

REGION IV EMS ADVISORY COUNCIL

May 19, 2026

Minutes

Attendees

In Person:

Zach Yerkie, KJ Marvel, John Dennis, Dr. Kyle Fratta, Tina Kintop, Shari Donoway, Dr. Steven White, Cyndy Wright-Johnson, Michael Parsons and Bryan Ebling,

Virtual:

Mark Bilger, Aaron Edwards, Angie Lord, Chris Shaffer, Cory Polidore, Cyndy Wright Johnson, David R Barr III, Debbie Wheedleton, Derrick Simpson, Harvey Booth, Jenna Jarriel, Logan Quinn, Lorenzo Cropper, Nicole Leonard, Patrick Campbell, Dr. Timothy Chizmar.

Region IV EMS Council Chairman, Zach Yerkie reminded everyone that recording the meeting for purposes of taking minutes is taking place.

Zach Yerkie called the May 2026 Region 4 EMS advisory council meeting to order at 13:35 hours.

Minutes from the March 2026 meeting were reviewed with no additions or corrections noted. John Dennis, made a motion to accept the minutes as presented. Chris Shaffer seconded the motion. Motion was approved by using the anyone with objection method of approval.

Chairman Report:

Dr. Ciotola has withdrawn his name from consideration for the Region IV Medical Director citing matters involving the onboarding process and personal circumstances. At this time the position for the Region IV EMS Medical Director is open. Dr. Chizmar will continue to provide support to the Region as needed.

State EMS Medical Director Report:

Dr. Timothy Chizmar, State EMS Medical Director

Dr. Chizmar provided an update on several medical and regulatory matters.

ALS and BLS Protocol Updates

The updated ALS and BLS protocols are available online. An option is available to complete the associated training using a mobile phone. MIEMSS is developing a brief instructional guide explaining how to access and complete the training.

The next step will be to record the Base Station update and make it available through the online training center, as well as through hospital learning management systems.

Protocol Review Committee

Dr. Chizmar reported that the May 2026 Protocol Review Committee meeting did not include any formal action items. Discussion topics included the use of prehospital antibiotics, with proposals from Queen Anne's County and Montgomery County.

Senate Bill 159 – EMS Vehicle Equipment and Supplies

Dr. Chizmar reported that Senate Bill 159 passed the Maryland General Assembly and was signed by the Governor. The new law requires the MIEMSS Executive Director to coordinate the overall minimum equipment, supply, and medication requirements for EMS vehicles, including requirements related to early-childhood and neonatal care.

Dr. Delbridge has requested that MIEMSS begin gradually collecting information regarding equipment, supply, and medication lists currently maintained by EMS Operational Programs.

A question was raised regarding whether the new requirements would replace or supplement the Voluntary Ambulance Inspection Program (VAIP). Dr. Chizmar stated that there is currently no definitive answer and that the relationship between the two processes remains under development. He indicated that the equipment lists may ultimately be integrated or otherwise coordinated with the existing VAIP process. He also noted that some jurisdictions utilize VAIP inspections for external verification and billing-related purposes and that some form of the inspection process may continue.

DEA and Maryland CDS Licensure

Dr. Chizmar provided an update regarding ongoing discussions with the Drug Enforcement Administration (DEA) and the Maryland Controlled Dangerous Substances (CDS) office concerning agency-level licensure for EMS organizations.

He reported that Maryland is currently among approximately 25 states that do not have the ability to license EMS agencies at the agency level. The anticipated future process would transition EMS medical directors from individual licensure toward an EMS agency license. Dr. Chizmar stated that there are currently no penalties or adverse consequences associated with the existing process, but that agency-level licensure is the anticipated direction.

Medical directors whose CDS or DEA registrations for EMS activities are scheduled to expire during calendar year 2026 were advised to renew their existing registrations. Dr. Chizmar emphasized that the transition to agency-level licensure remains under development.

Dr. Chizmar also addressed questions regarding hospital medication resupply and clarified that the current process does not prohibit EMS agencies from receiving one-for-one medication resupply from hospitals. He noted that some jurisdictions have received information suggesting otherwise and encouraged medical directors and jurisdictional chiefs to seek clarification before acting on such information.

Dr. Chizmar advised that the DEA/CDS requirements remain subject to change and that agencies should remain aware of potential operational and budgetary implications as the process develops.

Pediatric Regional Medical Director and EMSC report:

Dr. Steve White; Regional Pediatric Medical Director announced they had the PMAC meeting on Star Wars Day May 4th.

He stated they are going to have some discussions at the end of June meeting in preparation for the July PMAC meetings. There was some discussion about a couple of ongoing studies; county studies are ending. Impacts on protocols based on those studies will be determined in the future.

Any new protocol proposals must be submitted before June 11th which gives us time to discuss it. There is still ongoing pediatric facility recognition to provide you some ongoing guidance for pediatric patients.

19 hospitals that have letters of intent. 15 are working on applications.

Cyndy Wright Johnson - MD EMSC: Stated we have a number of hospitals in region IV that are in process of working on their applications. we started the process last May for pediatric facility recognition. Process has been slow due to several factors, one being the interruptions of federal budget allocations.

Cyndy Wright-Johnson continued by stating she wants to highlight that Salisbury EMS, Ocean City EMS, and Doug Walters, and his team from Tidal Health Regional will be doing one of the workshops on Monday afternoon of MSFA convention. It will be a pediatric simulation.

Champion meetings went well in person in April. Our joint meeting is in July 22nd. It will be virtual and it will be focused on disaster preparedness and disaster planning and having children involved in disaster drills because that is a federal expectation.

Cyndy stated the rest of our updates, are online and I emailed them out to everyone. Just a reminder, if you would like to use the heat stroke display, we have six of them across the state. The one for region IV is now located in Salisbury. and other than during convention and during the CPS courses that will occur in September in Salisbury for technician training, I believe it is available.

EMS board report:

Having no formal representative from the EMS Board at the meeting, Dr. Chizmar offered that the Board meeting was mostly closed session and disciplinary cases; he did not recall anything other than an update on legislative matters following the closing of the session.

Regional Affairs Committee:

Zach Yerkie reported on the Regional Affairs Committee activity.

In the FY26 state-wide allocations there were two jurisdictions after being awarded funds for Cardiac Monitors withdrew their commitment. Fortunately, it's was no one in Region IV. So RAC was left with about 42,000. The funds were re-allocated to a Region III EMSOP and a Region IV EMSOP. The Region IV allocation went to Easton VFD. They were not originally allocated funds on the first round of allocations back in January.

Zach also reported there was discussion on the FY2026 ALS Education grants. Nothing major as far as action items occurred.

Rural Health Transformation Grant

Information regarding the Rural Health Transformation Grant for Whole Blood was shared. It was reported that award notices are expected to be released shortly. Several agency representatives in attendance indicated that they had received their notices of award today, May 29.

Rural Stroke/Dizziness Project

Dr. Chizmar, provided an overview of a proposed project focused on improving the identification and treatment of stroke among rural patients presenting with dizziness. The project is being developed as part of the Rural Health Transformation Grant program and is separate from the Whole Blood project, falling under a different grant pillar.

The project is anticipated to be a collaborative application involving Johns Hopkins, MedStar, and MIEMSS. Dr. David Newman-Toker, a nationally and internationally recognized expert in dizziness and stroke diagnosis at Johns Hopkins, is expected to serve as the Lead Investigator.

The proposed project would utilize a mobile phone application to record a patient's eye movements during an episode of dizziness. The resulting video would be evaluated using software designed to analyze and graph eye movements, a process known as vestibular-oculography (VOG). The objective is to determine whether this technology can assist physicians and EMS clinicians in distinguishing patients experiencing dizziness as a result of a stroke from those whose symptoms are attributable to other causes, such as dehydration, an inner-ear disorder, or other conditions.

Dr. Chizmar described the technology as a decision-support aid that could provide additional clinical information beyond currently available assessments, including assessments involving sudden changes in vision or balance. The project team is seeking letters of support from interested jurisdictions. The anticipated implementation plan would include up to six counties during the first year, an additional six counties during the second year, and another six counties during the third year, depending upon the level of interest and available funding.

All EMSOPS in Region IV qualify as rural jurisdictions under the guidelines of the federal Rural Health Transformation Act. Participation and associated project costs would be fully funded through the grant. Based on a recent memo from Dr. Chizmar, Caroline County has expressed interest in participating. Additional jurisdictions are encouraged to indicate their interest in the project as well.

Office of Clinician Services (OCS):

Aaron Edwards, OCS Director Provided an update regarding EMT recertification. The recertification process is currently underway, and an issue has been identified involving communication between the training site and Image Trend. A workaround is available for

clinicians' experiencing issues with the recertification process. Agencies were asked to have affected clinicians contact OCS as soon as possible for assistance.

Edwards also reported that EMS Protocol books ready for distribution. EMSOPs were asked to notify their Regional Coordinators of the quantity requested for the upcoming protocol year. Each EMSOP will receive two large-format protocol inserts at no charge. Spirals are \$10.00 each and large format inserts are \$25.00

Regional Coordinator's Report (Bryan Ebling, Michael Parsons):

SEMSAC Vacancies

The Regional Coordinators reported that the State Emergency Medical Services Advisory Council (SEMSAC) currently has three vacancies. One of the vacancies is for a General Public Member who must reside in a county with a population of less than 175,000. All Region IV counties meet this population requirement. Individuals interested in serving in this capacity should have knowledge of the EMS system.

The EMS Board is seeking three nominees for each vacant position for consideration. Region IV representatives were encouraged to submit names of qualified individuals who may be interested in serving on SEMSAC.

Cardiac Device Grant and ALS Education Grant

A reminder was provided regarding the FY2026 Cardiac Device Grant and ALS Education Grant. Recipients were encouraged to complete their grant-related work and submit reimbursement requests as soon as possible. The recommended target date for submission is June 15, although submissions received by June 30 will also be accommodated.

The Regional Coordinators indicated that they will begin following up with jurisdictions that have not yet submitted their reimbursement requests to determine the status of their grant activities.

VAIP (Voluntary Ambulance Inspection Program)

Wicomico County; Powellville and Sharptown have completed their inspections successfully. Somerset County EMS inspected their four primary units. The inspection went well.

Queen Anne's County completed their inspections. We have two companies that are 100% done. That's United Communities and Crumpton Volunteer Fire Company. The balance of those companies has small matters to update and submit.

Other Matters

Mass Casualty Incident (MCI) Exercise:

Discussion was held regarding the MCI exercise conducted by the Hospital Preparedness Program on May 5.

Derrick Simpson, Ocean City, provided feedback regarding the exercise and expressed concern that the scenario did not adequately reflect the realities and operational needs of EMS personnel

in the field. He noted that greater integration of EMS into the planning and development of future exercises would be beneficial.

The discussion recognized that hospitals have specific objectives and requirements associated with preparedness exercises and that, while EMS participation is strongly encouraged, exercise scenarios do not always adequately address field EMS operations.

It was noted that additional work is needed to better integrate EMS into the development and execution of future HPP exercises. The importance of ensuring that EMS personnel have meaningful and relevant participation in these exercises was also discussed.

AGENCY REPORTS:

Cecil: Nothing to report. Happy EMS week to everyone. Dr. Delbridge, MIEMSS will be presenting an EMS Star of Life award on May 20th (tomorrow) at our DES Headquarters.

Kent: Logan Quinn; provided an update on the county's Mobile Integrated Health (MIH) program. Kent County is working through Rural Health Transformation (RHT) funding received through the local health department to explore expanding the MIH program to additional days.

The program is also considering the addition of Community Health Workers (CHWs) to assist with patient follow-up and care coordination. CHWs may also be utilized to help address transportation barriers by assisting patients with transportation to and from medical appointments and supporting patients in maintaining their scheduled medical care.

Queen Anne's: Zach Yerkie; We are in the final stages of our FY2027 budget process. The proposed budget includes funding for a seventh unit. If approved through the remaining budget process and public hearings, the additional unit is anticipated to become operational during FY2027.

We plan to transition to ZOLL X Series monitors during July as part of an equipment upgrade.

We received notification of an award through the Rural Health Transformation Grant to support implementation of our whole blood program. A Blood Coordinator position will be established as part of the grant-funded program.

We plan to expand our Rapid Sequence Intubation (RSI) cadre from its current supervisor-level structure to include eight Field Training Officers (FTOs), with two FTOs assigned to each shift. An airway laboratory scheduled for June will serve as the kickoff for the expansion.

Renovations to our Station 400 are scheduled to take place during the summer. The station will temporarily relocate to the Goodwill Volunteer Fire Company from approximately July 1 through September 1 to accommodate the renovation.

Caroline: KJ Marvel; Our Mobile Integrated Health (MIH) program is working closely with the local health department following receipt of the Rural Health Transformation Grant. The MIH program is transitioning from one day per week to a full-time Monday through Friday program, with a paramedic assigned full-time to the program.

Caroline County also reported that its Whole Blood Program became operational, with the first unit of blood received on the day prior to the meeting. The county acknowledged the assistance provided by Cecil County in establishing the program.

Future initiatives under consideration include expanding the MIH program, implementing additional clinical capabilities including BiPAP, and expanding Rapid Sequence Intubation (RSI) capabilities for command staff.

Talbot: Tina Kintop; reported that staffing levels have improved and that the agency currently has several paramedic positions filled above its previous staffing level. The agency is continuing to monitor staffing needs in anticipation of the planned expansion to a seventh unit.

Tina also reported that Talbot is awaiting authorization to submit its Rural Health Transformation Grant plans. The county also participated in a Region IV MIH consortium meeting intended to facilitate collaboration among regional MIH programs and identify successful practices and challenges.

A North County Station (Station 95) is scheduled to open in June.

Dorchester: Debbie Wheedleton; reported they were awarded the grant for the Blood program. They are hiring a new deputy chief if anyone is interested. We have some paramedic openings as well. Eagle Man is coming up on June 14th.

Wicomico: Shari Donoway; Nothing to report.

Salisbury: John Dennis; MIH didn't have any report other than they are working on different finance programs. John attended the EMS summit last week in Arizona. He highly recommends the summit.

We had a system board failure on one of our Life Pack 35's at the end of one of our calls. Luckily, it didn't affect anything, but Stryker had to replace a board in it. John reported they had another issue last week with their glucometers. Values were not being reported accurately. As a result, they replaced all of their glucometers and since have not had an issue.

Worcester: Harvey Booth; Nothing to report.

Ocean City: Derrick Simpson; Reported receiving notification regarding its Whole Blood Program and is preparing to begin implementation. The agency also plans to conduct a community blood drive in the coming month and intends to promote the program during the upcoming MSFA convention.

Ocean City is also planning a one-day resuscitation academy.

The agency reported that testing for full-time, part-time, firefighter, EMS, and paramedic positions is scheduled for July 15.

Somerset: Cory Polidore; Reported receiving its award letter for the Whole Blood Program and plans to present the award documentation to the County Commissioners for signature.

Additional paramedics are scheduled to begin employment during the first week of June.

The proposed FY2027 budget includes funding for three additional positions and a transition to a 24-hour EMS supervisor chase unit. The county also reported that two individuals are graduating from the Wor-Wic Community College paramedic program and three individuals are expected to begin paramedic education in the fall.

The chair called for reports from hospitals. No response, therefore, no reports from hospitals.

Old Business:

No additional old business was reported.

An update was requested regarding the previously discussed radio encryption project. It was noted that information regarding the project had been distributed to the Region.

New Business:

Senate Bill 439 – Cannabis and Employment:

The upcoming implementation of Senate Bill 439, effective October 1, 2026, was discussed. The bill's potential impact on fire, rescue, and EMS personnel was identified as an issue that agencies should begin reviewing in preparation for implementation.

Participants discussed questions regarding the application of the legislation to EMS personnel, employment policies, drug testing, impairment, and the relationship between employment actions and potential action by the EMS Board. It was noted that the legislation addresses employment practices and that questions remain regarding how agencies should address situations involving a positive cannabis test, particularly when there are or are not documented signs of impairment.

Dr. Chizmar provided clarification that, based on his understanding of the legislation, the restrictions on employment actions do not necessarily limit the authority of the EMS Board to take appropriate action in cases involving documented impairment. It was further discussed that cases involving a positive test without documented impairment may present different considerations than cases in which impairment is documented.

Talbot Emergency Services reported that it has begun reviewing the issue with county leadership and its Human Resources department. The agency also obtained a copy of Howard County's policy for review and consideration in developing its approach. The potential involvement of insurance carriers and the need for appropriate guidance and training were also discussed.

The group discussed the importance of agencies working together as they develop policies and procedures in response to the new legislation.

July Meeting:

The group discussed whether the customary cancellation of the July meeting is addressed in the Region's bylaws. It was noted that the July meeting has traditionally been skipped, although this practice is not believed to be specifically addressed in the bylaws.

A motion was made by Shari Donoway to cancel the July 2026 meeting and reconvene in September 2026. The motion was seconded. The motion carried.

Adjournment:

A motion to adjourn was made and seconded. The motion carried, and the meeting was adjourned at 14:57 hours.