



Dr. Lindstrom gave a FYI in citing he is working with Cheryl Hill to do a disaster training module. The funding is through a federal grant. This will probably be late 2010 or 2011. He reported they are working on the final curriculum.

Dennis Cole reported there is a request to lessen the threshold number of victims from 25 to 10 for declaration of a medical disaster.

Dr. Lindstrom reported he likes the idea of 10 victims as the threshold.

Dr. Miramontes mentioned he tried initiating triage tags for the Toledo Fireman to use on the first Tuesday of the month so they can get used to the different colors, but due to budget constraints this has not started. Dr. Miramontes also stated he liked the idea of 10 victims splitting them between hospital as well.

Chief Cousino asked if there have been any new updates regarding the protocols. Dr. Lindstrom reported no changes. Dr. Lindstrom also reported LCEMS has received their updated drug licenses back from the State.

### Old Business

Narcotics – Dr. Lindstrom reported there has been renewed concern over accountability of medications in the life squads, the biggie being the Scheduled II narcotics. Dr. Lindstrom reported this topic was discussed at the fire Chiefs meeting a year ago and there was a policy developed. The expectation is that every day an inventory is performed with tags logged between the ongoing officer/paramedic with the off going personnel. The back of the log book shows the usage of the controlled substances. Dr. Lindstrom reported there has been a loss at LS10 and LS8. In analyzing the situation there were too many days before it is discovered. Dr. Lindstrom noted the drug testing policy should be in place and reviewed at each department. Dr. Lindstrom also mentioned he has been doing a couple of spot checks at the fire stations. Dr. Lindstrom said he was pleased with records of LS4 & 5 being good and encouraged control is in place.

Dr. Lindstrom reported there is only one (1) accepted way to destroy a narcotic that has been broken or opened it is to be put in an evidence bag and give to the Annex. Dr. Lindstrom reported a list of meds that need destruction, is submitted in a letter to the State Board of Pharmacy and DEA. The State sends back a letter giving permission to do so along with a date. On the destruction day, he and Al from the Annex, witness, goes through the process of destroying the medications.

Dr. Lindstrom mentioned there was one physician who was fined due to lack of sufficient control

Paul Mullen from Oregon Fire mentioned they have a Knox Box for their first responders that keep track of the medication. They open the box with their assigned number.

e-PCR – Dr. Lindstrom gave an update on the ePCR saying Life Squads 1,6,7,8,9 and 10 have the In-Motion device installed. A discussion regarding where the patient report gets downloaded occurred.

Cheryl Herr asked if there was a time frame for reports downloaded for the priority patients, i.e., cardiac arrests, trauma patients, ICE patients.

Dr. Lindstrom reported he didn't think they are flagged, but he will check with IT and Brent.

Dennis asked Bob Boyd to join the meeting. Bob reported LS2 through LS5 are awaiting the software upgrade. Bob mentioned he was having difficulty with LS2's installation.

The question was raised regarding purchasing of new life squads. Dennis Cole reported the Commissioners have approved the purchase of four (4) which will be about six months out. The question was asked regarding what kind of chassis. Dennis reported EMS is going with the International.

Dr. Lindstrom reported he and Brent are still field testing the device called "CirQlator". They have used it twice without success.

Dr. Lindstrom reported another vendor has contacted him to trial another new device. The company would like EMS to field test a c-collar that has modules to hold replaceable cold packs. This would be used in conjunction with the ICE protocol. This will probably start this summer.

Dr. Lindstrom reported he would add this to our process in that it would add to the cooling process. Dr. Lindstrom reported the researchers he met with did it with baboons and they think selective brain cooling is the future for ICE.

Dr. Lindstrom reported EMS will be approaching the IRB's of the hospitals for data release on outcomes on the ICE; POD, GARD and CirQlator patients.

Cheryl Herr asked if consideration is being made to use the ICE protocol on stroke or head trauma patients. Dr. Lindstrom is not doing it right now.

Dr. Brickman reported there is no literature to support this and it would be the wrong thing to do right now on an athlete with a head injury. It is not a question to discuss for EMS.

Chief Fuller brought up the issue of UTMC as a Stroke Center. He said there is nothing official out there, but paramedics hear that UTMC is a Stroke Center. Sometimes Medical Control will divert to UTMC for strokes. Dr. Lindstrom reported he is aware of Medical Control doing this and that's their prerogative.

It was mentioned that other systems are diverting to a designated Stroke Centers, but nothing is in place.

Dr. Brickman reported UTMC has a Stroke Team that comes down as with a Trauma call.

A discussion of neurologic responses at other hospitals and the three (3) hour window.

Dr. Miramontes suggested a survey be done to investigate the resources in the community and look at the results

Dr. Lindstrom discussed his concern that this would place LCEMS in a validating position and LCEMS doesn't have time, personnel or resources to do so. Dr. Lindstrom stated he would like to give the hospitals a heads up and find out if any of the hospitals are considering a Stroke Certification.

Dr. Brickman offered to ask a neurologist to attend one of these meetings to give information what is expected with Stroke patients.

#### Open Discussion

Captain Jeff Romstadt introduced himself and Lt. Glenn Newman citing that he and Lt. Newman are the new staff at Toledo Fire's EMS Bureau. Captain Romstadt mentioned Lt. Newman will be the "122" and will have more presence in the street.

Dr. Miramontes reported if hospitals have issues, whether good or bad, to contact the Alarm Office at 419-245-1180. Dr. Miramontes said he encourages phone calls.

#### Adjournment

With no further business, the meeting was adjourned at 9:35 a.m. The next scheduled meeting is Monday, June 7<sup>th</sup> at 8:30 a.m.