

Chad Lawton

From: Godde, Matthew (DHHS-Contractor) <GoddeM@michigan.gov>
Sent: Friday, April 27, 2018 4:15 PM
To: Mark.Cleveland@mcd911.net; Chad Lawton
Cc: MDHHS-CE
Subject: 202 C CE Approval Mark Cleveland WMRMC
Attachments: WMRMC.pdf

Mark, attached is your CE approval for your consortium. Please call with any questions. Have a good weekend.

Matthew Godde
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Region 1 Coordinator
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Michigan Dept. of Health & Human Services Division of EMS, Trauma and Preparedness EMS Section PO Box 30207 Lansing, Michigan 48909-0207 Email: MDHHS-CE@michigan.gov *Email is the preferred method of application*	MDHHS USE ONLY	
	Received by Regional Coordinator: Date <u>4/25/2018</u>	
	Returned for Correction(s): _____	
	Corrections Received: <u>4/27/2018</u>	
	Date of Final Review: _____	
Regional Coordinator Signature: <u>Matthew Godde</u>		
CE Topic(s) Approval <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Region: <u>1</u>		

**NOTIFICATION OF INTENT TO CONDUCT A CONTINUING EDUCATION TOPIC
EMS CE PROGRAM SPONSOR**

For use by an **EMS CE Program Sponsor** that is applying for CE **not** as part of an initial education program

This form with a legal signature must be received by the Department at least 30 days prior to the start of the first class.

Failure to complete and submit this form as prescribed may result in an automatic disapproval. Your application and additional documentation will be reviewed and either returned for deficiencies or approved and a copy returned for your records. A copy will also be maintained on file with MDHHS.

EMS CE Program Sponsor must provide proof of attendance to each individual and maintain in records, a roster of those individuals who attended each CE session. The CE proof of attendance must have approved category name on the front.

For further information, refer to the Standardized EMS CE Credit Guide "Approval Guidelines for Continuing Education Programs"

EMS CE Program Sponsor	West Michigan Regional Medical Consortium		Approval #	16-6234
Sponsor Representative	Chad Lawton	Phone #	231-728-1967	E-mail: clawton@wmrmc.org
Street Address	1675 Leahy St, Suite 308B			
City	Muskegon	State	MI	Zip 49442 County Muskegon

EMS CE Instructor Coordinator:

Name	Mark Cleveland	Phone #	517-366-9963	E-mail:	cleveland.marka@gmail.com
Street Address	5380 E Apple Ave	IC Licensure Level	Paramedic	I/C#	513650
City	Muskegon	State	MI	Zip 49442	County Muskegon

I affirm that all the information submitted in this notification is true and that all presentations will comply with MDHHS requirements and will occur as outlined in this document. I understand that any misrepresentation of the information provided as part of this notification may result in non-approval or revocation of existing approval, or further action by MDHHS.

Legal Signature of EMS CE Instructor Coordinator  Date 4/25/18

Legal Signature of EMS CE Sponsor Representative Chad Lawton O=WMRM, E=clawton@wmrmc.org Reason: I am the author of this document. Date 04/24/2018



Lesson Plan: i-Gel

Topic: i-Gel Supraglottic Airway

Presenter: West Michigan Regional Medical Consortium CE Sponsor Program

Location: West Michigan Regional Medical Consortium CE Sponsor Locations

Credit Category: Airway

License Level: MFR, EMT, SPEC, MEDIC

Credits: 1

Format: 0.5 hour lecture, 0.5 hour practical

Objectives: At the conclusion of this CE session, the participants will be able to:

Cognitive

1. Discuss and review appropriate protocols.
2. Discuss indications for OPA and NPA
3. Describe the indications for placement of supra-glottic airway device.
4. List the contraindications of supra-glottic airway device.
5. Explain the color change for colorimetric device.
6. Describe proper supra-glottic airway device techniques.
7. Describe complications associated with supra-glottic airway insertion.
8. Review and discuss rules for sizing of OPA, NPA, or iGel.

Psychomotor

1. Perform proper BVM ventilation on mannequin.
2. Perform NPA insertion with BVM ventilation
3. Perform OPA insertion with BVM ventilation
4. Perform supra-glottic airway insertion with colorimetric device and BVM ventilation
5. Perform assessment of lung sounds for placement.

Affective

None



Lesson Plan: i-Gel

Outline for Session

1. Introduction of topic
2. Basics of Airway
 - A. Scope of practice
 - B. Medical Direction
 - C. Patient assessment pre and post airway placement
 - D. Indications for use of NPA, OPA and Supra-glottic airway device.
 - E. Contraindications for use of NPA, OPA and Supra-glottic airway device.
3. Air way Placement
 - A. Sizing
 - i. NPA
 - ii. OPA
 - iii. Supra-glottic Airway
4. Documentation
5. Practical scenarios
6. Summary and Questions

Student Evaluation Method: Simple evaluation will be done through classroom discussion and participation.

Evaluation of Presentation: Continuing Education Program Sponsor Evaluation Form will be filled out by all participants.



Lesson Plan: MFR & Basic EMT Epinephrine Study (MABEES)

Topic:	MFR & Basic EMT Epinephrine Study (MABEES)
Specific Topic:	Epinephrine Administration
Presenter:	West Michigan Regional Medical Consortium CE Sponsor Program
Location:	West Michigan Regional Medical Consortium CE Sponsor Locations
Credit Category:	Preparatory – 1 Credit Med Admin Special Considerations – 1 Credit Peds Med Admin
License Level:	MFR, EMT, SPEC, MEDIC
Credits:	2
Format:	1 hour lecture, 1 hour practical
CE Description:	<p>The purpose of this EMS continuing education (CE) session is to educate participants of MABEES on how to draw up and administer Epinephrine from a vial. Indications for administration of intramuscular epinephrine will be detailed. This session will cover the administration of epinephrine by MFRs and EMTs as allowed by the following protocols:</p> <ol style="list-style-type: none">1. 1.6 Anaphylaxis/Allergic Reaction2. 3.3 Respiratory Distress3. 4.5 Pediatric Respiratory Distress4. 1.6a MFR & Basic EMT Epinephrine Study – Addendum5. 8.40 MABEES Medication Kit Contents and Exchange Procedure

Objectives: At the conclusion of this CE session, the participants will be able to:

Cognitive

1. Understand the intent and purpose of MABEES
2. List and describe indications for the administration of intramuscular (IM) epinephrine
3. Recall the adult and pediatric dosages of epinephrine when given IM and cite relevant protocols
4. List and describe 5 rights of medication administration
5. Discuss techniques to minimize risk of needle stick injury
6. Describe the contents and use of WMRMCC Epi-Kit
7. Describe how to document epinephrine indications, effects, and administration
8. Describe the procedure that assures each administration of epinephrine is reported to the MCA

Psychomotor

1. Demonstrate how to draw up epinephrine from a vial and administer via IM injection using MABEES Epi-Kit to an adult and pediatric patient
2. Given a scenario, correctly identify a patient that should receive epinephrine via IM injection
3. Administer simulated epinephrine (NaCl) to a simulated patient to an adult and pediatric patient



Lesson Plan: MFR & Basic EMT Epinephrine Study (MABEES)

Outline for Session

1. Introduction
 - a. Understand the intent and purpose of MABEES
2. Epinephrine Overview
 - a. Describe the effects of epinephrine
 - b. List and describe indications for the administration of intramuscular (IM) epinephrine
 - c. Recall the adult and pediatric dosages of epinephrine when given IM and cite relevant protocols:
 - i. 1-4 Anaphylaxis/Allergic Reaction
 - ii. 1-15 Respiratory Distress
 - iii. 3-2 Pediatric Anaphylaxis – Allergic Reaction
 - iv. 3-4 Pediatric Bronchospasm
3. Medication Administration Considerations
 - a. List and describe the 5 rights of medication administration
 - i. Right Patient
 - ii. Right Medication
 - iii. Right Dosage/Concentration
 - iv. Right Route
 - v. Right Documentation
4. Needle Stick Safety
 - a. Discuss techniques to minimize risk of needle stick injury
 - b. Describe relevant protocols and LSA policies in the event of an exposure
5. MABEES Epi-Kit
 - a. Describe the contents and use of the MABEES Epi-Kit
6. IM Injection of Epinephrine
 - a. Describe and demonstrate how to draw up epinephrine from a vial and administer via IM injection using MABEES Epi-Kit
7. Documentation
 - a. Describe how to document epinephrine indications, effects, and administration
8. MABEES Epi-Kit Exchange Procedure
9. Scenario #1 – Anaphylaxis (15-20 minutes)
 - a. Given a scenario students will:
 - a. Manage ABCs
 - b. Call for ALS as needed
 - c. Identify patients that require epinephrine IM
 - i. List and describe indications
 - d. Administer epinephrine IM using simulated epinephrine (normal saline) into a simulated patient
 - e. Reassess the patient for desired effect
 - b. Post scenario, the instructor will list all correct and incorrect actions taken by the students and provide strategies to eliminate incorrect actions



Lesson Plan: MFR & Basic EMT Epinephrine Study (MABEES)

10. Scenario #2 – Asthma (15-20 minutes)
 - a. Given a scenario students will:
 - a. Manage ABCs
 - b. Call for ALS as needed
 - c. Identify patients that require epinephrine IM
 - i. List and describe indications
 - d. Administer epinephrine IM using simulated epinephrine (normal saline) into a simulated patient
 - e. Reassess the patient for desired effect
 - b. Post scenario, the instructor will list all correct and incorrect actions taken by the students and provide strategies to eliminate incorrect actions
11. Scenario #3 – Anaphylaxis or Asthma (15-20 minutes)
 - a. Given a scenario students will:
 - a. Manage ABCs
 - b. Call for ALS as needed
 - c. Identify patients that require epinephrine IM
 - i. List and describe indications
 - d. Administer epinephrine IM using simulated epinephrine (normal saline) into a simulated patient
 - e. Reassess the patient for desired effect
 - b. Post scenario, the instructor will list all correct and incorrect actions taken by the students and provide strategies to eliminate incorrect actions
12. WMRMCC MABEES Epi-Kit Exchange Procedure
 - c. Complete all necessary documentation and paperwork

Note: 2 of the 3 scenarios must be for a pediatric patient.

Student Evaluation Method: Students will be formally evaluated on their ability to demonstrate drawing up correct dose and properly administering epinephrine IM for adult and pediatric patients. This will be recorded using a practical skills form designed for this presentation. Students will also be given a written test at the conclusion of the presentation.

Evaluation of Presentation: Continuing Education Program Sponsor Evaluation Form will be filled out by all participants.