Can You Make the Diagnosis?

An 88-year-old male unaware that his Life Alert button discharged did not respond to the corresponding phone call. 911 was activated and paramedics were dispatched. The home was found to be dark and locked. The patient did not respond upon paramedic arrival, and no entry point was attained. Police were called to the scene, and dispatch was able to determine a daughter was nearby. The police and fire department entered the home after the daughter opened the door.

The patient was subsequently located in a downstairs bedroom pointing a .32 caliber revolver as the door to his room was opened. Police attempted to have the patient relinquish his weapon to no avail. The patient’s daughter was brought in and had convinced her father to release the gun. When the police moved in to secure the patient, he reached for the gun and the police utilized a Taser on the patient to secure the scene.

Paramedics then re-entered the home and found a confused elderly male sitting on the edge of his bed with the police and his daughter at his side. Paramedics noted a 12-gauge shotgun and several handguns were being removed from his bedroom. The patient was oriented to person and place but unaware that his Life Alert button activated and had confused responses to other questions. His vital signs were stable and he was found to have puncture wounds to his abdomen. The paramedics left the scene to bring the patient to the hospital, leaving the police and daughter in a heated discussion.

What is known about the physiology of Tasers and what are your concerns for these patients?

A Taser is an electroshock weapon that uses electrical current to disrupt voluntary control of muscles, causing neuromuscular incapacitation. Jack Cover, a NASA researcher, developed the Taser in 1969, naming it after his childhood hero, Tom Swift (Thomas A. Swift’s Electric Rifle). It initially used gunpowder as its propellant and was classified as a firearm. The electric current imparted interrupts the ability of the brain to control the muscles in the body. This creates an immediate incapacitation that is not based on pain and cannot be overcome. Once the electricity stops, a subject immediately regains control of his or her body. Tasers provide a safety benefit to police officers as they have a greater deployment range than batons, pepper spray or empty hand techniques.

They also can be considered to be a safety benefit to wildly agitated and uncontrollable patients possibly under the influence of toxic substances and potentially wielding a weapon who might otherwise get clubbed, choked, maced or even shot. Individuals with excited delirium have the best chance of survival if their menacing behavior and violent struggling, acidosis, and hyperthermia are quelled as soon as possible.

The Taser fires two small dart-like electrodes, which stay connected to the main unit by conductive wire as they are propelled by small compressed nitrogen charges similar to air gun or paintball marker propellants. There are a number of cartridges designated by range, with the maximum at 35 feet. The electrodes are pointed to penetrate clothing and barbed to prevent removal once in place. Newer Taser models (X26, C2) use a shaped pulse that can penetrate thicker clothing.

Eventually, a non-firearm electronic control device was developed, leading the U.S. firearms regulator to reclassify the Taser as a non-firearm. In the last 15 years, the technology has evolved into a handgun-shaped device using neuromuscular incapacitation that can fire three shots before it must be reloaded.

Inside

Policies Clarified for Posting Exams, Instructor Guide Online

Version 3 7th Ed. Post-Tests Released; Pre-Tests to Come

Highlights of 2012 International Trauma Conference

pg. 2  pg. 3  pg. 4

Art Proust, MD, FACEP
Can You Make the Diagnosis?

Numerous attempts have been made to clarify the exact effects of the Taser on humans and it has, therefore, been very difficult to convince the media and public that Taser utilization doesn’t cause cardiac, respiratory, or metabolic derangement.

However, the U.S. Department of Justice released the results of a well-designed Taser safety study completed in June 2009. The researchers concluded that:

1. There is no indication that respiratory function is significantly altered by a standard 5-second exposure.
2. There was no evidence of significant alteration in cardiac function (no induction of ventricular fibrillation or asystole), or evidence of cardiac muscle damage or ischemia based on post-exposure ECG and cardiac enzymes when measured from baseline.
3. Subjects were awake, alert, and able to function normally immediately after Taser discharge ended.
4. There was no evidence of cardiogenic shock type symptoms of dizziness, syncope, or altered mental status.
5. Serotonin levels were not altered to a degree to induce Serotonin Syndrome.

Issues still being debated are its legality in certain jurisdictions, as well as its use in the elderly.

Our patient was evaluated in the ER and had an essentially unremarkable workup, sustaining no cardiac or neurologic injury. He was admitted to Observation and subsequently discharged with Home Health Services following the patient to ensure his safety.

ITLS Policies Clarified for Posting Exams, IG Online

The ITLS Editorial Board recently clarified policies about acceptable use and circulation of the ITLS exams and the Instructor Guide. There had been much confusion among coordinators worldwide about where and how it is acceptable to make the ITLS exams and the Instructor Guide available.

The ITLS Post-Tests and Answer Keys as well as the Instructor Guide may not be posted online nor circulated except to approved instructors or course coordinators. If post-tests or the Instructor Guide are available online to approved instructors, the site must be password-protected to prevent unauthorized downloading of the files.

Be aware that some search engines may crawl your website and return in their results a link directly to the file, bypassing the password protection. It is very important, if you choose to make these restricted files available online, that you ensure the major search engines are blocked from returning content from these pages to prevent this problem. The easiest way to confirm this is to use several different search engines to look for key terms and evaluate any results it returns from your website.

The ITLS Pre-Tests and Answer Keys, however, may be posted online for students and circulated, as these documents are educational tools to identify the areas students need to study. Coordinators are permitted to post both the Pre-Test documents and the answer keys online as desired, to give students the opportunity to complete the Pre-Test in advance of the course and then determine which questions were missed in order to allow for more study on those subject areas.

ITLS Advisory Committee Welcomes 2 New Members

In 2012, the ITLS Illinois Advisory Committee welcomed two new members: Eric Beck, DO, EMT-P, and Edward Kemnitz, EMT-P.

Dr. Beck is an ITLS Illinois medical director and EMS Medical Director of Chicago EMS and Chicago Fire Department, as well as Assistant Program Director of the University of Chicago Emergency Medicine Residency.

Mr. Kemnitz is an ITLS Illinois course coordinator and Affiliate Faculty, and Director of Operations with Decatur Ambulance Services in Decatur.

The Committee is chaired by ITLS Illinois Chapter Medical Director Art Proust, MD, FACEP.
Version 3 7th Ed. Post-Tests Released

Based on data analysis of answer sheets collected from coordinators from chapters around the world, the ITLS Editorial Board has again revised the 7th edition ITLS post-tests and Version 3 is now available.

Thanks to all of the Illinois course coordinators who submitted 7th edition Post-Test answer sheets for data analysis.

All ITLS Provider courses going forward should use Version 3 post-tests. Earlier versions of the post-tests should be discarded.

The Editorial Board is at work revising the Pre-Tests, with new Pre-Tests expected to be released at the end of April. Watch your email for the new tests to be sent from ITLS Illinois Chapter Coordinator Sue McDonough.

New Patient Assessment Scenarios & Revised Instructor Guide
The case scenarios for the practical testing portion of the Basic and Advanced courses have been rewritten. All Illinois instructors and course coordinators should discard the old scenarios and replace with the new ones.

The original scenarios were compromised when they were posted by another chapter on an open website.

The Instructor Guide has also been updated with the new scenarios; make sure you have downloaded and are using the most current file to include the 10 new scenarios (instead of the 13 originally included.)

If you need the revised post-tests, scenarios or Instructor Guide, please contact ITLS Illinois Chapter Coordinator Sue McDonough at suem@icep.org or 630.495.6400, ext. 201, to request them.

ITLS International News and Notes

The ITLS Military Task Force and Editorial Board continue their work on the revision of the ITLS Military Provider manual and instructor materials.

The textbook is expected to be published and available for purchase in late summer. More details will be announced as they are available.

7th Edition eTrauma
The ITLS Editorial Board and Pearson are in the last stage of finalizing ITLS eTrauma to update to the 7th edition Provider manual.

The new 7th edition ITLS eTrauma package will be available for purchase from Pearson within the next two weeks.

As with the 6th edition, the standard package will include a textbook, but organizations may opt to purchase stand-alone access codes in bulk for training larger groups of students.

7th Edition Instructor Update Online Program Extended
The ITLS Board of Directors announced in January that the deadline to complete the ITLS 7th Edition Instructor Update Online has been extended to June 30, 2013. All instructors must complete the online program by this date in order to maintain current instructor status.

If you are an Illinois instructor who has not yet completed the Instructor Update Online, please do so immediately in order to maintain your instructor status.

As a reminder, all Illinois medical directors must also complete the Instructor Update to be eligible to serve as course medical director for future courses.

More information and a link to register for the program online can be found at ITRAUMA.org/instructor. The cost is $25.

If you have questions about whether you need to complete the Instructor Update Online, please contact ITLS Illinois Chapter Coordinator Sue McDonough at suem@icep.org or 630.495.6400, ext. 201.

ITLS Rolls Out New Black Instructor Polo Shirt for Purchase
A limited-edition black polo shirt to commemorate the 30th anniversary of ITLS is now available. The cost of the polo shirt is $32.

The shirt is a short-sleeved black polo with the ITLS logo and “INSTRUCTOR” embroidered on the left chest. The left sleeve is embroidered with “30th Anniversary” as well.

Polo shirts are available in sizes S through 2XL and can be purchased by calling the Bookstore at 630-495-6400, ext. 213, or emailing bookstore@icep.org. Tax and shipping charges will also apply.
The 2012 International Trauma Conference on November 9-11 at Walt Disney World Resort Florida, was a success, attracting 215 physicians, nurses, physician assistants, and EMS personnel from 20 countries and territories worldwide.

The Illinois Chapter was well-represented at the conference. Nine voting delegates were present, with a total of 12 representatives from Illinois in attendance. Serving as delegates were: Dr. Art Proust, Dr. Walter Bradley, Dana Carr, Tony Cellitti, Michael Crabtree, Edward Kemnitz, Amy Ludford, Rosemary McGinnis, and Deb Ward.

Representatives from Australia, Brazil, Canada, China, Colombia, Croatia, Germany, Hong Kong, Iraq, Ireland, Italy, Japan, Palestine, Puerto Rico, Saudi Arabia, Slovenia, South Africa, United Kingdom, United States, and U.S. Virgin Islands were also in attendance. It was one of the largest representations of international ITLS delegates to date.

The conference focused on a celebration of ITLS’ 30th anniversary and included a Welcoming Reception in which past and present members of the Board of Directors gathered to share memories. A short 30th anniversary video opened the conference educational sessions the next day; view the video online at ITLS’ Facebook page (Facebook.com/ITLStrauma). ITLS President and Founder Dr. John Campbell also gave a presentation showcasing the history of ITLS from its roots as BTLS in Alabama in 1982.

Board Members Elected
ITLS chapter delegates elected three members to the organization’s Board of Directors:

- Jonathan Epstein, MEMS, NREMT-P - incumbent (Massachusetts)
- Pete Gianas, MD - incumbent (Florida)
- Wilhelmina E. Nel, MD - incumbent (Alberta)

Serving as officers in 2012-2013 are:

- John Campbell, MD, FACEP - President
- Sabina Braithwaite, MD, MPH, FACEP, NREMT-P - Chair
- Neil Christen, MD, FACEP - Vice Chair
- Jonathan Epstein, MEMS, NREMT-P - Secretary-Treasurer
- Tony Connelly, EMT-P, BHSc, PGCEd. - Member-at-Large

Bill Pfeifer, MD, FACS, completed his term on the Board and was recognized for his enduring service. He continues to serve on the Editorial Board.

Voting delegates also elected Vickey G. Lewis, RN, BSN, CEN, EMT (North Carolina) to the position of Speaker, and Jeff Gilliard, NREMT-P, CCEMT-P, FPM, BS (Florida) to the position of Vice Speaker.

Continued on Page 5
The 2013 International Trauma Conference will be held November 7-9, 2013 at the Westin Bayshore in Vancouver, British Columbia, Canada.

Preconferences and the Welcoming Reception will be held on Thursday. The conference will be on Friday and Saturday.

Among the many topics on the conference educational program:

- Noted EMS author Dr. Bryan Bledsoe on spinal immobilization and ophthalmic emergencies
- Former National Park Ranger Dr. Harry Sibold on improvisational emergency care in wilderness and austere environments
- Popular EMS educator Mike Helbock with interactive video case studies to demonstrate the Sick Not Sick concept for treatment and transport strategies
- Spotlight on emerging technologies in trauma care, including lactate measurement, tranexamic acid, hemostatic agents, and the field use of ultrasound

The full conference brochure will be available this summer. For more details, including hotel information and reservations, visit ITRAUMA.org/conference.
For the most updated list of upcoming courses in ITLS Illinois, including registration information, please visit http://cms.itrauma.org/CourseSearch.aspx. You do not need to log in to access this page.

To return the most results, enter Illinois as the Chapter and leave other criteria fields blank. This will return all ITLS courses in Illinois currently entered into CMS.

If you need additional help, please contact Chapter Coordinator Sue McDonough at suem@icep.org or 630-495-6400, ext. 201.

Here are a few upcoming courses open to the public in Illinois:

**APRIL 12, 2013**
Combined Provider Recert
Coordinator: Shelley Peelman
Provena Regional EMS
Champaign, IL

**APRIL 13-14, 2013**
Combined Provider Course
Coordinator: Sheri Barnett
Sarah Bush Lincoln EMS
Mattoon, IL

**APRIL 19-20, 2013**
Combined Provider Bridge
Coordinator: Robert Hyman
North Egypt EMS
Mount Vernon, IL

**APRIL 20-21, 2013**
Combined Provider Course
Coordinator: Tony Cellitti
New Milford FPD
Rockford, IL

**MAY 7, 2013**
Combined Provider Recert
Coordinator: Dale Tippett
Peoria Area EMS
Peoria, IL

**MAY 8-9, 2013**
Combined Provider Course
Coordinator: Dale Tippett
Peoria Area EMS
Peoria, IL

**MAY 11-12, 2013**
Combined Provider Course
Coordinator: Tony Cellitti
Hebron-Alden-Greenwood FPD
Rockford, IL

**MAY 15-16, 2013**
Combined Provider Course
Coordinator: Debbie Woelfel
Alton Memorial EMS
East Alton, IL