



## Trauma Times Newsletter (November 2015)

Indiana State Department of Health sent this bulletin at 11/16/2015 07:52 AM EST



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## [Indiana State Trauma Care Committee \(ISTCC\) Update](#)

The Indiana State Trauma Care Committee (ISTCC) meeting on October 30 included Dr. Gerardo Gomez, Trauma Medical Director at Eskenazi Health, providing the Designation subcommittee update. Three hospitals Franciscan St. Anthony Health (Crown Point Campus), Reid Health and Terre Haute Regional had applications for becoming in the process. The Trauma Care Committee is recommending to Dr. Adams, the state health commissioner, that he recommend to the EMS commission these three hospitals be approved as "in the process" trauma centers.

Dr. Gomez indicated that Community East, North and South had given notice to the subcommittee that they were withdrawing their status effective immediately and that EMS commission and providers would be notified of this development.

Jessica Schultz, Injury Prevention Epidemiologist with the Division of Trauma and Injury Prevention, presented on the Injury Prevention App. The free app provides evidence-based solutions at the finger tips for currently 10 topics. There are plans for future expansion increasing from 10 to 21 topics in a future release. The app is compatible with both Android and Apple devices and can be downloaded from the Google Play Store and iTunes.

Jessica also mentioned that the next IPAC meeting will be December 10 in Rice Auditorium with special guest speaker Sally Thigpen, MPA, Health Scientist from the CDC, to discuss the Evidence Project in CDC's Division of Violence Prevention.

Scott Zarazee, Executive Director of the Healthy Hoosier Foundation (HHF), presented on the goals and responsibilities of the HHF. Created in 2013 by the General Assembly, the HHF is the first of its kind in the United States a registered nonprofit that helps fund Indiana State Department of Health (ISDH) programs with focuses on reducing infant mortality, obesity and reducing smoking and increasing immunization rates but not only limited to these focus areas. A foundation in place like the Healthy Hoosier Foundation, can raise money from the private sector, form partnerships and due to health funds being cut, provide an avenue to fund ISDH-related programs.

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## [Indiana State Department of Health Launches Website Showing Locations Where Life-Saving Naloxone Can Be Obtained](#)

The ISDH has unveiled a new online registry that will connect those on the front lines of the battle against addiction with entities that can dispense a life-saving antidote for opioid overdoses.

The Overdose Prevention Therapy-Indiana, or optIN, registry allows nonprofits, pharmacies, local health departments, addiction treatment facilities, correctional facilities and other entities to register as providers of naloxone, a non-narcotic medication that reverses life-threatening respiratory failure that is usually the cause of overdose deaths. Entities must obtain a prescription, or standing order, from a physician allowing them to distribute naloxone, provide training in the use of naloxone, instruct those who administer it to call 911 and provide a list of options for substance abuse treatment. Registered entities will also report the number of doses distributed to the state annually. The registry can be accessed at <https://optin.in.gov/>.

“Indiana knows all too well the toll that the national opioid epidemic is taking on communities and families,” said Indiana State Health Commissioner Jerome Adams, M.D., M.P.H. “By getting naloxone into the hands of emergency responders and lay people, we can save lives and give people who are struggling with addiction a second chance.”

The registry was created to support entities that register to dispense naloxone to families or friends of someone at risk of opioid overdose. Aaron’s Law, which Governor Mike Pence signed in April in honor of Aaron Sims of Indianapolis, allows healthcare providers to provide a standing order for naloxone to registered entities so they can dispense it to Hoosiers without a prescription. Aaron died of a heroin overdose in 2013 at age 20.

“Aaron’s Law is so important because it puts naloxone directly into the hands of families and caregivers and the individuals who are using opioids and heroin,” said Aaron’s mother, Justin Phillips, who now works to ensure that addicts and their families have access to the support and resources they need. “Aaron’s Law would have saved Aaron, and I want to save others in his memory.”

According to the Centers for Disease Control and Prevention (CDC), drug overdoses are the leading cause of injury-related death for Americans ages 25 to 64. Indiana ranked 16th nationally for drug overdose deaths in 2013.

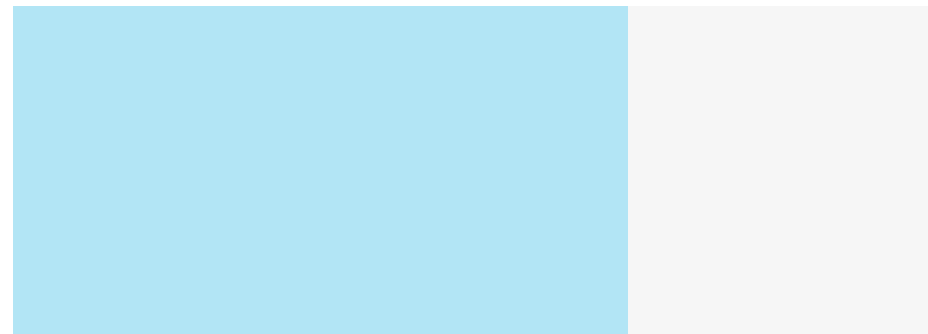
Naloxone is a Food and Drug Administration-approved medication and has been used for more than 40 years by emergency medical services personnel to reverse opioid overdose and revive people who might have died without treatment. It is not addictive, and although it is only effective at reversing overdoses of opioid drugs like heroin or prescription painkillers, it is not harmful if administered to someone who has not taken opioids.

In March 2014, Indiana lawmakers granted immunity for first responders to use naloxone.

Governor Pence has directed state agencies to raise the awareness of Aaron's Law, which puts this life-saving tool in the hands of friends, family members and others closest to people at risk of an overdose.

"Naloxone is proven to save lives, but it only works if people have access to it and know how to use it," Dr. Adams said. "This website makes it easy for Hoosiers to find a provider and get training so they are prepared to administer naloxone if someone close to them overdoses."

***EMS Providers Using the EMS Registry:***



## Reporting the Administration of an Overdose Intervention Drug Using the Image Trend ePCR

- Log into Image Trend.
- Open a new run sheet.
- Complete all the appropriate boxes as needed for the run you are on.
- If an Overdose Intervention Drug is given, you need to make a notation.

### Your EMS Service is the Only One to Administer a Overdose Intervention Drug, No Prior Aid Given

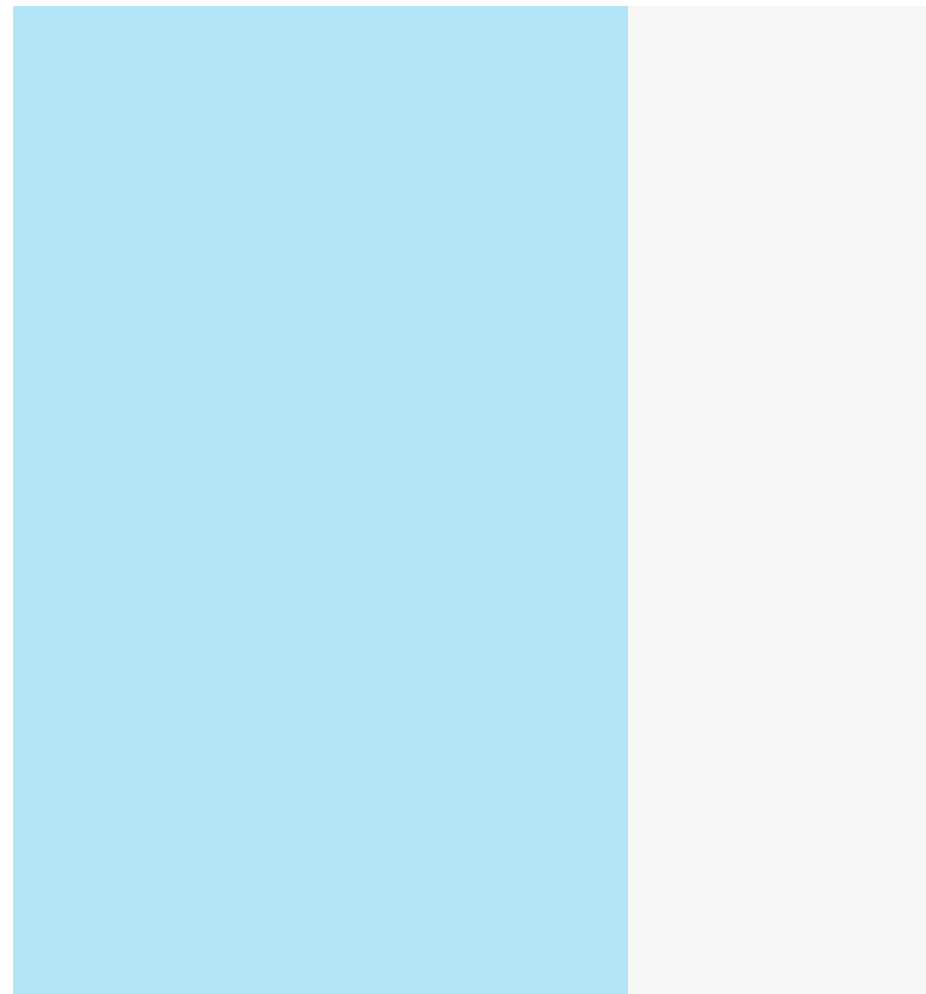
- Click on the Vitals/Treatment tab.
- Click on the Add Med tab.

The screenshot displays the ImageTrend EMS web interface. The top navigation bar includes 'Dashboard', 'Incidents', 'Modules', 'Staff', and 'Setup'. Below this, there are tabs for 'Dispatch Info', 'Call Conditions', 'Patient Info', 'History', 'Assessment', 'Vitals/Treatment', 'Transport', 'Narrative', 'Billing', and 'Signatures'. The 'Vitals/Treatment' tab is currently selected. In the bottom left corner, there are four buttons: 'Add Med', 'Add Proc', 'Add Vitals', and 'Add EKG'. The 'Add Med' button is highlighted with a red arrow pointing to it from the text 'Click on the Add Med tab.' in the instructions above. Another red arrow points from the text 'Click on the Vitals/Treatment tab.' to the 'Vitals/Treatment' tab in the interface.

- > After selecting the tab called Add Med, the sleeve will expand.
- > Select No in the box Medication Administered Prior to Arrival?
- > You need to identify which Crew Member administered the drug. This is accomplished by pulling down the drop down box called Crew Administering Medication, E18\_09.

The screenshot shows the 'Add Med' form in the WINGS EMT SERVICE BRIDGE software. The form is titled 'Secondary Assessment' and includes the following fields and options:

- Medication Administered Prior to Arrival? (E18\_02):** A dropdown menu with 'No' selected.
- Date/Time Medication Administered (E18\_01):** A date and time selector showing '14:42: 6/8/2015'.
- Crew Administering Medication (E18\_09):** A dropdown menu with a list of crew members: Admin, Adin, Admin, Service, Diekmann, Dustin, eddie, fast, eeeeeeeeee, greg, Gluesing, Jordan, Melby, Amy, Person, Lay.
- Medication Name (E18\_03):** An empty text input field.
- Medication Dosage Units (E18\_06):** An empty text input field.
- Medication Administered Route (E18\_04):** An empty dropdown menu.
- Comments:** An empty text area.
- Repeat:** A button to repeat the medication administration.



- Then select the overdose intervention drug given from the Medication Name, Medication Dosage, Medication Dosage Units and Medication Administered Route.

IMAGE TREND EMS SERVICE BRIDGE

Dashboard Incidents Modules Staff Setup

Search Actions Reports Options History About

COMPLETED Indiana Run Fo

Save Status Requires Review Locked Unlocked Patient:

Dispatch Info Call Conditions Patient Info History Assessment Vitals/Treatment Transport Narrative Billing Signatures

Secondary Assessment

Medication Administered Prior to Arrival? (E18\_02) No

Date/Time Medication Administered (E18\_01) 14:42 6/8/2015

Crew Administering Medication (E18\_09)

Medication Name (E18\_03) Haloxone (Narcan)

Medication Dosage (E18\_05) 2.00

Medication Dosage Units (E18\_06) ML

Medication Administered Route (E18\_04) Intranasal

Response to Medication (E18\_07)

Comments

Medication Authorization (E18\_10)

Medication Authorizing Physician (E18\_11)

Medication Complication (E18\_08)

Save & New Save Cancel Delete

- If you only administer one dose, click the Save box at the bottom of the sleeve.

Medication Authorization (E18\_10) Protocol (Standing Order)

Medication Authorizing Physician (E18\_11)

Medication Complication (E18\_08)

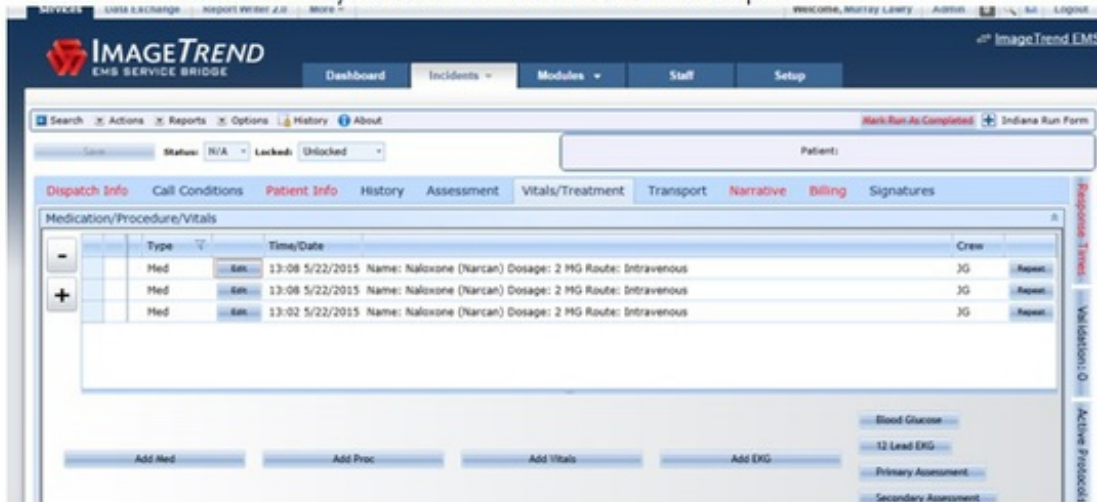
Save & New Save Cancel Delete

Protocols Used

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12:58 PM 5/22/2015

- If you need to administer a second time, third time, etc., click the Repeat button and repeat steps listed above each time.
- This is what the summary screen will look like after three attempts.



**Note-** This Guide illustrates how you would report using the Image Trend run sheet. However many EMS Services use run sheets from other software vendors. (i.e. EMS Charts, ESO Solutions, Data Med 32, etc). The state EMS Registry accepts run sheets from these other software vendors. The appropriate NEMSIS Elements just have to be mapped to the correct areas in order for the information to be accepted into the EMS Registry.

## [Indiana State Department of Health Releases Injury-Prevention App for Smart Devices](#)





The ISDH has launched a free app that easily links Hoosiers with data and resources about specific injuries and provides strategies to prevent injury at the state and local level.

The Preventing Injuries in Indiana: Injury Prevention Resource Guide is available for Android and IOS (Apple) systems. The app features buttons for 10 common sources of injury, such as distracted driving, sexual assault, prescription overdoses and falls among older adults. Each category includes a description of the scope of the problem in Indiana and the United States, discusses how the problem is being addressed and includes links to resources.

Users can search for specific items and download pdf versions of material included in the app, or they can share data from the app through email and social media. The app includes an email address for the health department's Division of Trauma and Injury Prevention, which will be updating and expanding the app in the coming months.

"The goal of the app is to serve as a guide that can provide easily accessible and understandable information and data on the size and scope of specific injuries in Indiana, while highlighting effective evidence-based solutions to the problem of injury," said Katie Hokanson, director of Trauma and Injury Prevention for the health department.

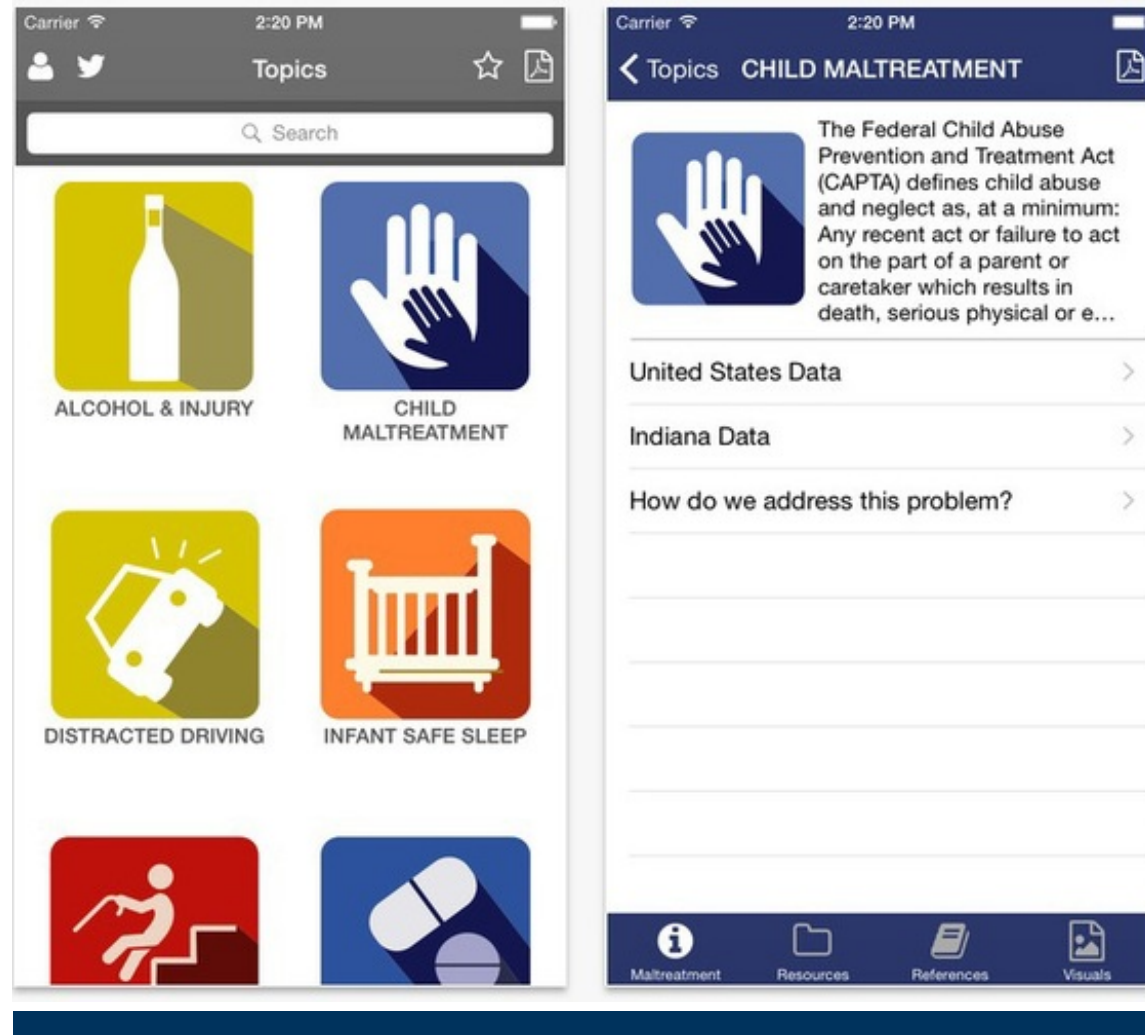
The injury prevention app is the second app developed for the ISDH. The MyVaxIndiana app was launched in October 2013 and allows Hoosiers to access their immunization records from mobile devices.

“The injury prevention app will put valuable information at Hoosiers’ fingertips just as MyVaxIndiana allowed residents to quickly access their vaccination records,” said State Health Commissioner Jerome Adams, M.D., M.P.H. “It’s exciting to see the ways we can use technology to help keep Hoosiers safe and improve their health.”

You can find the app under the Android and Apple stores here:

Android store: <https://play.google.com/store/apps/details?id=doh.in.gov.indianaprevention&hl=en>

Apple store: <https://itunes.apple.com/us/app/preventing-injuries-in-indiana/id1037435460?mt=8>



# The Process of Becoming a Certified Child Passenger Safety Technician (CPST)

## NATIONAL CHILD PASSENGER SAFETY CERTIFICATION

A Program of  
Safe Kids Worldwide

Child car seats reduce the risk of injury by 71% yet 73% of child restraints are used incorrectly and one-third of children are not using any type of restraint whatsoever. One way to help ensure that car restraints are being used correctly is to become a certified child passenger safety technician (CPST) through Safe Kids Worldwide (<http://cert.safekids.org/become-tech>). This is a four day course with three quizzes, three skills assessments and one car seat clinic. It is open to anyone who would like to become a technician. With the fee of \$85 to sign up for the class, you are provided with a workbook that is essential to learning how to become a technician. Getting certified may be time-intensive but it is worth it when provided families the education they need to protect their child's future.



## Thanksgiving Holiday Safety



Thanksgiving kicks off the start of holiday season, but it's always important to note some home safety tips to prevent injury and fire. Home fires during the holiday season often involve cooking, candles and decorations. The National Fire Protection Association has these home tips for a safe Thanksgiving:

- Create a “kid-free zone” at least three feet around the stove and areas where hot food and drinks are prepared and carried. Stay in the kitchen when cooking on the stovetop, and do not hold children while preparing food because hot liquids may splatter.
- Keep the floor clear so you and your guests do not trip over toys, jackets, pocketbooks or bags.
- Make sure your smoke alarms are working. Test them by pushing the test button.
- When using candles to decorate the home, remember to keep them at least 12 inches away from anything that can burn. Remember to blow them out when you leave the room or go to bed.

For information about how to safely prepare your holiday meal, visit:

<http://www.cdc.gov/features/turkeytime/>. For information about home fire prevention, visit:

<http://www.nfpa.org/safety-information/for-consumers/holidays/thanksgiving-safety>

## **International Survivors of Suicide Loss Day is November 21**



November 21 is the International Survivors of Suicide Loss Day, an event which started in 1999 when Senator Harry Reid, a survivor of his father's 1971 suicide, introduced a resolution into the US Senate. With its passage, the U.S. Congress designated the Saturday prior to Thanksgiving as "National Survivors of Suicide Day," a day on which friends and family of those who have died by suicide can join together for healing and support. This year's event includes screening of the American Foundation for Suicide Prevention's new documentary, Family Journeys: Healing and Hope after a Suicide, the second in a series on suicide loss survivors.

For more information, visit: <http://www.survivorday.org/>

## Additional Information

### Drowsy Driving Prevention Week

- Signs of sleepiness include trouble focusing, daydreaming, drifting or missing signs slower reaction time. Drive Alert & Arrive Alive!
- Avoid #DrowsyDriving - Watch for the warning signs of fatigue: <http://drowsydriving.org/about/warning-signs/> #DDPW #SafetyIN
- Get adequate sleep—most adults need 7-9 hours to maintain proper alertness during the day. Prevent #DrowsyDriving #DDPW #SafetyIN

### Child Passenger Safety Information:

- 73% of child restraints are used incorrectly. Find a child passenger safety technician at [cert.safekids.org](http://cert.safekids.org) #therightseat #SafetyIN
- Make sure to buckle up your older kids, too. Fifty-two percent of children age 13 who died in crashes in 2009-2013 were unrestrained. #buckleupforlife
- The best brand may not be the best fit. Need help deciding what car seat is best for your child? Check out <http://tinyurl.com/rightseat>

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Indiana Trauma Network has many events throughout the year. Visit our webpage <http://bit.ly/1HKSfj> to find which events interest you the most!

## Hospitals who have submitted data to the registries

(under the Trauma Registry Rule-update) <http://www.in.gov/isdh/25942.htm>

Jerome Adams, M.D., M.P.H. — State Health Commissioner  
Jennifer Walthall, M.D., M.P.H. — Deputy Health Commissioner  
Arthur L. Logsdon, J.D. — Assistant Commissioner, Health and Human Services

### Division of Trauma and Injury Prevention Staff

Katie Hokanson — Director  
Jessica Skiba, M.P.H. — Injury Prevention Epidemiologist  
Murray Lawry, M.P.A. — EMS Registry Manager  
Camry Hess, M.P.H. — Database Analyst Epidemiologist  
Ramzi Nimry — Trauma System Performance Improvement Manager  
Rachel Kenny — INVDRS Epidemiologist  
John O'Boyle — INVDRS Law Enforcement Records Coordinator  
Marion Chaloux, M.S. — INVDRS Records Consultant  
Lauren Savitskas, M.P.H. — Injury Prevention Program Coordinator

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