruined.

Editor’s Note:

We are grateful to Sean for providing us with his story. EMS history should be known to those who it influences. Sean’s story is one of thousands that contribute to what EMS is in our state. Please contact us if you would like to suggest someone’s story or if you would like to contribute yourself. EMS is a product of those unsung heroes who dedicated themselves to patient care throughout the decades of our history.

COMPLIANCE SECTION UPDATE – BLS Applications & Quality

Steven Stringer, BS, AAS, NRP, FP-C

Compliance Coordinator



Alabama logs approximately 1.0 to 1.5 MILLION responses on any given year. Of these responses, approximately 9,500 to 12,000 of them involve cardiac arrest situations. Where this may not seem like very many compared to all of them (less than one percent) still cardiac arrest management is one of the most important aspects of the practice of EMS. The best practice of EMS is to PREVENT cardiac arrest, but once cardiac arrest has occurred, the patient's best interest is served by making every attempt to resuscitate the patient when appropriate.

First, it is required of an Emergency Medical Services practitioner to be able to determine that a patient is in cardiac arrest. The skill is taught in CPR training. EMS practitioners are required to have training in Healthcare Provider BLS certification with a psychomotor (hands-on) component. An inability to perform that skill is not tolerated in our profession, or by society. Still, we investigate complaints each year for EMS personnel who legitimately fail to do so in practice. Each case is different, but the results are similar. Probably more common are complaints regarding failure to approach cardiac arrest management and CPR initiation in a timely manner. Crews arriving on scene and discussing whether to initiate CPR on someone's family member. The criteria for withholding resuscitative efforts in Alabama are listed in the EMS Guidelines, Section 18.03 Death in the Field; (1) decapitation (2) massive crush injury or evisceration of the heart, lung, or brain (3) incineration (4) warm environment rigor mortis (5) dependent lividity (6) DNAR qualification (7) an arrest patient in a valid mass casualty situation or (8) an arrested patient with blunt trauma.

If the patient cannot be verified to have one of these conditions, EMS rules, state laws, and common decency require that all measures be taken as quickly as possible to attempt resuscitation. Remember that your actions are compared to "a reasonable EMSP" in court, should you be sued for your alleged improper action. "A reasonable EMSP" would follow the rules and be able to perform the skill in high pressure situations. You are expected to make the appropriate decisions in patient care, and you are expected to fully and competently document your patient care on your e-PCR. Very often, if your judgement is called into question, your documentation is what saves you in court. You should consider your documentation skill to be as important as your BLS skills.

In my opinion, skills in EMS are best retained by "SEE one, DO one, TEACH one." If you teach BLS regularly, you will perform BLS techniques more efficiently. The same is true for ALS. Teach continuing education classes in ECG, electrical interventions, pharmacology, advanced airway care, etc., and you will inherently perform those skills more effectively.

I would just ask my EMS friends out there to remember that you cannot defend yourself and your decisions if your decisions are not based on the EMS rules and the standards of BLS and ALS care.

EDUCATION AND PROVIDER SERVICES UPDATE

Christopher Hutto, MBA, NRP

Education and Provider Services Coordinator



Education:

Spring and summer is always a fantastic time of the year to seek out ways to remediate yourselves on any and all things EMS! The more time you have to find educational opportunities, the less stress you'll be come January of your next renewal period. Go to the "EMS Education" tab on the OEMS website to find numerous sources. No matter where you go to learn, make sure the course: 1. is a recognized "ABC" type provider, e.g. CPR, PALS, BTLs, etc. taught through AHA, ARC, etc.; or 2. has a state or regional approval number; or 3. is CAPCE accredited (this usually applies more to websites than in person classes, but can be either). As always, don't forget to get a copy of your proof of completion for your own records!

As a good friend of mine used to say, "Tuck in your shirt and keep the bus between the lines!"

Provider Services:

We are in the midst of service license renewals. Services may apply either via paper or online. Both types of applications can be found on the "Service Licensure" tab on the OEMS website. To use the online application, you will need your Medical Control Physician's ID and your Service ID. If you cannot log into the online application, please give us a call. Once you have completed the online application, and have paid, a license will be emailed to whoever is listed as the contact person for the service. You **MUST** print this license and post it at the station for which the license applies. Inspectors will be checking to ensure compliance. The renewal period ends on June 30, so please don't procrastinate!