



PRC Meeting

Wednesday, May 8, 2024

9:30 AM to 12:00 PM

****The Committee does not anticipate a need for a closed session during this meeting****

****VIRTUAL / IN-PERSON HYBRID****

Meeting called by:	Dr. Timothy Chizmar
Type of meeting:	Protocol Review Committee

PRC Agenda Items		
Call to order		Dr. Chizmar
Approval of minutes		
Announcements	Commercial ALS Representative EMS Board Approval of Pedi PART	Dr. Chizmar
Old Business		
New Business	Labetalol for Hypertension	Randal Buckel and Dr. Shafiei
	Hypertensive Disorders of Pregnancy	Will Tipton, Tim Burns and Dr. Stone
	Changes to the Wilderness EMS Protocol	Dr. Millin
Journal Club		
Discussion(s)		
Adjournment		
Next Meeting	July 10, 2024 9:30am-12:00pm	



Protocol Review Committee Meeting Minutes

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Attendance:

Committee Members in Attendance (In-person/Virtual): Mary Beachley, Kathleen Grote, Dr. Jennifer Anders, Christian Griffin, Tyler Stroh, Dr. Steven White, David Chisholm, Marianne Warehime, Rachel Itzoe, Mark Buchholtz, John Olivera, James Gannon, Dr. Kevin Pearl, Dr. Thomas Chiccone, Dr. Roger Stone, Dr. Janelle Martin, Dr. Jennifer Guyther, Dr. Timothy Chizmar (Chair), Meg Stein (Protocol Administrator)

Guests: Dr. Michael Millin, Mustafa Sidik, Donna Geisel, Melissa Meyers, Michael Cole, Jonathan Siegel, Nichole Duppins, Randal Buckel, Christopher Shannon, Cyndy Wright-Johnson, Dr. Douglas Floccare, Daniel Goltz, Jeannie Hannas, Ben Kaufman, Dr. Rameen Shafiei, Dr. Stephanie Kemp, Dr. Asa Margolis, Scott Legore, Bryan Pardoe, Paul Roszko, Courtney Shannon, Dr. Jeffrey Short, Dr. Zachary Tillett, Will Tipton, Brian Dougherty, Dr. Kevin Seaman

Excused: Dr. Matthew Levy

Alternates:

Absent: Melissa Fox, Dr. Jeffrey Fillmore

Meeting called to order at 9:31 am by Dr. Chizmar.

Minutes: Dr. Guyther made a motion to approve the minutes as written. The motion was seconded by Tyler Stroh and passed with no objections or abstentions.

Announcements:

Commercial Ambulance ALS Representative to the PRC: Six candidates applied. John Olivera was selected as the representative with Jon Siegel chosen as an Alternate. Both John Olivera and Jon Siegel were present at the meeting and were introduced.

PediPART Research Protocol: The research proposal presented at the March PRC Meeting by Dr. Brown and Dr. Anders was approved for Prince George's County by the EMS board. The trial is designed to study airway management in children who are in arrest or respiratory compromise. The application was expedited as the trial is scheduled to start in May 2024.

Old Business: None.

New Business:

Labetalol for Hypertension – Randal Buckel and Dr. Shafiei: Randal Buckel presented a proposal for use of labetalol to treat patients experiencing a hypertensive crisis in cases with extended transport times. Proposed indications for labetalol are for patients in a hypertensive crisis with two or more blood pressure



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readings of SBP > 200, DBP > 110 mmHg, and MAP > 150 mmHg in bilateral extremities. Medical consultation would be required in all cases. Contraindications include patients experiencing a stroke with a positive Cincinnati Stroke Scale or positive cerebellar assessment. The West Virginia EMS Protocols already contain a similar protocol.

Key features of the protocol include:

- mandatory medical consultation
- the goal is to reduce MAP by 10%
- labetalol dosing of 10 mg IVP over 2 minutes
- nitroglycerine would be a second-line treatment
- labetalol would be contraindicated for pediatric patients

Dr. Shafiei emphasized that this protocol requires a medical consultation and is only for long transport times.

Discussion points included:

- The time-frame for what constitutes a long transport time or extended ED wait time was discussed. No specific time-frame was built into the protocol but Dr. Shafiei and Randal Buckel suggested transports greater than 20 to 30 minutes.
- Several people raised concern over administration of labetalol in the absence of symptoms. The need to target evidence of end-organ damage was discussed. The importance of having precise treatment parameters was agreed upon.
- Dr. Stone was concerned about the strict consultation requirement. He felt that this would be a burden on the base stations and might lead to frequent denials. He suggested a standing order for the initial dose with a consultation required for repeat doses. He also was concerned about the absolute contraindication for strokes. Dr. Stone suggested raising the BP threshold to reduce risk of having a standing order as opposed to a consultation. Dr. Millin agreed with the idea of a standing order.

Dr. Shafiei advised he will take these suggestions into consideration and bring back a modified proposal for the July meeting.

Hypertensive Disorders of Pregnancy – Will Tipton, Tim Burns, and Dr. Stone: Current treatment of hypertensive disorders of pregnancy is limited to eclampsia. Dr. Stone and Will Tipton presented a proposal designed to expand treatment to include pre-eclampsia, acute heart failure, and other pathologies with the goal of reducing the progression to eclampsia and increasing awareness of these disease processes. Inclusion criteria include pregnant patients greater than 20 weeks gestation through six weeks postpartum. Specific treatments for pre-eclampsia, eclampsia and acute heart failure are included in the protocol as well as corticosteroids administration for fetal lung development. Suggested additions to the formulary to accommodate these treatments include labetalol and nifedipine. Use of magnesium sulfate, nitroglycerine and dexamethasone would also be expanded.

Discussion included:

- The need for caution with wording regarding the choice hospitals.
- Possible need to modify some of the blood pressure parameters bases on Maryland ACOG and the MIEMSS perinatal recommendations.



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- Several people raised concerns over risks versus benefits of pre-hospital corticosteroids for fetal lung development.
- Possible reduction in the dosage of labetalol was discussed.

It was agreed that further research, including input from perinatal specialists from MIEMSS and ACOG, is needed prior to bringing the proposal back to a future PRC meeting.

Changes to the Wilderness EMS Protocol – Dr. Millin: Dr. Millin presented proposed updates to the Wilderness EMS Protocol. The most substantial changes include prophylactic treatment of tick bites with doxycycline and use of hypertonic saline for treatment of hyponatremia for over-hydration in heat related illnesses.

Discussion primarily revolved around the potential risks of treating hyponatremia with 3% saline and the need for physician input in treatment of hyponatremia.

Use of doxycycline for treatment of tick bites in pediatric patients was also discussed. Dr. Anders advised she check on this but believes that amoxicillin is preferred for prophylaxis while doxycycline is used to treat disease.

Dr. Millin will bring a modified proposal back to the July meeting.

Discussions: Dr. Chizmar noted that there are statewide Stop-the Bleed classes on May 23. Everyone is encouraged to participate.

Good-of-the-Order:

Dr. Stone is looking for ideas for a statewide, randomized control trial. He would like to bring research suggestions to a future discussion.

The status of current pediatric research projects was also discussed. These projects include PediPART, the Pedidose pediatric seizure study, and the pediatric trauma decision study.

Adjournment: The meeting was adjourned by acclamation at 11:53 pm.