

County of San Diego

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HEALTH AND HUMAN SERVICES AGENCY

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BASE STATION PHYSICIANS' COMMITTEE MEETING

Marcus Wang, M.D., Chairperson

Sharp Spectrum Auditorium 8695 Spectrum Center Court, Kearny Mesa San Diego, CA 92123

Tuesday, January 17, 2017 – Minutes

Present Members

Dunford, M.D., Jim – City of SD Medical Dir.
Grad, M.D., Michele – Palomar BHMD
Kahn, M.D., Chris – UCSD BHMD
Klingensmith, Todd – SD Co Paramedics Assoc.
Levine, M.D., Saul – Sharp Memorial
Schwartz, M.D., Brad – AMR/RCCP Director
Serra, M.D., John – Chula Vista Medical Dir.
Smith, D.O., Ryan – Tri-City BHMD
Smith, R.N., Susan – Prehospital Coordinator
Thihalolipavan, M.D., Sayone-Deputy PH Officer
Wang, M.D., Marcus – Scripps Mercy BHMD
Weinstein, M.D., Steven – Sharp Grossmont
Wiesner, M.D., Christopher – Scripps La Jolla

County Staff

Ameng, R.N., Diane Mahoney, R.N., Meredith Smith, R.N., Susan Thihalolipavan, M.D., Sayone Vassiliou, Elaine/recorder

In Attendance

Aldridge, Nicholas – UCSD BHMD Resident
Baird, Robert -- USBP
Bourdon, R.N., Darlene – Scripps Mercy BHNC
Calhoun, Jeff -- Escondido
Cote, R.N., Chara – Tri-City Medical Center
DeForest, Christine -- NMCSD
Dotson, R.N., Melody – UCSD BHNC
Duffy, R.N., Jenny – San Marcos Fire

In Attendance (cont'd) Fried, Ray - Poway Fire Graydon, R.N., Cheryl – Palomar Medical Center Healy, R.N., Marla – Sharp Memorial Idman-Gervais, R.N., Dianne - Sharp Grossmont Kay, R.N., Karen – CSA-17/AMR Krimston, Josh – Bonita FD Landa, Katrina -- NMCSD Lopez, Brent -- REACH Lord, Scott – Mercy Air Mahr, Kevin - North County Fire Maisonet, Scott -- USBP McFarland, Jeanne – Escondido Meadows-Pitt, R.N., Mary – Sharp Grossmont BHNC Moanum, Donald - REACH Air Murphy, R.N., Mary – CFD Nakajina, Yuko -- UCSD Neill, Mark – Reach Air Pearson, R.N., Danielle - Vista Fire Peltier, R.N., Patricia – AMR Rosenberg, R.N., Linda – Sharp Memorial Russo, R.N., Joe – SDFD Sapida, Juliet -- UCSD Scott, R.N., Chris – CVFD Scott, M.D., Christopher – Kaiser Permanente Sloane, M.D., Christian – Mercy Air

Staats, Katherine – UCSD EMS

Walrath, M.D., Ben -- NMCSD

Wells, R.N., Christine – Scripps La Jolla BHNC

Sullivan, Don – AMR

I. CALL TO ORDER/INTRODUCTIONS/ANNOUNCEMENTS

Marcus Wang, M.D. called the meeting to order at 11:01 am.

II. APPROVAL OF MINUTES

A motion was made and seconded to approve the minutes from November 15, 2016. Motion carried.

*There was no meeting in December 2016.

III. MEDICAL DIRECTOR'S REPORT (Sayone Thihalolipavan, M.D.)

- A. Kristi Koenig, MD is full time at County EMS. She was unable to attend the BSPC/PAC meeting today. The EMS Chief recruitment is currently underway; we hope to make an announcement in the near future.
- B. The License Management section of the ImageTrend system has been rolled out. It is requested that EMTs use the account already created for them in the system, rather than creating a new account. The Hospital Hub is expected to go live in February 2017; this module will include the dashboard to check bypass status, etc. The PCR and base hospital registry modules are almost completed.
- C. The QCS system will be phased out by July 2017.
- D. The County will be updating the Annex D Mass Casualty plan. If you would like to be involved in this process, please contact Susan Smith.
- E. The First Watch Transfer of Care (TOC) module soft launch took place in January. The module is currently in the learning and problem solving phase. The end of January the data will be wiped and in February true data collection will begin. A County-wide data report will be presented at future meetings.
- F. Treatment protocol updates for 2017. Due to the ImageTrend/CoSD LEMSIS and TOC rollout, County EMS will address the most critical issues, planned revision include: S-104, clarifying spinal stabilization guidelines and review of the hospital verification portion of LEADSD. The work from the Cardiac Arrest Task Force will be incorporated into S-127 (Cardiac Arrest & Termination of Resuscitation) and S-141 (Pain Management) will be reviewed for possible changes.

*Spinal Stabilization:

Spinal stabilization has been the subject of extensive education and training.

The ImageTrend system has options where questions on stabilization could possibly be added to the criteria. The trauma surgeons advocate use of stabilization as a precaution.

Dr. Koenig will assist the group in establishing the guidelines for spinal stabilization.

Dr. Thihalolipavan suggested that a possible task force be formed to study this issue, to include representatives from various disciplines.

Questions to Consider:

Which patients should be stabilized and how should these patients be stabilized? Is the backboard appropriate? Are there better ways to immobilize patients? Has the backboard caused injury in any cases? What will the spinal stabilization training look like for emergency personnel?

- G. Beginning in February 2017, Pre-PAC will be reaching out to all agencies, to make sure that everyone is represented in the pre-PAC/PAC process.
- H. Should there be streamline criteria for directing high risk pregnancies? UCSD Hillcrest no longer has an NICU, although the facility still has the ability to stabilize and treat these patients. After treatment, patients can then be transferred to UCSD/Jacobs.

IV. SAN DIEGO HEALTHCARE DISASTER COUNCIL

The disaster drill in November 2016 was a success. The next drill will be a terrorism event scenario, and will take place on June 7-8, 2017. The hospital portion will be on June 8, 2017.

V. SAN DIEGO HEALTH CONNECT

No report.

VI. CARDIAC ARREST TASK FORCE (Brad Schwartz, M.D.)

Protocols were discussed.

VII. PROTOCOL/POLICY REVIEW: CARDIAC ARREST PROTOCOL & TOR (Brad Schwartz, M.D.)

- New wording: If persistent VF/VT after anti-arrhythmic is given, call the base hospital for direction
- New wording: <u>shock refractory</u> VF/VT to replace <u>persistent</u> VF/VT
- Remove: do not interrupt compressions
- New wording: If persistent PEA (after 3 rounds of Epinephrine), call the base hospital for direction
- Remove: traumatic arrests go to trauma centers
- Add bullet point at the bottom: bring AED printout with information to the receiving hospital
- Add: if asystolic after 20 minutes resuscitative efforts with no change, cease efforts
- New wording: If the provider feels resuscitative efforts are futile, <u>continue BLS and contact base hospital physician to discuss ceasing resuscitative efforts before 20 minutes</u>

<u>S-411</u>-Reporting of Suspected Child, Dependent Adult or Elder Abuse/Neglect. The mandated reporting law has changed. The policy will reflect this change. An attached Mandated Reporter flowchart was added. Each responding agency has the responsibility to complete a report.

^{*}A motion was made to approve and move forward with the protocol and policy.

VIII. COMMUNITY PARAMEDICINE REPORT

There was a phone conference yesterday with the State of California. Next Monday
there will be a conference in Sacramento to present findings from the alternate
destination pilot project. An independent report is expected to come out of this
conference, which will include a list of criteria that can be used for alternate destination
patients.

The Community Paramedicine program will continue to enroll more patients. A new pilot project has been introduced in San Francisco; this alternative destination pilot project will focus on their sobering center.

 Bonnie Dumanis and the law enforcement community will give a presentation on the new strangulation protocol in early February. It is important for the legal and EMS community to know and look for signs of strangulation in women who are victims of domestic abuse.

There is a video being produced on this issue which will be distributed to all EMS agencies.

Palomar Hospital has received funding to provide exams for these women and follow up on their mental and physical health.

IX. ITEMS FOR FUTURE DISCUSSION

No report.

X. SET NEXT MEETING/ADJOURNMENT

The next Base Station Physicians' Committee meeting will be on February 21, 2017. It will be held in the Sharp Spectrum Auditorium. The meeting was adjourned at 1:24pm.