

Medical Committee
Meeting Minutes
April 4, 2008

Present

Chief Barry Cousino
Todd Brookens, D.O.
David Lindstrom, M.D.
David Miramontes, M.D.
Cheryl Herr, R.N.
Pat Mattevi

Representing

Chairman – Springfield Twp. FD
Toledo Hospital
EMS Medical Director
St. Vincent Mercy Hospital
Nurse Managers Association
Bay Park Hospital

Staff:

Dennis Cole
Gary Orlow
Brent Parquette
Pat Moomey

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

Others:

Jeff Hibbard
Heide Parquette
Kristie Gallagher
Bryan Biggle
Sherry Lauer
Carolyn Nagy
Jean Sandrock
Robin Undley

Life Squad 9
TTH Emergency Rm
TTH Emergency Rm
TTH Emergency Dept
TTH Trauma
St. Charles Trauma Coord.
St. Luke's Hospital
St. Luke's Hospital

Absent

Mary Beth Crawford, M.D.
Jeff Cooper, M.D.
Kris Brickman, M.D.
Kenneth Chelucci, M.D. (Primary)
Luca Delatore, M.D.
Rod Standiford (Primary)
Matt Homik (Alternate)

St. Luke's Hospital
St. Vincent Mercy Medical Center
UT MC
St. Anne Mercy Hospital
Flower Hospital
Paramedic Committee
Paramedic Committee

Call To Order

Chief Cousino called the meeting to order at 8:35 am

Minute Approval

The minutes from February 4, 2008 were made available for review. With no corrections, the minutes were approved.

CE

Brent reported that April CE was PEPP renewal and May CE will cover the hypothermia protocol for a June implementation.

Brent noted that EPCR program has been completed so that hospitals can sign in under their own account and access downloaded patient reports. This will be detailed following the Medical Committee Meeting.

Cheryl Herr commented that the hospital response to changing to the Respironics Whisperflow CPAP valve masks has not moved forward yet because the new mask doesn't fit on every machine.

Dave Lindstrom discussed the protocols that will be used for the ResQGuard field tests and how it differs from the ResQPod. It will be used for cardiac patients that have a pulse. Paramedics are to remove the device after they arrive at the hospital. He commented that we are looking at moving toward developing paramedic smart cards similar to what some hospitals use.

I.C.E. (Induced Cooling by EMS)

Dave Lindstrom reviewed the proposed hypothermia protocol and the current status of implementation. The protocol is based on Wake County protocols. EMS's goal is to implement ICE June 1st. The critical care staff at the following hospitals will support hypothermia:

St. Lukes external cooling
St Vincent external cooling
Toledo external cooling
UTMC internal cooling

These will be designated as ICE by-pass hospitals for patients meeting the protocol of post arrest with return to pulse but not immediately waking up. The protocol will include treatment of pregnant patients. Paramedics will start pre-hospital cooling with a target of lowering core temp by 1 or 2 degrees before they arrive at the hospital. Paramedics will cool patient with cooled saline and EMS may add cooling packs at a later time.

The protocols details were reviewed. Dave noted that he wants to get hospital outcomes on these patients. There was discussion if this would need to go through the IRB. There was discussion on the two new meds that will be used: etomidate and norcuron. David Miramontes discussed how a neuro exam will be done if patient is paralyzed by the norcuron. Information from Wake County is that the neuro exam isn't of any significant value for these patients.

Todd Brookens asked how many paramedics are needed to transport the patient. Dave responded that Wake County initially used three medics which included a paramedic supervisor that came to the scene. Wake County works the patient at the scene.

Todd Brookens asked what the current rate of return to spontaneous respiration. It's currently running between 28% to 44%.

Dave Lindstrom asked that the hospitals to try to make sure the department process is linked with the critical care department and equipment is available because the patient will come paralyzed. He noted that Wake County keeps the hypothermia going during cath. The paralytic will not be used as an airway process. If an airway can't be established the hypothermia procedure will not be started.

Next Meeting and Adjournment

The next Medical Committee meeting is Monday, June 2nd at 8:30. With no further business, the meeting was adjourned at 9:45 a.m.