

TriHealth Emergency Journal

McCullough-Hyde Memorial Hospital: A Magnet Journey

McCullough-Hyde Memorial Hospital is gearing up to participate with the rest of TriHealth in Magnet site visits in 2021. Although that may seem like a long way off, there's much to be done to get ready.

TriHealth Professional Excellence Specialists Amy Keller, MSN, RN-BC, and Zakiyah Thurman, MSN, RN, CMSRN, ONC, have met several times with the Professional Excellence (PE) Champions and report that excitement is building for their Magnet journey.

For Pam Collins, MSN, RN, FACHE, Chief Patient Services Officer, being involved in Magnet has been a dream of hers since she read the studies that initiated Magnet in the early

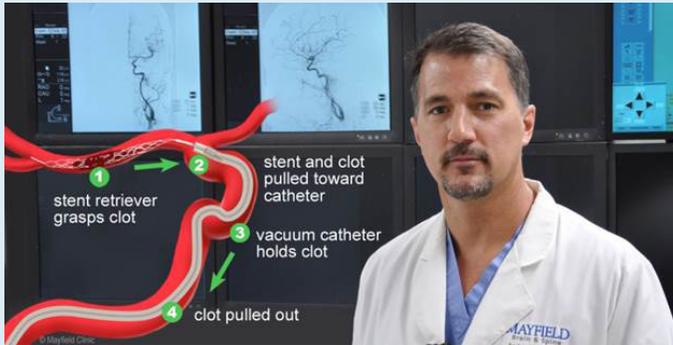
1980s. "At that time," Collins says, "researchers were trying to determine why some nurses were staying at their jobs while others were 'job-hopping.' The studies confirmed that nurses wanted to be in environments where they had a voice and where they could learn to be excellent in their roles."

These early studies, Collins says, led to the principles underlying the Magnet Program. "I knew at the time that our site was too small to do the formal Magnet Program, but we could still be 'magnetic' and increase our performance standards. Now we're thrilled to be starting this journey of excellence."



Thrombectomy for Large-vessel Occlusion

Revised guidelines for emergency stroke treatment are benefiting patients at TriHealth's Good Samaritan and Bethesda North hospitals. Both have the specialized imaging and clot-retrieval devices needed to treat patients who have strokes caused by large-vessel occlusion.



The American Stroke Association issued new guidelines in 2017 after studies found that patients who had suffered an ischemic stroke many hours earlier did better if their clot was removed with a retrieval device—a procedure called a thrombectomy—than if treated with medication alone. Large-vessel strokes can be safely treated with thrombectomy up to 16 hours after a stroke in select patients. Some patients may have up to 24 hours.

The widely expanded treatment window applies to a small subset of patients who wake up with stroke symptoms or for some other reason do not know when their stroke began. Specialized MRI or perfusion CT scans must reveal that the territory of stroke is small, while the blocked artery is large. If we get the clot out, the stroke stays small and the patient can recover.

Andrew Ringer, MD

Acute Stroke Readiness Bethesda Butler



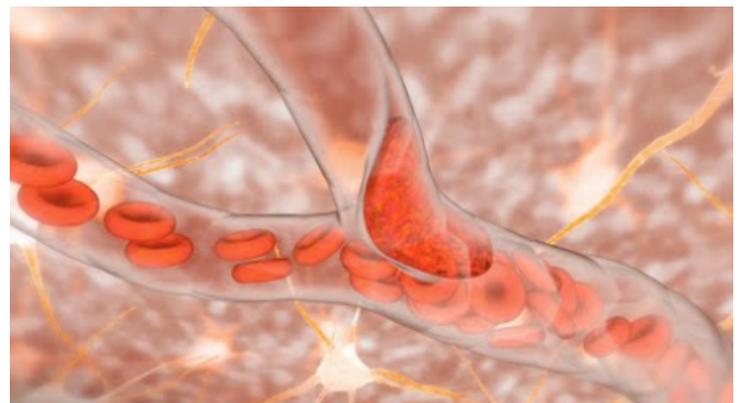
Care of patients with acute stroke is evolving rapidly, and while more treatment options are available, Alteplase is still found to benefit more patients suffering from embolic strokes than any other treatment option. And its use continues to evolve. As a health system, TriHealth realizes that timing is critical when treating Alteplase-eligible embolic

strokes. Establishing a diverse stroke certification program that includes comprehensive, primary and thrombectomy-capable facilities, in addition to acute stroke ready capability, enables our stroke patients to receive the most advanced stroke care as close to home as possible.

As a certified Acute Stroke Ready Hospital, Bethesda Butler has the processes (Door-to-CT time) and ability to treat all Alteplase-eligible patients in our Emergency Department as aggressively and as timely as any emergency department in our region. We partner with the Cincinnati Stroke Team and Mayfield Institute to ensure that our patients are receiving the most up-to-date care available anywhere.

Our inpatient department at Bethesda Butler Hospital has specialized training to quickly recognize stroke, provide initial treatment and transfer patients to a higher level of stroke care as needed. Our stroke educators are working tirelessly with local EMS providers and other community leaders to ensure that stroke patients are identified and treated as quickly and as aggressively as possible. Recent advances in stroke care have led to outcomes that we only dreamed of 10 years ago. With stroke care evolving so rapidly, we look forward to staying on the cutting edge of stroke care here at Bethesda Butler Hospital.

Wyman Morriss, MD



Calling Ahead for EMS

Thank You for calling ahead. The hospitals truly appreciate it. This step helps hospitals prepare for EMS arrival. They enjoy helping EMS with their turnaround time. It also provides a jump start in hospital patient care. Calling ahead allows hospitals to notify different departments such as Respiratory, Imaging, etc.— prepping them for EMS arrival.

| EMERGENCY DEPARTMENT | NOTIFICATION NUMBER |
|-----------------------------------|---------------------|
| Bethesda Arrow Springs | 282 7000 |
| Bethesda North Hospital | 984 8375 (865 1112) |
| Bethesda Butler Hospital | 893 8222 |
| Good Samaritan Hospital | 221 5818 |
| McCullough-Hyde Memorial Hospital | 524 5353 |
| Good Samaritan Western Ridge | 246 9926 |

Drug & Poison Information Center



Prehospital Snakebite

“Young primates appear to be born with only three inborn fears - of falling, snakes and the dark.”
Carl Sagan. The Dragons of Eden.

Venomous Snakebite

Ohio has three species of venomous snake: timber rattlesnakes, pygmy rattlesnakes and copperheads. Most snakebites occur between April and October, in the early evening, when snakes and people are most active outdoors. Males are most often bitten, usually on the upper extremity (80%) or on the foot or ankle (15%). Bites that occur when handling snakes are considered “illegitimate” and often occur when the victim is intoxicated. Snakes can strike about two-thirds their body length, at a 45° angle and a speed of 2 to 3 meters per second. They can strike from any position and can control the amount of venom injected. Because humans are not prey and the snake may be confused, injured or trying to escape, many human bites involve minimal or no envenomation. Many (30 to 50%) of human bites are considered “dry” or minimal and few or no symptoms develop. Pain and swelling are the most common complaints. Allergic reactions to bites are rare and should be treated as any acute allergic reaction. Antivenin is the only definitive treatment, and victims should be transported to a hospital that has the appropriate antivenin. No first aid treatment has been shown to be useful.

Nonvenomous Snakebite

Bites by nonvenomous snakes are more common than venomous snakes, and large snakes may cause significant injury. Removal of the snake and then removal of any foreign bodies such as teeth should be done. Snake teeth may be quite small and transparent and a magnifying glass may be needed. The area should be cleaned and antibiotic ointment and dressing applied. Bites from large snakes involving deep soft tissue injury should be splinted, as fractures may be present. These cases should also be given prophylactic antibiotics such as a second generation cephalosporin or ampicillin-clavulanate.

Prevention

Snakes have no external ears but hear through vibrations picked up through solid objects. Snakes will almost always attempt escape when possible to avoid confrontation with larger creatures. Human footsteps are usually adequate to alert snakes and allow them to escape. Caves, rock ledges, old buildings and river banks are common places where snakes can be found. Do not handle snakes. Even a dead venomous snake can reflexly envenomate you.

Edward J. Otten, MD, FACMT, FAWM

University of Cincinnati
Board Certified Medical Toxicologist
Professor of Emergency Medicine and Pediatrics
Director – Division of Toxicology– Drug & Poison Information Center

EMS providers can seek medical guidance for snakebites and other toxicological emergencies by calling the DPIC at **1 800 222 1222**. It's a free call.



Active Shooter/Stop the Bleed Program

Severe hemorrhage is a life threat. A traumatically injured person can bleed to death in 10 minutes or less. In the event of a major emergency, a rapid reaction by a trained public can mean the difference between life and death. No one should die from a preventable death due to uncontrolled bleeding.

This is a fun, hands-on, easy-to-learn class. There are certain professionals who can become instructors after successfully completing the class. TriHealth is providing bleeding control awareness and promoting Stop the Bleed trainings. Our goal is to educate community groups, office workers, factory workers, scouts, teachers, etc.

TriHealth is also working to educate our employees. Recently TriHealth team members at the Anderson Campus enjoyed the practical experience. They learned Active Shooter procedures and Stop the Bleed life-saving techniques. We would enjoy bringing the Stop the Bleed program to you and your group. If you are interested in partnering with us to teach community classes, please contact debra_walker@TriHealth.com.



May is Stroke Awareness Month

F

Does one side of the **FACE** droop?

A

Does the **ARM** drift downward?

S

Does the **SPEECH** sound slurred or strained?

T

There's not a lot of **TIME**.
Call 911.

A stroke is treatable if you act **FAST**.

Bethesda North - Verified Trauma Center

Bethesda North Hospital is the only American College of Surgeons verified Level III Trauma Center in Hamilton County providing immediate and coordinated response to all traumatic injuries. Our Trauma Team is comprised of specialty trained trauma nurses, ED physicians, trauma surgeons, orthopedic surgeons, neurosurgeons and other medical and surgical specialists. Bethesda North's Trauma Program works collaboratively with local EMS partners to provide patients with the highest level of care, beginning at the time of injury. In 2018, Bethesda North Hospital provided care to over 1,000 patients with traumatic injuries from falls, motor vehicle crashes, penetrating trauma or industrial accidents.



AMERICAN COLLEGE OF SURGEONS
Verified Trauma Center

Trauma prevention and education is one of the many services we offer to the community through grant-funded programs such as Hamilton County Safe Communities (HCSC). This program uses multiple strategies, including education, public awareness and high-visibility enforcement, to improve traffic safety and to reduce and ultimately prevent motor vehicle crashes, injuries and fatalities. HCSC promotes awareness of distracted driving, pedestrian safety, motorcycle awareness, and other specific traffic-related issues through collaboration with local law enforcement, schools, media and other community partners including Xavier University and the Cincinnati Bengals.

Our Trauma Program is comprised of 11 trauma surgeons ensuring swift, excellent care for all injured people, regardless of gender, race, religion or ability to pay. Bethesda North Hospital's Trauma Program is dedicated to every aspect of trauma care from injury prevention and education to providing the highest level of integrated care and follow up for all types of traumatic injuries.

Randall Johann

Fire/EMS Leadership Symposium

In April, TriHealth sponsored a Fire/EMS Leadership Symposium at Harrison Fire Department. The Fire/EMS Symposium supported topics geared to developing strong leaders in EMS.



EMS Week

EMS Week: May 19-25

TriHealth appreciates all you do!

Make sure to stop by your TriHealth Hospital to pick up your EMS token of appreciation.

And enjoy enhanced refreshments during the week.

EMS  **STRONG**
BEYOND
THE CALL



Fairfield Township Fire Department

Fairfield Township has been actively discussing the replacement of our **Tylersville Road Station** since before 2006. Last year the Township authorized a \$4 million budget for the replacement of our 1947 vintage building and entered into a contract with Cincinnati United Contractors for the new building. The Township had purchased property and allocated three acres for the new building.

The building was designed to allow for growth of the fire department. We currently staff six positions and have designed the new facility to accommodate 10 people.

The building was completed this spring and dedicated May 11.



Ohio Health Collaborative Corner



EMS Agencies Receive OHTrac Training

During a mass casualty incident, the tracking of a person or victim is crucial to successful family reunification. In Ohio, the potential for a mass casualty disaster can result from a number of events including: severe weather (blizzards, floods, etc.), aviation accidents, motor vehicle collisions on our extensive interstates, not to mention the feasibility of a pandemic event. The Ohio Department of Health has

identified the need for a standardized statewide patient tracking system to assist with family reunification during such an event.

OHTrac is a secure, password protected web-based database that will assist hospitals and agencies with the ability to track people affected by a mass casualty incident. Using patient demographic information entered by health care providers and/or first responders, the system has the ability to track patients from the scene, to their arrival at a health care facility and through discharge. In doing so, OHTrac is instrumental in assisting with response to an event along with facilitating family reunification efforts.

The Health Collaborative is in the process of training EMS departments across the region to have the ability to add patients to OHTrac on the scene of an incident, using barcoded triage tags and a smartphone/tablet application. If your agency is interested in learning more about OHTrac, please contact **Josh Boyd** (jboyd@healthcollab.org).

Attention All Ohio Fire Departments

Introducing the Ohio FACE (Firefighters Attacking the Cancer Epidemic) Team

Our Vision

To keep Ohio Fire Rescue departments free of occupationally related cancer exposures, incidents and a fire service created where all members are empowered with the desire, knowledge and abilities to capture and sustain our mission.

Mission Statement

This mission of Ohio FACE is to identify all contributing factors to the alarming cancer rates among members of the fire service. And with that, to create methods of reducing or eliminating these factors. We will do this through research, education, prevention and support. Our mission will be driven by this one purpose and commitment to improve the health and lives of the fire personnel.

Priorities

1. Awareness
2. Education
3. Prevention
4. Action

The team may solicit ideas and suggestions from management, members of the organization or simply the team members.

Possible priorities might include:

- Prevention
- Clean Cab
- Gross On Scene Decon of personnel and gear at fire scenes
- Diesel exhaust capturing
- Accessibility to advanced cleaning for gear
- Share your goals and accomplishments
- Schedule regular meetings with your administration to keep them informed and supportive of the team's effort. Publish minutes, a newsletter and department-wide e-mail to keep your department personnel updated as to the progress and direction of the team.
- Be encouraged that you're bringing health and quality of life for our fire service. The work, energy and commitment of all members will impact lives from this day forward.
- Be consistent and persistent but patient.

Chief Kevin Hardwick

For More Information:

For more information or to become part of the change with Ohio FACE team, please contact:

Chief Kevin Hardwick

513 218 8385

Khardwick@glendaleohio.org



We had our inaugural meeting to get the idea out and to start building the group on Wednesday, Jan. 30, at Forest Park FD Station 42. We have the people who started the Florida team helping us get our team started and providing material and information to eliminate wasted time.

Our goal quite simply is to provide information and to help departments in making decisions to benefit firefighters here in Ohio. We all want to make this as safe as possible. Working together as a group will give us more of an impact in getting things done. We have a talented group of people to provide guidance as we move ahead. We will likely see many new requirements come from all levels of government. We can be a part of that decision-making process while on the development side of the plans.

Since the inception of the team, we have been building a comprehensive group of fire department personnel, research and cancer treatment staffs, educational personnel and support groups. This is going to be a statewide organization.

We need your help. We need your participation and interest. We will provide you with all the resources and data that is out there. We can share policies and procedures with best practices. Our website is being built as we speak. The Ohio FACE Team will be at the Ohio Fire and Rescue Officer Development Conference (Ohio Fire Chiefs) in Easton in July with presentations over two days. We have the top research people in the country attending to have a discussion panel about the cancer problem and ways to reduce exposures.



Strike Out Stroke PR Detail at Bethesda North

April 18, 2019

Bethesda North partnered with the Cincinnati Reds to support the Greater Cincinnati Stroke Consortium. Mr. Redlegs stopped by to help kick off the fund raiser. The Stroke Consortium's mission is to enhance stroke care and improve stroke outcomes through a multi-system regional collaboration and an overarching goal of educating the public and health care providers about stroke care. Baseball tickets were sold at Bethesda North's Cafeteria for the May 3rd Friday night game against San Francisco. The fund raiser supported stroke education.



A WIN at Bethesda Butler

Jane Grollmus submitted an IRIS report per the following:

Orders for insulin drip are stated: Start infusion at 0.1 mg/kg/hr. The correct terminology is not mg but units. It should read 0.1 units/kg/hr. Also, when programming the pump, it equates to 7.26 ml/hr. Pharmacy rounded that to 7.3 ml/hr. The pump programs to run at 7.26 ml/hr. In order to make the pump equal pharmacy's rounded dose, it would require manually changing the pump again. There are too many opportunities for error.

Good Catch Jane – congratulations!

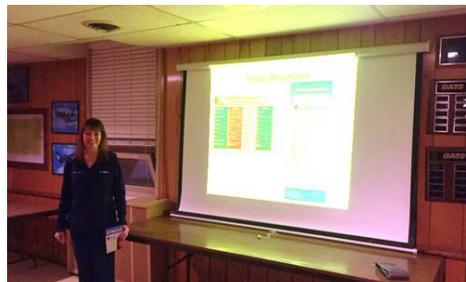


Stroke Education for the Warbirds

The Cincinnati Warbirds is a group of military aircraft enthusiasts who meet monthly and oversee the Lunken Days program at Lunken Airport. Lunken Days is a free event that occurs every September and brings war planes to Lunken Airport for the community to see and learn about. This event attracts large crowds with many elderly folks, increasing the risk of emergencies. The Warbirds identified the need to improve their ability to recognize and provide initial help for the illnesses or injuries that can occur during this event, until local EMS arrives.

Good Samaritan Hospital EMS Coordinator Pamela Otten collaborated with UC Health to provide a refresher on first aid skills, including how to recognize a stroke using the FAST exam. The group also learned TAKE10 CPR skills and tourniquet application to "Stop the Bleed."

Pamela Otten



Hamilton Fire Department



Emergency Medical Services (EMS) makes up approximately 85% of the total calls for service for the City of Hamilton Fire Department (HFD). In 2018, under the leadership of Chief Mark Mercer, the HFD responded to 14,254 calls with 12,161 of those requiring EMS. Since 2014, the department has seen a 17% increase in total runs. During 2016 and 2017, there

was a large increase in EMS runs due to the increase in opioid related EMS runs.

As the HFD responds to medical emergencies every day, there are also many ways the EMS Bureau not only prepares to react, but also is proactive in its mission of helping the community have better health. Through a partnership with Mercy Health, trauma kits were purchased and placed in every classroom at Badin High School. All of the Badin staff members received Stop the Bleed and CPR training by fire department personnel along with the trauma kit implementation. In coordination with UC Health, HFD members helped to train all of the Hamilton City School teachers with Stop the Bleed and CPR techniques. In the Spring of 2018, the HFD command staff and paramedics, Hamilton High staff and Hamilton Police also took part in an active threat training at Hamilton High School. This was essential training to prepare our personnel for a high stress and complex event if ever it should occur.

Along with training and community partnerships, the City of Hamilton Fire Department took huge steps in 2018 on two fronts. The first major change was the creation and filling of the position of EMS Assistant. This position's main task is to provide quality assurance for all of the EMS run reports created by Hamilton's paramedics and fire officers. This review of every run helps to ensure that members are compliant with our protocol and medical direction while maximizing legitimate reimbursement opportunities from insurance companies. The second major change occurred at the end of 2018 in December. With guidance from our Medical Director, Dr. Joseph Khan, the HFD adopted a new

aggressive pre-hospital care protocol. All members were required to attend mandatory in-service training on a protocol that introduced many new skills aimed at providing better patient care to the citizens of Hamilton.



The HFD also remains engaged in regional EMS activities. Along with the Butler County EMS Council, Greater Miami Valley EMS Council, Kettering Health Network, TriHealth, UC Health and other community health partners, the HFD remains active in trying to help the citizens of Hamilton and Butler County remain healthy and prevent injuries. The department also works with the next generation of young men and women who are entering the fire service. Partnerships with Butler Tech, Cincinnati State and Sinclair Community College offer EMT and paramedic students the opportunity to gain valuable experience while in school under the guidance of our skilled and professional paramedics.

Along with a new protocol, the EMS Bureau has implemented a number of new pieces of equipment on the medic units. Another one of the department's medic units was also remounted to "like new" condition and was outfitted with a Stryker Power Cot and Load System. This valuable tool not only allows for a more comfortable ride for our patients to the hospital, but it also reduces the opportunities for injuries to our personnel.

While many changes took place in the EMS Bureau of the HFD in terms of training and equipment, the most change probably took place in the types of runs that the HFD responds to. Over the past five years, the EMS call types have changed significantly. Historically speaking, the top five call types have been chest pain, abdominal pain, altered mental status, difficulty breathing and seizures. In 2018, the top five call types were opioid related disorders, weakness, altered mental status, difficulty breathing and abdominal pain respectively.

Mark Mignery



Everything You Need to Know: Human Trafficking

From Medical Professionals

Hidden in Plain Sight

Human trafficking takes many forms worldwide, but the bulk of human trafficking in America involves sex and/or labor trafficking. Force, fraud and/or coercion is used to exploit victims for financial gain. Since victims of human trafficking rarely identify as such, it is imperative medical professionals be able to recognize and respond appropriately to each case. Identification is the first step in rescue and restoration.



Recognize and Respond

Research indicates medical professionals are in the top four professions most likely to encounter a human trafficking victim. However, many medical professionals in the U.S. are not adequately trained to recognize and respond to human trafficking victims.

Assessment Guide

Historical Assessment:

- Delay in seeking care for illness/injury
- Vague/inconsistent history
- Lack of follow-up from previous care
- Hospital/Clinic hopping (often with alias)

Physical Assessment:

- Tattoo/Brand
- Poor self-care
- Neglect/Delay in care
- Injury doesn't match history
- Advanced stage disease/injury
- Persistent or untreated STIs/UTIs
- Cotton debris in vagina (stuffing)
- Neck and jaw problems
- Malnourishment
- Traumatic brain injury (TBI)



Mental/Emotional Assessment:

- Chronic shame
- Dysfunctional beliefs about self
- Fear (of controller, first responders, possibly hospital staff)
- Patient seems unusually submissive
- Depression/Hopelessness
- Suicide
- Anxiety/Panic Attacks
- PTSD/Dissociation
- Disoriented/Confused
- Cutting/Self-Harm

General Assessment:

- Appears younger than stated age (younger than 18, generally no ID)
- Communication seems "scripted"
- Addiction
- Age-inappropriate familiarity with sexual terms/practices
- Dressed inappropriately for stated work/weather
- Doesn't have possession of ID/documents (someone else holding them)
- Patient accompanied by "controller"
- Patient has no spending money
- No insurance (cash/not at all)
- Multiple STIs, and/or sex partners
- Patient doesn't know where they are (city, state)
- Lives where employed/with employer and can't give address

Questions to Ask:

- How many sex partners have you had in the last 30 days?
- What type of work do you do? Can you leave your job?
- When not working, can you come and go as you please?



McCullough-Hyde Team Members Provide Aid During Emergency

Tuesday – March 19, 2019 around 7:30 pm hours, MHMH team members Kayleigh Geiser, RN and Amber Schimelpfenig, EDT were working in the Emergency Department at TriHealth's McCullough-Hyde Memorial Hospital. A loud bang was heard just outside their doors. An explosion, from what Oxford Police are calling a modified pyrotechnic detonated in an alley near the hospital.

Kayleigh and Amber heard screaming outside the MHMH Emergency Department entrance. A college student ran across the parking lot screaming, "Help us, help us." Realizing the critical nature of the event, ED staff ran across the street. Upon reaching the victim, they immediately completed a quick field assessment and covered the injury. With the assistance of two college students they applied a make-shift tourniquet. While waiting for Oxford Fire Department to arrive, they kept the patient stable, monitored the airway, and checked for other bleeding. Oxford Fire Department arrived and transported the patient to McCullough-Hyde. There the patient was well cared for, stabilized and flown to a trauma hospital.

Debra Walker



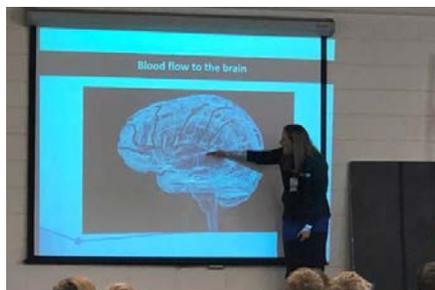
Stroke Education to Grade Schools

TriHealth is actively engaged with the Greater Cincinnati Stroke Consortium presenting stroke education to grades 1 through 12. Stroke is the fifth cause of death and the leading cause of disability in the United States.

With the help of the EMS Coordinators, children are receiving the message regarding the severity of stroke. They are learning the different types of stroke and how to recognize the signs and symptoms of this condition. The 45-60 minute presentation includes a short video and PowerPoint and activities. The activities allow students to discover the challenges a stroke patient deals with during a daily-life routine. They participate in activities that limit their senses. Examples of the activities are: putting a golf ball while one eye is covered; getting dressed while one arm is restricted by a sling; and playing corn hole with the non-dominant arm.

The presentation has been well received throughout the communities. If you would like to have this program offered at your school or other event, please contact your TriHealth EMS Coordinator.

Debra Walker





STOP THE BLEED

Stop the Bleed.
Save a life.

Stop the Bleed is a national awareness campaign and call-to-action.

Stop the Bleed is intended to cultivate grassroots efforts that encourage bystanders to become trained, equipped and empowered to help in a bleeding emergency before professional help arrives.

The TriHealth EMS Coordinators are bringing this **FREE PROGRAM** to your area.

In a short time, we want to teach you and your organization to be ready in case of an emergency.

Schools

Churches

Private Industry

Offices

Restaurants

Anyone

If you are interested in learning about Stop the Bleed, contact Debra Walker:

debra_walker@TriHealth.com



Public Health

On Thursday, Feb. 21, the Butler County General Health District exercised a Point of Dispensing (POD) at the Butler Tech Safety Education Complex in Liberty Township. In the event of a large scale public health emergency, POD sites throughout Butler County can be used to dispense medications to a large population of healthy people.

"This exercise provided Butler County General Health District the opportunity to strengthen our staff's ability to respond to an emergency, validate current plans and identify opportunities for improvement," said Jenny McCoy, Emergency Response Coordinator.

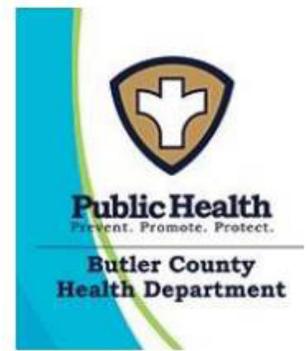
The first stage of the exercise involved a timed setup drill meant to test the POD staff's ability to prepare the location for a mass vaccination clinic within 90 minutes. During the second stage of the exercise, POD staff worked together to process as many "clients" as possible through the mass vaccination clinic within a 60 minute timeframe.

"Our volunteers took their roles very seriously and really challenged our staff with situations that could be faced in real life," remarked Jennifer Bailer, BCGHD Health Commissioner,

"We all had a good time handling or playing some 'wild' scenarios while honing our skills! Butler County General Health District appreciates all those who gave up their morning to assist us. We also appreciate support from partnering agencies such as Butler County EMA, Highland County and The Health Collaborative for sending observers."

Overall, it was a great opportunity to exercise emergency plans, train staff and interact with volunteers from across the region.

Jennifer Pilecki



Upcoming EMS/Nursing Training

May 1-2

ATLS – Advanced Trauma Life Support
Health Collaborative

May 8

Annual Premier Health Stroke Update
Berry Women's Center, Beiser Auditorium

May 20-21

The Ohio EMS Conference
Greater Columbus Convention Center

May 21

ENA Spring Educational Symposium
Greater Cincinnati ENA

May 22-23

TNCC – Trauma Nursing Core Course
Health Collaborative

June 13

EMS Symposium
Kettering Health Network

July 13-14

Firefighter Cancer Prevention
Ohio Fire Chiefs

August 14-15

ENPC – Emergency Nursing Pediatric Course
Health Collaborative

August 22

TNCC – One Day Renewal
Health Collaborative

September 19

Mass Casualty LEPC – Full Scale Exercise
Health Collaborative

October 16-17

TCAR – Trauma Care After Resuscitation
Health Collaborative

Information Contacts



Debra Walker

RN, BA, NR-P, FFII
EMS Coordinator
Emergency Department
Bethesda Butler Hospital
McCullough-Hyde Memorial Hospital
Cell: 513 207 4224
Fax: 513 852 3128
debra_walker@TriHealth.com
TriHealth.com



Randy Johann

MA, BS, NHDP-BC, FP-C, FF/Paramedic
EMS Coordinator
Emergency Department
Bethesda North Hospital
Bethesda Arrow Springs
Cell: 513 678 5249
Office: 513 865 5208
Fax: 513 865 1745
randall_johann@TriHealth.com
TriHealth.com



Pamela Otten

MSN, RN, CEN, SCRNP, FF/NR-P
EMS Coordinator
Emergency Department
Good Samaritan Hospital
Good Samaritan Western Ridge ED
Office: 513 862 3174
eFax: 513 852 1415
pamela_otten@TriHealth.com
TriHealth.com