

ASMI Report – Meeting Of The Minds
Saturday, September 26, 2009
Sheraton Hotel – Bloomington, MN

Accident Scene Management Inc. (ASMI) has trained over 15,000 students in Motorcycle Trauma First Response. With 29% of our students going on to use their training, there is no doubt this training is vital to improving outcomes by starting proper emergency care immediately. According to 2008 NHTSA's Traffic Safety stats only 1.2% of roadway crashes involve motorcycles. The disturbing number is that motorcycle crashes make up 14% of serious or fatal roadway injuries. In comparison, 10 years ago motorcyclists made up 3% of crashes and 11% of fatalities. While there is much debate about NHTSA statistics, something we can agree upon is that much negative attention is given to motorcycling in general due to the information stated above. ASMI is of the firm opinion that preventing a crash in the first place is the best possible solution but that when a crash does occur there is much that we can do better to reduce the injuries and fatalities that occur as a result.

How is this a “motorcycle rights issue?”

- Motorcyclists have the right to receive correct information re: proper response when someone goes down
- Motorcyclists have the right to expect good advise when 911 is called
- Motorcyclists have the right to expect properly trained emergency personnel to arrive at the scene
- Motorcyclists have the right/duty to expect those they ride with to help them if they go down (social responsibility)

While ASMI started as an organization that teaches motorcyclists what to do for each other, we quickly realized that there were other gaps in emergency care that prevented a smooth transition of care. In order to make a difference in the entire response ASMI developed a program for EMS and began traveling to Washington DC to participate in the Motorcycle Network Meetings held at the DOT (hosted by NHTSA). While this has not resulted in a change of practice or attitude yet, we are networking in a way that is slowly bringing attention to the deficits that exist in Trauma Care. The most notable work that is currently being done by ASMI is in the area of developing a “Best Practice” for Motorcycle Trauma outcomes. A meeting was held in December 2008 in Wisconsin at Waukesha County's dispatch center to discuss a Best Practice Model for motorcycle trauma. The meeting was attended by Waukesha Co. Executive Dan Vrakas, WI State Motorcycle Safety Coordinator Greg Patzer, Waukesha Co. EMS Director Dr. Mark Schultz, Representatives from the Dispatch Center, Fire Depts (EMS), ASMI instructors and ABATE of Wisc. We discussed a seamless process for those who were involved in a motorcycle crash by being sure we are all working within the same plan of care for the best outcome. A proposal was discussed that involved 4 entities.

- Motorcycle Rider Coaches would complete ASMI Basic Training since they are the first to have contact with most new riders
- Motorcycle Groups would continue to be encouraged to offer training to their members since they are most likely to be first on the scene and with proper training can start Emergency Care while waiting for the EMS to arrive. Incentives would continue as a way to encourage more bikers to be trained.
- 911 Dispatch Protocols would be developed to provide specific recommendations for care of motorcycle trauma victims (currently there are none)
- EMTs would be trained in Motorcycle specific care including but not limited to helmet removal and jaw thrust rescue breathing (currently there is no required training specific to motorcycles, not even helmet removal).

All in attendance were in agreement that this was a good model worth implementing and that they would support this process. A follow-up meeting was held in Madison, WI with Senator Mary Lazich, HHS, and DOT to talk about how those agencies can assist financially & logistically to implement this model. Nothing was promised & nothing new has been implemented to date.

ASMI is currently working with the Medical College of Wisconsin's crash test lab and the Center for Injury Prevention to test Helmet Removal techniques. Currently there are two commonly taught two person techniques, neither technique has ever been formally tested. We also want to implement a one person technique for First Responders who do not have a 2nd trained person at the scene. Emergency physicians Dr. Schultz and ASMI's BOD member Dr. Suzanne Martens are working on putting a study together with Dr. Pintar (researcher) from the Medical College of Wisconsin. Initial testing of manikins has been done and shows promising results.

On a final, personal note – I believe all state rights organizations should bring these issues back to their Board of Directors. While there has been resistance to add a “crash mitigation” strategy to what is supported by rights organizations, this topic is far from other strategies that have been proposed to “crash better”, which put the responsibility of crashing better on the biker. With only 1% of bikers surviving when trauma results in CPR, we need to implement knowledge as well as other strategies to reduce the chance that we get to the point that CPR is needed! Using a multi-pronged approach to achieve our final goal of reducing injuries and fatalities, we will have a better chance of achieving our goals. Consider sending someone from your state to be trained as an instructor and start to spread this message to those around you. The results are obvious when you read the many testimonials found on our website at www.accidentscene.org

Respectfully Submitted,
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ASMI is a non-profit organization established in 1996 to reduce injuries and fatalities to motorcyclists through First Response Education. ASMI offers programs to both General Public and Emergency Medical workers. ASMI lead Instructors are EMT or higher in medical training and are motorcyclists. For more information visit www.accidentscene.org