

Medical Advisory Committee

"Your Voice In EMS"

Meeting Minutes 11/11/2020

Members:

Х	Dr. Larry Anderson	X	Dr. Daniel Carney		Dr. Caroline Colleran	X	Dr. Michael Dumin
Х	Dr. Greg Frailey		Dr. Tabitha Jeffers	X	Dr. Beth Linkenheil	X	Dr. Anthony Fidacaro
Х	Dr. Scott Magley		Dr. Randi McLeod	X	Dr. Crawford Mechem		Dr. Paul Paris
Х	Dr. Mike Reihart (C)	X	Dr. Brian Risavi	X	Dr. Alex Rosenau	X	Dr. Kim Roth
Х	Dr. Steve Schirk	X	Dr. Duane Siberski	X	Dr. Rick Wadas	X	Dr. Alvin Wang
Х	Dr. Gerald Wydro						

Bureau of EMS Staff:

Х	Dylan Ferguson	X	Dr. Doug Kupas	X	Paul Hoffman	X	John Englert
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PEHSC Staff:

x Janette Swade x Butch Potter Andy Snavely x Duane Spencer		
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Guests, Liaisons & Contributors:

Juliet Altenburg	Dr. Dan Bledsoe	Eric Gratz	Dr. Frank Guyette
Larry Helwig	John Kloss	Dr. Jeff Kuklinski	Larry Loose
Carl Moen	Joe Ponko	Megan Ruby	Dr. Herbert Schiffer
Jason Smith	Dr. Jonathan Trager	Anthony Tucci	Merv Wertz
Tammy Whiteman	Bryan Wilson		

Call to Order

The meeting was called to order at 1003 by Chair Dr. Mike Reihart.

Approval of Meeting Minutes

The meeting minutes from August 12, 2020 were reviewed.

A motion was made by Dr. Frailey and seconded by Dr. Siberski to accept the meeting minutes as drafted – motion carried.

Reports

Organizational reports were deferred for this meeting in order to provide sufficient time for statewide treatment protocol review.

Old Business

- I. Statewide Protocol Update Dr. Kupas
 - a. Dr. Kupas previously provided a first-draft of the updated BLS, ALS and CCT protocols. At today's meeting, the committee reviewed and discussed the BLS protocols.
 - b. There are proposed changes/notes for discussion in the following protocols:
 - i. 103 Infection Control
 - ii. 111 Patient Refusal
 - iii. 112 Non-Transport/Cancellation of Response
 - iv. 150 Rehabilitation at Fire/Incident Scene
 - v. 170 Patient Destination
 - vi. 201 Initial Patient Contact
 - vii. 202 Oxygen Administration
 - viii. 222 Ventilation [of ALS Airway Device]
 - ix. 227 Carbon Monoxide Co-Oximetry
 - x. 251 ECG Monitor Preparation/Assisting w/ ALS Procedures
 - xi. 331A Adult Cardiac Arrest
 - xii. 331P Pediatric Cardiac Arrest
 - xiii. 333 Newborn/Neonatal Resuscitation
 - xiv. 411 Allergic Reaction/Anaphylaxis
 - xv. 501 Ventricular Assist Device Management (NEW)
 - xvi. 602 Multisystem Trauma
 - xvii. 605 Blast/Explosive Injury
 - xviii. 611 Head Injury
 - xix. 671 Burns
 - xx. 702 Altered Level of Consciousness/Diabetic Emergency
 - xxi. 706 Suspected Stroke
 - xxii. 781 Emergency Childbirth
 - xxiii. 801 Agitated Behavior/Psychiatric Disorders
 - xxiv. 931 Suspected Influenza-Like Illness
 - c. A physician workgroup from the EMS for Children committee contributed recommendations for pediatric patients that were incorporated into various protocols.
 - d. There will be an additional special meeting scheduled for December to continue the protocol review process. A Doodle survey will be sent to committee members to determine their availability.
 - e. Dr. Kupas thanked everyone who provided recommendations, either directly or through PEHSC's stakeholder survey.

New Business

- I. Proposed DEA Regulations for EMS
 - a. The DEA has published proposed rulemaking in the Federal Register to final address EMS as it relates to controlled substances.
 - b. A link to the proposed regulations was sent to the committee for review prior to today's meeting and the members asked to voice any concerns or recommendations. The only concern raised related to standing orders/protocols; the language is written on the assumption that each agency has their own protocols. While this is true in parts of the country, many states have adopted statewide protocols the current language does not address this variation. The MAC recommended this comment be submitted to the DEA for consideration.
 - i. This comment will be carried forward to the December 2nd PEHSC board meeting and combined with any other comments from the board members.

II. Establishment of an RSI Task Force

- a. During the October critical care transport task force meeting, the topic of identifying a pathway for high functioning ALS agencies to be permitted to perform RSI. Some members questioned why they were permitted to perform this procedure when working on a CCT vehicle, but not when they are functioning with their local ALS agency.
- b. It was pointed out that RSI has been a long standing, controversial issue with strong opinions both for and against expanding availability, however, it's not been formally discussed for several years.
- c. A recommendation was made to interface with the MAC co-chairs to determine if they would be interested in standing up a joint task force to explore the issue.
- d. In the days following the CCT meeting, PEHSC received correspondence from the BEMS requesting an RSI task force be established and provided guidance on group composition and objectives. PEHSC President Dave Jones is in the process of selecting participants based on the BEMS' parameters and will announce his selections in the near future.

III. Pulse Point

- a. Dr. Reihart asked if any member was using Pulse Point in their area to decrease time to CPR in an OHCA by alerting trained members of the community to the event.
- b. Several members indicated they are using the program, but noted it is somewhat expansive to maintain at the 911 center level.
- c. Another member commented that they are only sending out alerts for incidents occurring in a public place to avoid people showing up at a private residence or medical facility.

Other Business

- I. Congratulations to Dr. Doug Kupas for being the recipient of the 2020 NAEMT/Rocco V. Morando Lifetime Achievement Award!
- II. 2021 Meeting Dates
 - a. The proposed 2021 meeting dates were previously circulated for comment; only the January date will need to be changed due to a conflict with the annual NAEMSP meeting.

- b. The meeting dates for 2021 will be:
 - i. January 20th
 - ii. April 14th
 - iii. August 11th
 - iv. November 10th
- c. At this point, due to the pandemic, these meetings will be held using the Adobe Connect platform.

Adjournment - 1310 hours

