

EMS MEDICAL DIRECTORS' ASSOCIATION OF CALIFORNIA, INC.

MARCH 14, 2017

I. Scope of Practice Committee Meeting

Clarification of supraglottic/extraglottic/perilaryngeal airways for optional scope and quality metrics to be collected

A. Optional Scope

1. Alameda: Keeping pediatric intubation, however with BVM as primary method of airway management. Intubation only if unable to adequately use BVM. Will continue local optional scope for blood products.
2. Merced: Requesting to keep pediatric intubation as only optional scope item. 18 over 3 years.
 - a) Pending SCOPE final recommendations. 100% review of all pediatric intubations. 100% review and document complications (aspirations, hypoxia), minimum Q6month competency training
3. 24 LEMSAs with pediatric intubation as optional scope
4. Ideas
 - a) 8 or greater or larger than broselow (36KG) can be intubated
 - b) 100% audit
5. Criteria for supraglottic/extraglottic/perilaryngeal
 - a) Need metrics to be developed. Nicole, Marianne

II. Combined EMSAAC/EMDAC Meeting

A. EMSA report (Backer)

1. Community paramedicine: ~1.5 years into pilot projects. Evaluation for first year is complete and posted by UCSF. Results are very positive for 5/6 projects. 6th could not draw conclusions due to limitation of numbers(alternative destinations), thought found no harm. Effective, safe, and cost effective
 - a) 2 bills currently being discussed. May ultimately limit options.
2. Data transition: in progress... Starting to receive 3.4 data. ~20 LEMSAs reporting some data. Very few have full data reporting.
3. APOT still awaiting data.

4. Core Measures: Last year of NEMSIS 2.0 data being submitted. Will be looking to overhaul Core Measures in the future. EMSA will run the reports based upon submitted 3.4 data for rural areas.
 5. EMSA HIE meeting next month. Sheraton Park Anaheim.
 6. Regulations Update (EMT, Stroke, STEMI, EMS for Children)
 - a) Stroke, STEMI reviewing comments. 2nd comment period likely in May. EMS for Children will be going back to OAL. Updating reasoning statement for EMSC then will go to public comment after OAL.
 - b) EMT regulations go to Commission tomorrow followed by public comment. New EMT naloxone, tactical, glucometer will be mandatory training with local approval. Manually draw up epinephrine. LEMSA approval for local training sites. Skills form included. Mandate PCR. Likely July 1 for approval date.
 - c) Paramedic regulations: internal review. Updating application, tactical training, national registry,
 7. Stroke: Joint Commission looking at adding 4th category for stroke certification (Currently comprehensive, primary, stroke ready) Looking at adding embolectomy designation. Will include volume criteria. Stroke regulations may be immediately outdated.
 - a) Marianne: LACo ID patients using LAMS (~85% accuracy) Still no way to identify ICH/SAH prehospital. Using a model of primary centers and comprehensive/embolectomy centers. Not all embolectomy centers are comprehensive. JC initially will not have volume requirement but after certification will monitor for sufficient volume.
- B. EMSAAC - Conference – May 9-10, 2017 Loews Coronado Bay Resort, San Diego
- C. CARES update: state subscription with state coordinator in a sustainable model. Partner with Heart Rescue to host coordinator position. Talking to Geneva about staying on as coordinator.

III. General Meeting

- A. Introductions / Announcements / Sign in
- B. EMSA Update:
 1. CURES legislation and impact on EMS
 - a) Mike Small at DOJ. Difference between prescribing/dispensing and administration/furnishing. Did not want to inhibit emergency administration. EMS DOES NOT fall under prescribing or dispensing. EMS does fall under administration/furnishing. EMS providers DO NOT need to consult CURES. EMS Medical Directors DO NOT require CURES consultation. Does need documenting that medications were administered.
 2. Stroke Registry.

- a) Integrated data system being built at ICEMA. Scheduled to be completed/live in April. Will start with Contra Costa, Mountain Valley, ICEMA, and REMSA.

C. Approval of December Minutes ?

D. Reports

1. President's Report – Marianne Gausche-Hill None
2. Treasurer's Report: Sporer Financially sound.
 - a) Many people still need to pay dues.
3. Committee Reports:
 - a) EMS Commission (Rudnick)
 - (1) 227 on probation, 82% first pass for NREMT (nationally ~72%), EMT regulations (increasing hours, naloxone, epi (draw up and auto), glucometer, skills check, monitoring IVs/lines becomes optional scope, tactical)
 - b) Scope of Practice (Miller)
 - (1) Local scope of practice renewal (Alameda and Merced). See above.
 - (a) Pediatric intubation if greater than length of the broselow tape (8 years or older). If LEMSA wants to renew optional scope for under 8 must acknowledge BVM primary, Q6 month skills practice, 100% case review, data analysis to identify complications.
 - (b) 6 months to discuss. Review past years usage.
 - (c) supraglottic/extraglottic/perilaryngeal to identify metrics. Consider using metrics from Ventura/Santa Barbara studies). King now has sizes down to 10KG and iGel has all sizes.
 - i) Define Perilaryngeal essentially to include all devices
 - c) Legislative (Stratton)
 - (1) Watch on all bills. No bills have a support or oppose. Will have more discussion as they evolve/progress. Will need to consider taking positions at next meeting. Summary of bills was passed out.
 - d) MAC (Sporer/Brown)
 - (1) 3rd publication (Seizure) accepted by Western Journal of Emergency Medicine. Pediatric respiratory distress, adult respiratory distress, and altered mental status pending. Will need to discuss future direction.
 - e) EMS for Children (Gausche-Hill)

- (1) EMS for Children Conference November 9, 2017, Double Tree, Sacramento, CA
 - (2) Working on statement of reasons for state regulations.
- f) CAL/ACEP (Rose)
- (1) No current position on any bills.
 - (2) Try to come up with team partnership with EMDAC for public health.
 - (3) EMDAC and CalACEP relationship. Need to maintain relationship despite differing positions on community paramedicine.
- g) Community Paramedicine (Sporer)
- (1) Howard updated earlier
- h) State Trauma (Goldman)
- (1) State Trauma Performance Improvement and Patient Safety Trauma Summit May 2-3, 2017, Holiday Inn, Bayside, San Diego Trauma Regulations
 - (2) No updates
- i) Tactical (Ronay)
- (1) Tactical medical training to commission tomorrow.
- j) Aeromedical (Duncan)
- (1) Update on establishing state wide scope for aeromedical services
 - (a) 6 items (pediatric intubation, supraglottic airway, video laryngoscopy, IO, vent initiation and management, RSI) statewide.
 - (b) Data on aviation pediatric intubation was sent out by Duncan.
 - (c) Extensive discussion. No definitive position
 - (d) Recommendation: working group with EMSAAC. Email Marianne if interested in being on the working group.
- k) POST Training (Uner) None
- l) Stroke Registry Update Discussed above
- m) Website updates (Sporer)
- (1) Please look at the website and provide feedback. Publications section has not been updated in 1.5 years. Will continue if people find it useful.
 - (2) Need someone to take over website management.

4. EMT manual epinephrine administration.
 - a) Auto injectors cost has decreased since discussion initially occurred. EMSAAC is requesting that the manual epinephrine be removed from the new EMT regulations going to commission tomorrow. Local optional scope item. NAEMSP position paper coming out in the future. New options to make manual draw up safer. Majority voted to oppose the motion to remove from the new EMT regulations.
5. Color coding and standardizing pediatric formulary for the state: Marianne Gausche-Hill **WILL PRESENT TO SCOPE**
 - a) LA medical control included as handout. Use broselow tape to determine color code.
 - b) 2017 Broselow will have all the drugs on the LA County plan
 - c) Benefits potentially include cross jurisdictional care, potentially decrease risk of shortage.
6. Resuscitation Academy Update - Nichole Bosson/Ken Miller
 - a) CPR/Systems issues: Assign tasks on scene, BLS only CPR,
 - b) Working on hosting an RA in Bakersfield.
7. Primary impressions List- Greg Gilbert
 - a) Having some issues getting AMR corporate to implement primary impression list. Greg and Karl will put together letter to AMR from EMDAC. State requirement. Howard to sign as well. Howard sent email with link to primary impression list.
8. Vasopressors Summary - Nichole Bosson
 - a) Literature review sent out to list serve. Zip file has info on push dose epi. Paucity of evidence in prehospital setting. Dopamine is NOT recommended. No difference between norepinephrine (+/- dobutamine) vs epinephrine. Seattle uses dirty norepinephrine drip without pump. LAC adding push dosed epi. Nichole to email push dose epi policy to group.
9. 911 Interfacility Transfers- Clayton Kazan and Marianne Gausche-Hill
 - a) LAC use 911 for transfer of trauma and STEMI from ED to ED. However does happen for other conditions. Increased frequency.
 - b) Private ambulance companies declining to transfer MediCal HMOs due to lack of reimbursement.
 - c) EMTALA implications for abuse of system?
10. Automated Dispensing Systems - Clayton Kazan

- a) Moving forward on implementation of machines. No changes of legislation yet but still working to effectively make changes.
- 11. Treat and Release draft from EMSA handed out.
- 12. Body Cameras on EMS calls – Marianne Gausche-Hill/Gary Tamkin TABLED
- 13. CURES database – Howard Backer/Chris Kahn TABLED

E. Round Table (All)

NEXT MEETING:

June 20, 2017

Sacramento Courtyard by Marriott

1782 Tribute Road Sacramento, CA 95815