

Course Name	Course Description
Air Goes In and Out, Blood Goes Round and Round...And the Significance of the Patient Assessment	This presentation is designed to dive into the skill of patient assessment and dissect it apart to enhance the providers understanding of the most important tool we employ as ems providers. Many ems providers learned how to perform the patient assessment by memorizing words on a sheet of paper to gain points on a test and we are going to enhance your perspective and your practice by breaking down each component of the assessment. This will not be somebody reading you the assessment sheets and teaching you SAMPLE and OPQRST. The presenter will engage the participants for feedback and input as we focus on understanding the assessment and how imperative it is to keep this tool sharp and while keeping your mind focused and providing quality service to the recipients of your care
Airway Management as a Holistic Event	Airway management of the crashing, perfusing patient is a crucial step to resuscitation that is not often encountered by EMS providers. Approaching airway management as set of discreet tasks can result in critical steps in resuscitation being overlooked and poor patient outcome. This course will present airway management as an integral part of overall patient care that is deeply intertwined with total patient management. We will focus on procedure selection decision making, physiology maximalization, and post procedure management. Areas of discussion: Pre-patient care preparation, foundational knowledge, equipment familiarity, equipment checks; Checklists and checklist mentality; Patient assessment and procedure selection decision making; Pre-procedure set up; Peri-procedure physiology maximalization; Post-procedure assessment and management, common post airway management problems and solutions; Logistics and physiology of patient movement

Airway Management for the BLS Provider	The current airway adjuncts all have their indications and contraindications but what are the cases we use them in? How often to BLS providers utilize airway techniques rather than an adjunct? There are countless ways to protect and maintain a patent airway as a BLS provider. This is comprehensive review of the airway anatomy and function, normal vital signs with age groups and populations, and maintaining an airway including: positioning, suctioning, oxygen delivery, oral pharyngeal airway and nasal pharyngeal airway, and supraglottic airways for BLS providers
All Trauma, No Drama	The fundamental practices regarding quick stabilization and transport of the trauma patient
Assessment and Treatment of Diabetic Emergencies	Provide a review of the two type of diabetic patients that ems provider may encounter. Gain an understanding of the different types of diabetic emergencies that may be occurring with their patient. Review the different signs and symptoms and how to treat them
Athletic Training and EMS: Building a working relationship between athletic trainers and EMTs to successfully treat athletic injuries. Sports Injury Management	Communication between athletic trainers and EMTs is the name of the game when it comes to on-field injury management. This course will review the skills and qualifications of athletic trainers as well as effective communication strategies for working together on the field or court. This course will also cover common orthopedic injuries and concussion management. Hands-on skills include injury immobilization and concussion management
Barotrauma and Submersion Injuries	What does a guy from the mountains of Colorado know about Diving Injuries? Colorado has one of the highest numbers of divers per-capita in the country and I have been one of them since the mid 80's including time on a Dive Rescue Team. We will talk about the four gas laws and how they relate to the physics of diving. We will talk about the causes, signs and symptoms, and treatment for decompression sickness, submersion injuries, and problems associated with breathing compressed gasses, and the treatment for scuba emergencies related to barotraumas

Behavioral Emergencies and Excited Delirium	<p>Although we have progressed from the days of bath salts and Flakka events, there is no shortage of incidents where people are experiencing events which lead to Excited Delirium. National News is replete with major incidents involving Police and EMS services having contact with individuals who have had very poor outcomes following such encounters. This course will show video examples of the stages of Delirium, break down the individual components leading to Excited Delirium, including a discussion of the incident leading to the MARCUS Alert system</p>
Burn Management	<p>The Burn Management class provides knowledge for immediate care of the burn patient up to the first 24-hours post injury. The class will also focus on how to accurately assess, determine intervention needed and transport the patient to the appropriate facility. Applicable resources will also be identified for the first responder and medical facilities</p>
Cardiac Case Reviews for the ALS Provider	<p>We are back with an entirely new batch of cardiac specific cases to test your knowledge and treatments. Selected actual cardiac case review presentations for the ALS provider (I can't make this stuff up, I am not that creative and fact far outweighs fiction). These cases will test even the most experienced provider. Each participant will be given the patient's presentation from the EMS perspective and then the case will be followed through the hospital course on to discharge. Participants will be given actual EKG tracings, radiographic films, lab values, radio reports, and assessments to determine the case progression. Compare your treatment plan to what actually transpired. This will be an interactive course with plenty of audience participation. Topics Covered include Atypical STEMI presentation, Wide complex tachycardia; VTACH vs SVT with aberrancy, WPW, STEMI mimics, Tako-Tsubo cardiomyopathy, Pediatric Cardiac Arrest</p>
Cardiac Devices from pacemakers to VADs	<p>From hidden pacemakers to VADs, Life Vests, subcutaneous defibrillators and other implantable cardiac devices. How do they impact prehospital care and management pearls</p>
Disaster Management within the Pediatric Emergency Department	<p>Topic to evaluate pediatric disaster/mass casualty management starting in the field and continuing within the Pediatric Emergency department. Will discuss mass casualty triage, chemical and traumatic types of injuries</p>

Distinguishing Pediatric Trauma	Often times signs pediatric non-accidental trauma can be missed or overlooked in any healthcare setting. Becoming aware of the various signs and symptoms of this type of trauma gives providers a better understanding of what to notice, what to look for and how to report these instances and unfortunate circumstances
Dogs: Mans Best Friend, but Kids' Worst Enemy?	Each year, The Level One Pediatric Trauma Center at Children's Hospital of Richmond at VCU sees a number of dog bites with very serious injuries. Kate will review the general injury patterns, and trends in the home environment surrounding them. Rachel will discuss warning behaviors the dog might exhibit, and how to mitigate the risk to children. Utilizing case studies for illustration, we will review treatment modalities. Lastly, we will review the dogs' ability to help calm and soothe First Responders - and everyone can pet Monte
Drips, Drops, and Dopamine Clocks...A Field Provider Approach to Medication Administration and Pharmacology	Medication administration is often an area of intimidation for medical professionals when using medications that are not routinely utilized. In the clinical setting, we often have the luxury of medication pumps that do all the tedious and painstaking math for us. Unfortunately, we still have a ways to go before that becomes a mainstay of prehospital EMS. This presentation will begin with an overview of medication administration practices and commonly used medication administration equipment. We will then review some basic med math approaches and do some problem solving. The back half of the presentation will discuss some pharmacology to freshen up your med profile knowledge and also to employ some of the items we learned in the first half for calculating dosages and drip rates
Effective Social Media Use in EMS	The class is designed to empower providers, both career and volunteer, to use social media in a way that recognizes members for their contributions, recruits new members to join and builds the overall brand of their agency. The class focuses on which social media platforms provide the most value, how to make content that works on those platforms and how to measure the effectiveness of the agency's social media approach.

EMS Development in the Philippines	Volunteers from Hampton Roads have been instrumental over the past 26 years for the implementation and development of the EMT program in the Philippines. A look at the history of the program and the political impact on its development will be explored. Lessons learned and how they are similar and different from the EMS system in the US will be included
Encephalopathy, A Providers Journey Down the Rabbit Hole	Join us for a discussion about the pathophysiology of encephalopathy, the etiology and why what you see ain't what you get. This presentation is a direct and real life experience of a provider with 40 years of EMS and public safety experience, and hopefully will give the audience a better appreciation of the encephalopathic patient population
ESO HDE Overview	Look at the Hospital Data Exchange, how it works, what you can expect
ESO Overview - Data analytics	Look at the new ESO Insights and ESO Product Overview
Essentials of Prehospital Burn Care	Overview of standard best practice treatments in prehospital environment and in acute care environment of acute burn injuries
Extremes in Trauma: Geriatric and Pediatrics	We've all know that children are not little adults, but the similarities in trauma may surprise you. Compare and contrast 3 similarities and 3 differences in the response to trauma in both groups
Geriatric Trauma with Case Studies	With the Baby-Boomers, our single largest population group of people, getting older and beginning to retire, this topic becomes timelier and more applicable. Participants will be taken through the normal physiologic changes that occur with the aging process and then relate that to how it affects the traumatically injured victim. Participants will be given the information to help determine the underlying sequence of whether or not it was a medical patient first and then a trauma patient or vice versa
Head Injuries, That Ain't Rocks Rattel'n Around in Your Head	Please Join us for a review of anatomy and physiology of the head injury. We will also chat about presentation, assessment and treatment of the head injured patient and review some uncommon types of head injured patients using case studies. All provider levels are welcome
Heart Block Shouldn't Cause a Brain Block	Join us for a discussion on the various heart blocks and how to better analyze, assess and treat these different types of rhythm disturbances. We will discuss causes and concerns in deciding courses of treatment and review some strips and different patient presentations

<p>I think my Dad has Dementia, what do I do?</p>	<p>Your parent is getting forgetful, is not keeping up with the finances, looking disheveled. Is he just getting old and needing some general guidance or will you need to become more involved with his daily living? In this class we will discuss signs to look for and how to separate dementia, depression and delirium. This question-and-answer session will cover any concerns that may arise as a caretaker for your parent or others. We will also share other suggestions and resources that may be helpful</p>
<p>I'm in Charge, or Am I?</p>	<p>You're now in a leadership position (Attendant-In-Charge, FTO, Paramedic, Lieutenant, etc.) and people aren't doing what you tell them to do. Why not? This class will discuss positional leadership versus productive leadership and how you can become a better leader in your role.</p>
<p>Integrating Paid and Volunteer Staff</p>	<p>Veteran EMS providers and authors Paul Barnes and Bob Holdsworth will share the events of that call and the aftermath to help you develop both personal resiliency and to help you spot colleagues that might be in trouble.</p>
<p>IO or Oh No: Tools and techniques for difficult vascular access</p>	<p>Vascular access is often a challenge for EMS providers, especially when faced with unique patients. This course will review and demonstrate different methods in obtaining and maintaining vascular access in the field. An overview of complicated patient populations that provide unique challenges for prehospital providers obtaining access in the field will be discussed. We will also review several types of equipment and tips that are available for consideration</p>
<p>Is the Scene Safe? Implementation of a Nurse Safety Assessment Tool to Improve Nurse Situational Awareness and Safety</p>	<p>Healthcare workers work in an environment that exposes them to a number of hazardous conditions and threats while they are providing care to patients. Understanding how to identify threats and hazards in the emergency department (ED) helps to improve perception of safety. The specific aim for this study was to improve the nurse's perception of safety in the ED through situational awareness education and implementation of a nurse safety assessment tool. The tool is based on evidence-based practices from first responder scene safety assessments</p>
<p>Is your Station a Safe Haven? If not, get to work!!</p>	<p>We will keep safe any infant up to 14 days old that is dropped off at our stations until the proper resources arrive to take over care. However, are we prepared and willing to do the same for one of our own? Come be a part of an important discussion on setting the right environment for an all encompassing safe haven</p>

It's ok to NOT be ok	Designed to help providers realize that asking for help is not something to be ashamed of. Teaches attendees how to deal with stress and what resources are there to help them.
Keynote	Every call we respond to makes an impression, leaves a mark or takes a chip out of our armor. Do this job long enough, chips become cracks and cracks can lead to both personal and professional collapses. This session will take you through one call, simple in nature, but with very different results for two responders. For one, a story to be told, for the other a life changing outcome.
Liberal vs Restrictive transfusion strategies in the trauma patient	This presentation will include discussion of the following topics-1. Pros and Cons of the use of crystalloid in resuscitation of the trauma patient2. Definition of Permissive Hypotension and benefits when resuscitating trauma patients3. Benefits and complications associated with blood transfusions 4. Use and benefits of tranexamic acid (TXA) and thromboelastography(TEG) in the acute management of the trauma patient during the resuscitation phase. Current research findings will be incorporated in each topic
Mending the Mind	Improving responders mental well-being. Address the crisis that is at hand ranging from staffing shortages to covid-19. How to care of yourself and crew. Resources that are available both locally and nationally
Mental Health for First Responders	Mental Health for First Responders

<p>My Heart Bleeds for You” ; Heart Anatomy Dissection</p>	<p>Using a pig heart, students will observe the major chambers, valves, and vessels of the heart and be able to describe the circulation of blood through the heart to the lungs and back and out to the rest of the body. (The pig heart is used because it is very similar to the human heart in structure, size, & function.) This class will examine the inner workings of the heart and what makes it work. Each student will work in teams of two and have their own porcine heart to dissect. The heart dissection is probably one of the most difficult dissections you will do. Part of the reason it is so difficult to learn is that the heart is not perfectly symmetrical, but it is so close that it becomes difficult to discern which side you are looking at (dorsal, ventral, left or right.) The heart is also difficult because the fatty tissue that surrounds the heart can obscure the openings to the vessels. This means that you really must experience the heart with your hands and feel your way to find the openings. Following the normal blood flow, we will dissect the heart to examine the different valves, muscle structures, coronary arteries, as well as discuss the various problems that can afflict each of these. You will also have the opportunity to perform a cardiac catheterization with a stent on your anatomical model</p>
<p>Not Everyone is a No-Neck: A review of proper sizing of cervical collars</p>	<p>Cervical spine stabilization is an important skill for EMS providers, however, it is a skill that is often overlooked by providers in the field. There have been many upgrades to C-Collars in the industry and the proper use and application are often overlooked by many providers in the field. We will discuss the increase of policies that decrease the application of spinal stabilization in EMS and the implications of those decisions and policies and how they affect patient outcomes</p>

OB Review through Case Studies	Selected actual OB/GYN case review presentations for the ALS provider. A generous mix of medical and trauma cases to test even the most experienced provider. Each participant will be given the patient's presentation from the EMS perspective and then the case will be followed through the hospital course on to discharge. Participants will be given actual EKG tracings, scene photos, radiographic films, lab values, radio reports, and assessments to determine the case progression. Compare your treatment plan to what actually transpired. See if your patient would have survived. This will be an interactive course with plenty of audience participation. Specific topics will cover Pulmonary Embolism, Ectopic Pregnancy, Placenta Previa, Abruptio Placentae, DIC, Concurrent Trauma, Ruptured Uterus, and Normal pathophysiology of the pregnant patient
Overview of management of the burn patient	Content to be presented include: key principles of resuscitation; pathophysiology associated with burn injury, levels of burns (superficial, partial thickness and full thickness), initial wound management and topicals used in the treatment of burns
PALS / CPR in the cardiac patient	Update everyone the most recent PALS guidelines, and discuss resuscitation in children with cardiac pathologies
Pathophysiology of Shock	Please join us for this presentation that will address the dynamics of perfusion, the response of the body during times of hypoperfusion, and the various types of shock seen in our patient populations
Pediatric Cardiovascular Emergencies	If the thought of pediatric cardiovascular emergencies makes you want to throw up on your shoes well, look no more for a better understanding and confidence for these small patients. Please join us for a discussion on the etiology, presentation, assessment and management of pediatric cardiovascular emergencies. We will also discuss important and potentially serious historical factors in the providers decision making. All levels of providers are welcome
Pediatric Mental Health Pharmacology	An overview of the medications used for pediatric mental health and which diagnoses they may indicate. The neurotransmitters involved will be described and how they can be affected by different medications. Emergency care for overdoses will be explored. An overview of the diagnoses is included
Pediatric Neurological Emergencies	In this presentation we will discuss many of the top situations that can cause neurologic emergencies in the pediatric patient

Pediatric Respiratory Emergencies	Join us for a discussion on the various respiratory diseases and insufficiencies seen in an out of hospital EMS environment. We will discuss the pathophysiology, assessment, treatment and transportation of this unique patient population. All levels of providers are welcome
Pediatric Submersion Injuries	Please join us for this presentation of a difficult topic. We will discuss the etiology and pathophysiology of submersion injuries, community risk factors for water hazards and family discord and responder recovery post incident. All level of providers are welcome and encouraged to attend
Pediatric Trauma Case Studies for Prehospital Providers	Please join us for this interactive presentation of pediatric trauma case studies from an EMS perspective. This topic focuses on the management of the incident, assessment, triage and treatment of these unique patients. All levels of providers are welcome
Pediatric Traumatic Brain Injury	A child's response to head injury can be subtle as well as devastating. There are things health care professionals can do lessen the impact of the injury to a pediatric patient
Pediatrics, Parents and Pitfalls	This discussion will be based on 30 years of taking care of critically ill children Dusty has discussed with many of her parents things that they wished all health care providers knew about taking care of their sick children
Prehospital Case Studies of Cardiovascular Emergencies	Please join us to discuss both typical and atypical presentations and management of various cardiovascular emergencies in an out of hospital environment using actual cases. Cases will involve both adult and pediatric cases, all levels of providers are welcome
Push-Dose Vasopressors, A Paramedic Field Guide	This presentation will discuss pathophysiology of vasopressors, when to use push-pressors, selection of the best vasopressor, realities of carrying pressors, and will utilize cases to illustrate the challenges of adding push-pressors to the paramedic's arsenal of tricks. The case discussions will walk through a timeline from patient contact through stabilization and highlight the specific tasks needed to successfully manage hypotensive patients with pharmacology. Additionally, there will also be discussion of why medical directors and agency administrators get nervous about putting push-dose vasopressors in the drug box
Sepsis and EMS role in identifying and management	Defining what sepsis is and what it isn't followed by patient cases highlighting the more rarer causes of sepsis and how EMS plays a critical role in early identification and management

Special Calls with Special Needs	As first responders, we have been trained to care for patients among many different ages with different needs. However, in an EMS course we many not have been prepared how to handle patients with special needs and disabilities. We commonly think of patients with disabilities as people who may use a wheelchair or have physical challenges. In reality, it is a much bigger population that we need to be prepared for in order to best care for and treat our patients
Squeezing the Life out of Me - Crush Injuries	Injuries from crushing forces seem to have become more common place in society. Earthquakes and explosions seem to have become more frequent. The advances made in the technical aspects of confined space rescue have allowed living victims to be pulled from rubble instead of dead bodies. This has created a need to devise and standardize treatments for crush injuries and crush syndrome. However, less glamorous but much more common will be the immobile patient such as the inebriate or elderly patient. We will talk about crush injuries, compartment syndrome as they relate to actual case presentati
STEMI	Recognition and Intervention
STEMI/NSTEMI or No-STEMI - What's It All Mean?	This class will look at the difference between STEMI and NSTEMI cases in terms of presentation, diagnosis, and management of these different ACS syndromes
STEMIs aren't the only type of MI	Not the only type of heart attack. Better understand Acute Coronary Syndrome and differentiate between STEMI, NSTEMI, demand ischemia and other causes of cardiac damage.
Take the Strong Road	Strong is wanting more for yourself and from your life; being yourself and living life on your own terms; acceptin that change is essential for growth; accepting responsibility and admitting you have work to do; asking for and welcoming help. This is all about you. Where you are, where you want to go, what's keeping you from getting there, It's a self-assessment like no other. No person is an island but when we are stressed, depressed, overwhelmed, weoften go against our DNA and isolate. We will explore what happens and ways to re-engage with family and friends and also how to remove the toxic relationships from out lives. It's YOUR life... live it on your own terms... Take the Strong Road.

That Dude is Bat-\$\$@ Crazy: Excited Delirium	We will examine this variant of the non-complaint patient. This session will examine the difference between the “normal” violent / non-compliant patient and those experiencing excited delirium. We will explore predictors of violent behavior and then the session will explore the various treatment modalities (physical restraints, chemical agents) available to the prehospital EMS provider
That Little Punk A-Fib!	This class will look at all we know about our dear malfeasant friend atrial fibrillation with an emphasis on management for stable and not so stable patients.
The Art and Delivery of Paramedicine: Beyond the Science	How to provide a positive customer service experience for your patient
The Heart Block Academy	This class will look at the many origins of heart blocks and how they can adversely affect our patients. We will discuss real cases and see if you can identify the block!
The Misbehaving Child	The calls for children that have become unruly are increasing. They are usually scenes of mass confusion and many chiefs with few Indians. This presentation explores the common diagnoses of childhood mental health disorders and techniques which may assist in managing the situation
Total Patient Management	This is an 8 hour course designed to place the provider into real time situations of scene management, team leading, direct patient management to include assessment, triage, treatment and documentation of various patient scenarios. Please dress to get dirty and bring a change of clothes as you will get messy, all participants will take turns as moulage patients please come prepared with appropriate physical training attire (i.e. shorts, t-shirts, sports bra) that can get messy. All participants must be 18 years or older and all levels of providers are encouraged to attend.
Toxicology Case Studies	We will utilize case presentations to distinguish toxic exposures , formulate potential complications arising from these toxic exposures and then select the treatment modalities for the present toxic emergency. Topics covered in Acetaminophen, TCA’s, organophosphates, Beta Blockers, Ca Channel Blockers, Recreational drugs

Trauma Case Reviews for the Advanced Provider	Each participant will be given selected actual case review presentations for the ALS provider (I can't make this stuff up, I am not that creative and fact far outweighs fiction). These are all actual trauma cases to test even the most experienced provider. Each participant will be given the patient's presentation from the EMS perspective and then the case will be followed through the hospital course on to discharge. When available, participants will be given actual EKG tracings, scene photos, radiographic films, lab values, radio reports, and assessments to determine the case progression. Compare your treatment plan to what actually transpired. See if your patient would have survived. This will be an interactive course with plenty of audience participation
Treating Kids Like Little Adults: A Paradigm Shift in Pediatric Emergency Care	Have you ever wondered why pediatrics causes so much anxiety for pre-hospital providers? Why is it that even with years of experience pediatric resuscitation never seems to get any easier? The answer is based on scientific evidence that describes the brain's function during stress. Join Dr. Antevy for an enlightening talk that may finally convince the EMS profession to treat kids like little adults!
Understanding the dynamics of airway management, or not	This discussion will review the aspects of and differences of ventilation vs respiration; including pathophysiologic factors that enhance or impede these process in our patients
Virginia Beach Municipal Building Shooting	This course will go through the events of 5/31/19 highlighting the public safety response as well as the follow-on actions once the patients were transferred from the scene to include EOC operations, family reunification, memorials and media relations
Wading Into Chaos	This presentation focuses on provider health and dealing with the stresses associated with working in the field of emergency medicine and public safety
Walking in Their Shoes -- An Aging Sensitivity Training	"Getting old is for the birds", "It won't happen to me", "I'm young at heart". We've all heard these expressions, if not said them! Let's look at what it means to get old, some of the characteristics and the impact it has on you and others. "Let's Walk a Mile in their Shoes" using this interactive training about aging in society. This will allow you to better relate to the senior population you may encounter

What can Nightingale do for you?	Scott will touch on common misconceptions of using a medical helicopter for transport in urban and rural settings. He will provide Fire-Rescue members, nurses, and physicians with some determining factors of the fly-not-fly decision matrix they should consider
What Goes Up, Must Come Down: The Highs and Lows of Illicit Drug Use	This presentation will be focusing on prevalence of recreational drug use and their effects on people. The objective is to bring awareness to the EMS responder so that you can better recognize when someone may be under the influence and have an idea of what to expect during the course of your care. This program will discuss current trends in street/ recreational drug use providing drug overview, treatments and response considerations
What to Look For if Someone is Overdosing	What to Look for if Someone is Overdosing
What's Happening?	This presentation will discuss a simple way to interpret 12 lead EKG's to insure the team gives the appropriate care based on whats happening in the coronary vessel(s). After you drop your patient off in the Emergency Room or in the Cardiac Cath lab, have you ever wondered what they do in there? We will discuss the roles of the Cath Lab staff, typically catheterization process, review images of actual interventions, and get hands on experience with the wires, catheters, balloons, and stents
What's the Difference? -- Dementia vs Delirium	You respond to an emergency; it appears to be a mental health crisis from a senior - one of the many Baby Boomers you may encounter. What are the signs and differences between delirium and dementia? How do you know if the person is cognitively intact? We will discuss the basic differences between these and how this could impact your effectiveness in providing treatment
When Laughter Dies	This presentation will address PTSD within fire/EMS/public safety. The presenter will use personal experience to offer attendees insight into treating and managing PTSD
When Pigs Fly, Organizational Leadership Strategies for a New Millennium	Please join us for a discussion on leadership strategies in an ever changing environment presenting challenges to both formal and informal leaders. We will also discuss functional strategies for new supervisors and company officers
Where Have All the Leaders Gone	Join us for a discussion on leadership that is centric from the inside provider to the outside end user of our services, the customer. Leadership isn't all about the warm and fuzzy

Wound packing and bleeding control	Do you know how to apply a tourniquet? More importantly do you know how to improvise when you are without equipment? We will demonstrate how to use the common advanced bleeding control methods using commercial equipment as well as what tools are available in the event that you have no equipment on hand
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