Rappahannock EMS Council Guidelines & Training Committee Minutes October 26, 2015 REMS Training & Simulation Center

Call to Order: Meeting was called to order by Board member John Brandrup at 1900 hrs

Roll Call and Recognition of Guests: Members present: John Brandrup, Tim Jeter, Chris Payne, Jake Marshall and Wayne Perry, REMS Staff. On the phone were Waverly Alley and Pat Fitzgerald. Excused were Kelly Southard and Maurice Moody.

Approval of Minutes: August 24, 2015 Motion was made to approve and carried

Staff Report:

We have an upcoming NR psychomotor test on November 21, 2015 & January 9, May 21, July16, September 10 & November 19, 2016

EMT-I & P students are currently working on field internship & clinicals so they can be cleared to test

There are a few students that have gained their NREMT/State certification and about 4-5 more that are testing at the next NREMT site.

ALS Recert class being held now through December 8, 2015 on Monday & Tuesday Evenings EMT Class started August 17, 2015 with 19 students now at 17. Next Class starts January 11, 2016 EMT-B recert (24 cat 1 hrs) will be held January 23, 30 & February 6

GCC Degree Program –We are looking into options for a sponsor since Germanna is not able to get approval through SCHEV/SACS for the program being held off-site

ALS Instructor/Coordinator Requests: 1.James Hurlock-Re-Endorsement. Provider with Culpeper Ongoing BLS/ ALS CEU course approval Motion to approve by Chris Payne, seconded by Pat Fitzgerald. Motion carried.

Sub-Committee Reports:

1.) Protocol- Committee met on October 19 Items committee is working on:

Changes were emailed to committee members. These changes were reviewed and motion was made by Chris Payne, seconded by Pat Fitzgerald to approve all but 3 that are being sent back to the Protocol Sub Committee to revise. Those are Medical-Altered Mental Status, Medical-Overdose/Poisoning/Toxic Ingestions and IV/IO access. There were a few other grammatical changes made also. Motion carried. The changes will come back to G & T in

December.**See attachment for the changes

2.) ALS Release - Train the Trainer program.

Robert Usher taught on March 12 with only a few in attendance Chris Payne taught a class for provider Mark Liverman in Caroline County

Unfinished Business:

New Business:

EMT-VEMSES-Rebecca Raines-Stafford HS-9/8/14-4/30/16 MTWTF x2
EMT-VEMSES-Mary Gardner-Colonial Forge HS 9/14/15-4/25/15 MTWTF x3
Inter to Para – Gretchen Wills- Stafford County Fire & EMS 4/24/15–1/24/16 STTFS
Paramedic – Gretchen Wills – Stafford County Fire & EMS 2/6/15 – 1/24/16 STTF
Paramedic – Gretchen Wills – Stafford County Fire & EMS 2/5/16 – 1/22/17 STTFS
EMT VEMSES-Linda Harris-REMS-8/17/15 – 12/12/15 MWS
EMT VEMSES-LindaHarris-REMS-1/11/16 – 5/7/16 MWS
EMT VEMSES-James Allen – CCJA 10/1/15 – 10/16/15 SMTWTFS
EMT VEMSES-Amy Cantwell – CCJA 12/1/15 – 12/15/15 SMTWTFS
EMT VEMSES-Kim Madison- Shannon Training Center-09/21/15-02/01/16 MWS
EMT VEMSES-Mary Hart-Fauquier F & R-9/22/15-1/23/16- UNK days
EMT Non Traditional-Jenni Hartle-SCFRD- 8/24/15 – 12/20/15 MWS
EMT VEMSES-Alecia Hamm- Salem Vol F & R-9/28/15- 1/7/16 MThS
EMT VEMSES-Roger Wilson-LOW- 10/13/15 – 3/3/16 TTS

Chris Payne reported he monitored a class for CCJA & sent report

REMS BOD Action Item: Protocols will be sent to REMS BOD as complete package once all approved

For the Good of the Order:

Adjournment: Meeting was adjourned at 2022 hrs. The next meeting has been moved from December 28 to December 14, 2016 at 1900 hrs

Protocol Changes

Proposed Changes for the 2015 protocol update – Medical Direction Committee Review 10/26/15

Proposed Changes for the 2015 protocol update – Guidelines and Training Committee Review 10/26/15

Admin Section – approved by Medical Direction Committee 10/26/2015

Admin Section – approved by Guidelines and Training Committee 10/26/2015

- 1) Updated the BOD, committee, and other relevant items (dates, page numbers, etc)
- 2) 3.15.2 updated provider levels to current terminology (EMR, EMT, etc)
- 3) 3.18.3 -- Added SRMC as a SANE facility
- 4) 3.21 new section "Sepsis PEARLS"

Medical Section – approved by Medical Direction Commmittee with changes noted 10/26/2015

Medical Section – approved by Guidelines and Training Committee with exceptions noted 10/26/2015

All of the protocols are REQUIRED to comply with the new data dictionary for VPHIB v3. We were mandated by OEMS to update the names of protocols. Those protocols with only an update to the name are indicated below with an asterisk.

All of the protocols were updated to amend the initial treatment from SaO2 > 90% to SpO2 of 94-99%.

All of the protocols added EMR to the first responder provider and changed EMT-B to EMT.

- 5) Allergic Reaction now "Medical-Allergic Reaction/Anaphylaxis"
 - a. Added STAT kit use of Epi-pen for EMT level (#2)
 - b. Relocated dystonic reactions tx from Altered States of Comfort (#3)
- 6) Altered Mental Status now "Medical-Altered Mental Status" *
 - a. Received e-mail recommendation to add IN Narcan for EMT level
 - b. MDC accepted, but wants to change to 0.4 mg Narcan
 - c. G&T did NOT approve, returned it to the sub-committee for review

Altered States of Comfort broken into separate protocols due to naming requirements

- d. Morphine removed due to formulary changes
- e. Dystonic Reactions now in allergic reactions
- f. Nausea and Vomiting now in new nausea vomiting protocol
- g. Pain Management, Anxiety, and Sedation now in new pain control protocol
- h. Chemical extrication and crush management now in injury-multisystem
- i. Notes 1 and 4 were moved to behavioral
- j. Notes 2 and 3 were eliminated
- 7) Cardiac Arrest/ACLS/PALS is now "Cardiac Arrest Unknown Rhythm"
 - a. Updated rate of compressions to new 2015 AHA guidelines (100-120) and new depth of compressions (2-2.4 inches)

- b. Removed therapeutic hypothermia
- c. G&T changed the order of the wording for NTG x 3
- d. G&T recommended removing q from ALL of the protocols and replacing with every
- 8) Cardiac Chest Pain is now "Medical-Chest Pain -Cardiac Suspected"
 - a. Added STAT kit NTG and ASA elements to EMT section
 - b. Received an e-mail suggestion to add NTG to the dosing line
 - c. MDC approved this change
- 9) Eclampsia is now "OB/GYN-Eclampsia" *
- 10) Hypotension is now "Medical-Hypotension/Shock Non-Trauma" *
 - a. Received an e-mail suggestion to add ODT Zofran at the EMT level
 - b. MDC approved this change, check to see if it is in the correct protocol?
- 11) Overdose/Poisoning/Toxic Ingestion now "Medical-Overdose/Poisoning/Toxic Ingestions"
 - a. MDC change 0.4 mg Narcan, up to 2mg, repeat q 2min*
 - b. G&T did NOT approve, returned it to the sub-committee for review
- 12) Respiratory Distress is now "Medical-Respiratory Distress/Asthma/COPD/Croup/Reactive Airway"
 - a. Added #4 and #5 to EMT section from the patient assisted medication (STAT kit)
 - b. G&T recommended a change to the wording of Lasix as a home med
- 13) Seizures is now "Medical-Seizure"
 - a. Removed Ativan and Valium per changes to the formulary
- 14) General Pain Control (new protocol)
- 15) General Nausea Vomiting (new protocol)
- 16) General Behavioral / Patient Restraint (new protocol)
 - a. MDC change reduce from 4mg to 2mg/kg IM Ketamine, repeat x1 q10 minutes
 - b. MDC change reduce from 2mg to 1mg/kg IV Ketamine, repeat x1 q 5 minutes
- 17) General Indwelling Medical Device/Equipment (new protocol)
 - a. Received an e-mail suggestion to remove 6)g) or move it to 4)
 - b. MDC did not recommend this change, leave it as it
 - c. G&T recommended a change to #14 to amend the language
- 18) Patient Assisted Medication DELETED
 - a. ASA and NTG moved to Chest Pain
 - b. Epi-pen moved to Allergic Reaction
 - c. MDI moved to Respiratory Distress

Trauma Section – approved by Medical Direction Committee with changes noted 10/26/2015

<u>Trauma Section – approved by Guidelines and Training Committee with changes noted 10/26/2015</u>

- 19) Burns is now "Injury-Burns" *
 - a. MDC change based on e-mail recommendation add the ABA criteria to the reference section
- 20) Traumatic Brain Injury is now "Injury Head (Traumatic Brain Injury)"
 - a. G&T recommended a change to wording from ET to ETT.
- 21) Injury-Bleeding/Hemorrhage Control (new protocol)
- 22) Injury Multisystem (new protocol)

Clinical Procedures – approved by Medical Direction Committee 10/26/2015

<u>Clinical Procedures – approved by Guidelines and Training Committee with exceptions noted</u> 10/26/2015

- 23) Scope of Practice and Authorized Medication Table updated to include the updates
 - a. Added EJ for AEMT/EMT-E and EMT-I
 - b. Added IM and IN for EMT as conditional
 - c. Removed Valium, Ativan, Vasopressin, and Morphine
- 24) Airway Management is now "Airway-Sedation Assisted (Non-paralytic)" *
- 25) Airway—Rapid Sequence Induction (RSI-Paralytic) is new
- 26) IV and IO access
 - a. Added information about provider access of central lines
 - b. G&T did NOT approve, returned it to the sub-committee for review and recommended a change to the scope of care for medi-port access being EMT-P and above and PICC line access being EMT-I and above.
- 27) Clinical Procedures Therapeutic Hypothermia DELETED

Reference Section – approved by Medical Direction Committee 10/26/2015

Reference Section – approved by Guidelines and Training Committee with changes noted 10/26/2015

Changed the standard medication infusions worksheet to standardize the ratio Added a Sepsis decision flowchart

MDC change - add the ABA criteria to the reference pages

G&T change – add list of suggested supplies that are needed to fulfill the contents of the protocols

Medication Reference – approved by the Medical Direction Committee 10/26/2015

Medication Reference – approved by Guidelines and Training Committee 10/26/2015

Remove Morphine pages Remove Valium pages Remove Ativan pages Remove Vasopressin pages