

The CA-6 Chronicles

The latest news and information from the
San Francisco Bay Area Disaster Medical Assistance Team, DMAT CA-6
— Visit us at www.dmatca6.org —

Vol. 6, No. 12

December, 2006

Caregivers to the Nation...Building a bridge between hope and despair



Founded in 1997

Mark Your Calendars

- **20 Jan** – Team meeting, 1000 – 1500 hrs, Menlo Park Operations Center. Prospective Member Orientation 0900 – 1000 hrs.
- **03-18 Feb** – Haiti missions #1-2.
- **02-24 Feb** – Winter FTX CANCELLED. See below for additional information.
- **10 Mar** – Clinician's meeting, 0900 hrs.
- **17-22 Mar** – NDMS Conference, Nashville, TN. See additional information below.

Commander's Corner

By David Lipin, Commander

Hello everyone. As we all prepare to wrap up 2006 and usher in 2007, I'd like to take one last opportunity to thank everyone for your continued support of and dedication to our federal and non-profit teams and their common mission to bring medical relief to the victims of disasters. I hope everyone has a quiet and safe holiday season.

February FTX Cancelled

Unfortunately, the transition from DHS to DHHS has caused NDMS to put a freeze on all January and February trainings. As a result, we are canceling our planned Winter FTX, previously scheduled for Feb 24-26, 2007. We'll try this again in a future year!

NDMS Conference 2007

We do not yet know how the team funding, if any, will work for people going to the NDMS Conference. But we do know that there won't be much funding this year.

Members always have the option of going "on their own" unaffiliated with the team or NDMS. If you choose to do so, you should consider making your travel arrangements soon. Southwest Airlines has inexpensive tickets to Nashville at the moment. But keep in mind that you may also be committing to a less-than-optimal plan, should NDMS funds or tickets become available and you can't cancel your plans or get a refund.

Katrina Interviews

The New Orleans Historical Society will be present at our January team meeting in order to interview members who deployed to Hurricane Katrina. They are building an archive of the event, and would like first-person accounts. It's optional participation, and they might select only a few for interviews, based on whoever shows up.

Distinguished Member of the Year

You've got a few days left to vote for our Distinguished Member of the Year – the person that you feel best personifies the spirit, commitment and mission of the team.

The elected member receives a Distinguished Member ball cap, their name on the plaque at the operations center, and (hopefully) an all-expenses-paid trip to next year's NDMS Conference in Nashville. (I say "hopefully" because it's not clear whether we'll be permitted to fund this person this year; if not, I'm sure we can find another appropriate way to say "thanks"!).

The rules are simple:

Only team members are eligible (duh!), and the following previous

Distinguished Members are not eligible:

- 2005 – Brian Buckhout
- 2004 – Terry Holbrook
- 2003 – Bill Bush
- 2002 – Bonnie Atencio
- 2001 – Steve La Plante
- 2000 – Walt Sanders
- 1999 – Barb Center
- 1998 – Dave Lipin
- 1997 – Don Cheu

E-mail your vote to Bonnie Atencio (administration@dmata6.org) by the end of the year.

2007 Dues

Dues for the SFBAY DMAT (non-profit) 2007 calendar year are due by the end of this year to avoid a late fee. See the form attached to this newsletter.

Something new for this year – pay with your Visa or MasterCard! Just fill in the form and fax it back to us. Couldn't be easier!

MD Pain Management Reminder

Our Medical Director sends a reminder to all team physicians – you need 12 hours of pain management CME's to keep your CA medical license in good standing. It's a one-time deal mandated in California and must be completed by 12/31/06 or your license will lapse.

The AMA has a free online program that fulfills the requirement. You do not need to be an AMA member to take advantage of it. Come to think about it, you do not need to be a physician either. I don't know if they offer equivalent CE's to non-physicians but it is available to all and it's very good. The URL is: <http://www.ama-cmeonline.com/>.

[Contact me](#) if you need more clarification.



2007 Atlantic Hurricane Forecast

The first Colorado State University forecast for the 2007 hurricane season is in, and it doesn't look very promising. Numbers in parentheses are the average stats from 1950 – 2000, and the numbers after the parentheses are the forecasts for next year:

- Named Storms: (9.6) 14
- Named Storm Days: (49.1) 70
- Hurricanes: (5.9) 7
- Hurricane Days: (24.5) 35
- Intense Hurricanes: (2.3) 3
- Intense Hurricane Days: (5) 8

Probabilities for at least one major (category 3+) hurricane landfall on each of the following coastal areas:

- Entire U.S. coastline - 64% (average for last century is 52%)
- U.S. East Coast Including Peninsula Florida - 40% (average for last century is 31%)
- Gulf Coast from the Florida Panhandle westward to Brownsville - 40% (average for last century is 30%)
- Above-average major hurricane landfall risk in the Caribbean



WTC Worker's Comp Update

Released by the New York City Department of Health and Mental Hygiene, World Trade Center Health Registry, November 30, 2006

The Workers' Compensation Law has been amended to protect your right to file for 9/11-related workers' compensation if you become sick in the future. In order to file a claim, you must first register with the Workers' Compensation Board. Registration is available for most workers and volunteers who become injured as a result of 9/11-related rescue, recovery or clean-up work.

Registering now will protect your right to file for 9/11-related workers' compensation should you develop a latent disease in the future.

Deadline

The registration deadline is August 14, 2007. If you miss this deadline, you will not be eligible to file a 9/11-related Workers' Compensation claim in the future.

How to Register

In order to register, you must complete and submit a registration form to the Workers' Compensation Board. To obtain a registration form, call (518) 474-6670 or visit <http://www.wcb.state.ny.us/content/main/forms/WTC-12.pdf> to download a form. A registration form is also included with this letter.

To File a Claim

To report a work-related illness, call (888) 800-0029 or visit www.wcb.state.ny.us.



NDMS News

By David Lipin, Commander

Welcome to HHS



RADM W. Craig Vanderwagen, MD, our new boss at HHS, has released a "Welcome to HHS" video message for all NDMS members. You can view it at <http://videocast.nih.gov/ram/holiday121806.ram> or at http://worldvid.cit.nih.gov/holiday/vanderwagen_holiday121806.wmv. These are different formats, so hopefully one of them will work with your computer.

Individual Travel Cards

Very few team members have submitted their application for an HHS credit card. This is mandatory for all NDMS members; if you don't submit an application by the yet-to-be-determined deadline, then you'll be removed from NDMS!

Details of this program are in the Nov '06 newsletter, but the short of it is that it's quick and simple. Just [click here](#) and follow the instructions.



Operations Update

By Terry Holbrook, Operations Section Chief

Without any hardcore news to report or gossip about or conjecture on, let us in the Ops Section simply greet you warmly, wish you and yours the most peaceful and rewarding holiday season, and give you prayers for a safe and happy and fulfilling new year.

The pleasure to find ourselves in a place in life where you are all a part of it must truly be considered a blessing.



Director Paulison Lays Out Vision for a “New FEMA”

I'd like to thank all of you for taking time from your busy schedules to allow me to talk about one of my favorite subjects-the Federal Emergency Management Agency. FEMA has been in the news a lot during the past year. And while the coverage has not always been positive, it certainly reflects just how important this agency is to America. FEMA is very special to me-not because I am privileged to lead such a fine organization-but more important, because I get to work with people who are devoted to helping others.

I believe many Americans have little awareness of:

- FEMA's size, which is about the size of many high schools-or 2500 full time employees;
- FEMA's mission, which is to help America mitigate against, prepare for, respond to, and recover from disasters;
- FEMA's reliance upon partners-be it the States, the Department of Defense, or others in the federal, state or private sector-to accomplish nearly all that we do, and
- Citizens' personal roles and responsibilities, along with state and local jurisdictions, in the emergency management process.

Now I'd like to talk about how we at FEMA and all of our counterparts around the country need to work better together when we're facing disasters. It's well established that all disasters are local; however, Katrina made it very clear that we need to prepare for, respond to, and recover from disasters as partners, standing side by side, so if there's a need in the system or a gap to fill we fill it before there's a failure in the emergency management system. The traditional model of waiting for State and local capabilities to be overwhelmed before federal assistance is on the scene of a disaster is no longer sufficient.

Responding to all disasters, catastrophic or otherwise, must now be viewed from the perspective of “all for one” and “one for all.” It should be everyone's responsibility to make sure that no one fails. As an agency we are dedicated to being a partner with all of the States and the private sector. And, most importantly, we are a support agency. We are not coming in and taking over. FEMA will proudly lead the transformation of preparedness and emergency management in the nation. But we need the help of everyone in the emergency management community to do this.

As an agency, we're in much better shape than last year. But we still have a long way to go. And a critical piece of that progress is to ensure a can-do, results-oriented culture at FEMA. The men and women of FEMA are dedicated, resourceful public servants who work long hours with the single goal of helping their fellow citizens prepare for and recover from disasters. Many of them have worked seven days a week for months on end whether in response to Katrina or to the countless other disasters our nation faces each year. They have made great sacrifices, being away from their families for months at a time to help their fellow citizens. And they've been able to rise above and fight through a lot of negative and sometimes unfair press coverage and sustain their pride and commitment. This “MacGyver-like” approach – for those who remember the television series – has served FEMA well because we've been able figure out how to leverage scarce resources and innovation to get the job done for our disaster victims.

This quality has also prevented us from developing a more disciplined, strategic approach to many of our business processes. But we need to build on that willingness to work hard and look for ways to work smarter now and make sure the job gets done right. I'd like to spend a few minutes speaking about other challenges for FEMA. Following Katrina, there were dozens of reports about what went wrong in response to Hurricane Katrina and hundreds of constructive recommendations to avoid similar mistakes in future disasters.

I bring this up to make a point – although we can always improve systems and processes, we have a good understanding of what went wrong and why. We are aggressively and diligently working through the myriad constructive recommendations that emerged. Let us continue the good work

developing and implementing positive change for emergency management. We must resist the call for additional investigations unless they are based on new evidence or allegations. Rather than conduct additional studies, inquiries and analyses that look backward to tell us what we already know, we should continue to focus our energy on correcting the problems. Process is important, but results are what we and our counterparts at the state and local level will be judged upon. It will require changing the culture at FEMA by getting people to think more broadly in terms of results. The organization assessments that I mentioned earlier will be important tools to push us towards smarter, more results-oriented thinking.

But there is much to do beyond the confines of one agency. We will also need to learn how to work together better within the larger emergency management community. As we strengthen FEMA and align with this vision, what can America expect of us? America can expect that we will:

- Instill public confidence that FEMA is an agency that works for all of our citizens.
- Capitalize on partnerships among the local, state and federal authorities-because we will bring value.
- Manage our assets more efficiently and effectively.
- Help the Nation continue to build a culture of preparedness.
- Develop international protocols for emergency management, so we can be more effective when we are called upon to help others around the world.

And accomplishing all of these, we will be better able to marshal effective national responses to disasters.

FEMA's challenges are great, but so is our determination to meet and exceed the expectations of the American public. The men and women that make up FEMA are dedicated to strengthening the Nation's preparedness and our ability to respond and recover from disasters.



Safety First

Mass Sociogenic Illness

By Walt Sanders, Safety Officer

Brrrrrrr. It's cold again! Time to remind ourselves of some cold weather precautions and potential maladies. First, how to avoid problems for yourself:

- Wear several layers of loose clothing with a base layer made of a wicking material to help keep moisture away from the skin. Covering head and mouth will help protect lungs and prevent heat loss. The greatest body heat loss is from the head.
- Go to a warm dry area (preferably indoors) for frequent short breaks.
- Stay hydrated.
- Learn to recognize the symptoms of cold-related illnesses and how to avoid them.

Next, in a cold-weather deployment, we may well encounter frostbite. Some warning signs of frostbite include a tingly, numb sensation in the affected area, most often the fingers, toes, ears and nose. Skin may feel hard to the

touch and take on a pale, waxy-white color.

Frostbite Treatment

- Get to a warm, dry place and remove any wet or blood-flow-restrictive clothing.
- Do not rub the skin as that can damage tissue.
- Gently place the affected area in warm water (100-106° F) for 25-40 minutes. Do not pour water over the area or use hot water as this will cause the skin to warm too quickly and possibly damage the tissue.
- When normal skin color, feeling and movement have returned, dry and wrap the area to keep it warm.
- If there is a chance the area may become cold again, do not warm it. This may cause tissue damage.

A more emergent condition is hypothermia. Symptoms include a body temperature of 95° F or lower, fatigue, shivering, slurred speech, clumsy movement and erratic behavior.

Hypothermia Treatment

- Do not leave the person alone.
- Get to a warm, dry area, remove any wet clothing and wrap in dry clothes or blankets.
- Administer a warm sugary beverage.
- Initiate arm and leg movement to generate heat in the muscles.
- Place hot packs in the armpits, neck, head and groin area.
- DO NOT place person in warm bath or rub skin. This may cause heart stoppage.

Stay safe and warm, Walt.



San Francisco Bay Area Disaster Medical Assistance Team

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2007 Regular Member Annual Dues Statement

Covers Period from January 1, 2007 through December 31, 2007

Name: _____ Email: _____

Regular Member Dues if paid by January 1, 2007 = \$25.00	\$25.00
Late fee if paid between January 1 and January 31, 2007 = add \$5.00	\$ _____
Late fee if paid between February 1 and February 28, 2007 = add \$10.00	\$ _____
Late fee if paid after February 28, 2007 = add \$15.00	\$ _____
If dues in arrears for 2006 = \$40.00 per overdue year	\$ _____
<i>Tax-deductible Voluntary Donation to SFBAY DMAT (not required)</i>	\$ _____
TOTAL AMOUNT:	\$ _____

- Check #: _____
- Visa / MasterCard (circle one) #: _____ Exp. Date: _____
- CVV: _____ Signature: _____ Date: _____

Members will receive the San Francisco Bay Area Disaster Medical Assistance Team monthly newsletter and receipt of email related to disaster medicine, field deployments and other activities of the team. Email addresses and all other member information are kept confidential. No mailing lists are ever sold to third parties. Information may be shared with NDMS, the State of California EMS Authority, the California Department of Motor Vehicles, law enforcement, and/or the SFBAY DMAT insurance agencies as needed for documentation of certification, licensure, background suitability, and ability to be deployed.

Dues are not required for participation and membership in the federal entity DHS/FEMA/NDMS/DMAT CA-6. Dues are required for participation and membership in the non-profit entity San Francisco Bay Area Disaster Medical Assistance Team and its non-profit activities.

Payment may be made by check, money order, Visa or MasterCard in US funds only. Checks should be made out to 'SFBAY DMAT' and mailed to the DMAT office address listed above. There has been no increase in dues for the current year. Late fees are added for those paying dues late to encourage members to pay at the beginning of the year and to save the additional effort and cost of issuing further reminders.

The San Francisco Bay Area Disaster Medical Assistance Team is a 501(c)3 corporation, and is registered in the State of California as a non-profit public benefit corporation. Donations are deductible to the fullest extent of the law. Donations over \$100.00 will be acknowledged by a receipt. All other donations will be acknowledged by receipt if requested. Copies of the Financial Statement for the latest filed year are available upon request.