

Medical Committee
Meeting Minutes
December 1, 2008

Present

Todd Brookens, D.O.
David Miramontes, M.D.
William Sternfeld, M.D.
James Fenn, R.N.
Carolyn Nagy, R.N.
Pat Mattevi, M.D.
Kris Brickman, M.D.

Representing

Toledo Hospital
Mercy Health Partners – TFD
Flower Hospital
Flower Hospital
St. Charles
Bay Park Hospital
UTMC Hospital

Staff

David Lindstrom, M.D.
Brent Parquette
Dennis Cole

Medical Director
EMS QA/QI
LCES

Other

Rob Martin

St. Vincent's Life Flight

Absent

Chief Barry Cousino
Mary Beth Crawford, M.D.
Kenneth Chelucci, M.D.
Lucas Delatore, M.D.
Rod Standiford (primary)
Matt Homik (alternate)
Cheryl Herr, R.N.

Chairman – Springfield Twp. FD
St. Luke's Hospital
St. Anne Mercy Hospital
Flower Hospital
Paramedic Committee
Paramedic Committee
Nurse Manager's Association

Call to Order

David Lindstrom called the meeting to order at 8:30 am.

Minute Approval

The minutes from the October 6, 2008 meeting were made available for review. With no corrections, the minutes were approved as printed.

CE

Brent reported December's CE includes instruction on the web ePCR software. Dr. Lindstrom reinforced that the primary value of web ePCR software is for run report QA work flow. It will not be easier for the paramedics to use. A discussion ensued on the value of leaving hard copies of the reports at patient drop off. Dr. Lindstrom noted that the enroute radio report and the patient transfer verbal report is the primary means of communicating patient information to the hospital staff. The paper report is only reference occasionally. Brent noted that ultimately we would like to move away from leaving paper run reports. There was discussion that some of the hospitals need the paper copy at drop off to ensure it stays with the patient's records.

Old Business

Carolyn Nagy indicated that they are having trouble connecting to the EPCR server to access reports. It was suggested she connect with Brent and Robert Boyd to resolve the issue.

Dr. Miramontes commented that the standard for ambulance services requires leaving a report at time of drop; however, that can be accomplished with a drop card.

Brent reported that he will also be teaching paramedics on the King LT Airway in December in hopes of implementing it in the field sometime during 2009.

Dr. Miramontes commented that when the County goes out for the third party billing RFP we should consider having the vendor do state reporting.

New Business

Dr. Brookens raised the issue that medics have asked about wanting RSI sedation because of patients fighting intubation. His concern with an RSI protocol is the ability of all medics being able to follow RSI sedation post intubation. It was noted that since we have CO² on the squads the safety issue has resolved itself.

Dr. Brickman indicated that he needs to see consistency and asked if a sedation protocol could be generated that the docs could agree to.

Dr. Brookens is not advocating med assisted intubation. We're talking post intubation sedation.

It was also noted that there is a national move away from pediatric intubation. Dr. Miramontes suggested one attempt only.

Carolyn Nagy and Dr. Sternfeld raised discussion on the implementation of trauma level system on geriatric patients as it relates to the definition of long bone injuries. The Level III Trauma Centers are concerned that the County's protocols cause them to be incorrectly by-passed on cases that they are capable of handling. It was noted that the law hasn't been finalized by JCAR.

Dr. Lindstrom asked the Level III trauma centers to provide input on where the line should be drawn co-morbidity with less than GTS 14 patients. What can they handle and what is their plan for neurosurgery support.

Carolyn Nagy noted that St. Charles doesn't have a neurosurgeon but they transport those cases to St. Vs within 24 hours.

There was discussion on the definition that co-morbidity means use of Coumadin or Plavix , COPD, diabetes, anti-coagulantes and underlying renal disease.

Dr. Brickman recommended that subdural should go to a Level I with hip fractures. Acute change in mental state of GTS 14 or less single system injury with another co-morbidity issue.

Joe and Carolyn agreed to get with their trauma departments and draft a recommendation on behalf of the Level III centers.

Dr. Miramontes discussed the propose changes to the med boxes. Brent noted that we haven't implemented these changes yet pending further input from the medics.

Brent reported that the squads will be doing saline locks as opposed to IV tubing beginning in February.

Dr. Lindstrom noted that there are no drug license changes for 2009. However, a change may be made later in 2009 after protocols are reviewed.

Next Meeting and Adjournment

The next Medical Committee meeting will be Monday, February 2nd at 8:30 am. With no further business, the meeting was adjourned at 10:30 am.