

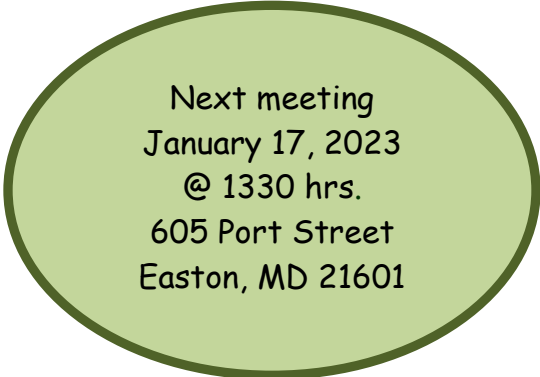
# *Region IV EMS Advisory Council*

**Rick Koch, Chair**  
**Chris Truitt, Vice-Chair**  
**Brian LeCates, Secretary**

## **AGENDA**

November 15, 2022

1. Call to Order & Introductions
2. Approval of Minutes
3. Regional Medical Director's Report
4. Pediatric Medical Director's/EMSC Report
5. EMS Board Report
6. SEMSAC/Regional Affairs Report
7. MIEMSS Report
8. Agency/Regional Reports (Circle "yes" on the roster if you want to make a report)
9. Old Business
10. New Business
11. Adjournment



Next meeting  
January 17, 2023  
@ 1330 hrs.  
605 Port Street  
Easton, MD 21601

**REGION IV EMS ADVISORY COUNCIL**  
**November 15, 2022**  
**Minutes**

**Attendees:**

**In Person:** Rick Koch, Chris Truitt, Shari Donaway, Matthew McCormick, Kathy Jo Marvel, Scott Haas, Scott Wheatley, Brian LeCates, Matt Watkins, Bryan Ebling, Michael Parsons.

**Call In:** Nicole Leonard, Randy Linthicum, Dr. Chiccone, Melissa Bragg, Dr. Uribe, Falon Beck, Dr. Todd, Patrick Campbell, Wayne Tome, Andy Budzialek, Cyndy Wright-Johnson, Yelitza Hernandez-Davis, Dr. Chizmar, FX O'Connell, 1<sup>st</sup>. Sgt. Larson, Dr. White, Dr. Ochsenschlager

The meeting was called to order at 1:30 by Rick Koch

**Rick Koch:** Before we start our meeting, I would like to recognize Scott Wheatley for his decades of service within our region and EMS as a whole for the State. I congratulate him on his retirement from Queen Anne's County and wish him well in all of his future endeavors.

**Approval of Minutes:** A motion was made by Scott Wheatley to approve the September minutes as written, seconded by Brian LeCates and passed.

**Regional Medical Director's Report:**

**Dr. Chiccone:**

Protocol Review Committee update:

1. The meeting that just passed was the last meeting for this year. Items that were passed will pass through SEMSAC and hopefully the Board and will be ready for institution with the updates in July 2023.
2. PEMAC made a presentation through Dr. Jen Anders mostly to the Cardiac Arrest Algorithm. These included replacing the word CPR with High Performance CPR and adding at strategic points in the algorithm the guidance to remain on scene. As well as changes in wording such as, High Quality Uninterrupted Chest Compressions were all voted through and will appear during the next protocol updates.
3. A high flow nasal cannula was introduced for inter-facility transport for children less than 13 years of age. This will be an optional supplemental protocol. Children who have been stable for 6 hours would be able to be transported with high flow nasal cannula in place by specialty care units that could support that operation. That was passed for urgent action. It will take a different pathway than approval for July. If the necessary parties sign off that would be instituted much sooner out of great need.
4. The Trauma Decision Tree will ultimately incorporate NHTSA recommendation in an edited format passed after much discussion.

5. The IV Nitroglycerin pilot received a final tweak and that was for a blood pressure threshold of exclusion to be set at 150mmHg after the application of C-PAP.
6. TXA for obstetrical postpartum hemorrhage also passed.

Announcements from the last Medical Directors meeting:

1. EMS Cares Conference; if anyone is interested, there are speaker opportunities for the May 2023 meeting.
2. The Pediatric Inpatient Surge Support Center (PSOC) is now operational.
3. There will be a quarterly state wide QA meeting held on December 8, 2022
4. A nod to Dr. Floccare for 33 years of stewardship in the Aero Medical Division.

I would like to make a nod to the mid-shore division chiefs of Talbot, Queen Anne's, Dorchester and Caroline. This is specifically for what is now become referred to among the Doctors in the State as the Eastern Shore off load plan.

### **Pediatric Medical Director's/EMSC Report:**

#### **Cyndy Wright-Johnson:**

We are looking forward to some upcoming conferences. Winterfest will be the first weekend in February, Miltenberger will be the second weekend in March and EMS Care will be in April this year.

Please look at the update I sent, it does cover a number of things. One being the EIIC who have put together some tool kits that they are calling Pediatric Education and Advocacy Kits (PEAKs)

We want to thank Bryan Ebling, Rick Koch and Dr. Chiccone for signing a letter of support for our grant. We are up for renewal and have submitted all of the necessary documents. We should hear something by March 1, 2023.

We have two upcoming Pediatric Nursing Courses. The first being PCAR and that course will be in Annapolis on February 15 & 16, 2023. The second is CPEN Review Course being held at Rocky Gap on March 8 & 9, 2023.

### **EMS Board Report:**

Dr. Chizmar will give an update during his report.

### **SEMSAC Report / Regional Affairs Report:**

#### **Scott Haas:**

We did have a meeting and I sent out information and updates through Dawn. One thing I would ask everyone to do is take a few moments to look at is the JEMSOP designation draft. This was presented as a draft and has not been voted on at this time. Your input is important so please take the time to look that document over and share any input that you may have.

The only other item I would like to note is we did have our elections and Eric Smothers is the new Chairman and Dr. Jen Anders is the new Vice-Chair.

### **MIEMSS Report:**

#### **Dr. Chizmar:**

I would like to start by saying it has been great to work on the SWOT with the Somerset County folks.

I want to thank Dr. Chiccone for his assistance in Kent County during the transition phase of their Jurisdictional Medical Director.

Christian Griffin, a representative from the Jurisdictional Advisory Committee has now been added to the Protocol Review Committee.

EDAS update – we are on target to replace the red and yellow alert system on or about January 1, 2023. The EDAS system will replace the red and yellow alert-replace it with the @ha ambulance dashboard data and the rating 1 – 4.

Dr. Delbridge and I have been going around and meeting personally with the staff in all of the Emergency Departments. We have done all of Region IV with the exception of Union Hospital in Elkton. We are looking forward to our visit to Union in the near future.

The ALS State continuing education content for 2023-2024 that was developed with the ALS Committee of SEMSAC is about 5 hours. This content was released in the online training center and is available for anyone who is doing his or her recertification in 2023 or 2024.

We are currently dealing with COVID, Monkey Pox, Ebola, FLU and the pediatric surge of RSV. It is still worthwhile to wear a mask when transporting your patients on ambulances.

#### **Bryan Ebling:**

The Cardiac Device grant FY22 – We still have several recipients waiting to receive their equipment.

The Cardiac Device grant FY23 – Region IV was initially awarded \$95,570.00. Vice Chair Truitt and myself attended the Regional Affairs Committee meeting and there was an additional \$53,318.21 allocated to Region IV. These were funds that were left over from Region I & II that

did not have the requests for the amount they were allocated. That brings us a total of \$148,888.21 available to Region IV for cardiac devices.

We have several upcoming training opportunities that I want to share.

1. Mental Health Class by Eric Olson that will be held on November 17, 2022 at 7:00pm
2. Winterfest 2023 will be February 3<sup>rd</sup> – 5<sup>th</sup>
3. Miltenberger 2023 is scheduled for March 10<sup>th</sup> & 11<sup>th</sup>
4. 1<sup>st</sup> Responder Mental Health and Wellness Conference will be held on March 30<sup>th</sup> and 31<sup>st</sup> at the Fontainebleau Resort in Ocean City.
5. EMS Care 2023 will be held April 26<sup>th</sup> – 30<sup>th</sup> at the Fontainebleau Resort in Ocean City as well.

Pediatric Champions are still needed for Worcester and Somerset County. If anyone is interested, please let us know.

The Critical Care Coordination Center C4 & C4P has been very busy. They are currently averaging about 25 calls per day.

Base Station Re-designations:

1. Christiana Union, Tidal Health and UMSH (all four facilities) have completed their site visits.
2. Atlantic General's site visit is scheduled for this coming Monday.

### **Agency / Regional Reports:**

#### **Cyndy Wright-Johnson:**

We will not meet again until January, so please think back over the last year regarding nomination for Star of Life and Right Care When It Counts. In addition, each of our Pediatric Champions have been challenged to submit at least one Child or youth.

#### **1<sup>st</sup> Sgt. Larson:**

I would like to dispel any myths or rumors that may be floating around regarding medivac transports. When Trooper 4 is busy and there is a medivac request on the lower shore, Trooper 6 carries 2000 gallons of fuel. This allows Trooper 6 to go from base at Easton to the lower shore and get a patient to Baltimore without having to re-fuel. For the good of the order, I just want everyone to be aware that Trooper 6 is more than capable to respond from Talbot County to the lower shore and able to take a patient to Shock Trauma, Hopkins or Bayview if needed.

**Old Business:****Chris Truitt:**

Cardiac Grants FY23 – As Bryan said we were able to secure additional funding for Region IV. When the Region IV HJOs all got together it was decided instead of going for a full 50/50, we would allot \$900.00 for AEDs and \$10,000 for cardiac monitors. We are the first in the State to do this and it has allowed us to fund a lot more devices. This grant was able to assist with the purchase of 14 heart monitors totaling \$139,888.21 and 10 AEDs totaling \$9,000.00.

**Scott Haas:**

At the last meeting, I talked about the Active Assailant group. Our next project that we are working on is reviewing the Maryland IMT field guild. If you are not familiar with it, it is an application that you can download on your phone. We are currently reviewing the Active Assailant component and that is the part where we want feedback. However, they have opened it up so that feedback can be given for the entire application.

**New Business:****Rick Koch:**

We have been asked to submit names to represent on the SEMSAC committee. We sent this request out to all of the HJOs and for the most part everyone nominated Scott Haas. Chris Truitt and I were also nominated. We will get these nominations sent to HQ for consideration. We were also asked for an EMS Volunteer nomination for SEMSAC, that request was sent out to the HJOs, and we did not receive any response.

**Scott Wheatley:**

In keeping our alliance up, Matt, KJ and I have been bombarded by Dr. Roggio about the telemedicine gap that he wants us to spearhead. In the beginning, we were very interested; however, as it has come to our attention it seems like a lot of extra technology, multiple devices and extra consults will be necessary. In addition, we have not been able to get a straight answer regarding the HIPPA compliant component. Dr. Chiccone would you or anyone else be able to shed any insight?

**Dr. Chiccone:**

I do not have any insight regarding the HIPPA component. I do know that there were several technology issues while trying to make all the contacts work together. This potentially has the capability to provide a telemedicine consult in regards to priority 3 transports, with the ability to have a physician-sponsored recommendation to take the patient to an alternative site for

treatment. The problem began when trying to make all parts of the technology talk to one another seamlessly.

**Dr. Chizmar, Dr. White and Scott Wheatley** agreed that this topic would need to be revisited once they have more insight regarding multi-consults and HIPPA concerns.

**Scott Wheatley:**

Regarding EDAS – I am the most excited person to be getting away from color codes and can agree that a saturated hospital is not where you want to end up. That said, at the last Region IV meeting we had an introduction to Pulsara, which would work throughout the State to help solve this issue. I am not saying we need to push the State to go to with Pulsara, however, what I would like would like to leave this committee to consider is maybe for designation of hospital MIEMSS specialty centers; Pulsara should be a part of that because that would solve a lot of issues all the way around. If I understand EDAS correctly, it would work perfectly with Pulsara.

**Dr. Chizmar:**

I think what we were looking for is to start with Pulsara proof of concept to make sure that a jurisdiction or two try it out even though it has been used nationally. We wanted to also make sure the EMS side of the house was okay with using it as well.

**Scott Wheatley:**

I really like the Pulsara product, it is a one-stop shop and it is free to EMS. I just think it may be something this Region should consider.

**Scott Haas:**

For the good of the order, we just want to thank everyone who helped with the Bay Bridge Run. We consider it a great success and I think there was only three patient contacts during the event.

**Matt McCormick:**

I just wanted to introduce myself; I am the new interim HJO for Somerset County. I am hitting the ground running; however, I am new at this so please bear with me. If you need my contact information, I am more than happy to share it with you.

**Adjournment:** The meeting was adjourned at 2:47