

Medical Committee
Meeting Minutes
December 2, 2013

Present

Chief Barry Cousino
Todd Brookens, MD
Zak Husain, M.D.
Deborah Graham
Cheryl Herr, R.N.
Julia Harsh
Bob McCarthy
Kristie Gallagher
Captain Mark Benadum
Lt. Kirk Keane
Lt. Kim Hood
EMS Chief Martin Fuller
Captain Jeff Hibbard

Representing

Springfield Township Fire Department
Toledo / Flower Emergency Centers
St. Anne Mercy Hospital
St. Anne Mercy Hospital
St. Luke's Hospital/ED Managers
Toledo Hospital
Great Lakes Emergency Nurses Council
ProMedica Toledo – EC
Toledo Fire EMS Bureau
Toledo Fire EMS Bureau
Toledo Fire EMS Bureau
Whitehouse Fire
Whitehouse Fire

Staff

David Lindstrom, MD
Dennis Cole
Brent Parquette
Jon Ziehr
Pat Moomey

Medical Director LCEMS
Emergency Services Director
LCEMS QA/QI
LCEMS CE Program Administrator
Communications Manager

Absent

Domian Kandah, MD
Pat Mattevi, MD
Paul Rega, MD for Dr. Brickman
Thomas Boggs, MD
Daniel Schwerin, M.D.

St. Charles Hospital
Bay Park Community Hospital
University of Toledo Medical Center EC
St. Luke's Hospital
St. Vincent Mercy EC

Call to order

Chief Cousino called the meeting to order at 8:32 a.m.

Minute Approval

The minutes from the October 7, 2013 meeting were made available for review. The minutes were accepted as printed.

Introductions

Chief Cousino noted there were a number of new attendees and suggested introductions be made.

Old Business

Cooling Collars – Dr. Lindstrom reported the new set of cooling collars had gone out to Springfield and Sylvania Fire to evaluate. We have not been very successful in getting completed data sheets returned and all the collars are used.

New Business

STEMI patients – Julie Harsh reported Toledo Hospital is starting an EMS STEMI Patient Pilot Program. She reported this program will run for three months starting December 4th. It will run from 0700-1700 hours Monday through Friday, excluding holidays. If the patient is stable, they will be directed to go straight to the cath lab and will be accompanied by a CICU nurse and if they are not available, the ED RN to go. Julie also said the concern for the cardiologists is having dissections. Paramedics are to have bilateral blood pressures when they give report. Julie also reported the patient will be having the cardiologist who is on the on-call schedule. Patients excluded from this would be patients with unstable vital signs, unstable rhythm, OOHC and a suspected diagnosis other than a STEMI.

Dr. Lindstrom said this should not create any confusion, the problem would occur when the cath lab is not open, usually at night. Also, the hospital personnel should let the paramedics know before they get to the hospital if they will be staying in the ED or going straight to the cath lab.

Kirk Keane raised the question about the time frame involved, citing the twenty minute rule and their distance to the cath lab. Dr. Lindstrom said he may need to look at this and may have to adjust the 20 minutes.

Jon said when it comes to cardiac arrests and trauma patients, extra time is given. All the paramedics just have to let Dispatch know and time is usually extended.

Trauma Diversion - Dr. Lindstrom reported he attended the NORTR annual meeting where regional and state trauma annual statistics were reviewed. One area where LCEMS may improve is under triage of Hospital Level 2 alerts. The NORTR and state data indicate an increased Injury Severity Score (ISS) in patients with isolated single system trauma who were also on some form of anticoagulants. For LCEMS Intermediate criteria, isolated injuries to the head, neck or torso in patients on Aspirin, Coumadin, Plavix, Pradaxa, or Xaralato would be categorized Intermediate in Pediatric, Adult and Geriatric criteria.

Diversion Data – Dr. Lindstrom reported he will discuss the year end report of diversion data at next meeting. Dr. Lindstrom reported the hospitals are doing a great job with diversions.

Medication – Dr. Lindstrom reported LCEMS is in reasonable shape as far as medications go. Also the narcotics will be going back into the trauma trailers.

Adjournment

With no further business the meeting was adjourned at 8:55 a.m. The next meeting is scheduled for February 3rd at 8:30a.m.