

# North Central Regional Trauma Advisory Council



## NCRTAC Trauma Conference 2024

Thursday, April 11, 2024 – Northcentral Technical College & Online

0730-0800	Registration
0800-0915	<p><u>Dr. "Deke" Farrington Memorial Keynote Presentation</u>  <b>This Might Be Your Grandma's Brain - Important TBI Updates for EMS &amp; the ED</b>            Dr. Ronna G. Miller</p>
0925-1025	<p><u>Break-out sessions 1</u></p> <ul style="list-style-type: none"> <li>a) <b>What Happens When Your Trauma Instructor / Co-Worker is Your Trauma patient?</b> – Lisa Ebert</li> <li>b) <b>Pelvic Trauma: Do Get in a Bind(er)</b> – Michael Fraley</li> <li>c) <b>US Senior Open 2023 Medical Sector Review</b> – Dr. Michael Clark &amp; Panel</li> </ul>
1025-1055	Morning Break/ Visit Vendors
1055-1155	<p><u>Break-out sessions 2</u></p> <ul style="list-style-type: none"> <li>a) <b>Exploring Anabaptist Injury Prevention: What's causing injuries and what can we do about it?</b> – Marsha Salzwedel</li> <li>b) <b>Avalanche Optional – EMS Assessment &amp; Care of the Hypothermic Patient</b> – Dr. Ronna G. Miller</li> <li>c) <b>From the Battlefield to the Back of the Bus: The Translation of Combat Medicine to Mainstream EMS</b> (Classroom portion) – Chris Cook</li> <li>d) <b>Crisis Standards of Care: The Basics and How It Can Better Help You in Your Preparedness</b> – Douglas Hill</li> </ul>
1155-1240	Lunch/ Visit Vendors
1240-1340	<p><u>Break-out sessions 3</u></p> <ul style="list-style-type: none"> <li>a) <b>When Sight Is on the Line – Emergency Assessment &amp; Care of Eye Injuries</b> – Dr. Ronna G. Miller</li> <li>b) <b>Data Validation in ImageTrend Patient Registry</b> – Katie Prather</li> <li>c) <b>Technical Rescue &amp; EMS: A Case Study</b> – Eric Lang</li> <li>d) <b>From the Battlefield to the Back of the Bus: The Translation of Combat Medicine to Mainstream EMS</b> (Hands-on portion) – Chris Cook</li> <li>e) <b>There's an App for That: Simplify EMS and Hospital Communications</b> – Katherine Johnson</li> </ul>
1350- 1450	<u>Break-out sessions 4</u>

More details and registration are available at: [NCRTAC-WI.org/Conference.html](https://ncrtac-wi.org/Conference.html)

	<ul style="list-style-type: none"> <li>a) <b>From Skiing to Pad Thai: A Trauma Survivor Shares His Journey</b> – Tracie Timm</li> <li>b) <b>Lost in the Trauma Registry? A Map to Success!</b> – Heather Rhodes-Lyons</li> <li>c) <b>Peds Trauma: What's Changing and Why You Need to Know</b> – Bob Foster</li> <li>d) <b>Medical Aspects of Haz-Mat Incidents</b> – Dr. Michael Clark, Ted Tautges &amp; Wausau FD Haz-Mat Team Members</li> </ul>
1500-1600	<p><u>Closing Session</u>  <b>Our Public Safety Mental Health</b>  Brennan Cook</p>
1600-1615	Closing remarks/ Door prizes

### Conference Sponsors



### Conference Vendors



AstraZeneca  
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# North Central Regional Trauma Advisory Council



NCRTAC: Trauma Conference 2024      Thursday, April 11, 2024

**Time:** 8:00 am – 4:15 pm

**Location:** Northcentral Technical College, 1000 W Campus Dr, Wausau, WI 54401 and online. We have limited seats on campus but the sessions will also be streamed online.

**Audience:** This program is intended for EMS providers of all levels, hospital trauma nursing staff and all other providers interested in injury prevention and the care of the trauma patient. Additionally, the [North Central Wisconsin Healthcare Emergency Readiness Coalition](#) is sponsoring a number of preparedness presentations.

**Cost:** \$40.00 (In-person or online)

**Registration:** Complete the registration form through Northcentral Technical College HERE (<http://tinyurl.com/yh54pvm3>)

Please submit one registration for each person that will be attending the conference.

**For more information or for any accessibility/special needs requests contact:** Michael Fraley, NCRTAC Coordinator at [Michael.Fraley@NCRTAC-WI.org](mailto:Michael.Fraley@NCRTAC-WI.org) or (715) 892-3209.

## **Contact Hour Statement for Allied Health Professionals**



Marshfield Clinic Health System, Inc. (MCHS) is approved as a provider of continuing health education by the Wisconsin Society for Healthcare Education and Training (WISHET). MCHS designates this activity for up to 6.25 contact hours (0.625 CEUs) of continuing education for allied health professionals. To claim credit, you must complete the program evaluation.

**Refund/registration change policy:** A full refund is available for registration cancellation requests received on or before April 4. No refund will be available after April 4. Registrants may switch from attending in-person to virtually until April 4.

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## Session Details:

**NOTE:** Each presentation has the primary audience indicated. This is only a recommendation. You are welcome to attend any session.

0800-0915	<p><b>This Might Be Your Grandma's Brain - Important TBI Updates for EMS &amp; the ED (Keynote)</b></p> <p>Traumatic Brain Injury (TBI) death and disability exact huge costs from patients, families, and society. What can we do to improve outcomes? The old advice to “avoid hypotension &amp; hypoxia” is still true. Now, however, there’s more to optimal TBI care, including resuscitation endpoints different from those used in general trauma care. This presentation reviews: important Glasgow Coma Scale (GCS) refinements; major findings of the EPIC-AZ TBI Study; new Brain Trauma Foundation Guidelines; and other, recent, evidence-based best practices for TBI care. Finally, it discusses new and emerging technologies which may improve outcomes for moderate-severe TBI.</p> <p><b>Ronna G. Miller, MD</b> EMS Physician &amp; Education Consultant</p>		
	<u>Hospital Audience</u>	<u>EMS Audience</u>	<u>Preparedness Audience</u>
0925-1025	<p><b>What Happens When Your Trauma Instructor / Co-Worker is Your Trauma patient?</b></p> <p>Traumatic injuries have a significant impact on patients and families, but what is the impact on the health care providers that are caring for these patients day after day.</p> <p>This presentation shares a case study looking at the impact of caring for a trauma patient that is your friend and colleague. What is the physical, emotional, and psychological impact on the team?</p> <p><b>Lisa Ebert RN, CEN, SCRN</b> Aspirus TNCC Course Director, Aspirus System Stroke Coordinator, ED Staff RN, Wisconsin Regional ENA Director, Wisconsin ENA Injury Prevention Chair Aspirus Wausau Hospital</p>	<p><b>Pelvic Trauma: Do Get in a Bind(er)</b></p> <p>While not an everyday occurrence, pelvic fractures do occur in both high- and low-energy mechanism of injury incidents and their mortality can be as high as 20%. Michael will review pelvic anatomy, assessment for injury, and the treatment of suspected fractures including the importance of pelvic stabilization devices.</p> <p><b>Michael Fraley, NRP, BS</b> North Central Regional Trauma Advisory Council</p>	<p><b>US Senior Open 2023 Medical Sector Review</b></p> <p>This session will review the planning for the US Senior Open 2023 at SentryWorld along a review of the weeklong event and summary of the lessons learned from the event. Concepts to be covered include the development of a multi-disciplinary leadership team, interacting with organizing committees, patient tracking including EMTrack as medical</p>

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				<p>record, and integration of regional partners in preparedness.</p> <p><b>Michael Clark, MD, MPH, FAEMS, FACEP</b>          USSO 2023 Medical Director          EMS Medical Director          Aspirus MedEvac</p> <p><b>Panel of the USSO 2023 Medical Sector Leadership Team</b></p>
	<b>Hospital Audience</b>	<b>EMS Audience</b>	<b>EMS Audience</b>	<b>Preparedness Audience</b>
1055-1155	<p><b>Exploring Anabaptist Injury Prevention: What’s causing injuries and what can we do about it?</b></p> <p>Anabaptists (Amish, Hutterites, and Mennonites) differ from the mainstream population in many ways, including their use of technology and motorized vehicles, communal lifestyle, conservative dress, and views on health care. These lifestyle differences may yield different responses when seeking care, as well as injury patterns that differ from the mainstream population, requiring a specialized approach. Increasing the need for data and culturally appropriate interventions is that, while there is no centralized database to track injuries in this population, there are studies indicating a higher number of injuries compared to the general population, especially in children. In this interactive session, we will share more information on Anabaptist communities and current research</p>	<p><b>Avalanche Optional – EMS Assessment &amp; Care of the Hypothermic Patient</b></p> <p>Accidental hypothermia (AH) is a potentially deadly, unintentional drop in core temperature to 35°C or below. While environmental exposure in winter is the #1 risk factor, AH can occur in ANY season, in ANY climate, AND in a wide range of settings due to trauma, medical illness and even iatrogenic. Who is at risk? What do</p>	<p><b>From the Battlefield to the Back of the Bus: The Translation of Combat Medicine to Mainstream EMS (Part 1)</b></p> <p>With a colorful flair from his combat medic background, Chris will review the origins of military medicine and its transformation into the back of our ambulance. He will review how the important concepts of tactical medicine and rescue task force operations have evolved over the last several</p>	<p><b>Crisis Standards of Care: The Basics and How It Can Better Help You in Your Preparedness</b></p> <p>A basic guide designed to equip individuals and organizations with the necessary understanding and strategies for responding effectively to emergencies and disasters. This resource delves into the foundational principles of crisis standards of care, outlining how they can be applied to enhance readiness and</p>

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	findings, as well as facilitating an open discussion on cultural appropriate interventions.  <b>Marsha Salzwedel, EdD</b> Project Scientist National Farm Medicine Center	hypothermic patients look like? How do we stage AH? How does care differ from that of normothermic patients? Does destination triage make a difference in survival? Come learn about evidence-based “best practices” for EMS care of hypothermic patients!  <b>Ronna G. Miller, MD</b> EMS Physician & Education Consultant	years and how they should be applied to everyday operations of all EMS responders including ALS and BLS providers from large and small services in urban and rural settings.  The morning session will be lecture-based and the afternoon session will be a hands-on opportunity to review the basic skills of tactical emergency combat care (TECC).  (Seating is limited)  <b>Chris Cook</b> EMS Division Chief Pewaukee Fire Department	response capabilities. By exploring practical approaches and emphasizing the importance of preparedness, this title aims to empower readers to make informed decisions and take proactive steps towards safeguarding communities in times of crisis.  <b>Douglas Hill</b> Manager Wisconsin Crisis Standards of Care Project	
	<u>Hospital Audience</u>	<u>Hospital Audience</u>	<u>EMS Audience</u>	<u>EMS Audience</u>	<u>Preparedness Audience</u>
<u>1240-1340</u>	<b>When Sight Is on the Line – Emergency Assessment &amp; Care of Eye Injuries</b>  Although they are not directly life-threatening, eye injuries can result in devastating vision loss. Prompt recognition,	<b>Data Validation in ImageTrend Patient Registry</b>  Data entry can be a time-consuming process. How can you make sure the time spent is as productive as possible?	<b>Technical Rescue &amp; EMS, A Case Study</b>  This session will include a presentation and case study of a silo rescue/recovery of a victim that occurred in Marathon County.	<b>From the Battlefield to the Back of the Bus: The Translation of Combat Medicine to Mainstream EMS (Part 2)</b>  (Attendance in <b>Part 1</b> is <u>required</u> and this session will not be available to virtual attendees.)	<b>There's an app for that: Simplify EMS and Hospital Communications</b>  Juvare communication platforms continue to be Wisconsin Department of Health Services'

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	<p>immediate EMS assessment and treatment, proper triage, and rapid transport for specialist evaluation may reduce injury progression and save a patient's sight. When and how should we assess visual acuity? When and how should we irrigate? When and how should we "shield and ship"? What about treating pain and nausea? Attend this highly illustrated presentation to learn about common settings; general assessment principles; and the emergency care of chemical, blunt, penetrating, and thermal/radiation eye injuries from the field to the ED.</p> <p><b>Ronna G. Miller, MD</b> EMS Physician &amp; Education Consultant</p>	<p>Within Patient Registry, there are several features and reports to help minimize data entry, compare patient information with other medical records, review incidents and verify data, and run reports to catch errors and missing data. This session will provide a demonstration of these features and reports and allow for questions and answers about data validation.</p> <p><b>Katie Prather</b> Trauma Registry Data Manager Wisconsin Division of Public Health</p>	<p>Discussion points will include the potential role and responsibilities of rural fire/EMS departments, resources available to departments, safety considerations at a confined space/technical rescue, patient medical considerations, and application of technical rescue for victim rescue/recovery.</p> <p><b>Eric A. Lang</b> Deputy Fire Chief SAFER District</p>		<p>source to alert healthcare partners of critical information. The interoperability between EMResource, the real time hospital bed capacity and census capability dashboard, and EMTrack, the patient movement and tracking software that allows field first responders to communicate with hospital staff, is used to alert healthcare partners of diversion and facilitate reunification for patients tracked. Prior to this session, participants can request access to the systems by emailing <a href="mailto:DHSEMSystems@dhs.wisconsin.gov">DHSEMSystems@dhs.wisconsin.gov</a> and downloading the EMTrack and EMResource by Juvare iOS or Android application on their smart device.</p> <p><b>Katherine Johnson</b> Hospital &amp; Healthcare Systems Coordinator Wisconsin DHS</p>
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	<u>Hospital Audience</u>	<u>Hospital Audience</u>	<u>EMS Audience</u>	<u>Preparedness Audience</u>
1350-1450	<p><b>From Skiing to Pad Thai: A Trauma Survivor Shares His Journey</b></p> <p>Traumatic injuries have devastating effects on patients and families. EMS and hospital personnel work tirelessly to save trauma patients, but they often do not know the outcome of their efforts. This session is an opportunity to hear the story, from a trauma survivor on that fateful day on the ski hill to life today, from a rehabilitation perspective.</p> <p><b>Tracie Timm, FNP-C, APNP</b> Aspirus Medical Group</p>	<p><b>Lost in the Trauma Registry? A Map to Success!</b></p> <p>The American College of Surgeons Committee on Trauma requires the documentation of a rigorous research and scholarship program to qualify for Level I verification. This can be accomplished by using patient data from the Trauma Registry. Efficiency in trauma surveillance and research can be created with the use of an internal Registry codebook with translation to identify the fields and structures relevant to research. The structured fields create a Trauma Research Database, which is linked to visualization software. This data management system can be used to automate monthly operations reports, support performance improvement, and aid in the identification of</p>	<p><b>Peds Trauma: What's Changing and Why You Need to Know</b></p> <p>How kids are injured and dying has changed over the last few years, and how we treat them is also changing. We will describe what has changed, examine recent shifts and advancements in trauma care, and discuss specific considerations of pediatric trauma within a case presentation. We will then review pediatric assessment, and end with some tips making the care and transport of kids easier for you and your patients.</p> <p><b>Bob Foster, BSN, RN, CCRN, CPEN, C-NPT</b> Pediatric/Neonatal Transport Nurse Peds/Neo Care Team Leader &amp; Education Coordinator UW Health Med Flight</p>	<p><b>Medical Aspects of Haz-Mat Incidents</b></p> <p>This session will review a framework for assessing and treating patients involved in HazMat incidents, key toxidromes, and treatments. Cases will be presented to highlight both on-scene and hospital management of patients involved in Haz-Mat incidents. Dr Clark and Lt Tautges are both Advanced HazMat Life Support Instructors and have taught courses in WI for over 5 years.</p> <p><b>Michael Clark, MD, MPH, FAEMS, FACEP EMS</b> Medical Director Aspirus MedEvac</p> <p><b>Ted Tautges, NRP, RN Lieutenant</b> Wausau Fire Department Regional Type 2 Haz-Mat Team</p>

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		<p>previously unconsidered fields for the generation of new possible research questions.</p> <p><b>Heather Rhodes-Lyons, PhD, DHS, RT(R)(ARRT)CT</b> Marshfield Clinic Health System</p>		<p><b>Members of the Wausau Fire Department Regional Type 2 Haz-Mat Team</b></p>
1500-1600	<p><b>Our Public Safety Mental Health (Closing Session)</b></p> <p>How many different ups, downs, sideways, forward, and backward directions happen to our mental health in our time spent in public safety? This presentation gives an overview of the normal changes that happen to the human brain when exposed to stress. Discussion of how to combat the bad stress, promote the good, and prepare us for the wild ride our body and brain can take us on. This lecture was developed as part of the lessons learned after the writer experienced firsthand the wild ways the brain adapts in order to cope with the craziness that is our jobs.</p> <p><b>Brennan Cook, RN, BSN, CCP</b> Aspirus MedEvac</p>			

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