

NCEMSF NEWS

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"With continual emphasis on safety...we will not only mitigate risk...but will become models for other EMS organizations to follow!"

Message from the President

Dr. George J. Koenig, Jr., NCEMSF President

With the academic year underway, I wanted to take a moment and provide you with a recap of our summer accomplishments. I am pleased to announce that our 21st Annual Conference will be held in Boston, Massachusetts, February 28th - March 2nd. We are excited to return to Boston and to have the opportunity to honor and learn from the experiences of the providers from the Boston Marathon bombing. We also signed a contract to return to Baltimore, Maryland in 2015. We hope that by announcing both locations early that it will make the planning and budgeting process easier for your organizations. The cost structure for the 2014 and 2015 conferences will remain unchanged.

Over the summer, I was named the Associate Medical Director for the ground and aeromedical transport service at my hospital. As part of my orientation, I completed several ride alongs. The purpose was not only to interact and meet the crews, but also to gain a better understanding of the operational and service model.

On a Thursday morning, I arrived at one of the airbases and met the crew. Immediately, the pilot walked me to the aircraft to complete the safety briefing. He showed me the location of the fire extinguishers, provided instruction on how the seat belts worked, and reviewed how to exit the aircraft in the event of a water landing. The briefing concluded with emphasis on the culture of safety that empowers all to speak up to prevent an accident and that communication during take off and landing is restricted to safety concerns only. After several hours, we were assigned a mission. We boarded the aircraft and the pilot began the preflight check list with a visual inspection of the aircraft. All exterior compartments were checked, seat belts fastened, aircraft doors were shut, and the pilot radioed, "enroute to location, four souls on board, risk low."

This experience was dramatically different from my ground EMS experience. I remember, in the distant past, being dispatched to a pedestrian struck while conducting an orientation session.

We had completed about five minutes of the orientation at the time of dispatch. I looked at the new member and said, "I guess that concludes your orientation". We got into the truck and headed to the scene. What if we crashed on the way to that call? The new member would not have known where the fire extinguisher was or been familiar with other ways of egress if the truck had flipped.

The experience also left me questioning, why it is not standard procedure to complete a visual inspection of the truck prior to leaving the station before every call? While volunteering in college, enroute to a call, I watched the entire equipment compartment empty onto the ground in the middle of an intersection. Since that day, I routinely check to see if the compartments are secured before responding. However, I find it hard to explain why this is left to provider preference rather than standard procedure.

Finally, why do we not complete a risk assessment before every call and announce it to the entire crew? Deteriorating weather or hazardous scene conditions raise the relative risk of injury and death. If we performed a risk assessment and communicated it among crew members, we would be able to consider ways to mitigate the risk and reduce adverse events.

As you begin to tackle the typical tasks of training, recruitment, scheduling, and outreach at the start of the academic year, I urge you to review your safety plan. If you do not have one, harness the enthusiasm of your new leadership and draft a safety plan. I hope you consider including pre-mission checklists, safety briefings for all crew members, and risk stratification before every call.

With continual emphasis on safety and the development of standard procedures, we will not only mitigate risk for our crews and patients, but we will become models for other EMS organizations to follow! I look forward to hearing your success stories on making the delivery of EMS safer.



What is Wilderness Medicine?

Tod Schimelpfenig, WEMT, FAWM, Curriculum Director - NOLS, St. Michael's College Fire & Rescue '76

The roots of modern wilderness medicine lie in first aid courses taught in the 1940's, 50's and 60's for wilderness travelers and mountaineers. Finding urban first aid courses ill-suited to their needs the climbers and hikers of the era often found a friendly local climbing doc who taught a program loosely modeled on Red Cross first aid curriculums.

The development of modern wilderness medicine programs began in earnest in the 1970's in tandem with the growth of the outdoor education and recreation industry. The students were backpackers, canoeists, park rangers, climbers, ski patrollers, mountain guides and wilderness instructors. The medicine was practiced in the wilderness, with very little gear, no communication technology and only the rare helicopter. Arduous litter evacuations were the norm.

Today, wilderness medicine is a broader discipline studied by first aiders and medical students. You can take programs ranging from 16 hour basic courses to 80 day semesters in wilderness rescue. Wilderness medicine has a professional medical society (the

Wilderness Medical Society), several professional journals and Fellowship programs. You can even earn an advanced certificate, a Diploma in Mountain Medicine.

If you're a collegiate EMS provider thinking about the next steps after graduation, don't dismiss wilderness medicine as something for granola lovers, rock jocks and ski bums. Today, the scope of wilderness medicine has expanded to include disaster responses, rural clinics, military medicine – really any remote scenario where the caregiver has to manage austere conditions that threaten themselves and the patient, work with less than ideal gear, in prolonged transport situations, with poor communications and inadequate medical and rescue infrastructure.

A common definition for wilderness medicine has been; "an hour to definitive care." It's an arbitrary and dated concept. I serve on an ambulance service where we can easily be a hour from definitive care and still be on pavement. Granted my environment is controlled, I have modern gear and generally good

communications, but I will see the patient change over time, and I may need to use interventions, such as making a decision on whether to immobilize the spine, that are usually reserved for "wilderness."

The definition of wilderness medicine is also not found in the medicine we practice. Most of wilderness medicine is basic first aid, albeit with an emphasis on relevant environmental topics such as heat, cold, and altitude. The nuances of wilderness medicine, which are significant, are the context; the remote environments, the need to improvise gear and solutions, the need for sound wilderness skills to prevent injury and illness, caring for patients for more than the minutes it takes an ambulance to arrive, and to do so in adverse weather and challenging terrain. The subtle distinctions are also in our need to make decisions on how soon a patient needs to see a physician, and how we might make that happen.

Wilderness medicine teaches us to function without the support of modern technology, which as natural disasters have shown, can be quickly stripped away, even in urban environments. One of wilderness medicine's assets is learning to act like we are in the wilderness, with all it's good habits and values, every day of our lives. Wilderness medicine teaches us to care for our companions, to thrive with less, to be patient, tolerant of adversity and self-reliant. These are valuable skills for anyone in emergency services.

PUSH YOUR LIMITS—TAKE YOUR SKILLS INTO THE WILDERNESS!



NOLS WILDERNESS MEDICINE INSTITUTE COURSES FOR EMTs



CONTINUING EDUCATION

BUILD ON YOUR BACKGROUND IN URBAN EMERGENCY CARE—EARN YOUR WEMT.

Wilderness Upgrade for Medical Professionals (WUMP)

Learn how to improvise equipment, deal with challenging environments, and make difficult medical decisions in remote locations with confidence. Apply your urban emergency care knowledge as our seasoned instructors guide you through five days of intense, hands-on learning. The WUMP course will keep you engaged in wilderness medicine curriculum through case studies and practical scenarios with mock patients.

"The large scenarios and SAR were the highlights of this class because I was able to practice skills that I don't otherwise get to use on a daily basis in the ambulance, yet I have a great interest in them." –WUMP grad, Paonia, Colorado

FIND MORE INFORMATION AND A COMPLETE COURSE SCHEDULE AT NOLS.EDU/WMI/COURSES, WMI@NOLS.EDU, OR (866) 831-9001.

Wilderness Medicine Resources:

- Wilderness Medical Society
www.wms.org
- NOLS Wilderness Medicine Institute
www.nols.edu/wmi
- Diploma in Mountain Medicine
wms.org/education/dimm.asp
- Fellowship in the Academy of Wilderness Medicine
wms.org/fawm/default.asp
- Journal of Wilderness and Environmental Medicine
wms.org/publications/journal.asp
- International Society for Mountain Medicine
www.ismmed.org/



NCEMSF Membership - Renew Today for 2013-2014 Academic Year

Karolina A. Schabzes, NCEMSF Membership Coordinator

Do you wonder what benefits your NCEMSF membership provides? In addition to making a continued commitment to the advancement of existing collegiate emergency medical services and the development of new response groups, your membership provides financial support to promote Collegiate EMS Week, help support our annual conference, produce publications including *NCEMSF News*, honor outstanding collegiate EMS organizations and personnel through our awards program, and advocate for collegiate EMS throughout the country.

Your membership in NCEMSF also entitles you to a number of member

discounts. These offers and discounts are detailed in their entirety on our Web site, are available only to NCEMSF members and include discounts on software, equipment, supplies, uniforms, products and publication subscriptions. Emergency Training Associates / The NCEMSF Store, offers up to a 26% discount for EMS texts and NCEMSF apparel. Purchases through the NCEMSF store also support the Foundation. *Emergency Medical Services Magazine* is available to personal NCEMSF members free of charge.

Your NCEMSF membership adds to the collective strength of hundreds of members throughout the nation - those

participating in and advocating for collegiate EMS. Renewing your NCEMSF membership for the 2013-2014 academic year shows your continuing commitment to collegiate EMS. Don't let your enthusiasm for collegiate EMS diminish just because you may have graduated. NCEMSF also offers life memberships that keep you in touch with the world of collegiate EMS.

More information about our membership categories - personal and institutional - and rates can be found online at www.ncemsf.org/membership.



Starting a Campus EMS Organization

At the start of every academic year, NCEMSF receives a flurry of inquiries from eager and enthusiastic EMTs on campuses across the country desiring to establish squads of their own on their own college campus. One of the most challenging aspects of starting a collegiate EMS organization is developing a team of individuals who share and are committed to the same goal. The other is finding a network of experienced providers at peer institutions who can give advice, answer questions, and serve as a sounding board for ideas. NCEMSF provides many resources to help new startup groups tackle these issues.

NCEMSF, our Startup Coordinator Andrew Mener, newly appointed Assistant Startup Coordinator Daniel McConnell, and Regional Coordinator Network are available to assist and help guide those interested through the difficult and time consuming yet extraordinarily rewarding process. It is best to contact NCEMSF early in the process before sitting down with key decision makers and formulating specific plans.

Consult our website to read our startup philosophy and then email us (startup@ncemsf.org) to request our official startup packet, which outlines a general step-by-step process for establishing a campus based EMS group.



Calling NCEMSF Alumni

Joshua E. Glick, NCEMSF Alumni Coordinator

Over the years, NCEMSF has proudly represented thousands of collegiate EMS providers and has served as a constant support for collegiate EMS organizations across North America. Our organization would not be what it is today without the commitment and dedication of our broad network of alumni members.

Alumni not only provide a rich source of advice on organizational management for new board members, but can also serve as a valuable career development tool for seniors and undergraduate members who are looking for academic and professional opportunities during the summer months and after graduation.

A well-maintained alumni network can serve as a important resource for a collegiate squad. NCEMSF recognizes that the initial development of such a program can be difficult for both young and old organizations. In order to facilitate the creation of these networks, NCEMSF developed a helpful packet of information on the website that provides step-by-step instructions on how to set up a network as well as a list of activities and methods to keep in touch with alumni. Please feel free to use this resource and provide us with some of your own ideas on successful alumni programming!

Additionally, if you would like to be listed as a possible mentor to graduating students, please contact us. Our online listing of alumni mentors can be found on the NCEMSF website under the

Resources tab. Contact information is not publically available, and members must log onto the website in order to access it. The list includes a diverse array of professional fields who are willing to be contacted to provide advice and guidance to NCEMSF members.

Each year, a strong proportion of our conference presenters are collegiate EMS alumni who have donated their time and acquired expertise to the Foundation and future generations of campus EMS providers. If you have not attended an NCEMSF conference recently, I request that you to plan to join us this February in Boston and encourage you consider speaking and sharing your knowledge and experience with current collegiate EMS providers. Our online speaker submission form will be live on our website starting October 1st. Please remember to indicate your alumni status when completing the submission form.

We continue to provide an increasingly diverse set of educational lectures, hands-on simulations, and social networking opportunities at our annual conference, including an alumni social and networking event. We are confident that with our alumni's continued and anticipated increased involvement and support the NCEMSF Annual Conference will yet again be a great success.



Regional Roundup (March to September 2013)

News from Around the NCEMSF Regions

From the National Coordinator

The Regional Coordinator (RC) network facilitates communication between NCEMSF and its constituents. It is through the Regional Coordinators that NCEMSF is best able to accomplish its mission of advocating and supporting campus based EMS. The Regional Coordinators are equipped to assist each squad with the day-to-day issues it faces and to help publicize squad achievements. There are few issues that the NCEMSF leadership has not seen before and for which it is not equipped to offer advice and guidance.

Regional Coordinator vacancies exist, however, in the Northern New England, and Southeast regions and we are looking for a new New York RC as well. If interested in applying please contact Stephen Lanieri - nc@ncemsf.org.

Central

Mustang EMS at Southern Methodist University received a temporary charter as a student organization at SMU and hopes to receive a full charter later this year. It received a \$2,000 CPR Center Grant to develop and operate an AHA CPR Training Center on campus. The campus AED system also was turned over to Mustang EMS for maintenance, upkeep, and monitoring. The group also participated in the dedication of the

George W. Bush Presidential Library and Museum Dedication at the end of April.

Rice University EMS helped train staff members at the US Embassy in Panama in emergency response techniques. Led by Medical Director and REMS founder Mark Escott, a group of current and former REMS members, along with the REMS Director Lisa Basgall and REMS Assistant Medical Director Shane Jenks, taught the 40-hour class to 25 personnel from various embassy departments. The class was coordinated by Mike Escott, a security official with the US State Department, a REMS alumnus, and brother to Dr. Mark Escott.

University of Arizona Student EMS was featured in a great article written by its school's communications office highlighting the group's contributions to the campus but also promoting the essence of campus based EMS in general. "We're students at the UA who happen to be EMTs. We're not student EMTs," said Derek Smith, manager of UA Student EMS, in the article. "It's real-life, in-the-field experience you can't get shadowing somebody in a hospital," said another squad member. "Here, you're set to a standard and you have a responsibility. That is your patient until further medical attention arrives."

The group also recently secured medical direction through the University Medical Center (thanks in part to information gained from an NCEMSF survey conducted over the summer). In addition, UA is in the process of adopting electronic charting and is moving to 24/7 campus coverage. The group was formed in 2009 and provides BLS services.



Mid Atlantic

Last year marked *Georgetown Emergency Response Medical Service (GERMS)* 30th Anniversary. The organization celebrated the event with a number of alumni over a weekend filled with guest lecturers, mock calls, an open house showcasing the GERMS office and organization memorabilia, and a final gala. At the gala, the 40-minute documentary, *Thirty Years in Service: The History of GERMS*, available on the GERMS' website, premiered. In addition to celebrating its anniversary, GERMS is pleased to announce the Robert Doherty Memorial Award, named after the organization's founder. This award is funded by GERMS and Georgetown University's The Corp. It covers all enrollment expenses for the EMT class that GERMS conducts each semester. GERMS is also launching an on-campus CPR Center, where American Heart Association CPR will be taught to the campus and surrounding community members.

University of Richmond EMS was featured several times in *EMS World Magazine* over the last semester. The first covered the squad's new emergency response vehicle. The second addressed campus calls and the concept of collegiate EMS. The byline read, "university-based first response gives new meaning to 'student EMT'." The final article, "Lending a Paw," documented the story of a service dog that gives one diabetic EMT the freedom to focus on her patients, not herself. You might have met this campus EMT, Alexis Achey, and her furry companion, Winston, at the 2013 NCEMSF Conference. Check out all three articles at www.emsworld.com.

(Continued on page 5 - RR)

Boston Marathon Bombing Apr 5-Campus EMS Responds

Massachusetts Institute of Technology (MIT) police officer and supporter of MIT EMS, Sean Collier, was the victim in a shooting by the bombing suspects. The MIT EMTs pictured help treat their fatally wounded friend.

In an interview with *The Boston Daily News*, the MIT EMTs said that Collier often spent his breaks in the MIT EMS basement office playing video games. "From the beginning, he was the best officer; we always wanted to be on calls with him. He was young like us. He understood us." Rest in peace Officer Collier!

Meanwhile, *Boston College Eagle EMS* played host to confusion—and caretaking as well. Eagle EMS (EEMS) student volunteers were already on duty on Newton Campus, Brighton Campus, and in the Mods. Two teams were stationed along the route, and five or six EMTs were staffing the first-aid tent in front of St. Ignatius, which became an emergency shelter and triage area for around 400 runners. With the help of 30 of its EMTs, EEMS checked out all of the runners, provided care, and kept track of bib numbers to get a count of how many people it had.



(RR - Continued from page 4)



The *Virginia Tech Rescue Squad* switched from VHF to UHF radios in order to be able to communicate directly with its local police. VTRS has also reformatted its Quality Assurance and Quality Improvement (QA/QI) committee. Every call is now sorted by numerous factors such as scene time and interventions performed. After being sorted, members of the QA/QI committee go through call reports and write an email describing how to improve the call report. This year all five of the group's operational officers are new to their positions. This is a challenge that all collegiate squads encounter considering students are only present for four years. As a result, VTRS instituted a two month long, bi-weekly officer training course at the end of last semester. This course teaches skills such as managing MCIs, operating advanced radio repeaters and trailers, special operations, dispatching, and day-to-day squad management. While these are skills that they expect of most members, having an officer class allows them to ensure that they have prepared their officers to the highest degree.

Midwest

The first few weeks of the year are going well for *CaseEMS* with a successful training week and recruitment of many new, eager first years. With the influx of so many new members of varying skill level, they are working to get them all trained and certified and have implemented several solutions to utilize everyone's talents regardless of certification level including committees to help plan a fall MCI drill, draft a new medical amnesty policy, and fundraise.

University of Dayton Rescue Squad started the year with its annual training week comprised of lectures and practical exercises including a mass casualty

incident drill simulating a structural collapse that involved the local level 1 trauma center. UDRS also recently worked with athletics to help them stage sports such as Volleyball and Soccer.

New York

Harpur's Ferry Ambulance competed at the annual JEMS games at EMS Today after winning the ALS Skills Competition at the NCEMSF Conference last winter. Physio Control, sponsor of the NCEMSF Skills Competition, graciously helped support the team's travel to the competition and JEMS waived the entry fee for the NCEMSF champion.



Northeast

The *College of New Jersey Lions' EMS* recently celebrated its 15th anniversary! Along with this milestone, LEMS won two TCNJ Student Leadership awards for the 2012-2013 academic year; the squad was recognized for "Excellence in Service," and its new chief, Bill Toth, was named "Emerging Leader of the Year." Lions' EMS is working to expand its hours of service by implementing an all-call system for daytime emergency response. Members also continue to provide frequent CPR and first aid classes to the campus community. Finally, Lions' EMS has recently revitalized its website.

Northern New England

St. Anselm College EMS was recently approved by its administration to purchase its first Fast Response EMS Vehicle whereby expanding its current operation and level of service to the college community. NCEMSF supported St. Anselm's efforts in acquiring the vehicle by reviewing the group's proposal and writing to its Dean of Students. Congratulations St. Anselm, we cannot wait to see pictures of the new vehicle!

Pictured top right, students from *Dartmouth EMS* observe a Lifeflight of Maine helicopter at last spring's Greater Maine Collegiate EMS Conference



hosted by *Colby Emergency Response* at Colby College. Dartmouth hosted a Northern New England regional conference the following weekend. More great examples of collegiate EMS collaboration at its finest!

Pennsylvania

On May 16th, *Drexel EMS* was awarded Student Organization of the Year at Drexel's Annual Student Life Award Ceremony. Student Organization of the Year is the most prestigious award to be given to a campus organization. This was Drexel EMS's first time being nominated for this award since its founding in 2010. Four members were invited to a sit down dinner and to accept the award. Following the awards ceremony, on May 17th, Drexel EMS hosted its first annual campus wide spring BBQ.

The local television news did a great feature story on *Franklin and Marshal EMS* last spring highlighting the group's contribution to campus and the members' training and the concept of students helping fellow students.

Villanova University EMS (VEMS) took delivery of a new Horton Type III ambulance this summer. A formal housing and celebration is planned for homecoming weekend later this fall.



Do you have news about your squad you'd like to share? Contact your RC and look for it in the next issue of *NCEMSF News*.



First HEARTSafe CAMPUS Named

Joshua E. Glick, NCEMSF Alumni and HEARTSafe Coordinator

NCEMSF, with support from the American Heart Association (AHA), the Sudden Cardiac Arrest Association (SCAA), and Physio-Control, launched a new award program at the 2013 annual conference for colleges and universities with a specific focus on the awareness, training and safety of cardiac arrest emergencies. The "HEARTSafe Campus" designation has been developed to encourage and promote community awareness of the potential for saving the lives with effective CPR and early defibrillation. The intent of this program is to recognize campus based EMS organizations and their communities and hold them out as examples to other campuses as a means to improve overall cardiac arrest care.

Information from this program may be shared by NCEMSF with other campus EMS organizations in consulting, seminars, and written material for the purpose of helping organizations improve the quality of EMS and overall cardiac care on campuses.

Campus EMS organizations completing and submitting this self-assessment and verification packet on behalf of their campuses and fulfilling all required criteria will be acknowledged by NCEMSF at the annual conference and recognized for a three-year period with the "HEARTSafe Campus" award. HEARTSafe Campuses will need to recertify ever three years by updating and re-filing the application. All applications (available online) must



be received at least two-weeks prior to the start of the annual NCEMSF conference for the year in which the campus is to be considered for the award or renewal of the award. e-mail heart safecampus@ncemsf.org with any questions regarding the application process or the designation.



This year, NCEMSF is proud to announce the **Massachusetts Institute of Technology (MIT)** as the first organization to qualify for this new award (they were also the first college to be labeled a HEARTSafe Community). Their continued dedication to effective cardiac arrest management and training remains an example for all collegiate communities. Congratulations to MIT on this achievement.

NCEMSF affirms that the cornerstone of any HEARTSafe Campus is a vibrant campus-based emergency medical response organization.

"HEARTSafe Campuses," like HEARTSafe Communities, promote and support:

- Rapid Response by CPR and AED Trained First Responders
- Rapid Public Access to Defibrillation
- Early Access to Advanced Care
- Public CPR and AED Training for the Community
- Engagement in Preventative Cardiovascular Healthcare Activities

Massachusetts Maritime Academy Recognized

At the 20th Annual NCEMSF Conference in Washington, DC, the **Sudden Cardiac Arrest Foundation** (represented by Matthew Strauss) presented Massachusetts Maritime Academy with a new AED in recognition of their excellent leadership and organizational abilities. SCAF in partnership with NCEMSF desired to acknowledge a squad that had recently and successfully navigated the difficult and time consuming Startup process and support that group's continued growth and development by supplying them with a new AED for their campus. MMA, founded in 2011 as a small quick response service, has expanded into a thriving service, with 48 members and now possesses a licensed ambulance.

Pictured here is the AED presentation at the NCEMSF Conference as well as a ceremony this spring on their campus where MMA EMS received not 1, not 2, but 3 vehicles donated to them by a private ambulance service in Massachusetts. Congratulations MMA EMS!



NCEMSF wants your squad photos for our website...

Please send us actions shots, whole corps' photos and EMS Week/Conference pictures to:

localnews@ncemsf.org

About This Publication

NCEMSF NEWS is an official publication of the National Collegiate Emergency Medical Services Foundation (NCEMSF). This newsletter is published as a service to the Foundation's members and the national EMS community.

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E-mail articles to be considered for publication to info@ncemsf.org

Life Member and Conference Regular Saves Life

Last June, NCEMSF Life Member and conference regular attendee and lecturer, Dr. Benjamin Abo saved a stranger who fell onto the PATH tracks in New York's West Village just as a train was pulling into the station.

Ben, an emergency medicine resident in Miami, Florida and a paramedic, was on vacation in NYC and was standing on a crowded platform when a man suffered a seizure and teetered at the platform edge falling and hitting his head on the rail. Abo had somebody pull an alarm before he leapt into the gutter just as a train was "30 seconds away." Fellow passengers watched as Abo and another good Samaritan rescued the man. The victim, the fellow hero and the screaming woman were hoisted over the edge to safety. Abo was last — and barely made it. The train roared into the station seconds later.

Abo evaluated the man as he regained consciousness. EMTs and cops soon arrived and showed their gratitude to Abo.

Asked what was running through his mind as he leapt onto the tracks, Abo said he wasn't thinking much at all. "Someone was in need," he said. "You just do it."

Ben has been recognized by government bodies, his hospital and other agencies as well

as on the radio by Howard Stern for his heroic act. NCEMSF joins in congratulating Ben for his life saving skill and selfless service. You makes us all very proud!

The patient Ben saved is reportedly doing well.

⌘



SAVE THE DATE: NCEMSF 21st Annual Conference

**February 28-March 2, 2014
Marriott Copley Place
Boston, Massachusetts**

Why Attend?

- 3 days of exceptional conference programming
- Over 50 expert lectures in up to 9 concurrent tracks
- Multiple moderated roundtable and panel discussions
- Several hands-on skills labs
- Student speaker competition
- Alumni speaker series
- Two keynote addresses
- Collegiate EMS skills competition
- Annual NCEMSF awards ceremony
- Lowest cost conference of its kind in the country
- **Network with 1,000+ of your peers from over 100 schools**

Interested speakers and presenters may apply online starting October 1st
Online early conference registration opens December 1st

More information available online throughout the fall

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Please visit the Membership section of the NCEMSF Web site to keep your contact information up-to-date. Renew your membership for the current academic year and update your contact information. Thank you for your ongoing support of campus based EMS and NCEMSF!

The NCEMSF Database of Collegiate EMS Providers is an excellent resource in the event of natural disaster or other public health emergency. Please keep your information up-to-date so that should the situation arise, we can contact you and collectively as campus based EMS answer the call to act!

NATIONAL COLLEGIATE EMS WEEK - November 11-17

Take advantage of this opportunity to celebrate campus based EMS together with all other collegiate corps nationwide. The annual packet filled with ideas for activities and publicity is available online.

Kick Off Collegiate EMS Week With...

NATIONAL COLLEGIATE CPR DAY **Monday, November 11**

Join together on this single day in the pursuit of educating as many college students across North America as possible in the basic principles of CPR and how to save a life!

Support Materials and Program Particulars Available Online at www.NCEMSF.org

Stay tuned for information about NCEMSF's HEARTSafe Campus Program

Modeled after National EMS Week, endorsed by the American College of Emergency Physicians (ACEP), and supported by the American Heart Association (AHA)



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Visit the NCEMSF Fan Page

www.facebook.com/ncemsf

LEARN 2 STEPS SAVE ONE LIFE

CALL



CALL 911

PUSH HARD AND FAST



POSITION HANDS IN THE CENTER OF THE CHEST



FIRMLY PUSH DOWN TWO INCHES ON THE CHEST

CONTINUE UNTIL HELP ARRIVES