



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 – April 20, 2022**  
**Conference Phone Number:** 1-646-876-9923 **Meeting Number:** 81559853848  
**Zoom Address:** <https://mainestate.zoom.us/j/81559853848>

**Meeting Minutes**

**Please Note: This meeting will be shared with the LifeFlight of Maine CPC, which will begin at 1100. Please note, these meetings will be virtual.**

- Members present:* Matt Sholl, Benjy Lowry, Beth Collamore, Bethany Nash, Claire DuFort, Dave Saquet, Seth Ritter, Michael Bohanske, Pete Tilney
- Members Absent:* Tim Pieh, Kate Zimmerman, Rachel Williams, Kelly Meehan-Coussee
- MEMS Staff:* Chris Azevedo, Marc Minkler, Darren Davis, Sam Hurley, Melissa Adams, Jason Oko, David Davies, Jason Cooney, Ashley Moody,
- Stakeholders:* Byron Ouellette, Chase Labbe, Chip Getchell, Dwight Corning, Emily Wells, Joanne Lebrun, Nicholas Bryant, Mike Choate, Paul Hewey, Sally Taylor, Shawn Cordwell, Stephanie Cordwell, Rick Petrie, Chris Pare, Phil MacCallum, Rob Sharkey, Dr. Norm Dinerman, Conrad Jellison, Jay Bradshaw, Karen Pearson, Ted Mahar, Pat Rawson, John McGinty, Chad Lucas

**MDPB Agenda – Meeting begins at 0900**

- 1) Introductions
  - a. MDPB introductions and roll call.
- 2) Approval of March 2022 MDPB Minutes
  - a. Motion by Dr. Collamore to approve the March 2022 minutes. Motion seconded by Dr. Lowry.
  - b. No discussion. Motion passes.
- 3) State Update
  - a. Director Sam Hurley
    - i. No major updates.
    - ii. Maine EMS is getting ready to celebrate EMS Week in May.
      1. Director Hurley solicits submission of nominees for EMS awards from the group.
  - b. Dr. Sholl
    - i. Dr. Sholl and Director Hurley discuss the strategic planning process with the group.
      1. There will be a 2-day retreat for the EMS Board, and an introductory meeting in April.
    - ii. Strategic Planning Process and MDPB Input
      1. Dr. Sholl has met with Dr. John Becknell, who is the consultant who is contracted to assist in the process and discussed with him engagement of the MDPB.
      2. The plan is to reach out for a “1 on 1” session, as well as doing a video or in person meeting with the MDPB as a whole. Working on setting dates for both of these items.
      3. Dr. Ritter asks if “strategic planning” goal is to write a plan for the next 5 years? Dr. Sholl discusses intent and goals with this effort as it moves forward. Discussion by the group follows.
        - a. Dr. Ritter expresses concerns regarding a lack of good venue for virtual participation in this, with the ability to submit comments, etc., online.

- b. Director Hurley – the meeting will be broadcast, as well as an email address given for viewers to be able to submit their comments and input to Dr. Becknell directly and not via Maine EMS.
      - c. MDPB BLS Position
        - i. Dr. Lowry reviews and discusses the process that was utilized for selecting the new BLS representative to the MDPB for the group and attendees.
        - ii. Motion to accept the recommendation that Emily Wells be accepted for BLS representative on MDPB made by Dr. Nash and seconded by Dr. Collamore No discussion. Motion carried.
  - 4) Special Circumstances Protocol Review – NONE
  - 5) New Devices– Discussion re: Required Elements for Cricothyrotomy Kits
    - a. Dr. Sholl discusses the “new devices” process
    - b. Dr. Lowry was approached by one of the services in his region, regarding a possible addition to cricothyrotomy kits.
      - i. Dr. Lowry discusses the proposal
        - 1. This came about as a result of a call in which a surgical cricothyrotomy procedure didn’t go as well as it might have. The service asked about possibly including a Shiley as part of the kit.
        - 2. Discussion by the group.
          - a. Dr. Sholl discusses harmonization of MDPB recommendations and Board requirements for minimum equipment. Discusses kit equipment content proposal. Discussion by the group.
          - b. Dr. Sholl proposes that a list of important items to be included in the kit be included as the fourth option in the minimum equipment list. Motion made by Dr. Bohanske and seconded by Dr. Saquet to accept. Discussion. Motion is carried.
- 6) UPDATE –Medication Shortages
  - a. Dr. Nash
    - i. Pharmacies struggling to keep up with demand for prefilled syringes, oral glucose gel. However, supply is slowly improving.
    - ii. Also, saline versus lactated ringer’s solution in 1-liter bags.
- 7) COVID-19
  - a. Dr. Sholl discusses latest monthly update meeting.
- 8) Data Request: Cutler School Review of the Community Paramedic Program
  - a. Dr. Sholl introduces Karen Pearson, to discuss the data request
    - i. Data is necessary in order to understand the value of Maine EMS Community Paramedicine programs. Discusses specific data types needed and where the Muskie School is receiving data from.
    - ii. As data had previously been queried from MEMSRR, would now like to do so from MEFIRS, as this is the current platform for patient care reporting.
    - iii. Looking for de-identified data.
    - iv. Motion made by Dr. Lowry and seconded by Dr. Collamore to approve the data request. Discussion. Motion carried.
  - b. Data request by Maine Medical Center’s Department of Emergency Medicine.
    - i. MD/MPH Candidate Caroline Wight, studying barriers, enablers, and impact of Maine’s naloxone dispensation protocol. Her project proposal, IRB approval and endorsements sent to the group. This request would allow Maine EMS to share data with her and the study group.
    - ii. Motion made by Dr. Bohanske to accept the data request. Motion seconded by Dr. Nash. Discussion. Motion carried.
- 9) Request from the Jackman Pilot Project – Protocol Amendment
  - i. Dr. Jonnathan Busko recognized that there is not harmony between AHA definition of STEMI and latest Maine EMS protocols and recommendations. Asked if MDPB would approve current MDPB definition of STEMI for their protocol. This would require MDPB to review, adjudicate and approve this, if necessary.
  - ii. Motion by Dr. Saquet and seconded by Dr. Bohanske to accept Dr. Busko’s request. Discussion. Motion carried.
- 10) 2023 Protocol –All – 1010-1100 – 2023 Protocol Discussion
  - a. Review Timeline/Status
    - i. Dr. Sholl shares his screen and discusses the current timeline.

- ii. Dr. Collamore adds that review of the equipment list would be a good item to add to list of review items. Discussion.
    - b. Announcement – upcoming Protocol Discussion Forum – May 12, 2022, at noon
      - i. Dr. Sholl discusses the next forum.
    - c. Orange Section Review – Bohanske, Lowry, Saquet and All
      - i. Dr. Bohanske shares his screen
        - 1. Transport of Mentally Ill protocol
          - a. Emphasis added on evaluation for a treatable medical cause for behavior
            - i. No vote needed to accept.
          - b. Recommendation for confirmation with AAG that cited Maine laws are still correct. This is an administrative change and not substantive.
          - c. Involuntary committal
            - i. Reminder for clinicians that sign-off situations are always risky and include referral back to Gray 20 protocol.
            - ii. Discussion regarding need to contact OLMC in this situation.
          - d. Add PEARL
            - i. Pediatric behavioral health emergencies, awareness of specific needs and making transport decisions.
            - ii. Marc Minkler discusses concern with protocol length and guidance versus education. Also concerns with adding the concept of “protective custody.”
        - 2. Depression/Suicidal Ideation
          - a. Pt assessment: if suicide attempt has occurred, evaluate need for medical treatment.
          - b. Assess patient’s risk for depression and suicidal ideation.
          - c. Item #6. Record or collect items such as toxic substances, etc. that may have been taken and transport with the patient to the hospital if appropriate.
        - 3. Orange 3 Restraints
          - a. Preamble? Add a note that restraint can pose risk to the patient and clinicians need to be attuned to how to mitigate the risk.
          - b. Discussion.
          - c. Item #11- Concerns regarding the law enforcement statements that appear to contradict each other. Discussion. Dr. Sholl suggests adding a statement (reads it).
      - d. Dr. Sholl recognizes the time and proposes pausing discussion for May’s meeting.
- 11) Committee Assignments
  - a. Data
  - b. Others

**Old Business – 1100 - 1110**

- 1) Ops - Director Hurley
  - a. Working on materials for EMS works
  - b. Ops Team is working on addressing QA/QI
- 2) Education – Chris Azevedo
  - a. NCCP Transition phase 1 of 3 begins 1 Nov 2022
    - i. Developed training presentation giving a process overview
    - ii. Training- EMS Clinicians, Service Chiefs, Medical Directors and MDPB
      - 1. Sign-off/endorsement of provider competence in practice
      - 2. Mechanism by which this works
    - iii. Determination of State/local CEH content requirements for provider re-licensure
      - 1. Specific content
      - 2. Review/revision intervals
- 3) QI – Jason Oko
  - a. Committee meets today. Going over naloxone and substance abuse newsletter as well as next topics.
    - i. Multiple committee positions open on the committee.
    - ii. Director Hurley queries the group for topics of MDPB importance for the newsletter.
      - 1. Dr. Sholl discusses.

- 4) Community Paramedicine
  - a. David Davies
    - i. Working on Scope of Practice for different licensure levels with regard to CP protocols.
- 5) TAC/MSA
  - a. Ashley Moody
    - i. Interviewed candidate for committee vacancies.
    - ii. Have sent out requests for visits
    - iii. MSA
      1. Meets next week.
      2. Developing some education for MEMSED
    - iv. Will begin input of CARES data next week
- 6) EMS-C
  - a. Marc Minkler
    - i. Brought onboard 2 new members
    - ii. Working on hospital ER pediatric readiness recognition.
    - iii. Continuing BLS-O efforts.
- 7) Maine Heart Rescue – no report

Motion to adjourn mad by Dr. Saquet and seconded by Dr. Bohanske.

**Ongoing Items for Future Discussion:**

- PIFT protocols – Tilney/Sholl
- Operational Physicians

**The LFOM CPC Meeting will begin at 1115. The QI Committee meeting will begin at 1330**