



State Emergency Medical Services Board

December 11, 2018

Meeting Agenda

State of Maryland

**Maryland
Institute for
Emergency Medical
Services Systems**

653 West Pratt Street
Baltimore, Maryland
21201-1536

*Larry Hogan
Governor*

*Donald L. DeVries, Jr., Esq.
Chairman
Emergency Medical
Services Board*

*410-706-5074
FAX: 410-706-4768*

- I. Call to Order – Mr. DeVries
- II. Approval of Minutes from October 9, 2018
- III. Old Business
 - 2019 Maryland Medical Protocols proposed changes – ACTION - Dr. Chizmar
- IV. MIEMSS Report – Ms. Gainer
- V. SEMSAC Report – Dr. Kalish
- VI. MSPAC Report – Captain McMinn
- VII. New Business
- VIII. Adjourn in to Closed Session

Adjourn to closed session to carry out administrative functions, to discuss the appointment of appointees and officials under General Provisions Article §3-305(b) (1), to consult with counsel, to obtain legal advice on pending disciplinary actions under General Provisions Article §3-305(b) (7), and to maintain certain records and information in confidence as required by Health Occ. Art. §14-506 (b) under General Provisions Article §3-305 (b) (13).



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Minutes

Board Members Present: Donald L. DeVries, Jr., Esq., Chairman;

Board Members Attended by phone: Sherry Adams, Vice Chairperson; Murray Kalish, MD; Dany Westerband, MD; Sally Showalter, RN (phone); Jim Scheulen; Bill Frohna, MD (phone); Steve Cox; Mary Alice Vanhoy, RN

Board Members Absent: Dean E. Albert Reece, MD;

Others Present:

MSPAC: Captain McMinn; Director Woods

MIEMSS: Ms. Gainer; Dr. Chizmar (phone); Ms. Abramson; Ms. Alban; Ms. Aycock; Mr. Balthis; Ms. Fullard; Mr. Hurlock; Ms. Myers; Mr. Naumann; Mike Reynolds (phone); Mr. Schaefer; Mr. Slack; Dr. Floccare; Ms. Goff

OAG: Mr. Magee; Ms. Sette

The Peake Newspaper: Mr. Crum

Chairman DeVries called the meeting to order. A roll call of members was conducted.

ACTION: Upon the motion by Mr. Scheulen, seconded by Dr. Westerband, the Board voted unanimously to approve the minutes of the EMS Board meeting held on November 12, 2018.

Old Business

Due to Dr. Chizmar's availability, Mr. DeVries asked for the Board members to consider the 2019 Maryland Medical Protocols out of order.

Dr. Chizmar gave an overview of the proposed protocol changes for EMS Board review:

- **Adult Tachycardia:** The algorithm has been significantly revised, including the removal of medical consultation prior to the administration of diltiazem and the addition of blood pressure parameters.
- **DNR/MOLST:** The list of acceptable procedures for DNR and MOLST B patients has been expanded to include the use of Magill forceps for obstructed airways and capnography.
- **Fentanyl:** The use of fentanyl has moved to the general patient care section and morphine has moved to an optional supplemental protocol. The preferred route of administration for fentanyl will be intranasal.

- **Needle Decompression:** The flutter valve will be an optional piece of equipment. The preferred location for needle decompression will be moved from the mid-clavicular line to the mid-axillary line.
- **Medical Consultation Requirement:** Changes have been made to the consult requirement for Priority 2 patients. The decision of hospital notification versus medical consultation will be based on the need for procedures or medication that require physician approval.
- **Stroke:** The last known well time window has been changed from 3.5 hours to 20 hours. EMS providers will also be required to relay the last known well time to the hospital with the Stroke Alert, which aligns the Maryland Medical Protocols with the latest science regarding care for stroke patients. A new prehospital stroke assessment for the detection of posterior circulation stroke has been added, which employs the BE-FAST mnemonic.
- **Tissue Donation:** Contact information for Living Legacy and Washington Regional Transplant Community has been added for reference.
- **Trauma Arrest:** The use of epinephrine for ADULT patients in traumatic arrest has been discontinued.

Dr. Chizmar said that the Baltimore City Fire Department's Minor Definitive Care pilot has requested expanding the catchment area to include the area around Bon Secours Hospital.

ACTION: Upon the motion by Dr. Westerband, seconded by Ms. Vanhoy, the Board voted unanimously to approve the changes in the 2019 Maryland Medical Protocols.

Dr. Chizmar and Mr. Reynolds left the call at 9:10am.

MIEMSS Report

Opioid Crisis. Ms. Gainer reported that the Opioid Operational Command Center will provide another \$200,000 in grant funds for MIEMSS to pass through to EMSOPs to offset unrecoverable naloxone costs they incurred in FY18.

Ms. Gainer said that the Maryland Department of Health (MDH) has requested that local EMS companies share overdose data with county public health officers. MIEMSS sees no legal impediment for sharing overdose data with county health officers.

ESSENCE. Ms. Gainer added that MIEMSS is reviewing a contract with MDH to map eMEDS data into ESSENCE.

SB 682 – EMS Reimbursement

Ms. Gainer said that work continues with the Maryland Health Care Commission (MHCC) and other stakeholders on the report to the Legislature. MIEMSS and MHCC have requested a 30-day extension to complete the report. As of December 1, 2018, Dr. Delbridge is under contract and will be reviewing the draft report.

eMEDS Elite:

Ms. Gainer said that MIEMSS anticipates all EMS jurisdictions to be using the platform by the mid-January 2019.

Grants

Ms. Gainer said that MIEMSS is reviewing the distribution of the 50/50 grants for cardiac monitors and equipment.

SEMSAC

Dr. Kalish reported that at the December 6, 2018, meeting, SEMSAC approved the changes to the 2019 Maryland Medical Protocols.

Dr. Kalish said that, after surveying SEMSAC members, SEMSAC would like more information regarding budgeting, grants and explanation of acronyms used by MIEMSS. He added that SEMSAC would like to present information to the EMS Board regarding the possible redistribution of funds and a needed increase in 50/50 grant funding.

Dr. Kalish said that he has asked for two or three SEMSAC members to sit on the EMS Board Finance Committee.

Mr. DeVries said that EMS Board member Jim Scheulen is the Chairman of the EMS Board Finance Committee and that two named SEMSAC members are welcome to join the committee. Dr. Kalish said he would be one of the two SEMSAC members.

MSPAC

Captain McMinn said there were no new changes to the MSPAC report and wished everyone a happy and safe holiday season.

ACTION: A motion was made, seconded and unanimously approved for the EMS Board to adjourn to Closed Session.

The EMS Board adjourned to closed session to carry out administrative functions, to discuss the appointment of appointees and officials under General Provisions Article §3-305(b)(1), to consult with counsel, to obtain legal advice on pending disciplinary actions under General Provisions Article §3-305(a) (7), and to maintain certain records and information in confidence as required by Health Occ. Art. §14-506 (b) under General Provisions Article §3-305 (a) (13).

In Closed Session:

Board Members Present: Donald L. DeVries, Jr., Esq., Chairman;

Board Members Attended by phone: Sherry Adams, Vice Chairperson; Murray Kalish, MD; Dany Westerband, MD; Sally Showalter, RN (phone); Jim Scheulen; Bill Frohna, MD (phone); Steve Cox; Mary Alice Vanhoy, RN

Board Members Absent: Dean E. Albert Reece, MD

Others Present:

MIEMSS: Ms. Gainer; Ms. Mays; Ms. Goff

OAG: Mr. Magee; Ms. Sette

In closed session:

1. The Board considered a SEMSAC nomination; and
2. The Board considered EMS provider disciplinary actions.

There being no further business, the Board adjourned by acclamation.