



STATE OF MAINE
DEPARTMENT OF PUBLIC SAFETY
MAINE EMERGENCY MEDICAL SERVICES
152 STATE HOUSE STATION
AUGUSTA, MAINE 04333



JANET T. MILLS
GOVERNOR

MIKE SAUSCHUCK
COMMISSIONER

J. SAM HURLEY
DIRECTOR

Medical Direction and Practices Board

Weds, May 20, 2020

Conference Phone Number: 1-720-707-2699 Meeting Number: 345 024 1513

Zoom Address: <https://zoom.us/j/3450241513>

Members present: Matt Sholl, Kevin Kendall, Beth Collamore, Kate Zimmerman, Matt Opacic, Mike Bohanske, Pete Tilney, Dave Saquet, Seth Ritter, Bethany Nash, Tim Pieh

Members Absent:

MEMS Staff: Chris Azevedo, Melissa Adams, Marc Minkler, Jason Oko, Sam Hurley,

Stakeholders: Amy Drinkwater, Benjy Lowry, Chip Getchell, Dan Pugsley, Debbie Morgan, Jay Bradshaw, Joanne Lebrun, Paul Marcolini, Rick Petrie, Stephen Smith, Alison Roberts, Bob Brown, Ben Zetterman, Sean Tuemmler, Dennis Russell, Chris Pare

“The mission of Maine EMS is to promote and provide for a comprehensive and effective Emergency Medical Services system to ensure optimum patient care with standards for all providers. All members of this board/committee should strive to promote the core values of excellence, support, collaboration, and integrity. In serving on this Board/Committee, we commit to serve the respective providers, communities, and residents of the jurisdictions that we represent.”

MDPB Agenda – Meeting begins at 0930

Meeting held online via ZOOM app due to COVID-19 restrictions.

- I. Introductions
 - a. Dr. Sholl
 - i. Dr. Sholl reviews meeting rules pertaining to online medium and calls roll for the meeting.
 - ii. Recognition of EMS Week.
- II. Approval of past MDPB meeting minutes
 - a. The minutes for January through March were not approved due to COVID tempo of operations. Dr. Sholl presents those minutes to the group for final review and approval.
 - b. January minutes
 - i. Dr. Ritter made the motion to approve the minutes. Motion seconded by Dr. Collamore. Discussion. The motion is passed
 - c. February minutes
 - i. Dr. Kendall made the motion to approve the minutes. Motion seconded by Dr. Collamore.
 - ii. Discussion. Includes Dr. Zimmerman’s edits.
 - iii. The motion is passed
 - d. March minutes
 - i. Dr. Collamore made the motion to approve minutes. Beth motion. Dr. Kendall seconded the motion. Discussion. The motion is passed.
 - e. April minutes.

- i. Nothing to report. Status quo
- f. Dr. Saquet
 - i. Crews not giving U21 status over the radio. This may be complacency setting in among crews as conditions relax.
 - ii. Discussion of complacency issues with PPE and reinforcement of this.
 - iii. Administrating transport of patients for testing has been difficult as it is not always known what the patient is being tested for. Discussion of this point ensues. Dr. Saquet notes that Dr. Norm Dinerman is working with him on this topic.
- g. Bethany Nash
 - 1. Nothing new to report from Mid Coast Hospital
- h. Dr. Kendall
 - i. EMS service volumes have been increasing back to normal
 - ii. Question- have any other MDs been seeing this COVID associated syndrome in pediatric patients?
 - 1. Dr. Sholl- one suspicious patient that got transferred to Boston.
- i. Dr. Tilney
 - i. Volumes picking up across the board.
 - ii. Questions coming up centering around OHCA protocol
 - 1. What if the call is a ROSC and the patient is being transported to the ED?
 - 2. How does this apply to events during IFTs?
 - 3. Recommending extrapolation to IFT from the protocols.
- j. Dr. Pieh
 - i. Nothing new to report.
 - ii. Pushing EMS services to consider face coverings and how to protect responders when in quarters.
- k. Dr. Sholl
 - i. Monitoring any possible increase in COVID numbers. This may occur due to increased access in testing vs actual increase in numbers of people infected.
 - ii. Recovery. Need to remain active and nimble as state proceeds through re-opening process.
 - iii. Discussion of immunity and antibody presence. Monitor research on this as we proceed through recovery.

IX. 2021 Protocol Update

- a. Process Timeline
 - i. Review of timeline graphic shared onscreen.
 - ii. Order of review 1- Ecchymotic, 2- Yellow, 3- Blue, 4- Red,
 - iii. Finish Yellow and grey section in May
 - iv. Start/finish Blue in June/July
 - v. Start/finish Red in July
 - vi. Discussion regarding the MDPB taking month off in August, as normal.
 - 1. Closely monitoring timeline to have this done for work with Education Committee to do the education.
 - 2. Also need to discuss PIFT with Pete Tilney in timely manner as well.
 - vii. Adoption of national scope of practice revisions into protocols.
 - viii. Pediatric section
 - 1. Would like to have the new Pediatric Physician member participate in this to learn the review process. Therefore, the Pink section is being put to later in the process.
 - 2. Pink and Orange will be 7th and 8th in order.
- b. Review Progress
 - i. Discussion on direction after review of the Red section.
 - 1. Pediatric section should be later in review order to accommodate new EMS-C MDPB member.
 - 2. Dr. Zimmerman asks Green protocols to be addressed later so she can get input from the Trauma Advisory Committee (TAC).
 - 3. Gold should be reviewed after Red. Then Green should be reviewed.

c. Discussion – Purple/Brown/Grey/Black

i. Grey section change sheet shared on screen. Discussion of changes

1. Hospice patients

- a. Questions to group. Do you think these changes are necessary? Do you like having the protocol?
- b. Listed reasons EMS may be called to hospice and then listed guidance for providers.
- c. If patient/caregiver insists on transport, that is the route that should be taken.
- d. There needs to be a separation of issues that are pertinent when the terminal issues are unrelated to the reason why EMS was called.
- e. Motion made by Dr. Kendall to approve the section as written. Motion seconded by Dr. Bohanske. Discussion. Motion is carried with one abstention.

2. Bariatric patients

- a. Discussion of bariatric protocol
 - i. Hospital destination decisions
 - ii. Motion made by Dr. Zimmerman to approve the Bariatric language as modified at this meeting. Motion is seconded by Dr. Kendall. No discussion. Motion is carried.

3. Death with dignity rule

- a. Much of the protocol was taken from the law itself.
- b. There is a form that the patient is supposed to have filled out.
- c. Law encourages participants to inform their family members regarding this law and participation.

4. POLST

- a. Took guidance from other states as well as Maine
 - b. Updated POLST language so that it's compliant with the MAINE state form
 - i. This document has changed. Important for providers to be aware of the changes and be aware of the language meanings. So, this has been broken down. Protocol language comes right from the form.
 - ii. Sam- that language is from the national standardized form, which has been adopted by the state. May want to give examples of treatments that could be covered. Verbiage "...such as, etc."
 - iii. Poll of MDPB regarding support of the language and content changes. Motion to approve- Kevin. Second Mike Bohanske. Discussion. Motion carried.
 - c. Director Sam Hurley highlights concerns regarding protocols vs POLST forms and future direction MEMS was working on.
 - d. Group agrees to review this issue separately with Maine EMS.
- ii. Brown section recommendations by Dr. Zimmerman
1. Tactical situation verbiage reviewed and revised by the group.
 2. Motion to accept changes. Motion carried.

d. Discussion – Yellow

i. Dr. Zimmerman makes the recommendation to finish the definition of hypothermia in Yellow 105

1. Dr. Opacic leads discussion with the group.
2. Motion is made by Dr. Sholl to accept changes. The motion is seconded by Dr. Kendall. Discussion. Motion is carried.

Old Business – 1215-1230

- 1) Operations
 - a. Director Hurley
 - i. Sam Hurley thanks the Regional Offices for their work. MEMS still meeting weekly with regions.
 - ii. Working on PPE distribution issues
 - iii. Working on EMS Week items
 - iv. Heard from Bill Montejo. Based on his interpretation, there have been no changes for medical necessity requirement. He has reached out to CMS and Maine Care to ensure there have been no changes that he's unaware of. Infection control is not covered under medical necessity for ambulance transport.
- 2) Education
 - a. Exam and Education Committees have submitted criteria lists for review
- 3) QI
 - a. QA group meeting today.
 - b.
- 4) Community Paramedicine
 - a. CP group met.
- 5) Maine Heart Rescue
 - a. Progress on this project has been tabled due to COVID-19 operational requirements.

Adjournment: Motion to adjourn made by Dr. Kendall. Motion seconded by Dr. Collamore. Meeting adjourned at 1240 hrs.

Ongoing Items for Future Discussion:

Discussion – Operational Physicians – Pieh/Sholl
PIFT protocols – Tilney/Sholl