

# Region IV EMS Advisory Council, Inc.

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Scott Wheatley, Chair  
Andy Robertson, Vice-Chair  
Brian LeCates, Secretary

## AGENDA

May 16, 2017

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



Next meeting  
September 19, 2017  
@ 1330 hrs.  
605 Port Street  
Easton, MD 21601

## REGION IV EMS ADVISORY COUNCIL

May 16, 2017

### Minutes

**Attendees:** Denise Hill, Andy Aswegan, MD, Dan Ochsenschlager, MD, Rick Koch, Andy Robertson, Ryan Todd, Anna Sierra, Tom Chiccone, MD, Joseph A. Ciotola, MD, Scott Haas, Brian LeCates, Judy Micheliche, John Donohoe, Cyndy Wright-Johnson, Laura Klein, Jon Krohmer, MD, Michelle Lloyd, Jason Shorter, Michael Parsons,, Doug Walters, Bill Hildebrand, Barbara Steiner, Phil Hurlock, Robert Price, David Collins, Scott Wheatley.

The meeting was called to order at 1:35 by Scott Wheatley.

**Approval of Minutes:** A motion was made by Brian LeCates to approve the March 2017 minutes as written, seconded by Denise Hill and passed.

**Regional Medical Director's Report:** Dr. Chiccone - Protocol Review Committee Meeting highlights - HPCPR occupied a large part of meeting. Revolved around - selection of optimum rate of CPR revival (not a firm rate yet); CPR fraction which is percent of time of total resuscitative effort; should keep eyes on goals which is to restore the pulse rather than transport a dead person. Several protocols are now involved so a change in one causes a downstream change in another protocol. Mechanical CPR received a nudge forward. Scott Wheatley asked how many in the room had a Lucas device and used them. Return of spontaneous circulation is up in those jurisdictions that use the device. Protocols seem to want to dictate how long to do manual CPR before putting on the Lucas device. Concern was expressed with the protocols dictating absolutes that may not work in the field. Question: What dictates when to put on the Lucas device? Onset of compressions, even by a bystander, should be considered the time for start of resuscitation.

Dextrose D50 is to be removed from formulary. Will be going to D10 across the board. Analgesia for pain and excited delirium - Ketamine may make an appearance outside the broad protocol. TEMS - seek permission to initiate in a rare circumstance post exposure prophylaxis before testing.

Regional Medical Director's Meeting was 7 minutes long. Opioid Crisis - 8 confirmed Carfentanil deaths in Maryland. Fire department's engagement providing safe zones for addictive individuals, relatives, etc. is proving effective. Coming up in legislature: Funding mechanism for MIH; and AEDs in restaurants will be coming up again.

**Pediatric Medical Director's/EMSC Report:** Cyndy Wright-Johnson - PEMAC is working on a number of protocol updates. They will be looking at creating a PDF quick reference. Looking at creating a laminated/bound quick reference guide. Also, working on a Pedi-tree. Termination of Care - pediatric protocol will be revised based on outcome of adult protocol coming out of Protocol Committee. Pediatric survey needs to be completed; only takes a few minutes to complete. Only three counties on the Eastern Shore have completed the survey.

**SEMSAC Report:** Did not meet.

**Regional Affairs Report:** Did not meet.

**EMS Board Report:** No report.

**MIEMSS Report:** John Barto - Please pick up protocol inserts/pocket protocols/and opioid cards. There are also rosters that need to be reviewed by the departments so they can be cleaned up for Licensure and Certification. When we merged to the current system, all of the names (including archived names) from the old system showed up. Excellent opportunity to update the company rosters. Individuals can update their own information on-line. The regional office cannot get into the new L&C web site to view information. Frustrations: Scott Haas - System does not do anything that it is supposed to do. However, when he goes to state meetings the standard line is that the problem is user error. Basically, we have lost functionality with the new system and cannot do the things we used to do. This has come up at both SEMSAC and JAC. It has been suggested that the Council should write a letter expressing concern with the loss of functionality.

We have received two SHSGP Grants in Region IV. Mid-Shore - UMMS - Shore Regional Easton - has been approved by various healthcare reviewing bodies for cardiac catheterization, but they are not yet a cardiac intervention center (CIC) by protocol for 911/EMS. Base Station Site Visits are now done by the Regional Administrators.

**Regional Reports:** MSP - Sgt Mann emailed his report to Scott Wheatley - Reviewed Tpr 1 and 4 usage and availability within the region.

Rick Koch, Ocean City - Trooper 4 is not coming to OC this year. Will stage as needed/required. Data didn't support changing staging area in the summer. Building a new helipad at 65th street.

Brian LeCates, Talbot County - Half Marathon this weekend--St. Michaels Running Festival.

John Donohue, Cecil DES - Cecil County DES and Ocean City submitted a SHSHP Grant for Regional TECC training. Would buy equipment to run tactical tech classes using TECC instructors that are within the region. Rick Koch explained the project. This should reduce the cost of tactical training and maintaining the certification. Jason Shorter said MFRI now has 13 instructors. TECC Protocols they would follow would be the Active Assailant Protocol.

Rural Work Group - Two combined subadvisory meetings (Dr. Ciotola). Next Wednesday at Washington College is full workgroup meeting where public is welcome. Will Chester River still be an acute care hospital?? Anna Sierra elaborated on the various meetings. There will also be meetings in Dorchester County with regard to the future of Dorchester General Hospital. Basically, DGH will be closing and they will be building a Freestanding Medical Facility on Route 50 (at Cambridge Plaza) with a target completion of 2022. There is still on-going discussion within various agencies. This is an important issue since the outcomes of these meetings will definitely affect the Eastern Shore of Maryland. There was a lengthy discussion on this subject.

Phil Hurlock - EMSOP funds appear to be solid through 2023. MIEMSS has three reports that need to be prepared for the legislature. Next week is EMS week.

**Old Business:** Concerns that were raised regarding Licensure at MIEMSS are still an issue. The next JAC meeting is in June 14, 2017. Should try to get this issue on the agenda with a dedicated 30 minute slot. Should encourage all jurisdictions that are having problems to attend this meeting and prevent MIEMSS from stating that the problems are user error. If so, they should have someone go to the jurisdictions having problems and show them the proper way to use the system. The system is definitely not user friendly.

**New Business:** A motion was made to write a letter to MIEMSS regarding the concerns with Licensure and the new system....motion made by Scott Hass addressed to co-exec directors with Licensure software, seconded by Anna Sierra. Unanimously passed.

Tell all BLS providers to check their con-ed and complete the on-line application in order to get their card before the end of June.

Anna Sierra - eMEDS special meeting is next week. Discussing local validation rules. MIEMSS made it clear at Medical Director's Symposium that the local jurisdiction would be responsible for the fees involved in this.

**Adjournment:** The meeting was adjourned at 3:34 p.m.