



# BSBRA SIGNAL 19

“and the following messages”



## Shamrock

The **shamrock** refers to the young sprigs of clover or trefoil. It is known as a symbol of Ireland, with St. Patrick having used it as a metaphor for the Christian Trinity, according to legend. The name shamrock is derived from Irish seamróg, which is the diminutive version of the Irish word for clover (seamair) meaning simply "little clover" or "young clover".<sup>[1]</sup>

Shamrock is usually considered to refer to either the species *Trifolium dubium* (lesser clover, Irish: seamair bhúí)<sup>[2]</sup> or *Trifolium repens* (white clover, Irish: seamair bhán). However, other three-leaved plants—such as *Medicago lupulina*, *Trifolium pratense*, and *Oxalis acetosella*—are sometimes called shamrocks or clovers. The shamrock was traditionally used for its medicinal properties and was a popular motif in Victorian times.

## Chief Gerald Guzsack # 30



No Report Submitted for the month of March

**3-24-30G Gerald Guzsack Chief of Department @ BSBRA**

## 1st Assistant Chief Felix Rodriguez # 31



**I want to thank the membership for another successful month, calls are getting out and the building is being kept clean. The new ambulance has been delivered to Nassau fire and it's just a matter of time it will be delivered to us. Stay tuned!!!**

**A few things I want to address. First, we would like to start seeing the membership addressing the officers by their rank. This is a small step in getting the structure of the organization back is gear. It may not seem important to some but it shows acknowledgment to the success of these individuals. This is in no way a sense of self satisfaction for the officers, in our eyes it a step towards rebuilding the structure.**

**We would also like to see the ambulance getting cleaned to get the salt removed from the rigs. In addition the physicals have started and the dates will be posted as they are made available, every member must have a physical done by either your primary care physician or by our physicians. However all drug testing must be done by our physician and its mandatory.**

**Keep up the good work and as always our doors are open for any questions or concerns.**

**-Felix Rodriguez 1st Assistant Chief @ BSBRA**

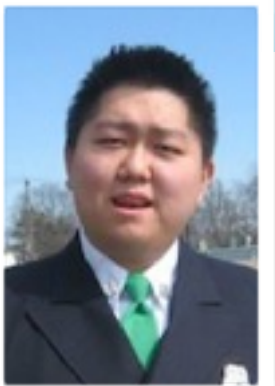
## 2nd Assistant Chief Brian Stevens # 32



No Report Submitted for the month of March

**-Brian Stevens 2nd Assistant Chief @ BSBRA**

## 3rd Assistant Chief David Kwok # 33



**Hello everyone great job this past month.**

**Just a reminder please keep the ambulances and the building clean at all times, especially the rigs with all the dirt and salt from the street. I will be sending out an email in the future about the EVOC class upcoming month. I hope to see everyone for the St. Patrick's day parade on the 14th it will be a great day with lots of fun with food afterwards. Keep up the good work and have fun!**

**-David Kwok 3rd Assistant Chief @ BSBRA**

# Captain's Reports



SUNDAY Brian Dufour #50

No Report Submitted for the month of March

Bryan Dufour Captain #50 \* [bdufour@bsbra.org](mailto:bdufour@bsbra.org)



MONDAY Robert Dean #51

No Report Submitted for the month of March

Robert Dean Captain #51 \* [rdean@bsbra.org](mailto:rdean@bsbra.org)



TUESDAY William Lutz #52

No Report Submitted for the month of March

William Lutz Captain #52 \* [wlutz@bsbra.org](mailto:wlutz@bsbra.org)





## WEDNESDAY John Martinez #53

I know that "Thank You" is not enough to relay how grateful I am for all the help i've been getting during my day on Wednesday

If you need driver training or need to be precepts, please do not be shy, just come down on Wednesdays you are more than welcome to ride, and believe me you will ride!! Wednesdays is known for the amount of calls we get,

Please keep the building clean, do not leave trash in the rigs, and do your rig checks, this are very important

John Martinez Captain #53 \* [jmartinez@bsbra.org](mailto:jmartinez@bsbra.org)



## THURSDAY Tim Presinger #54

I would like to thank those that come down week after week to help me out. It means a lot. However, I am still need of help between 6:00 and 18:00. If you are able to come down, I would greatly appreciate it.

I would also like to remind you to please clean up after yourselves and especially to keep the ambulances clean. I am sure you would not be very happy if your loved one was transported to a hospital by ambulance and you saw dirty gloves lying all over the floor.

Last thing would be a reminder to everyone. When you start your tour, you are required to do a rig check. This is very important. Without much needed equipment patients can die. The only way to insure we have this needed equipment is to do a rig check when you first enter the building. Do not wait to be told by your captain or crew chief.

Keep up the good work everyone!

Tim Presinger Captain #54 \* [chevyxll@aol.com](mailto:chevyxll@aol.com)



## FRIDAY John Messing #55

I would like to thank everyone that has continually helped me on Friday throughout the day and evening and also the overnight crews. Please keep in mind that the building is continuing to be left in shambles. Please clean up after yourselves. Everyone is doing a great job that's what helps keep this organization so good.

John Messing Captain #55 \* [busarider75@clearwire.net](mailto:busarider75@clearwire.net)



SATURDAY Joseph Frisina #56

No Report Submitted for the month of March

Joe Frisina Captain #56 \* [jfrisina@bsbra.org](mailto:jfrisina@bsbra.org)

## Common courtesy call to your captain of the day

We are seeing a rash of last minute call in's, no show-no calls, and members who consistently run late to their duty tours without any notifications to the Captain of the Day. We would like to remind the membership that a call just to give the Captain a heads up would be appreciated as they would be able to help cover that portion of the tour.

For the last minute call in's, it would be common courtesy to give your Captain an ample amount of time to assist in finding coverage. You might be asking yourselves, "What is an ample amount of time?" We are asking that you give a minimum of SIX (6) hours notice. Most people know (in the working world) that they will be calling in within at least that amount of time whether they be sick or just need a mental health day. We feel that the same applies for the volunteer world. We understand that things happen, however, calling in 15-20 minutes after your tour does not help us. We can't even find paid coverage in that time, let alone volunteer coverage. Please have the common courtesy to help the organization.

As far as no show-no calls, we can advise that this is totally unacceptable and it is spoken about way to often in meetings. Members are also reminded that if you have a regular duty slot and you cannot make it, you are to contact the Captain and try to fill your spot. (as per the SOP's). You are responsible for your duty slot, regardless if you are a probationary member, dispatcher, EMT or Driver.

These situations apply to all members, probationary and badge, call-in to interim. When you commit to a slot or to help out someone, please do it. You are giving your word that you will help them out. Should you have any questions in regard's to these requests, please see a Chief.

On behalf of the Chiefs Office, Bill Froehlich Chief @ bsbra

# Good & Welfare



## Welfare

The chiefs office and the members of the department would like to wish Al Manzella a speedy recovery

---



# BSBRA Youth Squad “Taste of History”



Alfred Manzella, a retired medic, current dispatcher at Bay Shore Brightwaters Rescue Ambulance and a life time member told us his story on how he became interested in this adrenalin filled field and how today's emergency medical equipment and techniques have improved over time, changing drastically.

Mr. Manzella is an optimistic, lighthearted, and very experienced man. He originally joined as a volunteer at Brentwood Rescue Ambulance. Afterwards he joined BSBRA volunteering as a driver. Throughout the 17 years that he has spent with the organization, Alfred came to a realization that being a volunteer for your community rescue ambulance head quarters creates a sense of delight in your heart, "It is a really nice feeling to know that your giving back to your community" Alfred stated. Alfred has noticed over the years that many young people don't volunteer their time as much as they used to because they are looking for money when

that shouldn't come first, Alfred expressed. "Volunteering is giving something back the pay stinks but I'm not looking for that."

Every organization has their cliques and issues but at the end of the day we must need to become fully aware that we are all one big diverse family. Alfred Manzella believes having cliques are satisfying in a way. It is comforting to have a friends who have similar values and qualities as you such as likes and dislikes. Along with people who are similar to you there will also always be people who are different from you. Politely ignoring or avoiding them is the right to go about handling the situation. When it comes to going on a run all differences should be set aside without hesitation because the moment you step foot on to that ambulance the patients well being is your number one priority and nothing else matters except your safety of course. Alfred said himself, "Don't let cliques ruin the cause. You are part of a group. Come together for a good cause. We are a family, if you don't get along then we can't get anything done. You donate a lot of time and intelligence into becoming a member and once you are a member you want to do a good job with the public you don't want to ruin that because you are part of a group the group is your people in this area here. Come together unite."

-continue on next page



As far as advanced technology goes, the stretchers went from manually elevating the patient to battery powered making it much more simpler to lift them. and easier. Alfred has noticed that with time the PCR's have become more detailed. He stated, "Well they have better gurneys now, they don't have to physically lift them, they are battery are battery operated. The equipment is a little bit nicer."

All in all this agency has come a long way. Since January 2010 BSBRA has been capable of providing 24/7 ALS coverage for the community. In addition, BSBRA was awarded the "2010 EMS Meritorious Award" for providing exceptional medical care under a dangerous situation during the March 2010, Nor'easter. However, more recently BSBRA was named 2011's Impact Volunteer EMS Service of the year. While recognition is nice, we are most proud of being able to provide the finest medical care possible to our town in the quickest amount of time. We are known for responding to calls quickly and efficiently became a top priority of all. BSBRA is considered one of the top responding ambulance corps in the town of Islip. So keep it up Bay Shore! You guys are doing a phenomenal job. Keep in mind you are doing a wonderful thing, giving back to the community, and to not let cliques ruin the cause, as Alfred said.



The youth Squad newsletter committee for Signal 19

-Kayla Corsini & Victoria Wojcik-



# BSBRA March 2015 Calendar

<b>GENERAL MEETING</b>	HQ	2000 hours	Monday	Mar. 2nd
<b>POLAR BEAR STANDBY</b>	THE MARINA	0900 hours	Saturday	Mar. 7th
<b>ST PATRICKS DAY PARADE</b> <b>All must members attend</b>	MAIN ST.	1100 hours	Saturday	Mar. 14th
<b>OFFICERS MEETING</b>	HQ	1930 hours	Friday	Mar. 19th
<b>IACA MEETING</b>	TBD	1900 hours	Tuesday	Mar. 24th

BSBRA HQ IS NOW SMOKE FREE ZONE!!!

# NOTICE



**This is a  
smoke-free  
workplace**



**ANNUAL YOUTH SQUAD  
PANCAKE BREAKFAST FUNDRAISER**



**Sunday May, 17th 2015**

**911 Aletta Place, bay Shore NY 11706**

**Starting at 9:00 am - 12:Noon**

**PANCAKES, SAUSAGE, BACON, STRAWBERRY TOPPING  
ORANGE JUICE, COFFEE  
(Chinese Auction)**

**ADULTS: \$ 10 (11 years old & up)**

**CHILDREN: \$ 8 (10 years old & under)**

**For any information please call John Martinez @ (631)418-6053**



# BSBRA CPR TRAINING

2015 Community CPR Dates

Bay Shore-Brightwaters Ambulance Building 10:am Free of charge.

Jan. 17th

Mar. 28th

May 16th

Jul. 18th

Sep. 19th

Nov. 14th



**Spring 2015 Course Announcement**  
***Emergency Medical Technician-Original***

<b>Location:</b>	<b>Port Jefferson Ambulance EMS Academy</b> 25 Crystal Brook Hollow Road, Mount Sinai
<b>Dates:</b>	<b>April 7, 2015-September 17, 2015</b>
<b>Days/Times:</b>	<b><i>Tuesday's and Thursday's 6pm-10pm</i></b>
<b>Skills Final:</b>	September 5, 2015, 8am - 25 Crystal Brook Hollow Road, Mount Sinai
<b>State Exam:</b>	September 17, 2015, 7pm - 25 Crystal Brook Hollow Road, Mount Sinai
<b>Instructor:</b>	<b>Peter A. DiPrima Jr.</b>
<b><u>Tuition: \$975.00</u></b>	
<b>Course tuition includes AHA BCLS Textbook, AAOS Emergency Care and Transportation of the Sick and Injured, 10<sup>th</sup> Edition</b>	

**All students MUST attend the first day of class. NO exceptions, no accommodations!**

**Pre-Requisites:**

- To be eligible for enrollment in the course, the candidate for certification must be at least 18 years old by the last day of the month in which the State written certifying examination for the course is scheduled.
- FEMA ICS-100, IS 700 and HAZMAT Awareness – OSHA Compliant minimum 3 hours. (FEMA links will be emailed to students with the confirmation email, if students haven't already taken those classes.) Firefighter 1 completed AFTER 2003 will count for HAZMAT Awareness, must show proof. *Completion of these online courses are required, a certificate of completion from FEMA MUST be submitted to the CIC of the program before day 15 of the course.*

**To register for this course:** Please visit our website at <http://www.pjvac.org>, click on the "BLUE" course registration tab, then click on the NYS EMT COURSE tab, and follow directions. **NO SEATS WILL BE HELD UNLESS FULL PAYMENT IS RECEIVED.**

**Please note:** No seats will be held unless the registration process is complete. You will receive a confirmation email. Please make sure you include your email address. If you do not have an email address, please make sure your mailing address is included online during registration. Enrollment is first come, first served.

---

**Information regarding course reimbursement for members of an EMS agency:**

1. A Student that is a member of an EMS agency may be eligible for tuition reimbursement by the N.Y.S. Bureau of EMS. To see if you are eligible for reimbursement, refer to the NYS BEMS Policy Statement 13-03. This policy can be found at the following website: <https://www.health.ny.gov/professionals/ems/pdf/13-03.pdf>

---

**<http://www.pjvac.org>**

**Port Jefferson Ambulance EMS Academy**  
**25 Crystal Brook Hollow Road, Mount Sinai, New York 11766**

# SC 2150307 *All students MUST attend the first day of class. No exceptions, no accommodations!*

COUNTY OF SUFFOLK, DEPARTMENT OF HEALTH SERVICES, EMS DIVISION

## Rapid Emergency Medical Technician – Basic Original Course

LOCATION: Community Amb. Co., 420 Lakeland Ave., Sayville, NY 11782 INSTRUCTOR: Teresa McLaughlin

DATES: 4/10/15 to 7/16/15 SKILLS FINAL: *Approx. Sat. 7/11/15 8am* SC EMS Division, Yaphank

DAYS/TIMES: Monday through Friday WRITTEN FINAL: 7/16/15 (Thurs.7 pm)  
6:30pm to 9:30pm-10:30pm

**STUDENTS MUST BE 18 YRS OLD BY THE MONTH OF THE NYS WRITTEN EXAMINATION.**

FEE: \$130.00 for EMS Personnel \$905.00 for NON EMS (\$20 additional charge for printed paperwork, read below)

Students must have their own b/p cuff, stethoscope, notepads and writing tools. **\*\* No walk in students will be allowed\*\***

**Pre-requisites:** FEMA NIMS 100, NIMS 700 and HazMat Awareness – OSHA Compliant minimum 3 hours. (FEMA links will be emailed to students with the confirmation email, if students haven't already taken those classes.) Firefighter 1 AFTER 2003 will count for HazMat Awareness, must show proof. (All HazMat Awareness classes MUST have been taken after 9 11 to count.) Copies of certificates must be handed in to the instructor within the first month of the course.

To reserve seating for this course: Complete this form with check(s)/money order(s) payable to the Suffolk County EMS Division (please postdate check(s)/money order(s) to the start date of the course). Please mail to: Suffolk County EMS Division, 360 Yaphank Ave., Suite 1B, Yaphank, NY 11980, Attn: EMT Courses. Per County Resolution #968-1997, there will be an additional \$25 fee added to the cost of the course for any checks returned with notice of "insufficient funds." **NO SEATS WILL BE HELD UNLESS FULL PAYMENT IS RECEIVED.**

Please note: Forms will be returned if incomplete, illegible, or if the course is full or canceled. No seats will be held unless the registration process is complete. You will receive a confirmation email. Please make sure you include your email address in the box below. If you do not have an email address, please make sure your mailing address is listed on the check. You will receive a confirmation letter in the mail. Enrollment is first come, first served.

**Please be advised,** the Suffolk County EMS Division will be handing out CDs with all of the New York State and Suffolk County policies, protocols and various other vital information. If you do not have computer access, please notify the Suffolk County EMS Division in advance by stating "NO" in the box below next to your name so that the Division may give you a copy of the information mentioned above. **There will be an extra charge of \$20 for the printed paperwork.** If you do not fill in "NO" in the box next to your name then the Suffolk County EMS Division will assume you have computer access. If you fill in "NO" and you do not include the additional \$20 for the printed paperwork, the Division will then cross off the "NO" and write "YES."

### SC 2150307 *All students MUST attend the first day of class. No exceptions, no accommodations!*

**RAPID EMT-Basic Original Course**

Community Ambulance Company, Sayville

CORPS/DEPT: \_\_\_\_\_ NYS EMS AGENCY CODE #: \_\_\_\_\_

NAME (print or type)	Computer Access? Y/N	Email Address
1.		
2.		

This is to certify that the individuals identified above are members of this EMS Agency.

Officer (Print Name) \_\_\_\_\_ Date \_\_\_\_\_ Title \_\_\_\_\_

Signature \_\_\_\_\_ Phone # (daytime) \_\_\_\_\_

# SC 2150405 *All students MUST attend the first day of class. No exceptions, no accommodations!*

COUNTY OF SUFFOLK, DEPARTMENT OF HEALTH SERVICES, EMS DIVISION

## RAPID Daytime EMT-Basic Refresher Course

LOCATION: Community Ambulance Company, 420 Lakeland Ave., Sayville, NY 11782 INSTRUCTOR: Kevin Finn

All students **MUST** attend the course opening at 9am on 3/2/15 at the Suffolk County EMS Division, 360 Yaphank Avenue, Suite 1B, Yaphank, NY 11980. You will be completing the course opening, Suffolk County and New York State paperwork, and you will be taking the Challenge Written Exam. The skills part of the Challenge Exam is optional and starts at 12:30pm.

**THE FIRST DAY OF CLASS WILL BE HELD AT THE SUFFOLK COUNTY EMS DIVISION, YAPHANK!**

DATES: 3/2/15 to 5/21/15

SKILLS FINAL: *Approx.* Sat. 3/28/15 at SC EMS Division, Yaphank

DAYS/TIMES: Monday through Friday 9am to 3:30pm-4:30pm

WRITTEN FINAL: 5/21/15 (Thurs. 7 pm)

(Monday 3/2/15 – Friday 3/6/15 & Monday 3/9/15 – Friday 3/13/15)

FEE: \$100.00 for EMS Personnel \$555.00 for NON EMS (\$20 additional charge for printed paperwork, read below)

Students must have their own b/p cuff, stethoscope, notepads and writing tools. **\*\* No walk in students will be allowed\*\***

**Pre-requisites:** FEMA NIMS 100, NIMS 700 and HazMat Awareness – OSHA Compliant minimum 3 hours. (FEMA links will be emailed to students with the confirmation email, if students haven't already taken those classes.) Firefighter 1 **AFTER** 2003 will count for HazMat Awareness, must show proof. (All HazMat Awareness classes **MUST** have been taken after 9 11 to count.) Copies of certificates must be handed in to the instructor within the first week of the course.

To reserve seating for this course: Complete this form with check(s)/money order(s) payable to the Suffolk County EMS Division (please postdate check(s)/money order(s) to the start date of the course). Please mail to: Suffolk County EMS Division, 360 Yaphank Ave., Suite 1B, Yaphank, NY 11980, Attn: EMT Courses. Per County Resolution #968-1997, there will be an additional \$25 fee added to the cost of the course for any checks returned with notice of "insufficient funds." **NO SEATS WILL BE HELD UNLESS FULL PAYMENT IS RECEIVED.**

**Please note:** Forms will be returned if incomplete, illegible, or if the course is full or canceled. **No seats will be held unless the registration process is complete.** You will receive a confirmation email. Please make sure you include your email address in the box below. If you do not have an email address, please make sure your mailing address is listed on the check. You will receive a confirmation letter in the mail. Enrollment is first come, first served.

**Please be advised,** the Suffolk County EMS Division will be handing out CDs with all of the New York State and Suffolk County policies, protocols and various other vital information. If you do not have computer access, please notify the Suffolk County EMS Division in advance by stating "NO" in the box below next to your name so that the Division may give you a copy of the information mentioned above. **There will be an extra charge of \$20 for the printed paperwork. If you do not fill in "NO" in the box next to your name then the Suffolk County EMS Division will assume you have computer access. If you fill in "NO" and you do not include the additional \$20 for the printed paperwork, the Division will then cross off the "NO" and write "YES."**

### SC 2150405 *All students MUST attend the first day of class. No exceptions, no accommodations!*

**RAPID Daytime EMT-Basic Refresher Course (NYS Written Exam May 21, 2015)**

Community Ambulance (First day, March 2, 2015, will be held at the Suffolk County EMS Division, Yaphank.)

CORPS/DEPT: \_\_\_\_\_ NYS EMS AGENCY CODE #: \_\_\_\_\_

NAME & EMT# (print or type)	Computer Access? Y/N	Email Address
1.		
2.		

This is to certify that the individuals identified above are members of this EMS Agency.

Officer (Print Name) \_\_\_\_\_ Date \_\_\_\_\_ Title \_\_\_\_\_

Signature \_\_\_\_\_ Phone # (daytime) \_\_\_\_\_





**Suffolk**  
COUNTY COMMUNITY COLLEGE



***Earn your degree in Paramedicine without having  
to leave Suffolk County!***

**Learn and train with experienced educators!**

New York State Department of Health/ AAS Degree Program

***Pre-requisites*** for the program include:

A current *NYS EMT Basic Certificate, Bio 130 and Bio 132* (C or better)

Or

A current *NYS EMT Critical Care Certificate and Bio 130* (C or better)

**Enrollment is now open, register early! Seating is limited to  
24 students!**

**\*\* Certifications must remain valid throughout the entire course\*\***

**\*\*\* *Financial aid available to qualified students*\*\*\***

Students interested in the program need to complete an application at the  
admissions office of the Ammerman Campus.

Further questions or concerns can be directed to:

Matt Zukosky, MA, NREMT-P  
Emergency Medical Care Program Coordinator  
631-451-4678  
zukoskm@sunysuffolk.edu

or

Karen Pepe  
Admissions Office, Ammerman Campus  
631-451-4843

# SC 2151101 *All students MUST attend the first day of class. No exceptions, no accommodations!*

COUNTY OF SUFFOLK, DEPARTMENT OF HEALTH SERVICES, EMS DIVISION

## EMT-Paramedic Refresher Course

LOCATION: SC EMS Academy, 360 Yaphank Ave., Suite 1B, Yaphank, NY 11980 INSTRUCTOR: Wm. "Mike" Masterton

**Challenge Practical Exam (optional):** Tuesday 3/3/15 at 6:30pm, Suffolk County EMS Academy, Yaphank.  
Please call 631-852-5080 to pre-register for the Challenge Practical Exam.

DATES: 3/5/15 to 5/21/15 SKILLS FINAL: APPROX. Saturday 5/16/15, SC EMS Academy, Yaphank

DAYS/TIMES: Tuesdays and Thursdays 6:30pm to 10:30pm WRITTEN FINAL: 5/21/15 (Thurs.7 pm)  
(First day of class is 6:30pm to 11pm)  
3 Saturdays 8am to 3pm (4/11/15, 4/18/15, & 5/16/15)

FEE: \$250.00 for EMS Personnel \$1,130.00 for NON EMS (\$20 additional charge for printed paperwork, please read below)

**Students must have their own b/p cuff, stethoscope, notepads and writing tools. \*\* No walk in students will be allowed\*\***  
Paramedic Refresher to include: BCLS and ACLS

**Pre-requisites:** Paramedic 3 hour online Transition class, FEMA NIMS 100, NIMS 200, NIMS 700 and HazMat Awareness – OSHA Compliant minimum 3 hours. (Paramedic 3 hour online Transition class and FEMA links will be emailed to students with the confirmation email, if students haven't already taken those classes.) Firefighter 1 AFTER 2003 will count for HazMat Awareness, must show proof. (All HazMat Awareness classes MUST have been taken after 9 11 to count.) Copies of certificates must be handed in to the instructor within the first month of the course.

To reserve seating for this course: Complete this form with check(s)/money order(s) payable to the Suffolk County EMS Division (please postdate check(s)/money order(s) to the start date of the course). Please mail to: Suffolk County EMS Division, 360 Yaphank Ave., Suite 1B, Yaphank, NY 11980, Attn: Paramedic Course. Per County Resolution #968-1997, there will be an additional \$25 fee added to the cost of the course for any checks returned with notice of "insufficient funds." **NO SEATS WILL BE HELD UNLESS FULL PAYMENT IS RECEIVED.**

Please note: Forms will be returned if incomplete, illegible, or if the course is full or canceled. No seats will be held unless the registration process is complete. You will receive a confirmation email. Please make sure you include your email address in the box below. If you do not have an email address, please make sure your mailing address is listed on the check. You will receive a confirmation letter in the mail. Enrollment is first come, first served.

**Please be advised,** the Suffolk County EMS Division will be handing out CDs with all of the New York State and Suffolk County policies, protocols and various other vital information. If you do not have computer access, please notify the Suffolk County EMS Division in advance by stating "NO" in the box below next to your name so that the Division may give you a copy of the information mentioned above. **There will be an extra charge of \$20 for the printed paperwork. If you do not fill in "NO" in the box next to your name then the Suffolk County EMS Division will assume you have computer access. If you fill in "NO" and you do not include the additional \$20 for the printed paperwork, the Division will then cross off the "NO" and write "YES."**

SC 2151101 *All students MUST attend the first day of class. No exceptions, no accommodations!*

EMT-Paramedic Refresher Course

Suffolk County EMS Academy, Yaphank

CORPS/DEPT: \_\_\_\_\_ NYS EMS AGENCY CODE #: \_\_\_\_\_

NAME & EMT # (print or type)	Computer Access? Y/N	Email Address
1.		
2.		

This is to certify that the individuals identified above are members of this EMS Agency.

Officer (Print Name) \_\_\_\_\_ Date \_\_\_\_\_ Title \_\_\_\_\_

Signature \_\_\_\_\_ Phone # (daytime) \_\_\_\_\_



**American Heart Association Emergency Cardiovascular Care Programs  
Instructor Candidate Application**

**Instructions:** To be completed by the instructor candidate with appropriate signatures. Please complete 1 application for *each* discipline.

Name (with credentials): \_\_\_\_\_

Mailing address: \_\_\_\_\_  
\_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

Type of instructor course:  HS     BLS     ACLS     PALS

Recommended renewal date of provider card in discipline in which candidate is seeking instructor status: \_\_\_\_\_

**Instructor Commitment:** As an AHA Instructor, I agree to teach at least 4 courses in 2 years in accordance with the guidelines of the American Heart Association. I also agree to strengthen and support the Chain of Survival and the mission of the American Heart Association in my community.

\_\_\_\_\_  
Signature of Instructor Candidate

\_\_\_\_\_  
Date

**TC Alignment:** I approve this application and grant alignment with this Training Center for this applicant. I agree to all responsibilities for this instructor as outlined in this manual.

Name of Training Center: \_\_\_\_\_

Training Center ID#: \_\_\_\_\_

Signature of TC Coordinator: \_\_\_\_\_ Date: \_\_\_\_\_

**Verification of Instructor Potential:** I verify that this instructor candidate has achieved a score of 84% or higher on the provider written examination in the discipline for which he or she is applying and has completed *at least 1* of the following options:

- Has been identified as having instructor potential during performance in a provider course
- Has demonstrated instructor potential during a screening evaluation
- Has demonstrated exemplary performance of provider skills under my direct observation

\_\_\_\_\_  
Signature of TCF/Course Director (circle appropriate title)

\_\_\_\_\_  
Date



# AHA BLS Instructor Course

COUNTY OF SUFFOLK  
DEPARTMENT OF HEALTH SERVICES  
EMS DIVISION

LOCATION: Suffolk County EMS Academy  
360 Yaphank Avenue, Suite 1B, Yaphank, NY 11980

DATES: Saturday, April 11, 2015 9am - 3pm (skills & written test in morning)  
Saturday, April 18, 2015 9am - 3pm

**MUST ATTEND BOTH SESSIONS**  
**ONLY 25 SEATS AVAILABLE**

FEE: \$200.00 for EMS/FIRE Personnel \$300.00 for NON EMS

**EACH STUDENT INSTRUCTOR MUST POSSESS A CURRENT AHA HEALTHCARE PROVIDER CARD**  
**EMT CARDS WILL NOT BE ACCEPTED**

Students must SELF PURCHASE the AHA BLS INSTRUCTOR TOOLKIT (#90-1037) \$96.00,  
from one of the 3 vendors listed below:

Laerdal Medical: 800-648-1851 or [www.laerdal.com](http://www.laerdal.com)  
World Point-ECC: 888-322-8350 or [www.worldpoint-ecc.com](http://www.worldpoint-ecc.com)  
Channing Bete: 800-477-4776 or [www.channing-bete.com](http://www.channing-bete.com)

All instructor candidates **MUST** affiliate with an AHA Training Center and complete the required BLS ESSENTIALS Course prior to admission into the Instructor Course on April 11, 2015.

The Essentials online cost is \$25.00 from one of the 3 vendors listed above. #90-1429

All Candidates **MUST** bring, the first day of the instructor course, the completed and signed Instructor Candidate form and the Essentials Course Completion Certificate.

To reserve seating for this course: Complete this form with check(s)/money order(s) payable to the Suffolk County EMS Division (please post date check(s)/money order(s) to the start date of the course). Please mail the course application to: Suffolk County EMS Division, 360 Yaphank Avenue, Suite 1B, Yaphank, NY 11980, Attn: Ellen Komosinski. Per County Resolution #968-1997, there will be an additional \$25 fee for any checks returned with notice of "insufficient funds."

**NO SEATS WILL BE HELD UNLESS FULL PAYMENT IS RECEIVED.**

Please note: Forms will be returned if incomplete, illegible, or if the course is full or canceled.

Upon receipt of this registration form, you will be emailed the AHA Instructor Candidate form and information to acquire a list of AHA Training Centers in the New York City/Long Island Region.

Enrollment is first come, first served ---- **ONLY 2 MEMBERS FROM EACH AGENCY WILL BE ACCEPTED.**

*If you have any questions, please contact Ellen Komosinski, Training Center Coordinator at [ellen.komosinski@suffolkcountyny.gov](mailto:ellen.komosinski@suffolkcountyny.gov).*

**DETACH AND MAIL THIS PORTION OF THE FORM**

**PLEASE PRINT --- SEND WITH COPY OF YOUR HCP CARD (FRONT/BACK)**  
**with this COMPLETED portion of the form ONLY...NO LATER THAN APRIL 3, 2015.**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Email: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Agency Affiliation: \_\_\_\_\_



New York State Department of Taxation and Finance  
**Claim for Volunteer Firefighters'  
 and Ambulance Workers' Credit**  
 Tax Law-Section 606(e-1)

**IT-245**

Submit your completed Form IT-245 with Form IT-201. See instructions on back.

**Step 1 – Enter identifying information**

Your name as shown on return	Your social security number
Spouse's name	Spouse's social security number

**Step 2 – Determine eligibility** (for lines 1 through 3, mark an **X** in the appropriate box)

- 1 Were you (and your spouse if filing a joint return) a New York State resident for all of this tax year?  1 Yes  No   
 If you marked an **X** in the **No** box, **stop**; you do not qualify for this credit.
- 2 Were you an active volunteer firefighter or ambulance worker for all of this tax year who **did not** receive a real property tax exemption for these services (see instructions)? .....  2 Yes  No   
 If your filing status is  Married filing joint return, continue with line 3.  
 For any other filing status:  
 If you marked an **X** in the **No** box, **stop**; you do not qualify for this credit.  
 If you marked an **X** in the **Yes** box, continue with Step 3.
- 3 If your filing status is  Married filing joint return, was your spouse an active volunteer firefighter or ambulance worker for all of this tax year who **did not** receive a real property tax exemption for these services (see instructions)? .....  3 Yes  No   
 If you marked an **X** in the **No** box at **both** lines 2 and 3, **stop**; you do not qualify for this credit.

**Step 3 – Enter qualifying information** (see instructions)

Name of qualifying volunteer	Volunteer fire company/department or ambulance company	Address of volunteer fire company/department or ambulance company

**Step 4 – Determine credit amount**

- 4 If you marked the **Yes** box at **either** line 2 or line 3, but not both enter **200**.  
 If you marked the **Yes** box at **both** lines 2 and 3, enter **400** .....  4  .00  
 Enter the line 4 amount and code **354** on Form IT-201-ATT, line 12.



# BIRTHDAYS



## MARCH BIRTHDAYS

- ▶ 03/16 Douglas Tenhoopen
- ▶ 03/16 Patrick Frost
- ▶ 03/17 Christine Flick
- ▶ 03/17 Estella Windsor
- ▶ 03/18 Kristen Iadue
- ▶ 03/23 Eliana Sosa
- ▶ 03/27 William Froehlich
- ▶ 03/31 Richard Ciabattari

May you enjoy it,  
from all of us here at  
BSBRA

## **BAY SHORE- BRIGHTWATERS RESCUE AMBULANCE**

911 Aletta Place. Bay Shore, NY 11706

*"If any officer wants to add any information in the next edition of "Signal19"*

*Please email us at [signal19@bsbra.org](mailto:signal19@bsbra.org)*



*-John Martinez, editors of Signal19 @ BSBRA*