

Region IV EMS Advisory Council

Rick Koch, Chair
Chris Truitt, Vice-Chair
Brian LeCates, Secretary

THE MARCH MEETING WILL BE HELD VIRTUALLY

Joining info Join with Google Meet

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AGENDA

March 16, 2021

1. Call to Order & Introductions
2. Approval of Minutes
3. Regional Medical Director's Report
4. Pediatric Medical Director's/EMSC Report
5. EMS Board Report
6. SEMSAC/Regional Affairs Report
7. MIEMSS Report
8. Agency/Regional Reports (Circle "yes" on the roster if you want to make a report)
9. Old Business
10. New Business
11. Adjournment

Next meeting
May 18, 2021
@ 1330 hrs.
605 Port Street
Easton, MD 21601

REGION IV EMS ADVISORY COUNCIL
March 16, 2021
Minutes

Attendees: Andy Aswegan, Falon Beck, Chief Budzialek, David Rice, Scott Haas, Scott Wheatley, Dr. Chiccone, Brian LeCates, Wiley Gray, Andy Fulton, Dozia Rahilly, Shari Donaway, Chris Truitt, Rick Koch, Chris Shaffer, Harvey Booth, Melissa Brag, Doug Walters, Nicole Leonard, Dr. Chizmar, Cyndy Wright Johnson, Dr. Ochsenschlager, Michael Parsons, Mark Bilger, Andrew Naumann, Mary Alice Vanhoy, Dr. White, Dr. Ciotola, Lisa Lisle, Eric Denston, Jonathan Larsen (MSP), Travis Nelson.

The meeting was called to order at 1:30 by Rich Koch

Approval of Minutes: A motion was made by Chris Schaffer to approve the January 19, 2021 minutes as written, seconded by Mary Alice Vanhoy and passed.

Regional Medical Director's Report:

Dr. Chiccone – Just a few announcements from the Protocol review committee that was held on March 10, 2021.

- ALS content for certification is now in EMS online training
- Caroline County is now using an alternative destination protocol
- There are now 5 counties altogether engaged in ET3
- The EMS Board approved the protocols that were submitted
 1. The Agitation Protocol
 2. Albuterol for BLS Providers
 3. A burn protocol update
 4. A Stemi Protocol
 5. Snake bite & IV pump protocol
 6. Expanded Ultrasound Pilot

The meeting content consisted of two items. We looked at the crashing patient protocol particularly stay and play vs. load and go in where a particular subset of patients who deteriorated during the time they are with EMS personnel and the arrival at the hospital. Meaning when you arrive you have a viable patient but somehow between that encounter and the arrival at the hospital that subset of patients have experienced a cardiac arrest. Hence a new acronym is born PARCA which stands for Post Arrival Respiratory Cardiac Arrest. Models do exist for this protocol. Some wonder whether it needs to be a protocol or maybe just an

expanded education piece to identify this particular subset of patients. There will be more discussion to follow at our May meeting.

Dr. Levy brought up Hydrofluoric Acid Protocol for Hydrofluoric burns. Dr. Levy is advocating that if appropriate treatment should be started early. Hydrofluoric acid is an agent in the chrome cleaner that you use to shine our ambulance so word of caution. We are looking into the availability of injectable calcium glutamate and other topical treatments. There will be more to follow on that in May.

There were just a few things that did not fall strictly under protocol that I would like to mention.

- PEMAC and maybe the committee in general is going to take another look at Acetaminophen as a protocol for febrile patients.
- There was some discussion that Ultrasounds may introduce some issues that we may not have considered in the past. For example placing an ultrasound probe during a cardiac arrest and you discover you have cardiac activity, but you do not generate a pulse anywhere what do you have? The questions was do you give Epinephrine as a push or as a drip. More discussion on those things to come.

Pediatric Medical Director's/EMSC Report:

Cyndy Wright Johnson – I would like to thank all of the EMS operational programs. As of February 25th we had 100% participation in the national EMS assessment. The whole State of Maryland is blue. We are the first state to complete that assessment in total. We should have results back mid-April so I am hoping to share summaries with you at the May meeting.

We will be launching the Hospital Pediatric Readiness Assessment. It will be the full assessment from 2013 and 2016. This is a very long and detailed assessment; it consists of 21 pages of questions. Just like we did with the EMS assessment, we will do a brief orientations and I will send out the documents so everyone can work ahead of time and then we will do a tutorial webinar going question by question and it will be archived, published and a link will be sent. We will have May, June and July to complete this assessment. Mary Alice has stepped up and agreed to be the Champion for all of the hospitals on the Eastern Shore.

I sent everyone my handouts, so please take a moment to read over them.

We have had a very successful PEPP class. It is a one day hybrid, is it all hands on skills and we did it out in Allegany County last Friday. Half the people, twice the mannequins and with the use of masks and gloves it went extremely well.

For the physicians, we are not scheduling APLS courses at this time but we do remember that the lower shore would like to host a joint PEPP AND APLS course.

Our Pediatric Champions had a January meeting; there next conference call is Tuesday April 20th. The topic will be ALTE BRUE.

My last request is that if you know of a child that has done something to help someone else or built a program to help EMS help children or help children help adults please nominate them. At this point, we have one nomination for Salisbury, thank you Chris.

As far as STARS of Life, on behalf of Jim Brown we actually have nominations for every category, which is a nice change. However, if you have any nominations we are still accepting those up until April 2nd.

EMS Board Report:

Mary Alice Vanhoy - We did not have a March meeting and Tom covered the protocols so I really have nothing else to report at this time.

SEMSAC Report / Regional Affairs Report:

Scott Haas - I have the same report as Mary Alice gave. I am appreciative of Dr. Chiccone, as he has covered everything.

I did have a quick question for Dr. Chiccone regarding the agitated protocol being watered down. What part was watered down?

Dr. Chiccone – Maybe watered down was the wrong terminology. I think everyone is aware of the misuse of Ketamine that has gotten national attention. I want to say that it has been tightened up, refined, and made clearer. I would say now that the protocol is safer rather than more restrictive, and certainly not watered down.

Dr. Chizmar – On senate bill 78 as you said there was some concern from the anesthesiology community that Ketamine should not be used pre-hospital. We were roped in to what was largely a police bill that said they did not want law enforcement officers to request that EMS come to a scene for the sole purpose of administering Ketamine based on a case that happened in Colorado. The larger point that we were trying to drive home is that we do not believe that medical protocol should be put into the statute, which the bill sponsors were looking to do.

MIEMSS Report:

Dr. Chizmar – I will be brief as I have just a few reminders. In the online training center in the Learning Management System, there is opportunity for ConEd both with Winterfest as well as

the ALS State recertification hours. There are 10 hours of online content, and we are asking that all ALS Clinicians that are recertifying complete that content by March 31, 2022.

Also within the online training center is the ability for the base stations for the hospitals that are on the line that the hospital base stations may conduct their base station courses online and the testing mechanism is on the online training center.

The @ha dashboard should be live and most of the Jurisdictions on the shore I know are reporting in so hopefully that becomes useful to people as to where the most appropriate destination is going to be with the least amount of wait time.

The Medical Directors Symposium will be held virtually on April 14th from 8am to 12pm and will take the place of the JAC meeting.

The Protocol content has been updated and the format will look entirely different for the treatment protocols and we have a July 1st printing date. I would expect the updated protocols to be coming a little bit later this year than usual, perhaps mid-May. We are working with the printer now and they will be in color and in a bullet format, so more of a quick reference format and we hope that you will like them.

Michael Parsons – Just a quick update, you should have seen the email about the Batelle system which should officially be done by the end of this month. The last day to send in your item will be March 18, 2021 and your FedEx return should be back March 25, 2021.

The Antigen test kit extensions have been sent out and they have been extended out to June 15, 2021. If you need some more of those test kits there is a smart sheet link to make that request. I can send that over if someone has not received that.

Andrew Naumann – As always I just want to thank everyone for your time, energy and effort that you have put forth this past year.

A CRISP update – the contract has been signed with Image Trend for two pieces of the CRISP project that are continuing. First being the ability for EMS Clinicians to see outcome data for the patients they have transported and those will be in the E-outcomes element. The second piece to that would be allowing EMS Clinicians to have access to CRISP data at the bedside. The timelines on the roll out are a little tentative but we are hoping these will be live by summertime if not the early fall.

I wanted to also talk about CHATS, we are actively working with CRISP on the replacement for CHATS which will involve a complete reworking of the system. The hope is for the technical work to be completed sometime around May.

Thank you everyone for getting the grants in on time this year. We have reimbursed the vast majority of the 50/50 grants at this point.

Agency / Regional Reports:

Chris Truitt – The mass vaccine clinic will open for the lower shore on Thursday at the Civic Center. In addition, we are still having a marathon on April 3rd this could change but as of right now it is still a go.

Andy Aswegan – We have some changes in Cecil County we wanted to let you know about. Starting July 1st DFES which is the emergency medicine group that staffs Christiana Hospital in Delaware will be taking over the Union hospital emergency department to kind of go along with Christiana taking over Union hospital overall. Therefore, at that time there will be a lot of turnover with Doctors. I will be moving to Chicago to take a full time position with my current company and so I will be finishing up at the end of June. I will be helping some of the new physicians to get base station certified and I hope that process goes smoothly. The county is currently looking for a replacement for me. I will be available for consultation and want everything to go as smoothly as possible.

Old Business:

Rick Koch – There was a question about who was going to be appointed to the protocol review committee. I spoke with Mike Parsons last week and he let me know that the position has been filled.

New Business:

None

Adjournment: The meeting was adjourned at 2:20 motion made by Brian LeCates, seconded by Mary Alice Vanhoy