

Paramedic Committee
Meeting Minutes
November 10, 2008

PRESENT

Chief Daryl McNutt
Rich Ellett
Chief Richard Helminski
James Fenn
Chad Premo
Chief Martin Fuller
Jeff Nissen
Tim Treadaway
Ed Herrick
Ken Kantura
Matt Homik
Kenan Mylander

REPRESENTING

Whitehouse Fire
Maumee Fire – LS7
Springfield Twp. Fire – LS 10
Flower Hospital Trauma
ProMedica
Whitehouse Fire
Oregon Fire
Toledo Fire – LS3
Toledo Fire
Toledo Fire
Monclova Twp. Fire
St. Vincent Mercy Medical Center

STAFF

Dennis Cole
Gary Orlow
Al Moenter
Pat Moomey

Emergency Services Director
EMS Manager
Annex Supervisor
EMS Dispatch

ABSENT

Starr Stockton
Gina Shubeta
Robert Kendrick
Sherry Watson
Jodi Livecchi
Tracy Stanford
Keith Mooseman
Mark Briggs
Chief Charles Flack
Brian Dotson
Rob Martin

Toledo Fire
Toledo Fire
Toledo Fire – LS4
Nurse Manager – Flower EC
Springfield Twp – LS10
Washington Twp. Fire
Waterville Fire
Ottawa Hills
Jerusalem Twp. Fire
Whitehouse Fire – LS9
Life Flight

Call to Order

Chief McNutt called the meeting to order at 9:00 a.m.

Minute Approval

The minutes from October 20, 2008 meeting were available for review. Minutes were approved as printed.

Training & QA

Dr Lindstrom noted that the December CE would cover the web EPCR changes. He commented that web EPCR software is not necessarily user friendly because of limitations of the software. Medics should not expect to complete reports over the web as the primary means of completing reports. Until software limitations are corrected, they should use this feature only when they need to turn the tablet over to the next shift but haven't completed run reports. Web EPCR's primary value is in QA.

December CE will also include instruction on the King Airway which is expected to be implemented sometime in 2009 as funds become available.

Old Business

Rich Ellett confirmed that the EMS portable radios were programmed to beep when keyed. He also noted that the new EMS mobile data computers are disconnecting. Dennis responded that we are aware of the disconnection problem and are working with BIO-key and Motorola to resolve whether the issue is the GPS chip or the computer modem.

A concern was raised regarding the passenger air bag and the location of the new MDC mounts. There was discussion but no clear resolution.

Dr. Lindstrom discussed the apparent duplication of medications in the med boxes and wastage of meds in the first responder bags. Concerns were discussed that reducing meds impacts squads differently based on their location. Chief Fuller noted that if the Whitehouse unit runs out of meds it's out of service until it can drive in to restock where this is not as significant in town. Paramedics were asked to get input on this issue for further discussion.

New Business

Rich Ellett asked about changing tourniquets. Al responded that we're aware of the issues with the current style and we will not accept that brand again in the new medical supply price agreement.

Open Discussion

The question was asked: How does the MDC mapping work and how current is the map? Dennis stated that the mapping software is Microsoft Map and it is limited in showing newer roads and subdivisions. It's probably a year or so old. Rich asked if Brent could cover some of the GPS functions in CE? Dennis responded that we could but we would prefer to wait until we resolve our issues with the GPS software. Chief Fuller asked if specific locations could be stored in the computer such as hospitals. Eric Klavinger will check into the capability. Discussion ensued.

Tim Treadaway mentioned an issue with the hospitals asking for more specific trauma information and asked Dr. Lindstrom to clarify to the hospitals what information the paramedics will communicate. Dr. Lindstrom noted that when the paramedics declare a specific trauma level, that should tell the hospitals what they need and we don't need to address additional questions. He recommended that medics repeat back their definition and expected arrival time. If they continue to ask questions on specific injuries the medics need to let him know so he can follow-up with specific hospital staff. He noted that this is a moving target because of hospital staff turn-over. He also noted that the geriatric piece is still an issue.

Dr. Lindstrom asked if there are still issues with STEMIs getting through. He reinforced the expectation that you can always send them. He will be asking hospitals to report on their door to table time. Rich indicated that he had an incident that it didn't work. But generally, it's working well.

Next Meeting and Adjournment

The next meeting will be Monday, **December 8th** at 9:00 a.m. With no further business, the meeting was adjourned at 9:44 a.m.