

MEDICAL ADVISORY COMMITTEE

Minutes of the April 8, 2015 meeting held at Mad River Community Hospital.

Present:

Doug Boileau, EMT-P	Arcata-Mad River Ambulance
Charlie Hanes, EMT	CAL-FIRE
Debbie Andresen, EMT-P	CAL-ORE Lifeflight
Jaison Chand, EMT-P	City Ambulance
Tim Howard, Sr. Medical OA	DHHS--Public Health, Humboldt
Donald Baird, MD	DHHS--Public Health, Humboldt
Charles Tweed, EMT-P	Del Norte Ambulance
William Rush, MD	HDN Medical Society
Matt Dennis, EMT-P	Humboldt Bay Fire
Patsy Barker, RN	Mad River Community Hospital
Jennifer Pancoe, RN, MSN	Mad River Community Hospital
Larry Karsteadt	North Coast EMS
Louis Bruhnke, EMT-P	North Coast EMS
Stayce Curry	North Coast EMS
Traci Siler, RN	St. Joseph Hospital
Davis Southerland	St. Joseph Hospital
Joni Freitas	Shasta Regional Medical Center
LyRae Sullivan	Shasta Regional Medical Center
Martha Bialik, RN	Sutter Coast Hospital

1. APPROVAL OF MINUTES

The 03/11/15 meeting minutes were approved.

2. OLD BUSINESS

North Coast Paramedic Program

Per Doug: Seventeen students have completed the program. All students that have taken the National Registry test have passed. Three students left due to various medical issues. Five never started field internships. Doug expects five remaining students to complete the program by mid May. Eleven people have already applied for the next class (at this stage last year, no one had applied). Many applicants are from out of the area. If there are too many applicants for the next class, the applicants will go into a lottery system. The program has never had to do this before and Doug does not know the specifics. Per Jaison: Is there a preference for “local students”? Per Doug: There may be a preference for in-state students, but not local. He is not overly concerned since the class seats thirty and there are always a few that drop the class early on.

Med Net System & MCI Channel Updates

Louis did not receive a report yesterday on the MCI test. Per Patsy: The April 2 test went well—only two people did not respond.

Image Trend and HIE Program Update

Per Louis: From his discussions with Mark Roberts, Image Trend liaison to the state EMSA, there will be a delay in transitioning to NEMSIS 3 until next year. While Louis does not know how the new version of NEMSIS will look, he does not believe it will look radically different to an end user. The delay will impact us because Louis believes it will mean less incentive throughout the state to implement Image Trend, and NCEMS was planning to be the first LEMSA to transition to NEMSIS 3. This also affects Jay Myhre’s work to create the backend to Image Trend. The HIE grant period to create this backend ends 08/30/15 and Louis does not know of prospects to extend the grant. Mellissa Glass, whom NCEMS has contracted to work on “discovery” portion of the grant—associating PCRs

with hospital outcome information, has begun the project. Louis, Melissa, and Mark Roberts recently participated in a conference call on the project which Louis believes went well. Melissa has a good understanding of EMS issues and data sharing issues she may face when working on the project. Per Louis: Other regions are working on similar projects. Per Doug: What is the status of purchasing mobile devices for using Image Trend? He is especially interested since three weeks ago the ICEMA site was hacked and down as a result for over eight hours. Paramedics can use mobile devices for Image Trend without being connected to the internet. Louis will work on purchasing the devices after he finishes working on the QIP. He will also work on developing the “triggers” to initiate communications among providers and County MHOACs. Per Dr. Rush: During past disaster exercises in Santa Clara County when they did not have a system like Image Trend in place, amateur radio operators shadowed hospitals on site, using packet-data transfer. This worked well.

Policy/Protocol Updates

Louis suggested moving this discussion to New Business.

Infectious Disease Update

Per Dr. Baird: Statewide, pertussis has peaked. Flu season is coming to an end. Last week at Redwood Memorial a patient had a measles-like rash, but it was not measles. Dr. Baird stressed that the Public Health Lab has PCR capability to diagnose measles within hours, and can diagnose eight other common viruses. Within a year, the Lab will have the capability to diagnose up to twenty-six viruses. Dr. Baird reports that immunization rates are up in California.

STEMI Program Update

Per Larry: NCEMS is continuing the process to designate St. Joseph Hospital as a STEMI Receiving Center. St. Joseph submitted the pre-hospital checklist, which NCEMS reviewed and requested additional information. NCEMS has participated in the process to develop draft state STEMI regulations. The draft is not yet available for public comment. May’s Humboldt County Cardiac Committee meeting may need to be re-scheduled. Larry circulated the 12-lead survey to transport providers and is awaiting feedback.

Exclusive Operating Area/Transportation Plan – Humboldt County

Per Larry: NCEMS is still developing the Humboldt County Transportation Plan. It has been released to St. Joseph Hospital, Mad River Hospital, City Ambulance, and Arcata Mad River Ambulance for review. Once the draft is finalized, it will go out for public review, then back to NCEMS governing board for further consideration. At the 04/14/15 Board of Supervisors meeting, the Supervisors will consider whether or not the county should recommend that NCEMS move forward in creating an Exclusive Operating Area. Larry does not know what time during the meeting yet, but will inform members when he finds out. The draft Transportation Plan includes “grandfathering” of the ambulance companies into EOAs within established zones, and creating performance standards. Once complete, NCEMS will submit the plan to the State EMSA for approval. Their review process will take several months. Per Dr. Baird: Should the county permit air ambulances? He has researched how other counties approach this issue and their regulations vary greatly. Larry supports revising the ordinance if needed to permit air ambulance services in Humboldt (Lake County currently does so). Per David: Since St. Joseph has been meeting with air ambulance services, he has concluded their hospital needs both fixed wing and helicopter service. He supports permitting air medical service. Per Dr. Baird: If the county is going to permit air ambulance carriers, we should permit all of them. Per Louis: The FAA regulations would prohibit this because of their authority over air space. Dr. Baird believes NCEMS should permit ambulances instead of the Public Health Officer. Larry believes NCEMS permitting would make sense if an EOA were established and would consider this issue in the future.

EMS, Trauma, and QIP Plan Revisions

Per Larry: The EMS and Trauma plans were submitted to the state following the last governing board meeting. He sent the Inventory section to City Ambulance, Del Norte Ambulance, and Humboldt Bay Fire for completion. He asked them to return it soon. Larry has not yet met with Louis on the QIP Plan

revision.

Inter-Facility Transfer Discussion

Larry asked members what are the next steps in resolving this concern. Jaison met with St. Joseph Hospital representatives a week ago to work on communications issue with their transfer center. He believes these meetings have gone well. He does not think a separate committee needs to be created or that MAC needs to be more involved at this point to resolve the problems. David agreed with Jaison's comments. Per Traci: St. Joseph will meet with Jerold Phelps to discuss transfer issues as well. Larry wants them to keep MAC updated. Per Charles: Del Norte Ambulance believes NCEMS needs to revise their inter-facility transfer policy related to ambulances. Larry has sent out that policy for review and asked for feedback.

Patient Destination Policy Discussion

Larry distributed the draft revision of the policy (also sent out via Infomail) and asked for input. The new revision clarifies that a base hospital is allowed to redirect or bypass a facility if the patient is stable, and the receiving facility must accept that patient. The revision also includes NCEMS's opinion that the ED physician should participate in the decision.

St. Joseph Hospital Aero Medical Bid Request

Per David: St. Joseph has met with two helicopter services to learn of the requirements for having the services, but they have not made any decisions.

3. NEW BUSINESS

Shasta Regional Center-Joni Freitas and LyRae Sullivan

Per Joni: Shasta Regional is outreaching to other medical providers in this region to re-establish connections they used to have. They want to be involved in the decision making on issues such as those being currently discussed in MAC. They used to have formal agreements with other hospitals under their previous ownership and want to re-establish some of those agreements. They would like to be a receiving center for more patients that need to be transferred to Redding. LyRae discussed many of the services their Center offers, such as being a Level 3 trauma center and a designated stroke center. They are opening a geropsychiatry unit at their center this fall. In May, Dr. Zeller from Alameda County will do a presentation at their hospital on innovative ideas for dealing with psychiatric patients. LyRae invited MAC members to attend. Stayce is interested in attending. Shasta has many of the same concerns this region has, including transporting patients, retaining physicians, and bed shortage for psychiatric patients. Dr. Baird thanked Shasta Regional and Shasta County for their willingness to accept Humboldt's orthopedic and trauma patients. Joni and LyRae distributed packets with contact information and other information about their hospital.

Gastric Lavage

Louis distributed the policy. Patsy discussed two recent cases in Hoopa where medics performed gastric lavage. Dr. Kelsey of Mad River was concerned upon hearing this because new medical standards say that charcoal is the preferred method of dealing with overdoses. He would like gastric lavage removed from NCEMS policy. Per Louis: Kayce Hurd reviewed this issue and agrees that the policy should be revised to only use gastric lavage under certain circumstances, but not completely remove it from the policy. Patsy stated she has only performed gastric lavage three times and none were beneficial. Per Charles: Del Norte Ambulance requested to remove oral gastric tubes from their ambulances because they were so rarely used. Members agreed that nasal gastric tubes should be retained. Jaison inquired on whether oral gastric tubes were already removed from the required equipment list years ago—they were. Several members agreed that gastric lavage was rarely used and should not be performed. Larry will take the issue to Dr. Stiver and contact Rod Johnson to clarify Hoopa Ambulance's policy.

LAVD Patient

Per Louis: NCEMS was informed there is now a patient in Humboldt County with a Left Ventricular Assist Device (LAVD). He lives in McKinleyville. NCEMS is concerned that most medical providers do not know a lot about VADs or how to treat a patient who has problems with their device. He distributed best practices guidelines for VADs and other Mechanical Circulatory Support (MCS) devices. The state is debating whether or not medical providers should be educated on the devices because they may never encounter a patient with one. NCEMS is looking for feedback on how to approach this issue. Families of a patient with VADs are trained to contact a VAD Coordinator if there is problem with the device. This coordinator is tasked to work with the family and medical providers. The state EMSA however believes it is inappropriate for EMTs to take instructions from an outside coordinator. Louis believes that EMTs should listen to the advice of the coordinator, but need authorization from a base hospital. EMSA is reviewing their policies on how to handle these situations. Jennifer is knowledgeable on VAD because of her time at Stanford's Cardiothoracic ICU. She had already met the patient in Humboldt at Stanford when he first had his VAD installed. She is developing a cheat-sheet for Mad River ER on working with VAD patients. Dr. Baird suggested giving the patient the cheat sheet in case medical personnel have to go on-scene to help the patient. Larry asked her to share it with NCEMS as well. Per Doug: The address of the known patient has been added to the Computer Aided Dispatch system. If medical personnel go on scene to a VAD patient, they should call the base hospital to make them aware. Per Jennifer: One of her colleges at Stanford, Dr. Richard Jaffe, is willing to teach a class on VADs, heart failure, and other related topics. She can also teach a class on VADs. Per Joni: Shasta has two VAD patients. Their VAD Coordinators are very helpful to both the patients and medical providers. Several MAC members expressed interest in attending a seminar on MCS and other cardio issues. Matt offered Humboldt Bay Fire's classroom for the seminar.

4. NCEMS Report

Per Larry: The Governing Board meeting is on 04/23/15 at 10:30am. Larry distributed flyers on a conference featuring members of the EMS for Children team taking place 04/23/15 at the Warfinger Building at 8:30am. Per Stayce: The 5150 Hold Webguide is now on the NCEMS website (under "Plans and Specialty Care"). She stressed that the information in the webguide is only summaries and hospitals should consult legal council to ensure they comply with all laws and regulations. She also added a tab for legislation related to 5150 laws. Assembly bill 1300 will change and clarify the 5150 laws if passed. She believes it will pass. Humboldt County Mental Health is hosting Crisis Intervention Training at the Humboldt Bay Aquatic Center from 06/02-05/15, 8:00am-5:00pm. Stayce distributed flyers. Attendees must reserve slots. Registration will begin on 05/01/15.

5. EMS Commission Report

Per Jaison: Assembly Bill 1223 would allow ambulances to transport patients to other destinations other than hospital emergency rooms. Per Larry: EMSA has not taken a position yet, but is discussing the bill. Jaison is concerned with how reimbursements work under these circumstances. Another bill would require medical provider's data to match up with NEMSIS and CEMSIS data. Since this region is already requiring this, will the bill affect us? Per Larry: The bill originally did not allow for using a single system. Per Jaison: The language has been changed to refer to LEMSAs using a single system. Per Louis: Through this bill, the state is mandating LEMSAs all conform to one state standard, however this standard is not supported at the federal level. Per Jaison: Oddly, the legislation, references CEMSIS, but not NEMSIS. Members agreed that it was not a well-crafted bill. Per Jaison: EMSA is creating regulations for a law passed last year that allows epinephrine to be prescribed to non-medically trained citizens. Those regulations should be complete by January 2016. The EMSA is charged with educating non-EMS providers who will use epinephrine, which Jaison believes in unprecedented. Per Dr. Baird: Schools have had Epi Pens on site for at least two years now. Per Jaison: 911 call routing is a big concern, mainly in southern California. 911 calls are going into Public Safety Answering Points (PSAPs) that are not in the area where the response is needed. While this is not a big problem in

Humboldt County, the CHP does get cell phone calls and cannot transport the geographical data to CAL-FIRE. Jaison also mentioned a problem primarily in southern California where patients taken to hospitals are waiting on gurneys a long time before going into the ER. An ambulance paramedic must stay with a patient while they are waiting. In this region, fortunately, hospitals have worked with ambulance companies to develop strategies to move patients off gurneys quickly. Per Dr. Baird: Who is responsible for a patient who has arrived at the hospital but has not yet been officially admitted? Per Jaison: Dr. Backer's interpretation of EMTALA laws is the hospital is responsible once a patient arrives on their property. Hospitals do not agree. Per Patsy: Hospitals believe they are not responsible until the medics hand over a patient with a report to a hospital nurse.

6. Facility Reports

DHHS-Public Health—Per Dr. Baird: Public Health Emergency Preparedness received \$60,000 in grant funding to purchase equipment for hospital care issues (PAPRs, N95s, etc.) Public Health is legally required to be in possession of this equipment, but will probably distribute some of it to medical partners in remote sites to be used in the event of an emergency. Some funding will be used to train Public Health's two Communicable Disease Nurses. If members have any questions, contact Charlene Pellatz, Public Health's Emergency Preparedness Coordinator.

Sutter Coast Hospital—Per Martha: Recently both Arcata Mad River and Del Norte Ambulance responded to an incident in a remote area near the Humboldt/Del Norte border. Sutter is still evaluating who should have responded and where the patient should have been transferred. Per Patsy: The patient required an orthopedic doctor but there was none on call in Humboldt, so the patient was transferred to Sutter Coast. Per Doug: Due to the location, Sutter Coast was actually the base hospital. Per Doug: What is the fax number for Sutter Coast's ER (the one he has did not work). Martha gave him their fax and her personal fax. She would prefer pre-hospital care reports be sent to her fax.

Shasta Regional Medical Center—Per Joni: They are co-sponsoring an annual cardiovascular presentation on 05/02/15 by Dr. Mohamed Khan, a cardiologist from Redding. The event is always popular. Attendees can get EMS-ECUs.

City Ambulance—Jaison appreciated yesterday's surprise MCI test because their staff who have not experienced one could then participate. City Ambulance is talking with the Coast Guard to plan an area-wide exercise similar in scale to the 2010 exercise the Coast Guard coordinated. They will meet with other medical providers to discuss what type of exercise they want to do sometime in the next three weeks. Jaison would like for the exercise to take place early this summer. City Ambulance will add fentanyl to their units by next month. Per Louis: NCEMS will revise its policy regarding the use of Narcan to reverse potential dangerous side effects from administering Fentanyl too quickly (called "Wooden Chest Syndrome"). Narcan cannot always reverse the side effects. Per Jaison: Sometimes Redwood Memorial has orthopedic surgeons on call and St. Joseph does not, which has resulted in bypasses in the last few weeks. This is a situation they have not encountered before. They are going to educate their paramedics on when to do bypasses for orthopedic patients. Traci has arranged for City Ambulance dispatch to be notified of orthopedic coverage status so they can plan accordingly. Jaison would like to make this a subject for a future field care audit. Jaison wants to put LMAs on the next MAC agenda because of the proven ineffectiveness of combitubes.

Humboldt Bay Fire—Per Matt: Two more staff members have been ALS trained, so stations 2, 3, 4, and 5 will be staffed by ALS providers full-time. They have formed a committee to discuss options for their ALS plan. Their EMT staff have been trained on using aspirin and pulse oximeters.

Del Norte Ambulance—Charles wants to address the issue of using Zofran for pregnant patients, because it is not addressed in NCEMS policy. Several MAC members believe it is safe. Per Charles: Next week two staff members are going to Washington D.C. to support the American Ambulance Association in advocating for Super-Rural Modifier extensions for ambulance providers. On 05/20/15

they will hold a First Responder Appreciation Day at the DN County Fairgrounds. On 06/08/15 Del Norte County will hold a countywide disaster exercise coordinated by Cindy Henderson, Del Norte's Emergency Preparedness Coordinator, and the Del Norte Office of Emergency Services. He invited ambulance companies from Humboldt to participate.

CAL-ORE—Per Debbie: They purchased a new bariatric gurney and will put a bariatric unit in service in Brookings within the next thirty days. They have purchased two new ambulances, one designed for bariatric use. It will be available to Humboldt if needed. Per Louis: Joe Gregorio will request not to transport bariatric patients after 8:00pm. Per Debbie: They purchased five new Zoll X-series monitors.

Mad River Community Hospital—Per Jennifer: They now have orthopedic coverage; she will create a schedule and distribute to MAC members. Representatives from UCSF Benioff Children's Hospital in Oakland will do a two hour session on pediatric extremis at Mad River this July. Jennifer will send all her staff to this session. On 04/23/15 they will conduct a drill with McKinleyville High School as part of the "Every 15 Minutes" program. They will use this drill to prepare for their MCI on 05/21/15. Jennifer would like to conduct MCI's monthly. They have another MCI scheduled for November. Their ICU and ER staff are meeting monthly. Per Jaison: Does Mad River take orthopedic patients when other hospitals do not have coverage, such as patients in southern Humboldt who are currently being transferred to hospitals farther south? Per Jennifer and Patsy: Yes. Per Jennifer: They are setting up tele-medicine cardiology from Ukiah Adventist Hospital in the next two weeks. Anything STEMI-related will still be sent to St. Joseph.

Humboldt Del Norte Medical Society—Per Dr. Rush: Nothing to report.

Arcata Mad River Ambulance—Per Doug: They have added Amiodarone, Fentanl, Atrovent, and mucosal atomizer devices and all staff have been trained. Recently they had to transport a patient needing orthopedic treatment from Prairie Creek to Redwood Memorial Hospital, so Doug is happy Mad River Hospital now has orthopedic coverage. They will be involved in McKinleyville High School's "Every 15 Minutes" drill on 04/23/15. Also on 04/23/15 at Eureka High School from 6:00-9:00 there will be a basketball event called "Freshdival" which promotes child nutrition. A former WNBA player and current Sacramento Kings player will be featured.

7. Next Meeting: Wednesday 5/13/15 at St. Joseph Hospital, room C1, 9:00 a.m.