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|  | **Meeting Minutes** | | |  | |
|  | | |  | | |
| Subject: | | | Medical Services Committee | | |
| Date: | | | October 11, 2019 – final | | |
| Voting  Members:  Absent  Members: | | | Dr. Burstein (chair), Dr. Beltran, Dr. Bivens, P. Brennan,  Dr. Dyer, D. Faunce, Dr. Nemeth, Dr. Old, Dr. Tennyson,  Dr. Walter and Dr. Walker.  P  Dr. Chung, Dr. Cohen, S. Gaughan and Dr. Tollefsen.  and Dr. Walker. | | |

# 0 Agenda

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Review of email distributed articles.

# Call to Order

Dr. Jon Burstein called to order the October meeting of the Emergency Medical Care Advisory Board’s Medical Services Committee at 10:02am on October 11, 2019 in the Operations Room at the Massachusetts Emergency Management Agency (MEMA)-Framingham.

# 3.0 Motions

The following table lists the motions made during the meeting.

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| **Motion** | | **Result** |
| **Motion:** by Dr. Walker to accept the September minutes.  Seconded by Dr. P. Brennan. | **Approved -** unanimous vote. | |

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| **Motion** | | **Result** |
| **Motion:** By Dr. Bivens to recommend a Medical Director Option protocol referencing Protocol 7.7 -Withholding and Cessation of Resuscitation. Seconded by Dr. Walter. | | **Approved** - unanimousvote. |
| **Motion** | **Result** | | |
| **Motion:** by Dr. Tennyson to move Magnesium  Sulfate to the Paramedic Standing Order Section  in Protocol 2.15 A -Seizures-Adult.  Seconded by Dr. Old. | **Approved** – unanimous vote. | | |

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| **Motion** | **Result** |
| **Motion:** by Dr. Tennyson to recommend allowing BLS providers to acquire and transmit 12 lead ECGs as a Medical Director option.  Seconded by Dr. Bivens. Friendly amendment to provide this skill in a coordinated system of care. | **Approved** – unanimous vote. |

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| **Motion** | | **Result** |
| **Motion:** by Dr. Walter to have the Department discuss the recommended QA list.  Seconded by D. Faunce. | **Approved -** unanimous vote. | |

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| **Motion** | | **Result** |
| **Motion**: by P. Brennan to adjourn the meeting. | **Approved -** unanimous vote. | |

**4.0Action Items**

The following table lists the action items identified during the meeting

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| **Item** | | **Responsibility** |
|  |  | |

1. Acceptance of Minutes: Friday September 13, 2019 meeting

**Motion:** by Dr. Walker to accept the September minutes. Seconded by Dr. P. Brennan.

**Approved** – unanimous vote.

1. OEMS Update-Scott Cluett

Thanked the MSC members for attending the meeting and for their commitment to the committee.

Noted a Deputy Director position has been posted for OEMS. Expected onboarding date is December or January.

1. Old Business
   1. Termination-of-resuscitation editing update.

The Department would like to create a Medical Director option protocol with language

identifying when termination of resuscitation may be appropriate under protocol 7.7.

**Motion:** By Dr. Bivens to created a Medical Director Option protocol referencing

Protocol 7.7 Withholding and Cessation of Resuscitation. Seconded by Dr. Walter.

**Approved** – unanimous vote.

* 1. Seizure vs. eclampsia standing orders vs MC option. Discussion and vote.

The language on Magnesium Sulfate differs in Protocol 2.10 Obstetric Emergencies-here it is

a Paramedic Standing Order vs. 2.15A where Magnesium Sulfate is a Medical Control order.

MSC discussed a distinction of knowing a seizing patient is pregnant vs. a seizing patient who is not known to be pregnant. Discussion-Magnesium Sulfate is acceptable in both situations.

**Motion:** by Dr. Tennyson to move Magnesium Sulfate to the Paramedic Standing Order

Section in Protocol 2.15 A -Seizures-Adult. Seconded by Dr. Old.

**Approved** – unanimous vote.

1. New Business
   1. Hypertonic saline for pediatric head injury (EMSC). Discussion and vote. – deferred due to absence of EMSC member.
   2. BLS transmission of ECGs? (Dr. Beltran). Discussion and vote.

ALS may not be readily available in the more rural areas. Can BLS providers acquire and transmit an EKG? Yes -- done in other states e.g. NY.

**Motion:** by Dr. Tennyson to recommend allowing BLS providers to acquire and transmit 12 lead ECGs as a Medical Director option. Seconded by Dr. Bivens. Friendly amendment to provide this skill in a coordinated system of care. **Approved** – unanimous vote.

* 1. New protocol: Sedation after intubation cf MAI. (Dr. Old) Discussion and vote.

Region 5 is proposing a post sedation protocol.

Discussion - should dosing be capped? Committee recommends MAI dosing removing Lorazepam.

The Department will write a protocol and return to the December meeting for

approval.

* 1. Add fever to 2.13 as indication for rx? (Dr. Walker) Discussion and vote.

Discussion only-no vote-deferred to the December meeting.

* 1. Use of monitors in determining death? (Dr. Walter). Discussion and vote.

Once a monitor is applied this does not indicate resuscitation must continue, assuming it was halted properly under protocol 7.7. Discussion only.

No change in the protocol.

* 1. 100% QA for critical procedures (which?)? Discussion and vote.

Ohio protocol reviewed. Discussion on which calls need 100% QA. The Department may issue an AR. Recommend 100% QA for

* + 1. Any advanced airway management (intubation, SGA, cric)
    2. Cardiac Arrest that was treated
    3. All pediatric ALS interventions
    4. Any Medical Director Option protocol that already calls for it
    5. CPAP
    6. A sample (10%) of refusals
    7. Needle chest decompression.

**Motion:** by Dr. Walter to have the Department discuss the recommended list.

Seconded by D. Faunce. **Approved** – unanimous vote.

* 1. Hemodialysis disconnect procedure. Discussion and vote.

Debbie Ulin-DPH Hemodialysis Healthcare Inspector-invited guest expert.

The Federal government has approved at home dialysis. EMS may see increasing cases where management of the at home dialysis machine is needed. The draft hemodialysis protocol was reviewed. Discussion. Recommendations were made to:

-Place an arrow in the picture pointing out the off button

-highlight the needles if possible

-add leave the machine at home

-add a picture of the larger type of machine if possible

-add language” if trained and equipped remove needles and clamp the site”

-unplug the machine

-note data on liters processed-take picture of the dialysis data

DPH to rework the draft protocol and return to MSC in December.

**Motion**: by P. Brennan to adjourn the meeting. **Approved** – unanimous vote.

Next Meeting: December 13, 2019; location TBD likely MEMA.

Documents utilized at meeting:

-Issue Summary for Old Business sz discussion

-Protocol 4.4 Head trauma & Injuries – Adult and Pediatric

-Bulger, E., May, S., Brassel, K., Schreiber, M., Kerby, J., Tisherman, S., et al. Out of Hospital Hypertonic Resuscitation Following Severe Traumatic Brain Injury. *JAMA*, Vol. 304, No 13, October 6, 2010, 1455-1464, *www.jamanetwork.com*

-MAI 2019Post-intubation Sedation

-CQI guideline-SW Ohio 2019 Protocols

-draft Protocol 2.20 Home Hemodialysis Emergency Disconnect

Meeting adjourned at 12:01 pm.