



## Prehospital Care Department

### UPDATES

#### 4/12/2022 Prehospital Meeting Notes

Minutes: Pre-Hospital Committee Meeting, April 12th, 2022.

In Attendance: Debbie Verkyk, Ed Mezulis, Troy Hoke, Bill Boler, Schelly Lindsey, Dan Elliot, Allen Muma, Alex Lewis and Vince Martinez.

- Dr. Lotz apologized – had to work to cover a sick call.
- Troy: 1) Agencies are to let pre-hospital office know what they are doing for EMS training, precepting, e.c.t so we can monitor to ensure standardization throughout the Verde Valley.  
2) Each agency should look at STR's for EMT's. Numbers for EMT's applying for Paramedic classes are down in the Verde Valley. NAH is doing Paramedic classes through Coconino County College.  
3) CWFD is buying the equipment for RQI training. If anyone wants to see this equipment or wants further information, contact Troy.  
4) Please complete new hire mentorship form on a monthly bases for 3 months. Please ensure that each new medic has a mentor to guide them through the process of navigating the omnical.  
5) Lifesaving award, which has been a goal of Troy's, has been instituted as of this month. Sedona Fire was the recipient of the first award, Cottonwood Fire and VVAC will be the recipients of the second, Copper Canyon the third. We have made a Lifesaving award board in the EMS room at VVMC.  
6) Positive feedback on Doc Talk, and to please continue. Thank you to Bill for putting the videos onto the Verde Valley EMS website. Please remind providers to fill out the attestation form once they have viewed the video.  
7) Reminder that the Declaration of Emergency has ended.  
8) EMS Skills Lab. Ed suggested that we use space at Yavapai College to run skills labs. Alex will set up a meeting with the director of the college to set dates for the fall of 2022. Please think about some skills for this skills lab. Ed suggested "movement of patients" for one of the labs= Debbie will plan this with rehab.

· Vince: 1) ESO update – Phase 2 will be moving forward in May in consultation with a super user group. Still waiting for some answers to questions from ESO.

2) NAEMS- Reminder grant applications are coming to an end at the end of this week.

3) 2 Bills are in the works at state level. One addresses patient refusals the other transport of Title 36 patients.

· Debbie: 1) Kent, VVMC Clinical Manager, requested that EMS providers please assist ED staff with writing the patients name and DOB on rhythm strips left with patient. That will assist in the identification should the RN forget to mount the strips.

2) If providers continue the practice of not documenting narcotic waste, taking narcotics out under “Outdates” instead of under a patient, pharmacy may adopt the policy to mirror that of FMC. EMS will no longer be able to remove narcotics from Omnicell but have to take completed medical report to pharmacy in order to replace narcotic. There is now 24/7 pharmacist at VVMC.

3) All agencies agreed with material Pyxis increases in October.

4) Debbie, Troy and Schelly are certified Matter of balance trainer. Together with Ed and Eric that makes 5, we will start classes soon.

NEXT MEETING July 12TH @ 10:00

### **3/1/2022 CAREMSG Updates**

#### Summary of CAREMSG 2022 Updates

1. Typographical fixes
  - a. Moved lightning bolts that overlapped text
  - b. Updated date on cover sheet
2. Tachycardia
  - a. Clarified diltiazem dosing for patients patients > 65 y.o. to match in both Stable SVT and AFib/Aflutter section
  - b. Add hyperlink to unstable tachycardia signs & symptoms
3. Cardiac Arrest
  - a. Remove CCR/MICR verbiage
  - b. Combine adult and pediatric into one guideline
    - i. Airway/ventilation – age cut-off
    - ii. Drug – age cut-off
    - iii. Defib – age cut-off
  - c. Clarify repeat dose interval for Amiodarone
  - d. Remove option to give medications via ETT
  - e. Updated Lidocaine dosing to 1 mg/kg
  - f. Cardiac Arrest Flow Sheet - added
4. ROSC and Re-arrest guideline
  - a. Updated to include both adult & pediatric patients

- b. Clarified language on repeat Epi dosing
  - c. Expanded language on post-ROSC care
5. Additional Personnel Ride-in/Follow-up guideline added
6. ALS Release to BLS guideline added
7. Magnesium dosing
  - a. Peds Resp and cardiac arrest updated to = 50 mg/kg, max 2g
  - b. Change made for ease of use and consistency
8. Rocuronium
  - a. Added to RSI algorithm as optional agent
  - b. Requires agency/medical director approval
  - c. Request from agency that utilizes this for RSI
9. IO added to all guidelines where route of administration lists IV
  - a. ex. Medication x mg/kg IV/IO
  - b. Request from several agencies/providers for consistency and ease of use
10. Updated ADHS COVID treatment guideline
11. Emergency Operations Rehabilitation guideline added
12. BRUE
  - a. Have had combined verbiage for a few years, national standard is BRUE terminology
  - b. All references to ALTE removed
13. Refusal language
  - a. Clarified BRUE age cut-off (< 12 m.o.)
  - b. Added "respiratory distress" to high risk refusal list
14. Drowning: Adult and pediatric
  - a. Added language to consider PEEP to support oxygenation
15. Trauma TOR
  - a. Clarified language at the bottom regarding when to contact online medical direction
16. VAD/TAH
  - a. Split VAD and TAH into 2 guidelines
  - b. Updates per VAD centers
17. Anaphylaxis
  - a. Changed pediatric Epi dose to 0.01mg/kg, max dose 0.3mg IM
  - b. Updated repeat dosing interval to Q5min from Q5-15min
18. Consistent dosing for Pediatric Epi IM = 0.01 mg/kg, max dose 0.3mg
  - a. Anaphylaxis
  - b. Bronchospasm
19. Sepsis
  - a. Clarified language in top box that sepsis is defined as box 1 + 2 and severe sepsis is defined as box 1 + 2 + 3
20. Airway management guideline
  - a. Added language regarding using cuffed endotracheal tube for pediatric patients
21. RAMP/Trauma Triage
  - a. Added to guidelines
22. VAN
  - a. Specify FAST is required
  - b. VAN listed as screening tool for LVO
  - c. Deleted time of onset for VAN
23. Categorized EDs and FSEDs updated
24. Categorized Stroke Centers Updated

- 25. Cardiac Receiving/Referral Centers updated
- 26. TXA – voted down at VMD → will **not** be added to 2022 guidelines
- 27. Tox updates – pending final vote on January 20<sup>th</sup> → will be added in after that meeting

## **2/1/2022      Baby Safe Haven**

This is FYI if your station is a Newborn Baby Safe Haven :

Per ARS § 8-528. Newborn infants left with safe haven providers; placement protocol; definitions

P. The protocols prescribed in this section apply only to an unharmed newborn infant who is **thirty days** of age or younger and who is not alleged to have been neglected or abused. If an infant who is transported to a hospital is older than thirty days or has been harmed, the hospital shall contact the department, and the department shall take custody of the infant.

**The time period allotted for dropping off a baby in a Safe Haven went from 72 hours to 30 days.**

## **1/11/2022      Prehospital Care Committee Minutes**

In Attendance: Debbie Verkyk, Ed Mezulis, Troy Hoke, Bill Boler, Schelly Lindsey, Jon Gable, Dan Elliot, Allen Muma, Alex Lewis ,Marie Carpenter and Vince Martinez.

- Introduction of Vince Martinez as the NAH Pre-Hospital program Director. Vince spoke about phase 2 ESO platform implementation. See attached power point presentation.
- Troy:
  - 1) Agencies are to let pre-hospital office know what they are doing for EMS training, precepting, e.c.t so we can monitor to ensure standardization throughout the Verde Valley.
  - 2) In the process of working with NAH to get RQI for agencies in Verde Valley = Will report back as more information becomes available.
    - 3) Accuracy of narcotic medication administration, documentation and documentation of waste has gone up from 70% to 96% for the month of December. Dr. Lotz would like to see 100%. Bill confirmed that he is working with Image Trend as well as ESO to ensure documentation of waste shows up in VVAC & VVFD EMS charts uploaded into patients chart.
    - 4) First “EMS Continuing Education” zoom meeting will be 2/16/22 @ 09:00. We will be going over Cardiac arrest and transportation. Please send Dr. Lotz any interesting cases or subject you want discussed at these meetings.
- Debbie has reached out to Jason from materials for possible increase of monthly EMS materials Pyxis chargers. Should have an answer before end of February if not sooner.
- Vince is attending a meeting at the state tomorrow, committee provided him some feedback for that meeting, namely; Utilizing the already available Cerner program so agencies can see bed status in hospital and ED which will assist them in their day to day planning as to best serve the hospital and community.
- Ed is going to provide us with information on “Doula” care of the deceased.
- Jon asked that we request for as many ESO data points our legal department will allow so there is no further add on costs down the line.
- Shelly: Guardian Air in doing training on Critical Care Transports on March 31<sup>st</sup> @ 09:00. All are welcome and she will look into a zoom link.

- CAREMSG protocols will be updated in March. Dr Bradley will be sending out the final updates. Debbie will forward these on as soon as they arrive.

**NEXT MEETING APRIL 12<sup>TH</sup> @ 10:00**