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### OTHER INFORMATION

**Resources:** Conference Line: Call In #: **1-866 247-6034** Participant Code #: **5435203325**

GO TO MEETING Access:

[https://global.gotomeeting.com/join/866531677](https://global.gotomeeting.com/join/866531677)  
Meeting ID: **866-531-677**
Meeting Minutes

Wednesday June 14, 2017
MIEMSS Room # 212

Representatives Present:

CASAC Chair: Bill Adams (Pulse/PLMD)
SOCALR: Scott Barquin, Inspector
Lisa Chervon, Director
Kelly Hawkins, Admin. Asst.
Brittany Spies, Licensing Specialist
Emergency Ops: Randy Linthicum, Dir
EMSC: Cyndy Wright-Johnson, Director
OMD: Dr. Richard Alcorta
Lic & Certification: Rae Oliveira

Service Attendees: Sean Britton (MIEMSS), Tessa Smith (MIEMSS), Bill Adams (Pulse), Will Rosenberg (Butler), Jim Pixton (AAA), Joe Gamatoria (AMR), Evan Feuer (AMR), William Ridgell (Patriot), Vic DeMattia (Patriot), Venetia Roberts (Lifestar), Debbie Alilff (Procare), Justin Kinsey (Pulse), Jill Dannenfelser (MEC), Brian Ashby (Medstar), Matt Larrabee via telephone (Freestate), Gary Rains (Butler)

Introductions:
- Meeting called to order at 13:00hrs by Chairman Bill Adams. Minutes from previous CASAC meeting approved unanimously.

High Consequence Infectious Disease:
- Randy Linthicum and Tessa Smith did a presentation on the High Consequence Infectious Disease Project. Tessa has been working with Ebola assessment and treatment centers to determine who they are currently using for EID transporst. Per Maryland protocol, EID patients should be transported to an assessment center and will be transferred to a treatment center once the disease is confirmed. Tessa will be contacting those services that previously held waivers, and those waivers are currently expired.

State EMS Medical Director Report:
- Opioid Crisis – commercials are doing frequent inter-facility transfers of overdose patients. The DHMH Opioid Crisis Hotline is 800-422-0009, and can be distributed as needed. Jim Pixton asked if this is an appropriate time to introduce an immunity clause to allow commercials to stop and render assistance. MIEMSS is not in a position to introduce legislation for an industry however Dr. Alcorta encouraged services to pursue legislation. Deb Alilff can reach out to NAEMT and will draft a letter to spearhead the issue. MIEMSS cannot take a position on any matter without the Governor’s support.
- Four additional questions have been added to eMEDS with regard to patients that were administered Narcan:
  1. Has the pt been given Narcan before? From who? How much?
  2. Is pt opioid overdose?
3. Has pt admitted to overdose?
4. Have you ever encountered pt for opioid overdose before?

- EMT's taking NREMT exam are now performing above national average. Educational institutions are doing a much better job of getting EMT's through the process.
- ELicensure – still experiencing some growing pains with this project. Rae is recruiting membership for a stakeholder’s group and commercial services are encouraged to attend. Contact Rae Oliveira if you want to be a member of this committee.
- MSFA Convention will be held next week.
- The 2017 EMS awards were wonderful. The presenters and hosts were great and it was well attended.
- Dr. Floccare reported to JAC that the EZ Tube is no longer being manufactured. An alternative airway is being examined that is an “intubatable LMA”, which may be a replacement for the King Airway. Dr. Alcorta wants to be sure that he has an OSP for any ALS program using the King Airway so that he can get an accurate count of how many are out there.
- There are three pieces of legislation that we need to generate studies on:
  1. Location for AED’S
  2. Is ED overcrowding?
  3. Mobile Integrated Community Health
- Queen Annes, Montgomery, Prince Georges and Charles counties are all piloting MIH programs.
- Jimmy Pixton – Calcium Chloride, Sodium Bicarb, Epi 1:10,000 national backorder. Epi 1:10,000 is a recurring problem and has already been clarified that 1:1,000 can be used. Dr. Alcorta stated that maintaining expired calcium is better than having no calcium as it is an inorganic substance.
- Will Rosenberg brought up a concern regarding the heparin protocol. It was clarified that there is no maximum date on this protocol and the dose remains 18 units/kg.
- Hospital Programs currently has 57 hospitals due for site visits.
   1. Primary Stroke Center-26
   2. Base Station-11
   3. Perinatal-9
   4. Trauma-10
   5. Cardiac Intervention-1

**SOCALR:**

- Will be issuing a flyer for QA Class for COMMERCIAL SERVICES ONLY. Class was going to be scheduled for 7/19-7/20, but instructor is on a leave of absence. We will be in contact with all Commercial Services when we get a new date.
- SOCALR would like to thank everyone for their cooperation during this annual renewal/inspection season. Your help was greatly appreciated.
- As of now 8-9 service base inspections have been done. We will resume these after annual renewals are finished.
**Ambulance Safety Forum:**
- Students from Johns Hopkins presented a new device for ambulance restraint that seems to allow more room to move around while in a seatbelt.
- Brian Frankel presented safer ambulance design ideas.
- Group plans to meet three times a year, and there will be two designees.
- Contact Lisa Chervon to be added to the group.

**MIH:** Deb Ailiff reported that the group will meet again on 7/6/17 and hopes to have document to present to EMS board.

**ALS Subcommittee:** No Report

**BLS Subcommittee:** No Report

**SCT Subcommittee:**
- Addressed the proposed verbiage changes to COMAR 30.09.11.04.04 (obstetrical transports.) Discussion followed regarding concerns that a facility without an OB program not having the capability to recognize a complicated OB patient.
- Questions arose regarding the actual definition of obstetrical patient/transport
- Justin Kinsey suggested removing the reg altogether and treating obstetrical transports as SCT transports.
- Will Rosenberg addressed the question of who determines which obstetric pt needs a higher level of care, and that an uncomplicated transport is determined by the Medical Director.
- Jill suggested another meeting regarding the obstetrics transport regulation issues.

**NEO Subcommittee:** No Report

**Protocol Subcommittee:** No Report

**Licensure & Education:**
- BLS renewal process. Anyone due to expire on 6/30/17 needs to complete the renewal application or extension application, which can be found on the MIEMSS website.
- Rae Oliveira explained the eLicensure Statewide Steering Committee is being assembled if anyone has any ideas, questions, or concerns regarding the process of making this licensure system successful. The first meeting will be on 7/20/2017 from 1:30-4:30.

**EMSC/PEMAC:**
- PEMAC met in May and will meet again in July.
- The National Highway Safety Administration request that we all get the message out on heat stroke. One of which is to **AVOID LEAVING PEOPLE IN CARS.**
- Cyndy Wright-Johnson has been working to get 911 response system jurisdictions to complete an online survey that must be completed by any ground transportation
ambulance in the nation. The survey will determine which of the 26 jurisdictions have an EMSC Coordinator. Please email Cyndy Wright-Johnson to communicate if you have a pediatric point person or champion.

- **Data analysis report:**
  1. We are experiencing a lower level of infant intubation. There were 120 in 2015, and 110 in 2016.
  2. Over the first nine months of the year we had 25 pediatric sepsis alerts, and only seven were actually sepsis.
  3. Cyndy questioned whether all pediatric sepsis transports are being entered into eMeds, and it was revealed that many people don’t check the pediatric sepsis box.
  4. Trauma patients are getting where they need to be based on care needed.
  5. At least two distributors are saying not to use Safe Guard or Pedi-mate, but as of now, it is acceptable to use Safe Guard or Pedimate. It will take the Federal Government 1-1/2 years to provide the funding needed to retest these two devices and another year and a half to actually get the retesting done.

- **PEMAC:**
  1. Discussed 2018 protocol projects. With focus on high performance CPR in pediatrics, termination of resuscitation for pediatrics, and D10 for hyperglycemia and evidence to support a protocol for that.
  2. Discussed Fentanyl as a primary pain medication.

**JAC Representative Report:** No Report

**Region III EMS Report:** No Report

**SEMSAC Report:** No Report

**Legislative Subcommittee:** No Report

**Old Business:** There are rarely enough attendees present at CASAC for a quorum to vote on issues, so Lisa Chervon requested that the CASAC by-laws be reviewed and updated. Debbie Ailiff agreed to spearhead this project. If you have any questions, revisions, or changes that you feel need to be added to the by-laws, please contact Debbie Ailiff.

**New Business:** No Report

**Next Meeting:** Meeting adjourned @1456 hours. Next meeting is September 20, 2017. SCT Subcommittee will meet at 1-1:30, and CASAC will meet 1:30-3:00.