

Paramedic Committee
Meeting Minutes
December 8, 2008

PRESENT

Chief Daryl McNutt
Rich Ellett
Chief Richard Helminski
James Fenn
EMS Chief Martin Fuller
Jeff Nissen
Tim Treadaway
Acting Captain Ken Kantura
Ed Herrick
Matt Homik
Kenan Mylander
Michael Thorpe
Mark Briggs
Craig Koperski
Rob Martin

REPRESENTING

Whitehouse Fire
Maumee Fire – LS7
Springfield Twp. Fire – LS 10
Flower Hospital
Whitehouse Fire
Oregon Fire – LS8
Toledo Fire – LS3
Toledo Fire
Toledo Fire
Monclova Twp. Fire
St. Vincent Mercy Medical Center
ProMedica
Ottawa Hills Fire
Sylvania Fire - LS6
Life Flight

STAFF

Dennis Cole
Gary Orlow
Al Moenter
Pat Moomey
Brent Parquette

Emergency Services Director
EMS Manager
Annex Supervisor
EMS Dispatch
QA/QI

ABSENT

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

Toledo Fire
Toledo Fire
Toledo Fire – LS5
Nurse Manager – Flower EC
Springfield Twp – LS10
Washington Twp. Fire
Waterville Fire
Jerusalem Twp. Fire
Whitehouse Fire – LS9

Call to Order

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

Minute Approval

The minutes from November 10, 2008 meeting were available for review. Name spellings were noted to be corrected. Also Chief Fuller made a correction on page 2, 5th paragraph, third sentence. With corrections made, Rich Ellett made a motion to approve the minutes, which was seconded by Craig Koperski. Motion carried.

Training & QA

Brent reported this month's CE is underway. The paramedics are being introduced to the web portion of the EPCR. The paramedics are also being shown the King LT airway and they are presented with case studies of cardiac arrests and Ice Protocol.

Brent reported next year's schedule is out. January's topic is pediatric scenarios. Brent reported he is in the process of re-writing the pediatric protocols.

Dr. Lindstrom reported with the King airway, it will be a timing issue as to when it will be implemented due to budget issues, hopefully, it will be in mid spring. In the meantime the paramedics will use the LMA and other rescue supports.

Old Business

Brent reported he is looking at the medication inventory for 2009, and along with Al, looking at the system as a whole. We are looking at cost savings at what the paramedics carry looking at review of ALS responder boxes and looking at pairing back at what we carry. Brent reported he would like to keep airway, IV solutions, first round of ACLS meds. Brent asked paramedics present to present a list for the ALS responder box.

Brent reported the paramedics carry a secondary med box and he is looking at its use due to the number of medications that expire and is there a need? A discussion ensued regarding drugs carried, where they were carried, expiration of drugs and the keeping track of inventory.

Marty Fuller suggested just keep the drugs for a cardiac arrest, other patients they transport Marty also suggested looking at the ALS Responder Box inventory with individual department needs in mind

Rich Ellett made a motion to get rid of the secondary box.

A discussion of drugs being locked on the rig and the State Board of Pharmacy rules.

Dennis stated that EMS will put together a list with recommendations and send via e-mail to the members to get input.

New Business

Brent reported equipment has been a topic of discussion and he presented an adjustable fit c-collar for potential purchase. Brent reported it costs more in the beginning, but will save money in the end. This collar comes in adult and pediatric sizes. Currently the life squads carry 14 collars, which come in 6 sizes.

Brent reported paramedics will be trained on the saline locks in January and he will work with Dr. Lindstrom on a protocol. Brent reported the saline locks cost \$2.22 as opposed to an IV set of \$6.00.

Brent reported a letter went out to the chiefs last week telling them the County is low on the supply of Cardizem. Al mentioned they are on backorder with the manufacturer. Brent reported the question was raised whether to carry Cardizem in the refrigerator. This relies on the paramedic checking the refrigerator and if the refrigerator is running correctly.

Dr. Lindstrom reported there should be some accountability upon checking drugs and inventory.

Al reported the annex is limiting supplies to the first responders. Supplies that were originally through their departments, (i.e., gloves, 4x4's, tape, suction canisters, etc.), will be not be given out at the Annex.

Craig Koperski reported the Annex is keeping fewer supplies on hand to limit expiration of products. This can pose a problem with less on hand, (i.e., Cardizem).

Dr. Lindstrom gave an update on the Geriatric Protocol. Dr. Lindstrom reported at the last Medical Committee meeting a long discussion occurred regarding this. The representative from the Level 3 hospitals have a concern where the line will be drawn on a these types of patients. Dr. Lindstrom said the State said any trauma patient can go to any trauma center. Locally Level 1 and Level 2 treat differently than a Level 3. Representatives from St. Charles and Flower were asked to go back and identify where they can draw the line he is waiting for their feedback

Gary Orlow reported he attended the last RPAB meeting. According to them we should operate under the old protocol until the State approves. Once the State approves and the region wants to make changes, then the RPAB goes back to the State with variances.

Dr. Lindstrom reported anytime the paramedics get an inappropriate diversion, it should be reported to him.

Open Discussion

Gary Orlow reported the Commissioners passed a resolution giving us permission to start billing in 2009. We are in the process of getting Medicare and Medicaid licensure numbers and creating a RFP to send out to bid for vendors of billing.

Kenan Mylander noted that at the last Paramedic meeting a discussion about trauma hospitals asking for additional information when declaring a trauma patient. Kenan Mylander distributed St. Vincent's EMS Incoming Patient Report form which has criteria for them to call a trauma alert stating they cannot declare a trauma alert until more information is obtained. To get an appropriate response, the hospital has to ask more questions.

Dr. Lindstrom reported the paramedics declare a specific trauma and tell the hospitals the basics, i.e., T.E.A.M. (Trauma Protocol (type), E – ETA, A, Age, M, Mechanism of Injury).

Next Meeting and Adjournment

The next meeting will be Monday, **January 12th** at 9:00 a.m. With no further business, the meeting was adjourned at 10:10 a.m.