

CONFERENCE REVIEW

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**The National Association of Emergency Medical Services Educators (NAEMSE)
11th Annual Symposium**
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This conference was the 11th annual National Association of Emergency Medical Services Educators (NAEMSE) symposium. The conference was attended by appropriately three hundred delegates held in Pittsburgh, PA at the Westin Hotel & David L. Lawrence Convention Center.

Several pre-conference workshops were offered to delegates including:

Cyanide poisoning
Systematic approach to teaching skills
Wilderness EMS
Multi-lead medic workshop
Achieving teaching objectives through simulation

The conference adopted the notion and theme of “Responding to the Call”. The symposium paid special tribute to the fifth anniversary of September 11th 2001 and given the amazing response of emergency workers this symbolised the epitome of “Responding to the Call”. This allowed conference organisers to seek both National and International experts in this specific, but broad subject matter. Break-out sessions included the following secondary themes:

Professional Growth/Development
Classroom Management
Curricula
Program Administration
Self-preservation
Research

The conference sessions were structured concurrently with four parallel sessions running at any one time. Each simultaneous session allowed four speakers to present for up to fifty minutes with ten minutes for questions from the floor.

The conference committee invited several keynote presenters namely, Captain J.D. DeSantis, Dr Brian Bledsoe (as informative and entertaining as per usual!) and Dr Jeffrey W. Runge.

The opening keynote was provided by Captain DeSantis who was at the World Trade Center during this global tragedy. Captain DeSantis explained how EMS training saved us and how our EMS training failed us; lessons learned in retrospect.

Brian Bledsoe outlined how experienced physicians solved clinical problems using their mastery of anatomy, physiology, pathophysiology and pattern recognition in determining a diagnosis and planning a treatment plan. He strongly argued this method can readily be applied to EMS education.

Other noteworthy sessions included: 'Generations in Education' by Jeffrey Lindsey. Jeff identified what we, as educators have to do to make our learning environment adaptable for each of the generations. Ken Sternig presented 'Research in EMS - the role of an EMS educators'. This presentation acknowledged some of the key elements EMS educators need to be aware of when participating in EMS research. Ken shared methods such as the use of learning management systems and distributive learning to deliver education relating to research. In addition, he highlighted specific tools that can be used to assure a smooth communication between a research study's principle investigator and the EMS providers. Finally, Madeleine O'Donnell presented 'Applying pedagogical principles to online teaching'. Maddy claimed that online teaching requires thoughtful development for the construction of curricula material based upon established and sound pedagogical principles.

This year's symposium also showcased five abstracts in the category of education (oral presentation) session. The five abstracts were selected from the Prehospital Care Research Forum's 2006 Call for Abstracts. These abstracts were deemed the most notable from all received in the category.

It is also important to make mention of the final keynote, delivered by the very informative and dynamic Jeffrey W. Runge (MD) from the US Homeland Security Department. His presentation titled: 'Medical Disaster Preparedness for high-consequence events' outlined several salient points:

- Preparedness for major disaster and terrorism is a shared responsibility.
- A major event will exceed the capacity of any single jurisdiction.
- Capabilities cross disciplinary and professional boundaries.
- A common framework is required to develop those capabilities as a country.

He also discussed at length the National Response Plan (NRP) and National Incident Management System (NIMS) explaining how a consistent nationwide framework would assist in preparing for and managing incidents sequentially.

In closing, the overall organisation and quality of presentations emphasised the current 'state of play' from a prehospital educational point of view. It was refreshing that our colleagues across the Pacific are also making strong progress not only as autonomous health care professionals, but importantly in the areas of clinical application, research and integration into EMS curricula. Finally, as only the third Australian academic to attend this conference, can I strongly urge that you consider submitting an abstract from an Australian context to the next NAEMSE conference – you won't be disappointed.

The 12th Annual NAEMSE conference is in sunny and enthralling Hollywood, CA from September 10-16, 2007. More information can be found at the following URL: www.naemse.org