

REMS Council Protocol Sub-committee  
Meeting Minutes – Wednesday, August 01, 2017– 9:00am  
REMS Council Regional Training and Simulation Center

The meeting was called to order by the chair, Patricia Derr at 9am. Members present were Patricia Derr, Linda Harris, REMS Staff, Wayne Perry, REMS Staff, Greg Leitz, Steve Mitchell, David Farmer, and guest David Noack, Spotsylvania FREM. On the phone was Maurice Moody.

Old Business:

Protocol changes/addition

1. Injury - Head (TBI) protocol
  - a. the committee approved adding the GCS scale to monitor patients but want it added as #2 for EMR and above.
  - b. MDC recommended to use vasopressors (Dopamine as first choice) to maintain Mean Arterial Pressure (MAP) at/above 60mmHg."
    - i. The committee wants to go back to the MDC to ask to use push pressors, and would recommend using Epinephrine due to already existing protocols and familiarity.
    - ii. The EPI is suggested to be added as #7 for EMT-I level and above.
    - iii. If approved, push pressors information will need to be added to reference section as well
2. Injury-Multisystem – open injury comments and infection precaution from MDC
  - a. There was some discussion about the status of Ancef and adding this to the formulary. It will be going to G & T on 8/22, the Pharmacy Committee on 9/7, and then to the BOD in October.
  - b. Committee decided not to add note on infection control as it was standard practice
  - c. Regarding crush injuries the recommendation to add definition information about what is a crush injury under criteria.
3. Administrative Section 3.18 - Assault & Neglect
  - a. Draft language was presented to the committee for review and edited during the meeting.
  - b. There was a recommendation to add language regarding financial exploitation
  - c. It will be blended into the same paragraph format to match with the other areas of the administrative section
  - d. The committee asked that the final document be sent to Spotsylvania County Social Services for their review of the content
  - e. After that feedback, it will be moved along to G & T, MDC, and BOD.
4. New medication sheets are needed based on the recently approved mass gathering protocol
  - a. The draft document for acetaminophen was presented and edited by the group.
  - b. The draft document for ibuprofen was presented and edited by the group.
5. There was a recommendation from the EMS community to look at options for non-narcotic pain management. Items such as cold therapy and liquid Tylenol were suggested. The R-OMD is amenable to either, but would like the pharmacy committee to review the cost impact of adding something like liquid Tylenol. This will be sent to the pharmacy committee for their input.
6. There was a discussion about the Next Generation Burn care information that was provided to the group. The sub-committee would like to check with burn centers to see if they approve this field treatment. It was suggested to check with Katie Holloway at Washington Hospital Center first. Staff will reach out to inquire.
7. There was a discussion regarding the AHA Stroke Severity Based Algorithm for EMS. This has been added to the State stroke plan with will be voted on at EMSGAB this week. The information will be sent to the Stroke Committee Chairman to be included in the revisions to the REMS stroke plan.
8. Protocol training for Dahlgren- Patricia Derr has information to assist this agency with protocol training. They will be sent her contact information.

9. There was discussion about the use of Magnesium Sulfate. It was recommended to change from online medical control to standing order in the Respiratory Distress protocol. Will move on to G & T, MDC & BOD.
10. There was a discussion about the use of Lasix. It was recommended to remove Lasix from the Respiratory Distress protocol and therefore also from the medication reference & formulary. This will go to G & T, MDC & BOD.
11. There was a discussion regarding the use of CPAP by providers. In the Ventilator and CPAP Clinical Procedure under criteria, it was recommended to remove the reference to pulse oximetry in line 1. Also under treatment section it was recommended to amend the EMT skill box from Online Medical Control to R-OMD. This recommendation will go to G & T, MDC & BOD.
12. There was some discussion on the dose of versed being different between protocols, but the final decision was to leave it unchanged in the protocols.
13. There was a discussion regarding the Allergic Reaction/Anaphylaxis Protocol. Under treatment - #9 it was recommended to remove Prednisone altogether. If approved, then also remove it from the medication reference and the formulary. If approved, it was recommended to move Solu-medrol to the Intermediate level. Number 10 would remain at the Paramedic level.
14. There was a discussion regarding the Altered Mental Status Protocol. It was recommended to move treatment item #7 to the AEMT level.
15. There was a discussion about scope of practice and it was recommended to change Adult IO to standing orders for AEMT.
16. There was a discussion about the possibility of adding Nitroglycerin paste as an option for patient care. This will go to Pharmacy Committee to find out the options/availability for this being added to the formulary, and it will also go to the medical direction committee for their input.

Meeting was completed at 11:30am Next meeting will be Wednesday August 16 at 12:30pm

**REMS Council Protocol Sub-committee  
Meeting Minutes – Wednesday, August 16, 2017– 12:30pm  
REMS Council Regional Training and Simulation Center**

Call to order: Meeting was called to order by the chair, Patricia Derr at 12:30pm. Members present were Patricia Derr, Linda Harris, REMS Staff, Greg Leitz, Steve Mitchell, David Farmer. On the Phone were Maurice Moody and Wayne Perry, REMS staff.

Old Business:

Protocol changes/additions

\*Multi system trauma – move Note 4 ( Contamination of open injury) & 5( Crush injury definition) to Criteria

\*Head Injury – Take Epi use for pressors to MDC

\*Greg Leitz will send Next Generation burn care info to VCU for input

\* Assault & abuse – adding other types of abuse- Greg Leitz will send to Spotsylvania SS Dept for review and input

\*As a non narcotic replacement for Fentanyl using Ice & IV Tylenol – will be sent to Pharmacy committee for the availability and MDC

\* the med sheets for Acetaminophen and Ibuprofen were reviewed and there were concerns that the Mass Gathering protocol advises EM to obtain vital signs to assure that the patient does not have hypotension prior to administration of these over the counter meds. There was also some discussion about a disclaimer in the front of the medication reference section that the information contained is not all inclusive and is just a quick reference for provider. Patricia Derr will write this paragraph.

New Business

The administration of versed was discussed. The request to have one n on weight based dose for adults for all protocols except for RSI as agreed by all in attendance. This will be presented to MDC for approval.

From Wayne:

\* Reminding all that the Narcan grant is still open for agencies. They can apply thru Evis.

\*He attending meeting where there was some discussion on the Scope of Practice for EMS 2050. There will be a planning meeting which will be posted on REMS website for this wishing to attend.

\*He asked Stafford provider to report on the medication exposure that happened with the sheriffs dept recently. He stated that one deputy responded with patient and another deputy carried evidence from scene. Both cars had to receive decon from hazmat.

\*The report on Evidence Based Guidelines in fatigue in EMS will be released soon.

The advisory committee will be sending to the federal government nomenclature for EMS paramedicine which is the first step to make it a profession.

There was some discussion on this committee becoming a full committee or at least moving it from a sub committee of Guidelines and Training to Medical Direction Committee. This will eliminate another step/hold up in the approval process. This will be presented at the board meeting for approval.

Meeting was adjourned at 1:45pm

**Next Meeting: TBD**