



EMS MEDICAL OPERATIONS COMMITTEE MINUTES

Date: December 13, 2023

Chaired By: James Reynolds

Location: TEMS Office and Virtual

Begin Time: 12:06 pm End Time: 1:37 pm

Welcome/Introductions – James Reynolds

Attendees were James Reynolds, Alan Perry, Amy Ward, April Achesinski, Chris Smith, David Keeler, David Long, Fred Paquet, Greg DeYoung, Jerry Griffith, Matt Owens, Stephanie Adams, Stephanie Hackett, Jeff Meyer, Wayne Berry, Ralph Rosignolo, Valerie Vagts

Approval of Minutes – James Reynolds

- o Motion to approve by Fred Paquet and seconded by Greg DeYoung. All motions in this meeting were unanimous with no negative votes or abstentions received

Directors Report – David Long

- o Whole blood update: 65 administrations since implementation. 4 units on the streets, 2 Virginia Beach, 1 Chesapeake, 1 Portsmouth. Advanced Resuscitative Care (ARC) bundle will include TXA and Calcium Gluconate, piloted in Portsmouth beginning February. Ideally would like to be piloted throughout region, but regional pharmacies may be a challenge
- o Drug box program discussions are underway to see how to combat the possible need for individual agencies having to restock their own medications, due to the DEA and DSCSA pending requirements. We are not going to worry about this until the rules are set
- o There is a request from MOC for CSR Process education from TEMS
- o There were a number of contracts that OEMS oversaw but were executed through various other councils (Handtevy, Vector Solutions, ESO, Blackboard, Monday.com, etc.). These contracts have been terminated. There will be an RFP process for the new ePCR vendor that will be awarded by VDH
- o Wayne Berry is available to any jurisdiction to ride along and get action shots in the field to help tell stories, just put it on the calendar
- o Igel has been added on the restock list and in appendix F list

Nurse Managers – David Long on behalf of Ralph Rosignolo

- o Sepsis management using something like Quick Sepsis Related Organ Failure Assessment (QSOFA) score to identify a sepsis alert. Suffolk has been alerting and patients had a substantial improvement. High performing agencies have sepsis alerting and IV antibiotics in the field across the country.
- o Ambulances are still being left unsecured at the hospital and are getting stolen

OMD Committee Report – Valerie Vagts

- o Pediatric accepted by the state as age 13 and younger. AEMT got cyanokit approved at the state level, will go into effect in July for TEMS. Blood exposure from deceased patients is proving to be a challenging process that the state is working towards a resolution for. NFPA put out a letter that heads up CPR is the standard of care, VA state OMDs went on record to oppose due to cost and needing more evidence to enforce this change. PEMS is combining their adult and pediatric protocols to streamline them. Everyone is working towards solving the Handtevy expiring issue, acid remap/pedistat is being evaluated as a solution. Sentara Williamsburg is working towards becoming a level 3 trauma center. PEMS created an airway alert that is non-divertible. Dr. Louka working towards dual sequential defib for refractory v-fib. PEMS is exploring color coded syringes of epi so BLS providers can provide care in anaphylaxis and allergic reactions. PEMS is using RACE score of greater than 5 to divert LVO patients to the appropriate facility.
- o CPR induced consciousness is more frequent so protocol will be updated to include a dose of 4 mg versed for these patients. Skills checkoff sheet removed to schedule TEMS boards. Working towards clinical and didactic ultrasound program to rollout in tandem with the whole blood program. There is too much risk delivering calcium chloride so a conversation with the pharmacy needs to happen



Performance Improvement – Valerie Vagts

- Stephanie Adams (PI Committee) stated we pulled the stroke report and made some tweaks to it and added some criteria in order to help shape our results. Next, we will pull the 12 lead report to make sure it is giving us the data we seek
- Alan Perry (STEMI Committee) stated they review performance metrics which seem to be improving. Improving bystander CPR rate and educating the public was a hot topic. Talked about rebranding the committee to include cardiac arrest
- Dr. Michael (Stroke Committee), Valerie stated we reviewed the data and talked about the need for IV's in stroke patients. Not to delay transport waiting for ALS, but if ALS is available to get a right arm AC, 20 gauge or bigger
- Mike O'Neill (Trauma Committee), Valerie stated we reviewed data and a few cases regarding Needle Decompression, Tourniquets, traumatic cardiac arrest and RSI. TXA was discussed and David filled us in where we stand within the region.
- The triannual review of the Stroke, STEMI and Trauma plans were approved with one revision suggested and adopted. Motion to accept by Alan Perry, Amy Ward 2nd. None opposed. Motion approved.

Education and Training – David Keeler

- QTEE January 25th 8am-5pm: <https://tidewaterems.org/calendar/quarterly-training-education-experience/>
 - Please handout the flyers and post in the emergency rooms; this theme is mental health, there will be dogs!
 - This QTEE will be simultaneously casted to the Eastern Shore participants
- MIH program that benefits the community and the healthcare workers
- Regional Moulage Team: 1st meeting is 1/22/23 at 10am, please send your people.

Education and Training Committee, Commercial EMS Agencies, Pharmacies, Public Health and OEMS

Nothing to report

MMRS

MCI plan is in review and should be finished at the end of this month. The Steering Committee has it currently

TCC, EVHC

Nothing to report

Unfinished Business

N/A

New Business

- Nursing home charges for lift assist – there is a policy in Norfolk for \$200 to the facility, but no one enforces it.
- Bystander CPR: N about 20%, VB about 50%, P about 5%
- Most agencies have decided to keep their Handtevy contract through year end and trying to get the renewal put in the budget for upcoming years.

Jurisdiction Reports

- Portsmouth: went live 11/14 with whole blood – 2 administrations. Naval Medical Portsmouth had their grand opening on Friday 12/8. Are very easy to work with
- VBEMS: is hiring. Going through a big transition with new leadership. Hired AEMTs full time and part time P's for the first time in history.
- Norfolk: DeBacco'd last day is 12/13, new leadership should be announces shortly. 40 in academy with 50 vacancies. Received \$300k for opioid program.
- Northampton: have part time openings, going into budget season, OMD is interested in the whole blood program and talking about starting blood draws for stroke patients. They will resubmit grants in February for an ambulance



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- VBFD: 40 recruits going through academy currently
 - Chesapeake: attended cardiac arrest summit and are working towards becoming "Heart Safe Chesapeake". Their goal is to close the 10 minute gap of CPR from incident to first medical contact.
 - Franklin: nothing to report
 - IOW: putting an ambulance in Rushmere in January; making decisions about Handtevy

Dates to Remember

- Expo May 14-19, 2024: Registration and Call for Presentations is open!
 - Click here to register: <https://tidewaterhealthcareexpo.org/>
- MOC meetings 2024: April 10, June 12, August 14, October 9, December 11.

Next Meeting

The next MOC meeting will be held in-person and hybrid on **December 13, 2023 at 12:00pm.**