

Medical Committee
Meeting Minutes
August 1, 2011

Present

Chief Barry Cousino
Todd Brookens, MD
Bob McCarthy
Paul Rega, MD for Dr. Brickman
Jeff Katko, M.D. for Dr. Sarsour
Greg Hymel, M.D.
Daniel Schwein, M.D.
Captain Jeffrey Romstadt
Lt. Terence Glaze
Assistant Chief Martin Fuller

Representing

Springfield Township Fire Department
Toledo / Flower Emergency Centers
Great Lakes Emergency Nurses Council
University of Toledo Medical Center EC
St. Anne Mercy
St. Vincent Mercy/TFD
St. Vincent Mercy/TFD
Toledo Fire Department
Toledo Fire Department
Whitehouse Fire

Staff

David Lindstrom, MD
Brent Parquette
Pat Moomey

Medical Director LCEMS
QA / QI / CE
Communications Manager

Absent

Mary Beth Crawford, MD
DomianKandah, MD
Pat Mattevi, MD
Cheryl Herr, R.N.
Rod Standiford (primary)
Matt Homik (alternate)

St. Luke's Hospital
St. Charles Hospital
Bay Park Community Hospital
St. Luke's Hospital / Nurse Manager's Assoc.
Paramedic Committee
Paramedic Committee

Call to order

Chief Cousino called the meeting to order at 8:33 am

Minute Approval

The minutes from the June 6, 2011 meeting were made available for review. Minutes were accepted as written.

Introductions

Chief Cousino had everyone introduce themselves due to the attendees.

CE Update

Brent reported the paramedics had a break for the summer from CE. September's CE will be ACLS. Brent mentioned the paramedics had training in June on the LUCAS, which was put in service in July. Brent said he is looking for feedback from the hospitals, such as any problems or comments from its use.

Dr. Lindstrom reported the LUCAS is a CPR device (thumper) that is battery powered from Physio. LCEMS had about a six (6) month discussion regarding the selection. Dr. Lindstrom reported the key reason they went with the device is to have uninterrupted CPR. Dr. Lindstrom cited a case reported from Bay Park of a concern where there was 45 minutes of CPR with the LUCAS on a patient with renal dialysis in which they got a pulse back. The patient had ecchymosis, skin breakdown due to the suction cup. The crew was re-educated on the device.

Chief Cousino asked how many uses have there been with the LUCAS. Brent reported 15.

Protocols

Brent reported with the paramedics taking ACLS in September, American Heart changed the drugs in Asystole & PEA. They pulled off Atropine and using Vasopressin and Epi. Dr. Lindstrom added Med Control can deviate medications if paramedics call in for further instructions.

Brent also reported there is a change in protocol in the Wide Complex Tachycardia in that Adenocard MAY be used first.

Dr. Lindstrom reported LCEMS paramedics had several occasions to go to specialty hospitals in the area. It's how the paramedics deal with these types of patients due to the fact the patients are on many drugs beyond their scope of practice. LCEMS paramedics will respond to calls for cardiac arrest and airway cases. Instruction to paramedics if this is beyond their scope of practice is to have the hospitals arrange for a mobile ICU to transport their patients.

Old Business

Cooling Collars – Brent reported that last reported there has only been a 36% success rate of putting on/documenting the collar. That has increased to 40%. Not sure if paramedics are not putting the collar on all the patients they are supposed to. They are still to fill out the evaluations in the EPCR. Lt. Glaze mentioned when he has been on a couple of cardiac arrest runs, there are occasions where the collar does not fit. Dr. Lindstrom state the temperature is dropping more than anticipated with the use of the collar.

CirQLator –Dr. Lindstrom reported were working with Advanced Circulatory Systems. Since Brent and Jon implemented the device, 12 cases have been submitted for an abstract of the AHA scientific sessions to be held in Nov. 2011.

LVAD – Dr. Lindstrom reported Dr. Brickman approached him regarding taking all LVAD patients to UTMC. Dr. Brickman citing their cardiologist and cardiovascular surgeons together took the position they are the best in the field. Dr. Lindstrom reported he approached St. Vincent and Toledo and there is no community consensus that UTMC is the best. Dr. Lindstrom reported how LCEMS handles LVAD patients is we are given information from either Cleveland Clinic or UM and a premise history is placed in the CAD. The paramedics are told to listen to the patient and the family and take any and all equipment and to transport to the closest STEMI hospital. Dr. Lindstrom said there is not plan to “funnel down” LVAD patients to UTMC.

12-Lead – Dr. Lindstrom reported new cellular is in place at the six hospitals to receive 12-lead transmissions. If anyone is having any difficulty in receiving, to let LCEMS know.

New Business

AMA vs Treat & Release – Dr. Katko asked for an explanation of AMA and Treat and Release for patients. Dr. Lindstrom reported the paramedics have two options at the scene. Treat and Release or AMA. Dr. Lindstrom said the paramedics will make an assessment and call it into Med Control citing their judgment the patient can be treated and release and say they can stay home. Med Control will come back and tell the paramedics have the patient sign AMA. Dr. Lindstrom explained there are times when a patient is a “treat and release”, i.e., diabetics. A discussion ensued.

Open Discussion

Dr. Lindstrom reported Dennis Cole wanted the committee to be aware receipts are down from our billing. Dr. Lindstrom explained the system is a sales tax based first and billing provides the rest of the funds.

Dr. Lindstrom this committee along with the Paramedic Committee reports to the Policy Board which in turns makes recommendations to the Commissioners.

Adjournment

With no further business the meeting was adjourned at 9:15 a.m. The next meeting is scheduled for October 3rd at 8:30a.m.