Drills Every Day

By S. CHRISTOPHER SUPRUN

Most of us, when we do think about planning, believe it is best left to people with the gold badges and white shirts who sit behind a desk and write memos. Some of those memos may come down and announce a great drill between your department and the one next door involving some important event like a hazmat incident or a live-burn drill—valuable training to understand the interaction between a local manufacturing plant and members' operation on a fireground.

What about today, though? What drill is planned for today? Anything? Why not?

Maybe the easiest of all drills to complete is an EMS continuing education drill, whether it's practicing a patient assessment, using a crew member's car to practice KED board extrication from a minor auto accident, or simply discussing an article you may have read and how the care in the magazine matches your department's treatment protocols.

Many providers express their complete dismay at the need for continuing medical education (CME). A familiar refrain to those of us who teach CME is, "I learned this material in class. Why do I need to hear it again?"

It may seem unnecessary, but ultimately the questions will have an effect on our patient care. If I asked what's for dinner, you might reply hamburgers, tacos, or pizza. If I were to tell you that this would be your last meal and you would have to survive on that, you would probably recoil in horror. But essentially, many EMS providers want to "eat" just once. In effect, they're saying, I went to eat once (initial training class), why do I need to get more food (education)?

When you think realistically, you'd realize that it is impossible to know and remember everything that is involved with

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Continuing Medical Education at Dallas Fire Station 3? Board games. Clockwise from left: Firefighter David Murphey, UT/ Southwestern EMS Instuctor Lynne Dees, Captain Jack Martin, Firefighter/Paramedic Anthony Blocker and Firefighter/Paramedic Eric Velasquez. Photo by S. Christopher Suprun.

EMS. Consider that one of the most-used initial training course textbook sets for paramedics is Brady's five-volume *Paramedic Care: Principles and Practice.* That's about 2,600 pages of text. Maybe you aren't at the paramedic level, so let's try the 6th edition of Dan Limmer's *First Responder: A Skills Approach.* That's just 585 pages.

Do you know 2,600 or even 600 pages of material backwards, forwards, upside down? You should, because our patients come backwards, forwards, and upside down. You may have heard a great deal of information in class and may have even mastered most of it, but if you're an EMT, do you know the differences in chronic obstructive pulmonary disease and congestive heart disease? And medics: when was the last time you ran a pedi code? Do you remember all the dosages of drugs for a 14-pound girl who is in asystole? What is the appropriate ET size if your patient is 3 years old?

CME can be fun—or at least not boring—because it can come in multiple formats. Classroom presentations, station drills and scenarios, computer-based learning, and conferences are all possible routes to receive the education and credits needed to recertify your national registry or state EMS certification. Many EMS systems use classroom presentations either through universities, or community colleges, or within their department. These CME sessions can happen in other formats as well, such as instructors coming to the station and distributed learning such as online or through videotapes, for example.

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Provider	Website	Telephone	EMT Hours	Paramedic Hours
EMCert CE3000.com Inc. MedicEd.com Paramedic Institute 24/7 EMS	www.emcert.com www.CE3000.com www.mediced.com www.paramedicinstitute.com/ http://www.24-7ems.com/	877.367.4376 877.563.3330 413.781.1173 800.671.9411 888.240.4911	Yes Yes Yes Yes N/L	Yes Yes Yes Yes N/L (Not listed)

Online CME Providers

One of the CME programs recognized nationally as a leader in continuing medical education is the program at the University of Maryland-Baltimore County (UMBC). At UMBC, students spend four days receiving their core content through lectures provided by faculty from across the country in areas of specialized awareness.

UMBC's last paramedic refresher started with a lecture by Maryland State Trooper Charlie Eisele on positional asphyxia and behavioral/violent patients. Eisele's lecture not only meets the needs of the National Registry continuing education curriculum, but paramedics find that it is more applicable to real-life settings with discussions about the physiology of breathing during a typical law enforcement restraint. Discussion also involved topics related to psychosocial behavior and characteristics of patients who are violent or experiencing behavioral emergencies. "UMBC has a national student composition with students in past classes coming from New Jersey to Mississippi and westward as well," said Crista Lenk, director of professional and continuing education for UMBC's Department of Emergency Health Services. "We try to have classes tailored to the National Registry guidelines, and we fill it with practicing paramedic instructors from a network of 40 universities, conference speakers, and we try to meet the needs of the practicing paramedic."

Agency Experienced

UMBC faculty are generally instructors who come with lectures they create from their personal experience, as opposed to using canned material read from a slide or video projector. Instructors come from agencies that include the state police, poison control, and air medical transport services. In conjunction with a full ACLS class, the course provides all the hours paramedics need to reach their National Registry recertification requirements.

Another method of delivering a continuing education "drill" is having instructors come to the station. At a recent CME session, the firefighters and paramedics of Dallas Fire Department Station 3 were around a kitchen table for their monthly CME training.

"Today was great because it was more fun," said Eric Velasquez, riding as the attendant-in-charge on Rescue 703. "The interaction was good, and that's a biggie because you can share your experience and get other people's experience in the conversation."

"It is one of the challenges to keep CME interesting for the providers," said Kenny Navarro, CE coordinator for the University of Texas/Southwestern in Dallas, "and it's one of the things we try hard to do."



GAMES PEOPLE PLAY

Instruction at the University of Texas/Southwestern Medical Center includes a Monopoly[®]-style board game, designed by class instructor Lynne Dees. "Educationally, people retain this," Dees said. Photos by S. Christopher Suprun.



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As part of UT/Southwestern's program, CME instructors go to each station to interact directly with the front-line field providers at the station level, which allows more one-on-one time and a small class size.

The topic for the day was infection control, and it was presented using a Monopoly®-style game board that Lynne Dees, the CME instructor, and her husband had thought up on a road trip to Colorado. Firefighters would roll game dice and move their fire engine, ambulance, or firefighter across a game board to answer various questions. The game was lively enough to receive the attention even of several crew members not specifically assigned to this CME session.

"Educationally, people retain this. People remember 10 percent of what they hear but 80 percent of what they hear, see, and do," said Dees, a paramedic with the City of Wautaga (TX) and EMS Instructor with UT/Southwestern. "CME does not have to be boring."

More important, her students say the same thing: "I'd do it (CME) to stay up on current practices and care," said Velasquez, of Rescue 703, "but it is a lot better when it is fun and directly related to the field."

A third option for continuing education is the personal computer. Many CE providers meet the needs of time-conscious adult learners by providing online continuing education. These programs offer a number of formats, but many provide continuing education by topic category. A provider who only needs Airway and Special Considerations content can choose from subjects within those areas to fulfill required hours.

One Web site listed topics ranging from basic airway management and dysrythmia interpretation to alcohol-related emergencies and considerations for hazmat incidents. Another includes options on club drugs, aquatic emergencies, and cyanide emergencies.

These Web sites offer a host of different courses that can be taken to cover a single area of deficiency in continuing education or that can be used to achieve all required hours. Fees range from around



Nothing boring about board games, said Eric Velasquez. "The interaction was good, and that's a biggie because you can share your experience and get other people's experience in the conversation." Photo by S. Christopher Suprun.

\$20 for a small set of courses to \$60 to \$70 for an entire set of CME courses.

As you peruse Web sites as part of your National Registry certification, keep in mind that the Registry requires that the course be CECBEMS accredited. CECBEMS-the Continuing Education Coordinating Board for Emergency Medical Services-was organized in 1992 by the American College of Emergency Physicians, National Registry of Emergency Medical Technicians, National Association of Emergency Medical Services Physicians, National Association of State EMS Directors, National Council of State Emergency Medical Services Training Coordinators, and the National Association of **Emergency Medical Technicians. Since** then, the National Association of EMS Educators and the American College of Osteopathic Emergency Physicians have joined the organization, to promote continuing education in EMS and ensure that continuing education would meet an appropriate standard.

In addition to reviewing and accrediting CE programs, CECBEMS is undergoing a Web site update that will let EMS providers track their CECBE-MS continuing education programs. Currently, CECBEMS-accredited CME educators provide CECBEMS with student rosters after they complete courses. After the update, students who give course providers an e-mail address will be able to log onto the CECBEMS site and access their individual continuing education record.

"For CECBEMS, one of our challenges is to respond by setting standards for the kind of CE the marketplace wants, and we did that three years ago when we developed criteria for online and other distributed learning activities," said Liz Sibley, executive director of CECBEMS. "I think we are meeting another challenge with this Web site update and providing another service to the student. We're pretty excited about it."

With so many options available, continuing education can be a daily drill you do with your station crew around the kitchen table, at your home kitchen table with your personal computer, or at a conference or symposium-style course designed to achieve the required content for your specific provider level. Whichever direction you take, keep at it. EMS is changing every day, and you need to keep up with it. Maybe it is time for your next meal?