



THE SIREN

New York State Sheriffs Association Yellow Dot Program

Arriving upon the scene of a motor vehicle accident with an unresponsive patient and no friends or family to fill in medical history details makes patient care much more difficult, and can put the patient at risk. This program fills the same purpose as the at-home "file of life" but in a vehicle, whether a family car, truck, van or RV. The following information is taken from the New York State Sherrif's Association website.



Yellow Dot is a free program designed to help first responders provide life-saving medical attention during that first "golden hour" after a crash or other emergency. A **Yellow Dot** in the driver's-side rear window of your vehicle will alert first responders that vital medical information is stored in the glove compartment.

How Yellow Dot Works

The **Yellow Dot** kit contains a personal information card and a **Yellow Dot** decal.

1. Complete both sides of the personal information card as fully as possible, in pencil. Attach a recent photo of yourself and place it in a visible location in your car's glove compartment.
2. Complete one card for each person who regularly occupies the vehicle. See below to request additional medical information forms.
3. Place the **Yellow Dot** decal on the rear driver's side window to alert first responders to look in the glove compartment for your medical information.
4. Update the card annually yourself or bring it to your annual medical check-up. If you sell your car, remove the **Yellow Dot** sticker.

Use Yellow Dot at Home

A **Yellow Dot** kit can also be used to alert those who respond to an emergency in your home. Simply place a **Yellow Dot** decal on or beside your front door and place a completed card for each occupant in a clear plastic freezer bag and place in a visible location in the freezer compartment of your refrigerator.

Request a Yellow Dot Kit

Yellow Dot kits are available for free. To request a kit, go to the New York State Sheriffs Association website yellowdot program page:

nysheriffs.org/yellowdot



Nyack Community Ambulance Corps
Current 2012
Administration and Officers

- President & Safety Officer - William McDowell
- Vice President - Administration - Catherine Radziemski
- Vice President - Operations (Captain) - Paul Morer
- Secretary -
- Board Members at Large - Tim Beaudoin, Steve Borton, Susan Hellauer
- Training Officer- Willie White
- Lieutenants -
1st: Ivan Guerra, 2nd: Tim Beaudoin
3rd: Morgan Ambler
- Legal Counsel - Duncan Lee, esq.
- Medical Director - Dr. Stuart G. Rasch
- Chaplain - Fr. Richard Gressle

Noteworthy

This is the October issue of **The Siren**, slightly delayed by the effects of Hurricane Sandy. We hope that all of you and your friends and loved ones are safe and all will soon get back to normal.

Welcome New Members! Nora Awadallah, Imani Lee, Stephanie Molliere, Elijah Negron and Philip Simon.

Annual Holiday Party at the Hudson House is scheduled for Friday, December 7. Watch your email and the bulletin board at the corps building for further details.

The minutes of our General Membership meetings are now being added to the Members' Area of the NCAC website. This is a work-in-progress, as we keep current, AND go back and add archived minutes. You will need to log in with your member id and password to see the minutes.

Officer Contact Information

Rank	Name	Radio	Cell #	Email	Duties
Captain	Paul Morer	1	917-817-1867	Paul.Morer@NyackEMS.org	
Lieutenant	Ivan Guerra	2	845 304 0246	Ivan.Guerra@NyackEMS.org	Rigs/First Aid
Lieutenant	Tim Beaudoin	3	845 499 9279	timbeaudoin25@gmail.com	Operations
Lieutenant	Morgan Ambler	4	845-893-0084	Morgan.Ambler@gmail.com	Communications

We would like to take this opportunity to express our abundant gratitude to NCAC Administrative Vice-President, **Cathy Radziemski**, who will be resigning from the corps at the end of December, 2012. Cathy and her family will be starting to spend winters in Arizona, and so the corps must bid her a fond farewell, AND thank her for her many services to the corps, including the complex task of keeping track of LOSAP points. THANK YOU CATHY, and all our best wishes to you and your family.



ORANGETOWN OPEN HOUSE

On Saturday October 13, 2012, from 11 am to 2 pm, Nyack Ambulance participated in The Orangetown Open House: Community Building: Government and Citizens Working in Partnership. Board Members Steve Borton, Susan Hellauer and Cathy Radziemski represented Nyack Community Ambulance at this event.

The Open House included tours of the Orangetown Town Hall facilities, demonstrations of equipment of various kinds, including the town's bomb disposal truck, with robot and explosive sniffing dog; the Orangetown SWAT team, with demonstration of protective equipment and non-lethal weapons and lecture on procedure; and the DPW's monster snowplow. Attendees were able to get their children "scared straight" with a look at the jail cell, get help with their golf swing and attend a budget information meeting.

EMS was represented by South Orangetown Ambulance Corps, Rockland Paramedics and Nyack Community Ambulance Corps. All three had set up informational tables inside the town hall, but only Nyack Ambulance conducted vehicle tours. Approximately 75 adults and children toured the ambulance, and learned how emergency medical care is administered en route to the hospital. They had an opportunity to have their questions answered about the role of volunteers in Orangetown EMS, training opportunities, and the Youth Corps.

The open house culminated at 2:00 p.m with a memorial ceremony in the lobby of Orangetown Town Hall commemorating the ultimate sacrifice of deceased Police Officers Thomas Kennedy, Michael Reedy and Waverly Brown and Sergeant Edward O'Grady.





KAPTAIN'S KORNER

CAPT. PAUL MORER, NREMT-B

POWER STRETCHER

NCAC has taken delivery on a new power stretcher. Initially, we will only have one that will rotate to the duty truck.

There will be two MANDATORY in-service sessions. You MUST attend one of them:

Sunday, October 28 at 10:00

Tuesday, October 30 at 19:00 (just prior to the CME that evening)

The in service will only take 30 minutes

After the in service sessions, the power cot will be put into service.

Let me know if you have any questions or concerns.

RESPONSE TIME SURVEY

For the month of November, I will be evaluating our response times.

Please remember, when you start a PCR, you can click on the little clock icon, next to whatever time you are recording, and that will automatically populate the current time in that field, so that you don't have to remember and enter it later.

The national standard for response times, is to arrive on scene, from time of dispatch, in under 8 minutes, 90 % of the time.

I will report back to you in the beginning of December, as to how close we are to meeting this goal.

As always, stay safe.

TRAINING/WEBSITE NEWS:

Log in and go to the Members' Area of the NCAC website to check out the "Training Opportunities - Posters" page, where we will put posters of upcoming training opportunities, sorted by date. We had formerly been including them in the Siren, but now they will be kept updated on the website, on an ongoing basis, -- it's your online training bulletin board.

Sue Hellauer - Keeper of the Website

TRAINING NOTES

FROM WILLIE WHITE, NCAC TRAINING OFFICER

To All Members (paid/volley):

Flu shots are available to all EMS personnel at Nyack Hospital on October 29th from 12p-1:30p

The vaccinations are given in the cafeteria vending area.

*Please be advised that **Central Ave in South Nyack** across the street from Nyack College is now known as **Chase St.***

Training opportunities: Please note that additional CME classes, taught by John Scanlan, can now be found on the NCAC website, under Resources in the Members' Area. It is also printed in this **Siren**.



The Siren is the quarterly publication of Nyack Community Ambulance Corps
251 N. Midland Avenue, Nyack, NY 10960

Susan Hellauer, EMT-B, editor (Susan.Hellauer@NyackEMS.org)



CME and training opportunities in the area

Following are local training and CME opportunities. For more complete information, changes and additions, check the training board at the NCAC building frequently for postings of CMEs and required training for corps members.

You can also log on to www.hvremSCO.org and click on CME for last minute changes and additions to area training. Also consult www.wremSCO.org for Westchester area CMEs, training classes and conference notices.

If you know of any training opportunities that are not listed here, or on the training board, please bring them to the attention of training officer [Willie White](#).



NOTE: CHECK THE TRAINING BOARD AT THE BUILDING FREQUENTLY FOR NEW TRAINING CLASSES.

Date	Day	Time	Location	Topic
11-01-2012	Thursday	1930	Greenwood Lake	
11-05-2012	Monday	1930	Blooming Grove	Geriatrics
11-12-2012	Monday	1800	Mahwah	GSH Trauma Symposium – Crossroads Sheraton
11-13-2012	Tuesday	1930	Pearl River	Abdom Emerg
11-19-2012	Monday	1930	Faist	Endo / Resp / Behavioral
11-20-2012	Tuesday	2000	Piermont	Abdom Emerg
11-27-2012	Tuesday	1930	Nyack	Airway
11-29-2012	Thursday	1930	SOAC	OB-GYN
Date	Day	Time	Location	Topic
12-05-2012	Wednesday	1900	GSH	End of Year call Audit
12-06-2012	Thursday	1900	Warwick	Airway / Respiratory
12-11-2012	Tuesday	1930	Pearl River	Airway / Respiratory
12-17-2012	Monday	2000	Faist	Special Needs Patients / EMS Operations
12-18-2012	Tuesday	1930	Piermont	Special Needs Patients / Cardiac / Resp
12-20-2012*	Thursday	1930	Nyack	Spinal Immobilization Workshop Please note date change
12-27-2012	Thursday	1930	SOAC	Fracture Management Workshop

DID YOU KNOW?

that the HVREMSCO TRAINING PAGE is where you can find all upcoming EMT original and refresher courses AND CME classes, along with contact information, available in the entire Hudson Valley Region, including Rockland County (excludes Westchester).

Go to:

<http://www.hvremSCO.org/trng.htm>

AND DID YOU KNOW?

that there are numerous training opportunities just a short ride away in Westchester County, many of them at Westchester Medical Center in Valhalla.

Go to

<http://emergencyservices.westchestergov.com> and click on [Training Classes](#).

Or click on

[About Us/E-mail Sign-up](#) to receive notices of all training classes.

Save the Date

Nyack Hospital Trauma Conference

Date: Dec. 1&2 2012
Time: 8:30am-4:30pm

Krutz Auditorium

Details to follow!

Contact: Jared Shapiro
shapiroj@nyackhospital.org

Nyack Hospital | 160 North Midland Ave | Nyack, New York 10960 | nyackhospital.org





Taught by John Scanlan.
Contact TO Willie White for more information.

CME SCHEDULE 2012

<u>July</u>		
07/02	SPAC	Pediatrics (7:30pm)
07/10	NCVAC	Geriatrics (7pm)
07/12	SHCAC	Poisoning/Environmental/Behavioral (7:30pm)
07/19	Nanuet	Airway (7:30pm)
07/23	CVCVAC	Pharmacology/Respiratory/Cardiac (7:30pm) **AT NCVAC BUILDING**
07/25	HVAC	ITAC/Nerve Agents—WMD (7pm)
<u>August</u>		
08/06	SPAC	TO BE DETERMINED
08/07	NCVAC	TO BE DETERMINED
08/08	HVAC	TO BE DETERMINED
08/09	SHCAC	Vital Signs
08/13	CVCVAC	TO BE DETERMINED **AT NCVAC BUILDING**
08/16	Nanuet	Assessment (7:30pm)
<u>September</u>		
09/13	SHCAC	Pharmacology/Respiratory/Cardiac (7:30pm)
09/17	CVCVAC	Poisoning/Environmental/Behavioral (7:30pm) **AT NCVAC BUILDING**
09/18	NCVAC	BLS Skills (7pm)
09/19	HVAC	Trauma (7:30pm)
09/20	Nanuet	Geriatrics (7:30pm)
09/24	SPAC	Documentation (7:30pm)
<u>October</u>		
10/01	SPAC	Poisoning/Environmental/Behavioral (7:30pm)
10/02	NCVAC	CEVO III—Part 1* (7pm)
10/03	HVAC	Pharmacology/Respiratory/Cardiac (7:30pm)
10/11	SHCAC	Assessment (7:30pm)
10/15	CVCVAC	CEVO III—Part 2* (7pm) **AT NCVAC BUILDING**
10/18	Nanuet	OB/GYN (7:30pm)
<u>November</u>		
11/05	SPAC	ITAC & Nerve Agents—WMD (7pm)
11/07	HVAC	BLS Skills (7:30pm)
11/08	SHCAC	AWR 160—Part 1—WMD* (7pm)
11/13	NCVAC	Trauma (7pm)
11/15	Nanuet	Pediatrics (7:30pm)
11/19	CVCVAC	OB/GYN (7:30pm) **AT NCVAC BUILDING**
<u>December</u>		
12/03	SPAC	Geriatrics (7:30pm)
12/04	NCVAC	Diabetes/Altered Mental Status/Allergies (7pm)
12/05	HVAC	Airway (7:30pm)
12/10	CVCVAC	Assessment (7:30pm) **AT NCVAC BUILDING**
12/13	SHVAC	AWR 160—Part 2—WMD* (7pm)
12/20	Nanuet	Pharmacology/Respiratory/Cardiac (7:30pm)

*Class starts promptly at 7pm. For AWR 160 and CEVO III, you must attend both sessions (Part 1 and Part 2) in order to receive a certificate for the course. If you attend 1 session, you will only get 3 hours of CME credit toward recertification.



Save The Date...

Good Samaritan Regional Medical Center
proudly presents the
14th Annual Trauma Symposium

Monday, November 12th, 2012
Sheraton Crossroads, Mahwah, NJ
5:00PM - 9:30PM

Speakers to be announced, confirmation pending.

*Reservations will be required for this event
bschs.bonsecours.com/emsevent

For more information:
Fax: 845.368.5491
Phone: 845.368.5408
Email: Ernie_Stonick@bshsi.org

Good Help to Those in Need™





IMPORTANT!

**CME Recert and Training Update
from Training Officer Willie White**

I attended the New York State CME Training update that was presented by Richie Robinson, NYS Health Department EMS Investigator Educator.

There have been many questions and confusions regarding the updates for the EMTs that are involved in the CME program. I will give a summary of the information that was given to me:

NIMS

All EMTs (NON PARTICIPANTS AND PARTICIPANTS in the recertification program) must have on file NIMS ICS 100, 700 and Hazmat course. There are a few Members and Paid Staff Personnel that have these training certificates on file. The NIMS portions can be found on FEMA.ORG website. In the search box, type which course you are searching for. I will reach out to everyone who needs the class(s). The Hazmat class will be scheduled by Frank.

ACTUAL CME RECERT

New York State DOH has added an additional 13 hours of CME class time and increased non-CME participants' class time to 26 hours. Their reasoning behind this thought is that CME participants are continually learning while the non Participants wait until a class refresher. I have requested a copy of the updates and once I have them, I will distribute accordingly. *Weapons of Mass Destruction and Geriatrics are no longer a requirement under Mandatory additional CME hours.*

TIME LINE

All EMTs will be required to attend the update sessions effective 12/20/12, or selective class time posted, and completion must be done by 6/30/2014. The updates are offered in non-participants' refresher class, and participants class time will be posted as soon as I discuss with Frank.

REGISTRATION

Any EMT who is interested in the program must be a registered student through Nyack Ambulance's CME Program. If you are an EMT and interested, you cannot wait till your card is expired to register; your registration will not be accepted by DOH. See me for registration.

COMPLETION OF PAPERWORK

Participating EMTs are still required to obtain 72 hours of training + the additional 13 hours of update, and a copy of a valid CPR card. All of your signed CME PAPERWORK must be organized and have a provider signature. In other words, you cannot submit this information to NYS DOH without Frank's and my signature. ***Your information must be submitted 45 days before your card expires.*** This gives Frank and me enough time to make sure all of your CME sheets are accounted for and signed. It is also your responsibility to make a copies of your completed CME sheet, give me a copy **and keep a copy for your records.** I will give you a year's notice before your card expires advising you what classes you still need. Participants have three (3) years to complete 72 hours of CME time. I suggest not waiting until the last year of expiration to complete your needed time. Once all of your paperwork has been completed, we will mail your information registered with a returned receipt which will be kept on file. If your card expires while waiting for your new card, you will still be allowed to operate as an EMT.

I will spare you the rest of the information, since it is for administration. Going forward please attend the classes that are posted. Everyone and anyone can attend the classes, but to get CME credit, you must be a registered participant. Any questions, please see me

[Willie White, Training Officer: ncac-6](#)



EMT-Basic - CME Recertification Program Checklist

- 24 hours of Refresher Training (review of core content)
 - Preparatory (1)
 - Airway (2)
 - Patient Assessment (3)
 - Medical/Behavioral (8)
 - General Pharmacology/Respiratory/Cardiac (4)
 - Diabetes/Altered Mental Status/Allergies (2)
 - Poisoning/Environmental/Behavioral (2)
 - Trauma (4)
 - Obstetrics/Gynecology (2)
 - Infants and Children (2)
 - Elective (2)

- 48 hours of additional continuing education requirements, which must include:
 - Geriatrics (minimum of 3 hours)
 - WMD/Terrorism (minimum of 3 hours)



A maximum of 12 hours for "core content" and 24 hours for additional CME hours may be credited for self-study activities through documented continuing education via publications, video and/or Internet training.

A maximum of 6 hours may be credited for teaching CPR courses and this can only be used once for each recertification period.

A CIC who teaches an original or recertification course can claim the maximum hours for the "core content" area only.

National continuing education programs like PHTLS, BTLs, PALS, ACLS, AMLS, SCOPE, PEPP, GEMS, etc. may be used towards "core content" areas or for additional CME areas. Please contact our office for guidance.

A maximum of 12 hours may be credited for any one specific topic.

See the program guidelines at the [DOH website](#) for the latest information.



Supplemental 13 hours - NEW! - for CME recertification

The following required hours must contain the new educational components from the NYS Educational Standards. These CME hours are above and beyond CME hours under the previous NYS curriculum and have been documented on the old CME renewal forms. All certified providers must complete these transition CME hours for certification renewals starting on December 20, 2012 unless they are submitting the new CME forms for the new Standards. All providers must complete their renewal process, including these transition CME hours, by their next renewal date or June 30, 2014, whichever comes first. Please check our web site for additional information pertaining to the transition to the National Educational Standards.

Preparatory	1.5
Anatomy/Physiology/Life Span/Public Health	2.0
Airway	0.5
Patient Assessment & Monitoring Devices	0.5
Pharmacology/Med Admin/Emergency Meds	0.5
Immunology/Toxicology	0.5
Endocrine/Neurology	1.0
Abdominal/Geni-Renal/GI/Hematology	1.0
Respiratory	1.0
Psychiatric	0.5
Cardiology	0.5
Shock and Resuscitation	0.5
Trauma	0.5
Geriatrics	1.0
OB/Neonate/Pediatrics	0.5
Special Needs Patients	0.5
EMS Operations	0.5
TOTALS	13.0



Health and Safety in the News

from
*William McDowell
and Susan Hellauer*

Your Smartphone Is Profoundly Filthy

A recent Wall Street Journal article reveals the dirty truth about your smartphone. The article is quoted, linked to and expanded upon in The Atlantic Wire. Read it, and reach for an alcohol wipe.

<http://www.theatlanticwire.com/technology/2012/10/your-smartphone-profoundly-filthy/58229/>

GET UP! GET OUT!! DON'T SIT!!!

A recent article in the New York Times cites two new studies that make a convincing case that sitting too much will shorten your life. This is especially problematical in professions such as Emergency Medicine, where long periods of inactivity, usually spent sitting, if not sleeping, alternate with short bursts of activity. Apparently, that 30 minutes a day of exercise is not enough. Read the article:

<http://nyti.ms/TalzNq>

NCAC WEBSITE RESOURCES

The NCAC website (www.nyackems.org) has resources for you!

In the Members' Area and under the Resources tab you can find the latest training calendar, corps SOPs, NY State BLS protocols, your LOSAP accounting, current and past issues of The Siren, numerous links, and articles of interest.

And now, we will be posting the minute of the General Membership Meetings in the Members' Area. Log in to see them!

Please let the Siren editor know about any other resources or links you'd like to see on the NCAC website.

Injury Rate for Young Kids Increased Again Last Year

A recent Wall Street Journal article by Ben Worthen reports on an increase, for the fourth straight year, in injuries to young children, age 4 and under. These are nonfatal, nonintentional injuries leading to an emergency room visit. The statistics work out to about 12.4 injuries per 100 children of this age in 2011, up from 12.2 per 100 in 2010.

A growing number of child-health experts and law-enforcement officials believe this increase, over the last four years, may be a result of parents being distracted by mobile devices, such as smart phones.

Read the article about these statistics, and this dangerous trend:

<http://online.wsj.com/article/SB10000872396390444657804578050812228669162.html>

HALLOWEEN FRIGHT: EVEN FIT PEOPLE CAN BE SCARED TO DEATH

On October 26, NPR's Science and Technology weekly program *Science Friday* with Ira Flatow featured a story on a sometimes-fatal cardiac syndrome: *stress cardiomyopathy*.

"Earthquakes, terrorist attacks, and muggings have all scared people to death. Sporting events, too, sometimes cause frenzied fans to drop dead. Neurologist Martin Samuels of Brigham and Women's Hospital explains how positive or negative excitement can lead to a heart-stopping surge of adrenaline."

Listen to the program, and link to a recent *Wall Street Journal* article on the Science Friday website:

<http://sciencefriday.com/segment/10/26/2012/scared-to-death-literally.html>



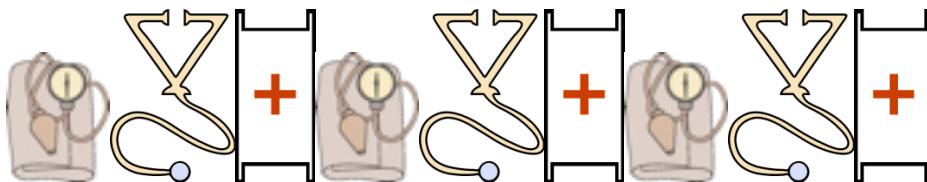
Nasal Narcan (Naloxone) Pilot Project

*This project is now underway in parts of NY State. This description is taken from NYSVARA's newsletter **The Blanket**, from October 2012.*

NYS Emergency Medical Advisory Committee (SEMAC) has approved a demonstration project involving BLS providers at the CFR and EMT level administering nasal Narcan. Regional EMS Councils/Medical Advisory Committees in the following regions have signed on to participate: Adirondack-Appalachian, Hudson-Mohawk (REMO), Monroe-Livingston, Mountain Lakes, Nassau and Suffolk. The goal of the project is to place lifesaving Narcan in the hands of as many first responders as possible in effort to combat the emerging public health emergency caused by opioid overuse/overdose. FDNY EMS proposed a similar demonstrate project for its personnel in 2007 but it was never implemented.

Information from Suffolk County in early July indicated that 24 ambulance services have volunteered to participate in the program and each is either in-serviced and operational, or conducting final training and will be operational shortly. Enrollment of agencies in the pilot program is now closed. 242 providers from 21 agencies have been trained and medical supplies have been placed on 52 ambulances. Per recently enacted local legislation, the Suffolk County Police Department is also in the program, using police officers with EMT certification in select sector cars in the 4th, 6th and 7th precincts, as well as the Marine Bureau. It is expected that 300 police officers will be trained and 60 sector cars equipped with nasal Narcan supplies. There were 5 cases of nasal Narcan being administered BLS providers.

Separate from EMS involvement, there has been an officially sanctioned program available for a number of years to train and equip friends and family of addicts with nasal Narcan syringes as these would normally be the first to observe someone in need of medical assistance. The 2/17/12 Morbidity and Mortality Weekly Report (MMWR) published by the US Center for Disease Control (CDC) discusses the community based opioid overdose prevention programs that exist in the USA, most of which pass out naloxone as either intranasal or intramuscular forms of delivery. This report states that over 53,000 laypersons have been trained with a reported successful reversal of over 10,000 patients who have overdosed. At least 15 states including New York have existing programs. This report was featured in a recent Time magazine article where the authors suggest this should be made an over the counter therapy and suggest that the FDA will be considering this in 2012.





[Excerpt from Emergency Management and Response Information Sharing and Analysis Center (EMR-ISAC), INFOGRAM 12-38, September 20, [2012](#)]

West Nile Increases Across the United States

(Source: CDC West Nile Virus site- <http://www.cdc.gov/ncidod/dvbid/westnile/index.htm>)

Reported cases of West Nile virus so far in [2012](#) have jumped to 3,142, the highest number since [2003](#). There are confirmed cases in 48 states, with Texas being hit especially hard (<http://vitals.nbcnews.com/news/2012/09/05/13682621-west-nile-cases-jump-25-percent-in-a-week-cdc-says?lite>) , and labs are struggling to keep up with the demand for diagnostic testing (<http://vitals.nbcnews.com/news/2012/09/12/13807714-west-nile-outbreak-stresses-lab-testing-limits-delays-diagnosis?lite>) .

Although the Centers for Disease Control and Prevention (CDC) (http://www.cdc.gov/ncidod/dvbid/westnile/wnv_factsheet.htm) states 80% of infected people will not show any symptoms, first responders should know the symptoms of West Nile. Most symptomatic people will show fever, aches, headaches, nausea, and vomiting. About 1 in 150 people infected show more severe symptoms like weakness, loss of vision, convulsions, and paralysis.

Reported cases are expected to drop as colder weather comes; state and local emergency managers should still take note of ways to minimize or control mosquitoes in their areas (http://www.cdc.gov/ncidod/dvbid/westnile/astho/wnv_astho.html) . For example, eliminate standing water to keep mosquitoes from breeding or implement a mosquito control program. Public handouts and informational brochures are also available for download or order (<http://www.cdc.gov/ncidod/dvbid/westnile/education.htm>) .

The CDC monitors West Nile virus and tracks state statistics on the weekly updated list of Notifiable Diseases and Mortality Tables (http://www.cdc.gov/mmwr/mmwr_wk/wk_cvol.html). They also maintain a regularly updated map of reported human and non-human cases (<http://www.cdc.gov/ncidod/dvbid/westnile/Mapsactivity/surv&control12MapsAnybyState.htm>) .

The INFOGRAM is distributed weekly to provide members of the Emergency Services Sector with information concerning the protection of their critical infrastructures. For further information, contact the Emergency Management and Response- Information Sharing and Analysis Center (EMR-ISAC) at (301) 447-1325 or by e-mail at emr-isac@dhs.gov<<mailto:emr-isac@dhs.gov>>.

<http://www.usfa.fema.gov/fireservice/subjects/emr-isac/index.shtm>

Note - WNV is transmitted mostly through the direct bite by an infected mosquito. Other rare transmissions have been documented through blood transfusions, organ donations and breastfeeding mothers with their children. Physical contact with an infected person WILL NOT transmit the disease, nor can it be transmitted through respiratory droplets, however proper PPE should always be practiced.

Emergency responders can help to prevent or control the spread of WNV by assisting public health authorities with the eradication of mosquito breeding sites in their communities by eliminating standing water when identified, especially after storms.



[Excerpt from Emergency Management and Response Information Sharing and Analysis Center (EMR-ISAC), INFOGRAM 12-39, September 27, [2012](#)]

Identifying "Shake and Bake" Meth Labs

(Source: National Law Enforcement and Corrections Technology Center)

Over the past year, "shake and bake" methamphetamine (meth) labs have been found in aisles or bathrooms of stores in Oklahoma (http://www.fox23.com/news/local/story/Woman-caught-making-meth-inside-S-Tulsa-Walmart/Rgu31vt1m0me-p0WwKsN_w.csp), Alabama (<http://www.wsfa.com/story/17367220/meth-lab-found-in-boaz-walmart-restroom>), and Missouri (<http://now.msn.com/woman-clears-wal-mart-with-purse-meth-lab?jid=6&rid=5>), and in a store parking lot in Tennessee (<http://www.newschannel5.com/story/15056113/mobile-meth-lab-found-in-target-parking-lot>). The "one-pot" method using plastic water or soda bottles (http://www.mountaineagle.com/view/full_story/10859434/article-Meth-lab-forces-neighbors-to-evacuate-homes) has quickly become popular due to their small size and fast production.

This method also needs less over-the-counter drugs and chemicals, which helps circumvent legal purchasing limits put in place to prevent larger labs.

Small and mobile, people sometimes drive around with them in cars (http://alcoholism.about.com/od/meth/a/shake_and_bake.htm) to help dissipate the toxic fumes and then toss them out the window once the drug is done cooking. They have been found alongside roads, in deserted areas (<http://claremoreprogress.com/local/x1778836843/County-employees-spot-shake-and-bake-meth-lab>), and in cars or trucks during traffic stops.

Educating community, jurisdictional, and private sector partners (<http://www.policeone.com/drug-interdiction-narcotics/articles/1657890-One-pot-recipe-boosts-meth-use-in-Mich>) about signs of "soda bottle labs" (<http://www.examiner.com/article/shake-and-bake-meth-new-way-to-make-meth-amphetamine-faces-of-meth-photos-and-slideshow>) is advised, including a reminder that both the cooking process and used bottles are explosive, and people handling them have been seriously injured. The National Law Enforcement and Corrections Technology Center (<https://www.justnet.org/index.html>) has a fact sheet on meth labs (<https://www.justnet.org/pdf/00-Clandestine-Meth-Labs-Fact-Sheet.pdf> - PDF, 67.28 Kb), and the Illinois State Attorney General's website (<http://www.illinoisattorneygeneral.gov/methnet/recognizingmeth.html>) has information available to aid in spotting suspicious activities relating to meth labs.

The INFOGRAM is distributed weekly to provide members of the Emergency Services Sector with information concerning the protection of their critical infrastructures. For further information, contact the Emergency Management and Response- Information Sharing and Analysis Center (EMR-ISAC) at (301) 447-1325 or by e-mail at emr-isac@dhs.gov <<mailto:emr-isac@dhs.gov>>.

<http://www.usfa.fema.gov/fireservice/subjects/emr-isac/index.shtm>

Note - A reminder that in addition to safety concerns for all emergency responders, NYS EMTs (all levels) are to look for any signs of children in the vicinity of a Meth lab and if found are required as Mandated Child Abuse / Neglect Reporters to call the State Central Registry (SCR) as soon as possible after the emergency response and file the NYS report <<http://www.ocfs.state.ny.us/main/cps/>> LDSS 2221A to the local DSS office within 48 hrs.



U.S. Department of Homeland Security First Responder Training

Incident Response to Terrorist Bombings - Awareness: This four-hour awareness level course is designed to provide basic instruction in weapons of mass destruction (WMD), with a focus on explosives and incendiary devices as terrorist weapons. The course includes classroom presentations that address potential terrorist targets in U.S. communities, common military and commercial explosives (available to terrorists), improvised explosive devices (EDs), and response procedures that support safe and effective operations during bomb incidents.

Prevention and Response to Suicide Bombing Incidents: This three-hour awareness level course provides participants with the skills and knowledge necessary to prevent, interdict, mitigate, and/or respond to a suicide-bombing incident. The course will provide participants with the ability to conduct pre-attack analysis and planning, collect information and collate this information into intelligence, implement target-hardening counter-measures, conduct interdiction operations prior to a suicide-bombing incident, implement a graded approach to response in the event a suicide bombing is imminent, and respond in a safe and effective manner after a suicide bombing has occurred.

Attendees will receive certificates from DHS. No fee for the training.

DATE: Saturday, November 3, [2012](#).

TIME: Registration starts at 0730hrs. Course is in two segments (AM - Terrorist Bombing, PM - Suicide Attack). First course begins at 0800hrs. Program completion is at 1700hrs.

LOCATION: Chappaqua Crossing (former Readers Digest Campus) 480 Bedford Road Chappaqua, NY, Conference Center, Main Building,.

REFRESHMENTS: A light breakfast, lunch and afternoon snack is available for \$20 per person.

REGISTRATION: Contact Bob Coulombe via email at bobchappaqua@aol.com<<mailto:bobchappaqua@aol.com>> or phone 914 261 3750. Seating limited to first 150. Registrations DEADLINE: OCTOBER 29th.

Any questions, contact Bob Coulombe or go to <http://www.emrtc.nmt.edu> .



[Excerpt from Emergency Management and Response Information Sharing and Analysis Center (EMR-ISAC), INFOGRAM 12-30, July 26, [2012](#)]

Active Shooter Resources Available

(Source: DHS)

Since the mass shooting in Colorado last week, the EMR-ISAC has received multiple emails from a variety of sources featuring free online resources available to emergency responders, businesses, and citizens. A summary:

- * Active Shooter: What You Can Do - 45-minute online training provides guidance on how to prevent and prepare for an active shooter incident.
<http://www.training.fema.gov/EMIWeb/IS/IS907.asp>
- * Active Shooter: How To Respond - booklet and poster available for facilities owners and operators to prepare and respond to incidents.
http://www.dhs.gov/files/programs/gc_1259859901230.shtm#3
- * Active Shooter Awareness Virtual Roundtable - this archived September [2011](#) webinar discusses response plans and employee training.
http://www.dhs.gov/files/programs/gc_1231165582452.shtm
- * Performance Venues - Indicators of Violence & Protective Measures (PDF, 131.5 Kb) - discusses suspicious activity reporting and protective measures.
http://content.govdelivery.com/attachments/USDHSFEMA/2012/07/20/file_attachments/143108/Performance%2BVenues-Indicators%2B%2BPMs%2Bdoc%2B7-20-12%2BFINAL%2B%25282%2529.pdf
- * Bomb Prevention Training - open to State, local, and private sector entities.
http://www.dhs.gov/files/programs/gc_1265223119415.shtm
- * Bomb Making Materials Awareness Program - helping to foster information sharing between businesses and law enforcement.
http://www.dhs.gov/files/programs/gc_1259938444548.shtm

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<http://www.usfa.fema.gov/fireservice/subjects/emr-isac/index.shtm>