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PUBLIC SAFETY GROUP SAN DIEGO COUNTY FIRE SAN DIEGO COUNTY EMERGENCY MEDICAL SERVICES OFFICE

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EMS MEDICAL DIRECTOR'S ADVISORY COMMITTEE - BASE STATION PHYSICIAN'S COMMITTEE

Chair: Dr. Gary Vilke | Vice Chair: N/A

Date: November 19, 2024 **Location:** Virtual

MINUTES

- I. CALL TO ORDER/APPROVAL OF MINUTES
 - A. Meeting called to order at 11:00 am
 - B. October 15, 2024, meeting minutes were approved.
- II. OPENING REMARKS (Dr. Kristi Koenig)
 - A. Introduced the upcoming agenda items
 - B. Infectious Disease Update
 - i. CDPH Mpox News Release (November 16)
 - 1. California Reports First Known U.S. Case of Emerging Mpox Strain
 - ii. 2024 Mpox Outbreak: A Rapidly Evolving Public Health Emergency of International concern: Introduction of an Updated Mpox Identify-Isolate-Inform (3I) Tool
 - iii. Mycoplasma Health Advisory (November 15)
 - 1. Increase in Mycoplasma Pneumoniae Activity in the United States
 - iv. Pertussis Health Advisory (November 14)
 - 1. Pertussis increasing in San Diego County
 - v. Pertussis: The Identify, Isolate, Inform Tool Applied to a Re-emerging respiratory Illness
 - vi. Dengue Health Advisory (October 25)
 - 1. Second Locally Acquired Dengue Case in San Diego County
 - C. Respiratory virus Surveillance Report
 - i. COVID/FLU/RSV triple-threat has potential to stress the healthcare system.
 - 1. Stay up to date on vaccinations.
 - 2. Be mindful of masking in indoor, poorly ventilated areas and when traveling through airports.
 - D. Revive & Survive San Diego
 - i. EMS Office partnership with UCSD.edu
 - Reached a milestone at over 250,000 trained in hands only CPR with a goal of 1,000,000 San Diegans trained.
 - E. Trauma Data Presentations
 - i. EPI data
 - ii. Dr. Bansal will present on the border wall trauma
 - F. Quality Improvement Initiatives
- III. COSD EMS QI INITIATIVES (Dr. Veer Vithalani)
 - A. IHI Model for Improvement Concept of Quality Assurance
 - B. Incorporate quality improvement activities; PDSA cycle of improvement
 - C. California Core measures, 2024 expectations for every LEMSA
 - i. TRA-2: Transport of Trauma patients to a Trauma Center
 - ii. PED-3: Respiratory Assessment for Pediatric Patients
 - iii. HYP-1: Treatment Administered for Hypoglycemia
 - iv. STR-1: prehospital Screening for Suspected Stroke Patients

ASSISTANCE FOR PERSONS WITH DISABILITIES OR LANGUAGE NEEDS: Disability-related accommodations necessary for meeting participation, language interpretation, including American Sign Language, and written materials in alternative languages and formats are available upon request. Please submit your request at least 72 hours in advance of event to: Nicole del Toro, 619.455.1819, Nicole.Deltoro@sdcounty.ca.gov

IV. DATA PRESENTATION (Amanda Moreno)

- A. Overview of the trauma data, 2023
 - i. Trauma Annual and Monthly Volume, 2019-2023
 - ii. Trauma Mortality Rates, 2019-2023
 - iii. Trauma Patients by Race/Ethnicity, 2023
 - iv. Trauma Patients by Gender, 2023
 - v. Trauma Patients by Age Group, 2023
 - vi. Trauma System Access, 2023
 - vii. Trauma System Status by Injury Type, 2023
 - viii. Trauma Incidents by ICD-10 Injury Category
 - ix. Top 5 Mechanisms of Injury by Average LOS, 223
 - x. Improving Pedestrian Safety, AB413
 - xi. Top 5 Mechanism of Injury by Age Group, 2023

V. TRAUMATIC INJURIES ASSOCIATED WITH THE BORDER WALL (Dr. Vishal Bansal)

- A. Dr. Bansal presented on the Trauma System and Catchment Area
 - i. Preventable death rates improvement
 - ii. SD County/TJ Border demographics
 - iii. 2014-2017 Paramedic port-of-entry calls
 - iv. Number of patients seen at the border entries/injury patterns
 - v. March 2024 mass trauma casualties, but much higher numbers could overwhelm trauma centers and the system
 - vi. Cumulative data increasing number of patients
 - vii. Hospital cost per patient
 - viii. Mortality before and after wall construction, consistent with increase last few years
 - ix. Cohort study and volume pre and post expiration of Title 42
 - x. Discussed estimated cost vs. charges of care

VI. COUNTY REPORT HIGHLIGHTS (Michael Assof)

- A. Continuously monitoring the ongoing situation regarding significant impacts on IV fluid manufacturing.
- B. Memos: Guidance for conservation strategies.
 - i. Baxter has started a second IV solutions manufacturing line.
 - 1. They expect all lines be restarted by the end of the year; they don't have a timeline for production to be fully restored prior to pre-hurricane levels.
 - 2. Prehospital Guidance for Normal Saline Shortage Mitigation
 - 3. Normal Saline Shortages Guidance for EMS Providers
 - 4. We have not heard of any local procurement issues from our agencies for NS or LR; continue to closely monitor inventory and availability and make early notification to county EMS if you foresee any changes or potential issues.

VII. OPIOID EPIDEMIC MITIGATION (Tyler Meick)

- A. Leave Behind Naloxone Program
 - i. Prehospital agencies participating in the LBNP are asked to submit your distribution numbers.
 - There will be a survey to look at trends in the LBN and naloxone usage to make programmatic improvements.
 - iii. HHSA dashboard will display aggregate information related to the opioid epidemic, coming soon. Discussed contributing factors such as documentation section for LBN field, supply more readily available, and decline in opioid usage and overdoses.
 - iv. Townhall held to get EMS community feedback, and we have planned to host additional meetings to support the LBN efforts in the future.
 - v. We are in our final stages of building the content for a new public facing webpage to host all the EMS-related opioid response materials, the new webpage will be launching soon.
- B. Prehospital Buprenorphine Program
 - i. The EMS Office is trialing a new component of LEMSIS to improve buprenorphine quality assurance by using the software included in LEMSIS we are able to quickly QA calls that result in a COWS score and send PCRs directly to participating agencies. The goal is to improve the agency's ability and lessen the burden to provide feedback to the crew.
 - ii. Continue to work on the quality improvement program.
 - AMR continues to expand their EMS buprenorphine program into the Central Zone. Final preparations are taking place that will place buprenorphine on all central zone transport units (an expansion of around 15 units).
 - iv. The buprenorphine pilot program will continue through 2025 and continue to work with agencies to determine its effectiveness.

VIII. CARDIAC UPDATES

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- A. Revive and Survive San Diego (Tyler Meick)
 - i. Since January 1st 260,000 San Diegans have been trained in bystander CPR. There have been 7,911 training events (individual and group).
 - ii. To submit numbers or if you would like to request a training event, visit the Revive & Survive webpage at www.revivesurvive.ucsd.edu
 - iii. Recent trainings along with plans for future trainings were highlighted.
 - iv. A new workgroup was created. A goal to train K-12 schools, training students to prepare them to do bystander CPR.
 - v. Thank you to those who participated in the Revive and Survive Fundraiser, The Comedy Store, La Jolla last week. The event was a major success.
- B. San Diego Resuscitation Consortium (Dr. Saul Levine)

There is a steady number of ECPR prehospital alerts 5-10 on average.

- Announcement of a fourth hospital UCSD, Hillcrest who represents the fourth hospital capable of performing ECPR 24/7. The four hospitals include UCSD Hillcrest, Sharp Memorial, Sharp Grossmont, and Scripps La Jolla.
- IX. ADDITIONAL QUESTIONS/BSPC ADJOURNMENT (Dr. Gary Vilke)
 - A. The BSPC meeting was adjourned at 11:45 am.
 - B. The next BSPC/PAC meeting is scheduled for Tuesday January 21, 2025.