

**Emergency Medical Services Board
June 9, 2009
Minutes**

Board Members Present: Donald L. DeVries, Jr., Esq., Chairman; Chief Scott Graham; David Hexter, M.D.; Murray Kalish, M.D.; David Fowler, M.D.; Mary Alice Van Hoy, R.N.; Eugene L. Worthington; Victor A. Broccolino (by telephone as of 9:11 a.m.); Dean E. Albert Reece, M.D., PhD.

Board Members Absent: Sally Showalter.

Others Present

MIEMSS: Dr. Bass; Ms. Alban; Dr. Alcorta; Ms. Beachley; Mr. Dubansky; Dr. Floccare; Ms. Gainer; Mr. Hurlock; Ms. Magee; Ms. Myers; Mr. Schaefer; Mr. Seifarth; Mr. Thompson.

OAG: Mr. Magee; Ms. Sette.

Maryland State Police Aviation Command: Major McAndrew; Mike Gartland; Jimmie Meurrens.

R Adams Cowley Shock Trauma Center: John Spearman; Brenda Fosler Johnson.

MSFA: Mr. Powell; Mr. Cox.

Others: Dr. Barney Stern, Dr. Terry Jodrie, Dr. Joseph Wright, Dr. Allen Walker.

INTRODUCTION

Chairman DeVries called the meeting to order at 9:06 a.m.

Action: Moved (Dr. Fowler), seconded (Mr. Worthington), passed unanimously to approve as written the minutes of the Board's open session on May 12, 2009, meeting.

EXECUTIVE DIRECTOR'S REPORT

Star of Life Awards. Dr. Bass reported that at the conclusion of the Maryland EMS Symposium (formerly known as "EMS Care"), MIEMSS had presented several awards to honor the efforts of EMS providers and programs, as well as citizens. The Stars of Life and other awards were given to honor those whose exemplary actions in emergencies had helped save lives.

Dr. Bass also noted that the Symposium's program had been excellent, although the attendance had been lower than at other conferences held in the state.

Trauma Standards. Dr. Bass reported that MIEMSS will be convening a Trauma Standards Workgroup that will review the current Maryland Adult Trauma Regulations in COMAR 30.08.05 et seq. He said that the COMAR regulations were originally written and promulgated over a decade ago. He said the Workgroup would review the existing regulations, consider recent changes to trauma standards of the American College of Surgeon's Committee on Trauma, and identify any updates or modifications needed to the Maryland regulations. He said that the workgroup would be comprised of one representative from each trauma center.

Maryland State Firemen's Association Meeting. Dr. Bass said that the MSFA's Annual Meeting in Ocean City would begin in a few days. He said that the meeting would mark the transition of leadership. He congratulated President Frank Underwood on a successful year.

H1N1 Virus. Dr. Bass said that there was no new information to report on the H1N1 virus.

EMAIS. Dr. Bass said that MIEMSS continued to work toward development of a new electronic pre-hospital patient care reporting system. He said that the agency would be looking for an off-the-shelf software product, instead of developing its own software, as had been done with the original EMAIS. He said that MIEMSS is also working to secure funding for the project.

Potential Helicopter Base Move. Dr. Bass said Major McAndrew had begun meeting with public safety providers on the Eastern Shore to discuss the potential move of the Trooper 6 base from Centreville to the Easton Airport. He said that two community meetings would be scheduled for the MSP to present and discuss the potential move. He said that he would report at the next Board meeting on the results of the community meetings.

MIEMSS Staff. Dr. Bass reported that Rae Olivera, BS, RN, NREMT-P, recently joined the MIEMSS licensure and certification staff as an EMS training specialist with primary responsibility for the EMT-B program.

STEMI. Dr. Bass reported that MIEMSS continued its efforts to develop a revised draft of the STEMI regulations. He said that he would soon be meeting with the Maryland Chapter of the American College of Cardiology and would report back to the Board on the results of that meeting.

Mr. DeVries expressed his congratulations and gratitude to MSFA President Frank Underwood for all of his efforts this year and also thanked First Vice President Roger

Powell and Second Vice President Doyle Cox. First Vice-President Powell said that President Underwood had devoted his body, soul and spirit to working with its partners and said he would convey Mr. DeVries' thanks to Mr. Underwood.

REPORT OF THE STATEWIDE EMERGENCY MEDICAL SERVICES ADVISORY COUNCIL

Dr. Kalish reported that SEMSAC met on June 4 and approved the 12-lead education project which the Board would be considering.

REPORT OF THE R ADAMS COWLEY SHOCK TRAUMA CENTER

Ms. Fosler reported that Shock Trauma Center admissions for the month were 111 behind the same period last year and that admissions during February accounted for much of the variance. She said that bed occupancy was about the same as last year's, and that the number of operating room cases was 78 fewer than the same period last year. She said that there had been one capacity alert in May lasting for 2.6 hours.

LEGISLATIVE REPORT

No report.

OLD BUSINESS

12-Lead Education Project. Dr. Alcorta presented the draft 12-lead curriculum to the Board. He said that 12-leads had been in use in Maryland for over a decade. He said that the draft curriculum would establish a minimum educational standard for 12-lead interpretation as part of advanced life support curricula. He said that this would help address variability in curricula among jurisdictional education programs and would set a floor to ensure that all jurisdictions were training to at least the minimum level. Dr. Bass said that jurisdictions have been doing 12-leads for a long time, but there existed variability in terms of training and hours; further, not all ALS training programs were teaching 12-lead interpretation. He said that, if approved, the curricula would help ensure uniformity of approach in the various training programs and would be beneficial as Maryland begins efforts to establish its STEMI program. He noted that this core curriculum would be put on the MIEMSS Learning Management System.

Mr. DeVries asked whether the draft represented a consensus document. Dr. Alcorta said that the draft had not yet been distributed to all jurisdictions. Dean Reece asked who was on the committee that developed the draft. Dr. Alcorta indicated that ten jurisdictions had had some involvement in the development of the draft. Mr. Broccolino asked how many jurisdictions already met the baseline that the curriculum would set. Dr. Bass indicated that MIEMSS had conducted a survey to determine this figure and was awaiting results

from the survey. Ms. Van Hoy said that if the curriculum were available on-line, it could also serve as a remediation tool for a provider needing further 12-lead education. Chief Graham agreed, but noted that the initial training should not occur on-line since it is a skill that is best taught first as a hands-on training.

Action: Moved (Dean Reece), and seconded (Ms. Van Hoy), to adopt the draft as a minimum standard, provided that it not be used on-line for initial training. Dr. Bass said that it would probably be until next July until all jurisdictions could comply with the standards if they are not already training to this minimum. First Vice-President Powell asked the Board to defer action on the draft curriculum until the MSFA has had an opportunity to review and comment on the draft. **Motion withdrawn.**

Mr. DeVries announced that the Board would be adjourning to Closed Session, but would be reconvening into Open Session.

Action: Moved (Dr. Fowler), seconded (Ms. Van Hoy), and passed unanimously to adjourn to Closed Session and thereafter return to Open Session.

The purpose of the closed session was to obtain legal advice from counsel under State Government Article § 10-508 (a) (7).

The closed session was attended by:

Board Members Present: Donald L. DeVries, Jr., Esq., Chairman; Chief Scott Graham; David Hexter, M.D.; Murray Kalish, M.D.; David Fowler, M.D.; Mary Alice Van Hoy, R.N.; Eugene L. Worthington; Victor A. Broccolino (until 10:11 a.m.); Dean E. Albert Reece, M.D., PhD.

MIEMSS: Dr. Bass, Dr. Alcorta, Ms. Gainer, Mr. Dubansky, Mr. Seifarth, Mr. Schaefer.

OAG: Mr. Magee, Ms. Sette.

Others: Dr. Barney Stern, Dr. Terry Jodrie, Dr. Joseph Wright, Dr. Allen Walker.

The minutes for the May 12, 2009, closed session were approved.

The pre-hospital off-label use of midazolam for status epilepticus (seizures) was discussed.

The Board returned to open session at 11:08 a.m.

Midazolam. Dr. Alcorta said that the Board had previously approved the use of midazolam beginning July 1, 2009 for treatment of status epilepticus under the Maryland Medical Protocols for EMS Providers. He noted that while midazolam is FDA-approved, it is not explicitly approved by the FDA for treatment of status epilepticus. He

said that use of an FDA-approved drug for a treatment that is not explicitly approved is commonly referred to as “off-label.” He asked the Board to reexamine the proposed July 1, 2009, implementation of midazolam in this regard.

Dr. Alcorta explained the process by which a medication is adopted for inclusion in the Maryland Medical Protocols for EMS Providers. He said that the Protocol Review Committee reviews the indications for use and existing research evidence as to the appropriateness of utility of a medication.

Mr. DeVries asked Dr. Alcorta about the composition of the Protocol Review Committee. Dr. Alcorta said that the membership includes eight (8) physicians, with additional specialists as needed, BLS and ALS EMS providers, and a representative from the Board of Nursing.

Mr. DeVries asked why the Protocol Review Committee decided to change from the use of Diazepam to the use of midazolam for seizures. Dr. Alcorta said that the PEMAG committee had expressed concern about the possibility of side effects, including respiratory distress, with the current medication. He said that Dr. Jodrie had expressed interest in finding an alternative medication and had proposed midazolam after reviewing the medical literature that indicated that midazolam was the better choice. The Protocol Review Committee reviewed and discussed the information and agreed with the change to midazolam.

Mr. DeVries asked Dr. Jodrie why he concluded that midazolam was the better medication choice for status epilepticus. Dr. Jodrie explained that the issue was thoroughly discussed over at least eight (8) Protocol Review Committee meetings. He said that his literature search had identified a number of studies that examined various possible medications for treating seizures. He said that these studies indicated that midazolam was superior in terms of ease, efficacy, and safety for prehospital treatment of status epilepticus for both adults and children. The result of the process was a consensus among the Protocol Review Committee that midazolam was the drug of choice for EMS providers in Maryland.

Mr. DeVries asked whether there was any disagreement at the Protocol Review Committee about adoption of midazolam for seizures. Dr. Jodrie indicated that, by the end of the Committee’s lengthy deliberations, there was consensus among Committee members to approve the adoption of midazolam for seizures.

Mr. DeVries asked what the advantages were to using midazolam in the pre-hospital phase. Dr. Alcorta said that the ease of administration, as well as the efficacy of midazolam as compared with diazepam, was clear. He said that there were also practical issues with the potential use of an alternative medication, lorazepam, since that medication typically requires refrigeration which makes it potentially problematic for pre-hospital use. He said that given all these factors, adoption of midazolam was the best choice.

Dr. Walker said that from a pediatric point of view, midazolam (administered IV, IM, or buccal) had clear advantages for use in seizing children. Dr. Wright said that the use of midazolam in the pre-hospital environment is consistent with where science is pointing across the country.

Dr. Stern said that a clinical trial funded by the National Institutes of Health (the “RAMPARTS” study) is being implemented nationwide to determine the efficacy and safety of lorazepam (IV) versus midazolam (IM) in the pre-hospital phase. He said that he hoped to submit the study protocol to the Board for approval at a later time. Mr. DeVries indicated that the study would be discussed at a future time and asked whether Dr. Stern disagreed with the adoption of midazolam for seizures in the field. Dr. Stern said that he did not disagree with this decision.

Mr. DeVries thanked all the discussants for sharing their perspective and information.

Action: Moved (Dean Reece), seconded (Dr. Fowler), and passed unanimously to approve the implementation of the pre-hospital off-label use of midazolam for status epilepticus.

Action: Moved (Dr. Fowler), seconded (Dr. Kalish), and passed unanimously to adjourn to Closed Session and thereafter return to Open Session.

The purpose of the closed session was to carry out administrative functions under State Government Article §10-502(b), to discuss appointment of personnel under State Government Article § 10-508 (a) (1), discuss matters related to the contents of a bid or proposal, if public discussion or disclosure would adversely impact the ability of the public body to participate in the competitive bidding or proposal process under § 10-508 (a) (14), obtain legal advice from counsel under State Government Article § 10-508 (a) (7) and maintain certain records and information in confidence as required by Health Occupations Article §14-506 (b) under State Government Article § 10-508(a) (13).

The closed session was attended by:

Board Members Present: Donald L. DeVries, Jr., Esq., Chairman; David Hexter, M.D.; Murray Kalish, M.D.; Mary Alice Van Hoy, R.N.; Chief Eugene L. Worthington; Chief Scott Graham; David Fowler, M.D.; Dean E. Albert Reece, M.D., Ph.D.

MIEMSS: Dr. Bass, Dr. Alcorta, Ms. Gainer, Mr. Dubansky, Mr. Seifarth, Mr. Schaefer.

OAG: Mr. Magee, Ms. Sette.

The results of site reviews of educational programs were discussed.

Provider disciplinary and final disciplinary actions were discussed with counsel.

The Board returned to open session at 11:35 a.m. Dean Reece departed the meeting.

Approval of Educational Programs. Mr. Seifarth presented three educational programs for Board approval.

Action: Moved (Ms. Van Hoy), seconded (Chief Graham), and unanimously approved educational programs as follows:

- **Anne Arundel County Fire Department Basic Life Support Education Program and ALS Continuing Education Program for five-year approval.**
- **Prince George's County Fire Department Advanced Life Support Education Program for approval for the remainder of the five-year period.**
- **Maryland Fire & Rescue Institute's Advanced Life Support Continuing Education and Basic Life Support Education Program for five-year approval.**

The Board adjourned by acclamation at 11:37 a.m.