IACP POLICE PHYSICIANS SECTION
CONFERENCE AGENDA
Room 122AB

SATURDAY, OCTOBER 21, 2017

8:00 AM – 9:30 AM  POLICE PHYSICIANS SECTION MEETING

10:00 AM – 11:30 AM  NEW TECHNIQUES FOR PREDICTING AND PREVENTING THE NUMBER ONE KILLER OF POLICE: HEART ATTACK
Dr. John Sheinberg – Cedar Park PD, US Marshals Service

There is no question, heart attack is one of the most significant killers of law enforcement officers. We have known for years that at ages 55 to 59, a civilian has a chance of dying from a heart attack of around 1.5%, while a police officer has the probability of dying from a heart attack in that same age range of around 56%. We are also seeing the development of non-fatal heart attacks much more frequently and younger in men and women in law enforcement. Fortunately, over the last several years, the ability to detect the early stages of heart disease has advanced tremendously.

12:30 PM – 1:30 PM  DECOMTAMINATION OF POLICE AND CITIZENS FROM A CHEMICAL EXPOSURE
David McArdle – SOC USA
John Sligh – UF Healthcare
Daniel Stout – Gainesville Police Department

Some chemical agents can cause serious injury or death after contact. Duration of exposure as well as amount of exposure can greatly magnify the adverse effects. Recommendations from a recent national symposium by the American College of Toxicology will be presented. Hasty field decontamination of personnel and critical equipment will be discussed.

2:00 PM – 3:00 PM  CREATING A ‘BLEED SAFE’ COMMUNITY
Dr. Joshua Bobko – Westminster Police Department

Recognizing the gap in traditional emergency medical services (EMS) response, Westminster Police Department started an innovative program in 2014 to develop a community partnership by integrating First Care Providers into the disaster planning framework. Implementation of these trained citizens has improved community resilience, public relations, and delivered a statistically significant improvement in the ability to provide care in the ‘hot zone’. By pre-identifying a network of locations and individuals within the city as a quantifiable to become the first truly 'Bleed Safe' community.
SUNDAY, OCTOBER 22, 2017

8:00 AM – 9:30 AM  
**NARCAN PROGRAM: ESSENTIALS FOR THE POLICE EXECUTIVE**  
*Scott S. Coyne, M.D. – Suffolk County Police Department*

Suffolk County Police Department (SCPD) began the Narcan (Naloxone) program for opiate overdoses in 2012. All patrol officers are certified and in 4 1/2 years have administered Narcan 725 times with a 98% success rate of opiate reversal. SCPD has been selected as a model for both New York state and is a leading national model of this patrol based Narcan Program. The opiate overdose epidemic, Narcan pharmacology and growing impact of fentanyl will be discussed. Key features including training, medication purchase, storage, and sample policies will be presented. Relevant laws, regulations, liability issues, Good Samaritan statutes and community police outreach programs will be discussed. Sample Narcan kits will be demonstrated.

10:00 AM – 11:30 AM  
**A VIDEO ANALYSIS OF IMMEDIATE MEDICAL CARE BY LAW ENFORCEMENT AFTER OFFICER INVOLVED SHOOTINGS**  
*Matthew Sztajnkrycer – Rochester Police Department*

Recently, questions have been raised about the medical response of law enforcement to subjects of officer involve shootings (OIS) in the immediate aftermath of high profile use of force encounters. A failure to render appropriate and timely aid to these individuals has been featured in several lawsuits and settlements. This presentation will analyze OIS events captured on video in order to examine in real time the frequency, nature, and appropriateness of care provided prior to EMS arrival. The presentation will use relevant video footage to highlight training and practice gaps. These gaps shall be further discussed in the context of evidence-based medical response to develop specific recommendations for physicians supporting law enforcement.

12:30 PM – 1:30 PM  
**EVIDENCE-BASED SPORTS MEDICINE AND STRENGTH AND CONDITIONING MODEL FOR RECRUITS AND INCUMBENTS**  
*Joe Dulla – Los Angeles County Sheriff’s Department  
Joseph Horrigan – Southern California University of Health Sciences*

A drop in the birth rate of 21 to 30-year-olds is adding to the talent crunch faced by law enforcement and public safety recruiting. Many incoming recruits do not possess the same physical fitness and sport backgrounds of years ago. Incumbents may also be challenged with rising health concerns. Department of Defense, professional, and collegiate sports possess sports medicine and evidence-based strength and conditioning models that can be of great use to law enforcement. The Los Angeles County Sheriff’s Department has implemented a sports medicine model in the academy with positive results on a minimal budget. This workshop will explore ways for all types of agencies to develop, fund, and evaluate similar programs for recruits and incumbents.

2:00 PM – 3:00 PM  
**UPDATE ON ILLICIT DRUGS: FROM FENTANYL TO SYNTHETIC CANNABINOIDS**  
*Stephen Wood – WEMA/Winchester FD/PD*

This program will provide an update on the current climate of illicit drugs including topics on fentanyl, methamphetamine, purified marijuana and synthetic cannabinoids. Specifically, this talk will address the history, manufacture, effects, pharmacology, toxicology and issues around detection.
MONDAY, OCTOBER 23, 2017

8:00 AM – 9:30 AM  DEVELOPING AN EFFECTIVE RESPONSE TO POLICE MENTAL HEALTH AND SUBSTANCE ABUSE CHALLENGES
Brian Nanavaty – Dynamic Life Recovery Centers
Wayne Stewart – Dynamic Life Recovery Centers

Workplace studies advocate healthy employees are more productive, use less sick time, and are more positive about their employer. Studies also show one in four police officers may experience substance abuse or mental health challenges during their career and yet many agencies have no policy directing officers and supervisors at the scene in determining appropriate response. Additionally, many agencies have no understanding of insurance issues or available clinical resources. This session is presented by Captain Nanavaty (retired), a finalist for 2016 IACP Officer of the Year for his nationally recognized work on officer wellness at Indianapolis Metro Police Department. Nanavaty currently serves as Director of Outreach at Dynamic Life Recovery Centers (Florida).

1:00 PM – 2:30 PM  THE ISRAELI EXPERIENCE IN DEALING WITH MASS CASUALTY VIOLENCE
David McArdle – SOC-USA
Isaac Ashkenazi – Ben Gurion University

Israel has been dealing with terrorist attacks for many years. Their experience will be shared regarding lessons learned and operation guidelines.

3:00 PM – 4:00 PM  PREPAREDNESS AND RESPONSE: USE OF TACTICAL MEDICAL TEAMS AND MEDICAL Countermeasures
Edwards Gabriel – HHS/ASPR

Within the U.S. Department of Health and Human Service’s Office of Emergency Management lies a Tactical Programs Division. The Tactical Medicine Branch has the capability to provide direct operational medical support (Low Signature/Footprint Medical Capability, High Threat/Risk Medical Response), as well as Tactical Medical Education, Law Enforcement (LE) Medical Direction, LE Liaison/Force Protection Coordination, and Medical Consultation. While not widely known, these services are available and aim to support our law enforcement officers in a number of austere environments. Additionally, the Office of the Assistant Secretary for Preparedness and Response supports the development of medical countermeasures to address the public health and medical consequences of chemical, biological, radiological, and nuclear (CBRN) accidents, incidents and attacks, etc.
OFFICER INITIATED MEDICAL CARE AT THE POINT OF WOUNDING: THE TUSCAN, ARIZONA POLICE EXPERIENCE

Michael Johnson – Tucson, Arizona Police Department
Jason Bredehoft – Tucson, Arizona Police Department
Eric Kazmierczak – Tucson, Arizona Police Department Training Academy
Andrew Tang – Director of Trauma Service

The Tucson Police Department has 1200 officers on the street with Tactical Emergency Casualty Care training. They will report on their experience with over 300 cases of officer initiated medical care from “point of wounding” to definitive care through the Trauma Service at the University of Arizona Medical Center Tucson, a Level I trauma center. In this session the attendee will be able to describe key components of training officers to provide point of care medical treatment in a high threat environment. The attendee will be able to compare and contract typical wounding patterns and treatment in the military experience and the civilian law enforcement sector. Additionally, positive interactions with the community by providing this life saving service will be highlighted.

CARDIOVASCULAR RISK IN THE ARGENTINE FEDERAL LAW ENFORCEMENT PERSONNEL

Dalia Schejtman – Freelance Advisor in Police Health

The epidemiologic profile of the operational personnel of the Argentine Federal Police (AFP) in the city of Buenos Aires, Argentina, was analyzed and the results highlight the need to implement intensive cardiovascular prevention programs. The total sample comprised the assessment of 11,652 police officers. After a first medical examination at their workplace when awareness was promoted and nutritional and medical counseling provided, a second health examination was performed on 1,005 individuals from the same sample (average length of time: 905 days). These results were compared with the Argentinian general population.

DISCUSSIONS A POLICE EXECUTIVE SHOULD HAVE WITH THEIR LOCAL EMERGENCY MEDICAL SERVICE (EMS) DIRECTOR

David McArdle – SOC-USA

Sadly, most police agencies do not have a physician specifically trained and dedicated to supporting law enforcement operations. Your local fire department or third service ambulance provider typically has a physician dedicated to oversight of their advanced level providers. Planning prior to a critical incident is mandatory to make sure everyone has consistent expectations and a common goal. Guidance for dialogue on a tiered response to homicides in progress, minimizing the risk of sudden death in custody, and preservation of forensic evidence in a variety of common high profile situations will be presented as topics to discuss with your local medical providers.

This Live activity, Annual Meeting of the Police Physicians Section of the International Association of Chiefs of Police, with a beginning date of 10/21/2017, has been reviewed and is acceptable for up to 15.00 Prescribed credit(s) by the American Academy of Family Physicians. Physicians should claim only the credit commensurate with the extent of their participation in the activity.