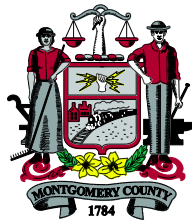


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DIRECTOR

**MCEMS**

Medical Advisory Committee Meeting Minutes

12 December 2018 10:00 AM

Montgomery County Dept. of Public Safety Training Campus

Conshohocken, PA

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**Attendees:**

Dr. Wang, Dr. Gualtieri, Tim McAteer, Anthony Mc Grail, Matt Welch, Pat Glynn, Kevin Bennett, Dr. Overberger, Mike Tuski, Mike Campeggio, Dr. Werner, Al Davey, Ernest Yea, Rebecca Werner, Maria Pierce, Kevin Thomas, Tom Levin, Chris Reif, Lori Duza, Dr. Pulley, Dr. Bushra, Matt Burfete, Vincent Blue, and Ed Martin Jr.

**CALL TO ORDER-at 10:05am**

- Introductions
- Review and approval of the September Minutes-Dr. Wang
  - No minutes were taken at the October 5<sup>th</sup> meeting
  - MAC presentation will be ppt driven and hard copies will be emailed out as necessary
  - Executive Session-None required

**SPECIAL INVITED GUESTS AND WARM HAND-OFF PRESENTATION**

- No Special Guests

**MEDICAL DIRECTOR'S REPORT**

- Review from the November 28th State MAC Meeting-Dr. Wang
  -

**QA COORDINATOR'S REPORT**

- Meeting Review-Ed Martin
  - Status of MAC library
    - The library was closed down as it pointed to Jessica's personal account.
    - Dr. Gualtieri saved all documents to his Gmail and would share with Ed.
  - The group was to receive access to the CQI site that Brian Pasquale created. Ed

will reach out to Brian to add the group.

- We continue to upload all KSAI Pilot incidents and Ketamine for ED will be stored for all to review and provide comment.
- Discussed status of QA form and what is the intended purpose.
  - The question was raised what the data is intended to prove?
  - Group discussed and decided to pull it back until a more functional form could be created and utilized and identify how to use the collected data. However, the group did decide to revive the confidential sentinel event form. Ed will update and forward to the group for review and to provide comment.
- Discussed a county wide Standardized Competency Training
  - Training will focus on High Risk/low Frequency Skills.
- A list will be created and shared with this group.
- Group discussed utilization of SIM Lab and open to all agencies.
  - The members of this group and the MAC would facilitate. More information to follow.
- A list of the best practice bench marks will be drafted
  - List will be forwarded to agencies. This would be a way to promote good clinical care
- This group will continue to meet at 9:00am before the MAC meeting.

## **COMMITTEE REPORTS**

- Ketamine Report
  - Ketamine Excited Delirium-Ed Martin
    - Dr. Wang reminded the group, this is a standing protocol, ems agencies are still required to forward all administrations to the Qa Committee for review
  - Ketamine SAI (KSAI) Pilot-Dr. Wang
    - Dr. Wang submitted a proposal for an extension of the pilot
    - The proposal was approved
    - The pilot will continue and expire December 20, 2019.
  - KSAI Data
    - As of November 28, 2018

- 26 cases, of which 22 were successfully intubated
- 4 patients managed with a BLS or rescue airway
- 25/26 cases were monitored with ETCO<sub>2</sub>
- Gender more females than males
- Average age 50 years old
- Data is a little skewed due to one agency's administrations were performed by one medic
- Pulmonary status: no patient was intubated that was breathing normally, most patients were agonal or grunting respirations.
- Most patients had an unprotected airway, with an intact gag reflex
- Difficult airway: 8/26 anticipated a difficult airway and encountered a difficult airway 9/26 did not anticipate but did encounter a difficult airway
- 4 cases a difficult airway was predicted and encountered
- 2 cases were difficult airway was not anticipated but encountered
- Patient selection is the most challenging
- 1.8 attempts when the medic anticipated a difficult airway
- 2.5 attempts when they were surprised they
- Al Davey question of how the data was captured and which patients did not get intubated: 4 patients
- 1 was a traumatic head injury
- 1 patient was being paced, received one dose of ketamine, the crew felt the patient could not be sedated due to the pacer, patient was still biting at ett tube, crew administered 2<sup>nd</sup> dose
- 1 cases was a closed head injury, patient vomited which obscured the view
- 1 case was a poly pharm OD when a difficult airway was not anticipated but encountered
- Review the different levels of what constitutes a negative event
- Review some of the protocols deviations
- Ketamine is showing to be more effective than etomidate

- Dr. Wang reviewed when not to use ketamine, no additional ems agencies will be added to the pilot.
- First Responder Naloxone Program-Ed Martin
  - Public Safety continues to disseminate Narcan under the PCCD Grant
  - We also continue to track the administrations
    - Ed reminded all EMS to fill out the PCCD form, forward it to [emstraining@montcopa.org](mailto:emstraining@montcopa.org)
    - Ed will update the group at the February MAC meeting
- EMS Education-Brandon Malmut
  - Training Institute needs Lab & Clinical Instructors, please contact Brandon
  - Methodology class is scheduled in the beginning of the year, you can sign up on [www.emstrainingcenter.org](http://www.emstrainingcenter.org)
  - The institute will schedule ACLS/PALS classes in 2019
  - The institute will also offer to host more con ed courses in 2019
  - Preceptor Program Update:
    - He is in the process of restructuring the program
    - 3 step Fisdap class: Step: 1 existing preceptor will be grandfathered and go through the appropriate level course, Step #2 new preceptors will have to go through the entire program, con ed will be offered, more information to follow, Step #3 ??
- Preceptor Program and Applications-Brandon Malmut
- 8 applications
  - Renee Cherwinski
  - John Harper
  - Melissa Ortiz
  - Heather Staley
  - Wayne Salat
  - Michael Armstrong
  - Andriy Mokritski

- Clark Bush
- MAC reviewed and approved
- Helicopter Report-Tim Dunigan
  - 13 flights in November, 143 total YTD , 2017 144, July busiest

## **OLD BUSINESS**

- LVO RACE training & hospital destination
  - Neuro-Interventional Capable Center Recognition
  - Window increased from 12 to 24 hrs.
  - The 2019 Protocol Update will mention primary and comprehensive stroke centers, DOH will maintain list, Montgomery maintains its own list
- County AEMT Utilization Update
  - Discussed at State MAC
  - Currently 200 certified across the state
  - Ed reported that Montgomery has 6
  - Unknown if they are operating as such
  - No plans to add third dispatch criteria, the current ALS/BLS model works well for Montgomery County
- Medical Command Facilities Update-Ed Martin
  - Ed reported that the Bureau has updated the medical command application process, it is processed through the registry, the medical command directors are responsible to fill out the on-line form and submit it.
  - All Medical Command Dr. are responsible to log onto registry and update their information.
  - The registry works best on Internet Explorer
  - Ed will continue to work with the facilities
  - Tim explained how to reach the help document
  - Ed will send out the help document
  - Dr. Overberger inquired if a physician cannot be in the registry, does that mean they do not have an account, Ed confirmed, the physician needs to create an account in registry

- Dr. Pulley inquired about the dual profiles 1. PHP and 2. MCP, Ed advised that the Bureau will combine those physicians under one profile
- 2019 Draft Recommended Drug List for Licensure-Dr. Wang and Tim Dunigan
  - Dextrose 10-50% currently the ems agencies are required to carry #3 doses, request to change to #2 doses
  - Dextrose D10 not currently on the list, requested to add
  - Magnesium sulfate increased from 1 to 2 vials/ambulance
  - Remove the disclaimer pilot for ketamine for Excited Delirium, change to pending MAC approval
  - Remove Duo Dotes, no longer in use in Montco
  - Remove Bretylium
  - MAC approved all the changes
- Emergency Communications-Ed Martin
  - EMD Revisions
  - Dr. Wang reviewed the P1 list
    - The MAC has been requested to review and revise this list
    - Goal is develop a more comprehensive list
  - Discussion ensued
  - Closest Ambulance by GPS went live on December 11, 2018,
  - Anthony Mc Grail inquired about moving the non-opiate OD to a P2 nature code. The group discussed the pit falls, Dr. Wang advise that there are 30+ nature codes and OD's are difficult to categorize.
  - The group requested if a representative from MCECOM would attend the next MAC meeting to review how calls are processed, Ed will take back.
  - Al Davey inquired about a 6-month review on efficacy of the project, Ed will take the request back to the department. The physicians agreed that there should be some report to evaluate the efficiency of the new procedure.
  - Dr. Wang requested that if the physicians identify any clinical issues to bring them the Qa committee attention
  - The group also inquired about the time save for the P1, is there a delay in a P2 response if the agency is not in their response area
- Closest Unit Dispatch-Ed Martin

## **NEW BUSINESS**

- 2018 National EMS Scope of Practice Model – Dr. Wang
  - Has been released in draft not approved
  - Webinar December 18,2018
  - EMRs can admin Narcan
  - EMR's can perform wound pack and hemorrhage control
  - EMRs can perform Spinal immobilization and splinting
  - EMTs can admin beta agonist
  - EMT's can administer over the counter medications
  - EMT's can assist with skills above approved skill level i.e use a bvm with an in place ett
  - AEMT can administer IV Zofran and Epinephrine during cardiac arrest and administer perennial pain medication
  - AEMT can apply high flow o2 nasal cannula
  - Skills Removed from scope
    - MAST pants removed
    - Ventilators removed
    - Carotid sinus massage
- SR6 Report-Ed Martin
  - Ed updated the MAC on the SR6 results
  - Urged them to read the report
- MAC Meeting Scheduling-Ed Martin
- NAEMSP PA Chapter Formation-Dr. Wang

## **NEW BUSINESS FROM THE FLOOR**

- Haldol for agitation-Pay Glynn
  - Pay Glynn explained that some patients do not respond to the current approved Benzodiazepines medications. Pat was inquiring if the MAC would entertain adding Haldol to the approved medication list
  - The group held a brief discussion
  - Haldol is currently not approved on the state medication list
  - A request has to be made to the State MAC and DOH BEMS as a pilot

- Ed and Alvin informed the group on the process to get a pilot approved
- The group decided not to pursue and focus more to educate the medical command Dr. to ensure the patient will receive the proper dose of the current benzodiazepines

#### **UPCOMING MAC MEETINGS SCHEDULED**

Feb. 27

May 22 (one week off our normal, during EMS week) possible an open house after MAC promote SIM Lab.

Aug. 28

Nov. 20 (moved due to the Thanksgiving holiday)

#### **2019 MONT CO EMS COUNCIL MEETINGS**

03/06/2019

#### **ADJOURN**

Pat Glynn and Dr. Pulley