



Tidewater EMS Council, Inc.  
Operational Medical Directors Committee  
Minutes – September 6<sup>th</sup>, 2022 12:00pm

**Attendance**

Name	Agency/Representing	Attended
Stewart Martin, MD	VBEMS/ Chairperson	x
Stephen M. Skrip, MD	MTI /Airport	
Jim Burhop, MD	CHKD	
April Shackelford, MD	Franklin/ Southampton	x
Allison Ashe	VB Lifesaving Service	x
Richard Slama, MD	Navy Region Mid-Atlantic	
Barry Knapp, MD	Norfolk Fire-Rescue	x
Rene Morcion, DO	Reliance Medical Transport	x
Carl Wentzel, MD	Suffolk Fire and Rescue	
Manuel Armada, MD	TCC	
Don Byars, MD	Portsmouth Fire and Rescue	
Paul Roszko, MD	Navy	
Zane Shuck, MD	Franklin/Southampton County	
Michael Owens, MD	HRMMST	x
Jamil Kahn, MD	CHKD	
Joe Lang, MD	Portsmouth Fire and Rescue	x
Joel Michael, MD	IOW, NSVRS	x
Lewis Siegel, MD	Chesapeake Fire	x
Lori Givonetti, MD	Nightingale	x
Mike Bono, MD	Special Events	
Paul Holata, MD	Norfolk Fire-Rescue EMT-I	
Hugh Hemsley, MD	Accomack Department of Public Safety	
Joseph Katora, MD	NMCP	
James Reynolds	CFD	x
David Long	TEMS	x
Joey Hundley	VBEMS	x
Valerie Vagts	TEMS	x
David Coulling	TEMS	
Mike McMahan	TEMS	x
Matt Owens	VBEMS	x

**Welcome and Introductions**

- Dr. Stewart Martin, called the meeting to order at 12:00 at Fin and Tonic. Dylan Woolum (EVMS Fellow attended as a guest)
- Approval of 6/7/2022 meeting minutes – 1<sup>st</sup> Dr. Lang, 2<sup>nd</sup> Dr. Siegel. Motion Passed.

**Old Business:**

- Whole blood administration: Started September 1<sup>st</sup>. Opportunity to Donate blood at the TEMS office on September 27<sup>th</sup> 11am-1900, for every unit collected, they give \$20 back to the organization. See website <https://donate.tidewaterems.org/> for more information. Most of the equipment needed is already inventoried and tagged, ready for deployment. Training for VBEMS is Sept 19 and Sept 22. Oct 4<sup>th</sup> at noon is the projected start and delivery will occur bi-weekly, Oct 18<sup>th</sup> will be second delivery and assessment of the first batch of blood will be assessed. Nightingale has transfused about 6 units since they started carrying packed red blood cells, will continue to get blood through Sentara and is slated to get whole blood. Will keep air ambulance process separate from ground ambulance reporting initially.
- Portsmouth Nitrous Oxide update: Changed IOP from either or, to use it before other medications.
- iGels: The RSAF grant was approved and TEMS is waiting for the award letter. The funds are enough to supply 1<sup>st</sup> line/disaster response and full hospital restock. Pediatric sizes will be included in the next RSAF Grant request.
- Ultrasound: Reliant on funding. Waiting to hear about the \$100,000 chic-fil-a grant that will be announced in December. AI is continuing to be improved during this waiting period. VB has 3 on order currently. Looking forward to using these to determine appropriateness of chest decompressions.
- CPAP: Hospitals don't use them so they throw them away when the patient gets to the hospital so they will not provide for restock even though 9/10 jurisdictions use the same product. Mercury Medical has a BiPap option, so we are circulating them through the hospitals, EMS agencies and Medical Directors. Motion made to accept switching to BiPap over CPAP when the appropriate product has been selected. Motion Passed with None Opposed.
- Cardiac Arrest Working Times: Verbeek criteria (witnessed arrest, ROSC at any point, shockable rhythm) has considerations for type of cardiac arrest. Average recommendation is 20 minutes unless it meets the Verbeek criteria; otherwise, can consider longer times. The change in end title is a good indicator.

**New Business:**

- Education and Training: Matt Owens
  - Protocol Changes: Termination of Resuscitation to change the cardiac arrest working times (this one will be revisited next meeting to make changes to identify and treat any reversible underlying causes wording). Agitated and Combative protocol – expand indications

to include patients with head trauma, reduce max dose of Versed on SO from 10mg to 5mg, given IM so can take out Haldol note; Reviewed new High Performance CPR reference protocol and new Whole Blood Protocol – Motion Passed to approve these changes and created protocols. None opposed.

- AEMT test proposal to go into effect 1/1/23, since the protocols have increased the AEMT's scope of practice significantly, E&T felt like a 50 question protocol test would be helpful. No boards or in-person meeting required. This would only apply to new AEMT's entering practice in the region after 1/1/23. Joe Lang 1<sup>st</sup>, Lewis Siegel 2<sup>nd</sup>. None opposed. Motion Passed.
- EMS Fellow Research Topic: Approval for tagging along the supply chain issues of D50 vs D10 and the implications in administration. Dylan is open to other projects. Look at ROSC rates based on initial presenting rhythm, which ties into cardiac arrest working times, heads up cpr, end tidal indications and other related hot topics (such as, bystander placed defibrillator pads). Leigh would like to have CFD come out to do a heads up training at the Corporate Meetings, which are held the 4<sup>th</sup> Wednesday of the month in the morning.
- Would like to see a list of points of contact for each agency to put in the ED's to give feedback regarding an EMS providers care. At a minimum the OMD contact.
- EMS fellow interviews have 5 applicants.

#### Meeting Schedule for 2022

- December 8<sup>th</sup> at PEMS with OMD update from 8-12 at 6876 Main Street, Gloucester, VA 23061

Meeting adjourned at 13:45

**Announcements / Dates to Remember** – please visit [www.tidewaterems.org](http://www.tidewaterems.org). Please contact Valerie Vagts at [vagts@vaems.org](mailto:vagts@vaems.org) with any changes to your contact information.

**The next meeting of the TEMS Operational Medical Directors Committee meeting is scheduled for  
December 8<sup>th</sup>, 2022 at 12:00pm.  
Location: 6876 Main Street, Gloucester, VA 23061**