

NCRTAC Trauma Conference 2024

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

0730-0800	Registration
0800-0915	Dr. "Deke" Farrington Memorial Keynote Presentation This Might Be Your Grandma's Brain - Important TBI Updates for EMS & the ED Dr. Ronna G. Miller
0925-1025	Break-out sessions 1 a) What Happens When Your Trauma Instructor / Co-Worker is Your Trauma patient? – Lisa Ebert b) Pelvic Trauma: Do Get in a Bind(er) – Michael Fraley c) Medical Aspects of Haz-Mat Incidents – Dr. Michael Clark, Ted Tautges & Wausau FD Haz-Mat Team Members
1025-1055	Morning Break/ Visit Vendors
1055-1155	Break-out sessions 2 a) Exploring Anabaptist Injury Prevention: What's causing injuries and what can we do about it? — Marsha Salzwedel b) Avalanche Optional — EMS Assessment & Care of the Hypothermic Patient — Dr. Ronna G. Miller c) From the Battlefield to the Back of the Bus: The Translation of Combat Medicine to Mainstream EMS (Classroom portion) — Chris Cook d) Crisis Standards of Care: The Basics and How It Can Better Help You in Your Preparedness — Douglas Hill
1155-1240	Lunch/ Visit Vendors
1240-1340	Break-out sessions 3 a) When Sight Is on the Line – Emergency Assessment & Care of Eye Injuries – Dr. Ronna G. Miller b) Data Validation in ImageTrend Patient Registry – Katie Prather c) Technical Rescue & EMS: A Case Study – Eric Lang d) From the Battlefield to the Back of the Bus: The Translation of Combat Medicine to Mainstream EMS (Hands-on portion) – Chris Cook e) There's an App for That: Simplify EMS and Hospital Communications – Katherine Johnson

More details and registration are available at: NCRTAC-WI.org/Conference.html

1350- 1450	a) From Skiing to Pad Thai: A Trauma Survivor Shares His Journey – Tracie Timm b) Lost in the Trauma Registry? A Map to Success! – Heather Rhodes-Lyons c) Peds Trauma: What's Changing and Why You Need to Know – Bob Foster d) US Senior Open 2023 Medical Sector Review – Dr. Michael Clark & Panel
1500-1600	Closing Session Our Public Safety Mental Health Brennan Cook
1600-1615	Closing remarks/ Door prizes

Conference Sponsors







Conference Vendors





AstraZeneca

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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 or (715) 892-3209.

Contact Hour Statement for Allied Health Professionals



Wisconsin Society for Healthcare 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.

Session Details:

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

0800- 0915					
	Ronna G. Miller, MD	Ronna G. Miller, MD			
	EMS Physician & Education Consultant				
	Hospital Audience	EMS Audience	Preparedness Audience		
0925-	What Happens When Your Trauma Instructor / Co-	Pelvic Trauma: Do Get in a Bind(er)	Medical Aspects of Haz-		
1025	Worker is Your Trauma patient?		Mat Incidents		
		While not an everyday occurrence, pelvic fractures			
	Traumatic injuries have a significant impact on	do occur in both high- and low-energy mechanism of	This session will review a		
	patients and families, but what is the impact on the	injury incidents and their mortality can be as high as	framework for assessing		
	health care providers that are caring for these	20%. Michael will review pelvic anatomy, assessment	and treating patients		
	patients day after day.	for injury, and the treatment of suspected fractures	involved in HazMat		
		including the importance of pelvic stabilization	incidents, key		
	This presentation shares a case study looking at the	devices.	toxidromes, and		
	impact of caring for a trauma patient that is your		treatments. Cases will be		
	friend and colleague. What is the physical,	Michael Fraley, NRP, BS	presented to highlight		
	emotional, and psychological impact on the team?	North Central Regional Trauma Advisory Council	both on-scene and		
	51 51 651 651		hospital management of		
	Lisa Ebert RN, CEN, SCRN		patients involved in Haz-		
	Aspirus TNCC Course Director, Aspirus System Stroke		Mat incidents. Dr Clark		
	Coordinator, ED Staff RN, Wisconsin Regional ENA		and Lt Tautges are both		
	Director, Wisconsin ENA Injury Prevention Chair		Advanced HazMat Life		
	Aspirus Wausau Hospital		Support Instructors and		

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				have taught courses in WI for over 5 years.
				Michael Clark, MD, MPH, FAEMS, FACEP EMS Medical Director
				Aspirus MedEvac
				Ted Tautges, NRP, RN Lieutenant Wausau Fire Department Regional Type 2 Haz-Mat Team
				Members of the Wausau Fire Department Regional Type 2 Haz-Mat Team
	Hospital Audience	EMS Audience	EMS Audience	Preparedness Audience
1055-	Exploring Anabaptist Injury Prevention: What's	Avalanche Optional –	From the Battlefield to	Crisis Standards of Care:
1155	causing injuries and what can we do about it?	EMS Assessment & Care	the Back of the Bus: The	The Basics and How It
		of the Hypothermic	Translation of Combat	Can Better Help You in
	Anabaptists (Amish, Hutterites, and Mennonites) differ from the mainstream population in many	Patient	Medicine to Mainstream EMS (Part 1)	Your Preparedness
	ways, including their use of technology and	Accidental hypothermia		A basic guide designed to
	motorized vehicles, communal lifestyle, conservative	(AH) is a potentially	With a colorful flair from	equip individuals and
	dress, and views on health care. These lifestyle	deadly, unintentional	his combat medic	organizations with the
	differences may yield different responses when	drop in core temperature	background, Chris will	necessary understanding
	seeking care, as well as injury patterns that differ	to 35°C or below. While	review the origins of	and strategies for
	from the mainstream population, requiring a	environmental exposure in winter is the #1 risk	military medicine and its transformation into the	responding effectively to emergencies and
	specialized approach. Increasing the need for data and culturally appropriate interventions is that, while	factor, AH can occur in	back of our ambulance.	disasters. This resource
	there is no centralized database to track injuries in	ANY season, in ANY	He will review how the	delves into the

	this population, there are s	ed to the general	climate, AND in a wide range of settings due to trauma, medical illness	important concepts of tactical medicine and rescue task force	foundational principles of crisis standards of care, outlining how they
	population, especially in children. In this interactive session, we will share more information on		and even iatrogenic.	operations have evolved	can be applied to
	Anabaptist communities and current research		Who is at risk? What do	over the last several	enhance readiness and
	findings, as well as facilitat		hypothermic patients	years and how they	response capabilities. By
	cultural appropriate interv	-	look like? How do we	should be applied to	exploring practical
			stage AH? How does	everyday operations of	approaches and
	Marsha Salzwedel, EdD		care differ from that of	all EMS responders	emphasizing the
	Project Scientist		normothermic patients?	including ALS and BLS	importance of
	National Farm Medicine Ce	enter	Does destination triage	providers from large and	preparedness, this title
			make a difference in	small services in urban	aims to empower
			survival? Come learn	and rural settings.	readers to make
			about evidence-based		informed decisions and
			"best practices" for EMS	The morning session will	take proactive steps
			care of hypothermic	be lecture-based and the	towards safeguarding
			patients!	afternoon session will be	communities in times of
			Danna C. Millar MAD	a hands-on opportunity	crisis.
			Ronna G. Miller, MD	to review the basic skills	Daugles Hill
			EMS Physician & Education Consultant	of tactical emergency combat care (TECC).	Douglas Hill Manager
			Education Consultant	Combat care (TECC).	Wisconsin Crisis
				(Seating is limited)	Standards of Care Project
				(Seating is infilted)	Standards of Care Project
				Chris Cook	
				EMS Division Chief	
				Pewaukee Fire	
				Department	
	<u>Hospital Audience</u>	Hospital Audience	EMS Audience	EMS Audience	Preparedness Audience
<u>1240-</u>	When Sight Is on the	Data Validation in	Technical Rescue & EMS,	From the Battlefield to	There's an app for that:
<u>1340</u>	Line – Emergency	ImageTrend Patient	A Case Study	the Back of the Bus: The	Simplify EMS and
	Assessment & Care of	Registry		Translation of Combat	
	Eye Injuries			Medicine to Mainstream	
				EMS (Part 2)	

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Although they are not directly life-threatening, eye injuries can result in devastating vision loss. Prompt recognition, 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.

Data entry can be a timeconsuming process. How can you make sure the time spent is as productive as possible? 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.

Katie Prather

Trauma Registry Data Manager Wisconsin Division of Public Health

This session will include a presentation and case study of a silo rescue/recovery of a victim that occurred in Marathon County. 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.

Eric A. LangDeputy Fire Chief SAFER District

(Attendance in **Part 1** is required and this session will not be available to virtual attendees.)

Hospital Communications

Juvare communication platforms continue to be Wisconsin Department of Health Services' 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 DHSEMSystems@dhs.wis consin.gov and downloading the EMTrack and EMResource by Juvare iOS or Android

Ronna G. Miller, MD

	EMS Physician &			application on their
	Education Consultant			smart device.
				Katherine Johnson
				Hospital & Healthcare
				Systems Coordinator
				Wisconsin DHS
	Hospital Audience	Hospital Audience	EMS Audience	Preparedness Audience
1350-	From Skiing to Pad Thai:	Lost in the Trauma	Peds Trauma: What's Changing and Why Yo	
1450	A Trauma Survivor	Registry? A Map to	to Know	Medical Sector Review
	Shares His Journey	Success!		
	,		How kids are injured and dying has changed	over the This session will review
	Traumatic injuries have	The American College of	last few years, and how we treat them is also	
	devastating effects on	Surgeons Committee on	changing. We will describe what has changed	
	patients and families.	Trauma requires the	examine recent shifts and advancements in t	rauma SentryWorld along a
	EMS and hospital	documentation of a	care, and discuss specific considerations of p	ediatric review of the weeklong
	personnel work tirelessly	rigorous research and	trauma within a case presentation. We will tl	nen event and summary of
	to save trauma patients,	scholarship program to	review pediatric assessment, and end with so	ome tips the lessons learned from
	but they often do not	qualify for Level I	making the care and transport of kids easier	for you the event. Concepts to
	know the outcome of	verification. This can be	and your patients.	be covered include the
	their efforts. This session	accomplished by using		development of a multi-
	is an opportunity to hear	patient data from the	Bob Foster, BSN, RN, CCRN, CPEN, C-NPT	disciplinary leadership
	the story, from a trauma	Trauma Registry.	Pediatric/Neonatal Transport Nurse	team, interacting with
	survivor on that fateful	Efficiency in trauma	Peds/Neo Care Team Leader & Education	organizing committees,
	day on the ski hill to life	surveillance and research	Coordinator	patient tracking including
	today, from a	can be created with the	UW Health Med Flight	EMTrack as medical
	rehabilitation	use of an internal		record, and integration
	perspective.	Registry codebook with		of regional partners in
		translation to identify		preparedness.
	Tracie Timm, FNP-C,	the fields and structures		
	APNP	relevant to research. The		Michael Clark, MD,
	Aspirus Medical Group	structured fields create a		MPH, FAEMS, FACEP
		Trauma Research		USSO 2023 Medical
		Database, which is linked		Director

	to visualization software.	EMS Medical Director	
	This data management	Aspirus MedEvac	
	system can be used to		
	automate monthly	Panel of the USSO 2023	
	operations reports,	Medical Sector	
	support performance	Leadership Team	
	improvement, and aid in	·	
	the identification of		
	previously unconsidered		
ı	fields for the generation		
	of new possible research		
	questions.		
	Heather Rhodes-Lyons,		
	PhD, DHS,		
	RT(R)(ARRT)CT		
	Marshfield Clinic Health		
	System		
1500-	Our Public Safety Mental Health (Closing Session)		
1600			
	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.		
	Brennan Cook, RN, BSN, CCP		
	Aspirus MedEvac		