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



MIKE SAUSCHUCK COMMISSIONER

SHAUN A. ST. GERMAIN
DIRECTOR

Medical Direction and Practices Board March 20, 2019 Minutes

Please contact shollm@mac.com for conference call information

Members Present – Dr. Pieh, Dr. Bohanske, Dr. Nash. Dr. Collamore, Dr. Kendall, Dr. Opacic, Dr. Saquet, Dr. Sholl, Dr. Zimmerman, Dr. Tilney

Members Absent – Dr. Ritter

Staff – Marc Minkler, Shaun St Germain, Don Sheets

Stakeholders – Ben Zetterman, Stephanie Cordwell, Nathan Yerxa, Jay Bradshaw, Justin Grant, Justin Bragdon, Chip Getchell

MDPB Agenda - Meeting begins at 0930

- 1) Introductions –Sholl 0930-0935
- 2) Feb 2019 MDPB Minutes Zimmerman/Sholl 0935-0940 Will be addressed in April.
- 3) State Update St. Germain 0940-0955
 - a. Medical Director's Resources None
 - b. CARES We are continuing to work with cares and the board has supported the continuation of this program
 - c. Heart Rescue/RA Northern New England RA scheduled for May 30 31 more information on registration to follow.
 - d. EMS-C Marc gave a recap of the first EMS-C meeting which was held last week. The group is looking to have more involvement. There will be a newsletter the first edition has gone out and will go out monthly. The EMS-C group will meet every other month.
 - e. Legislative Update
 - i. LD 215 Rate of reimbursement from the correctional facilities
 - ii. LD 915 An act to reimburse care etc.
 - iii. LD 1188 An act to require critical incident stress training
 - iv. LD 1236 Act to clarify statute reference to definition of a Paramedic
 - v. Jay discussed
 - 1. LD 674 Question about Police protocols as it may offer local options for EMD and the concern this could jepordize care.
- 4) Special Circumstances Protocols NONE
- 5) New Devices NONE
- 6) UPDATE Medication Shortages Nash / Zimmerman / All 0955-1010
 - a. Updates
 - i. Bicarb is still an issue which continues to be of concern as there is no replacement for the indications we have in protocol
 - ii. Ketamine is being reported and there have been sporadic local issues but nothing long term as of now.
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- b. Discussion re: current shortages and response/training
 - i. This has been created as a more fluid document that can be more flexible moving forward.
 - ii. The group will distribute this for final review by MDPB and then it will be placed on the website for use if necessary.
- 7) Follow Up Discussion re: re-arrest in route to the hospital Pieh/Zimmerman/All 1010-1020
- 8) 2019 Protocol Update Sholl/Zimmerman /All 1020-1220
 - a. Timeline review Zimmerman/All 1020-1030
 - b. Conference Call reviews 1030-1035
 - i. Feb 2019 conference call review major themes that arose Sheets/Sholl/Zimmerman
 - 1. Most of the discussion was what had been covered by the MDPB so far. This conference call focused heavily on the Pink section and the process of combining peds and adult where appropriate.
 - c. Protocol topics: 1035-1220
 - i. Prior Sections
 - 1. Follow up with AG re: Grey 16 SSG
 - Research by the AAG has been completed and a summary will be provided but it is felt a specific protocol would be appropriate under physicians order for restraint
 - 2. Follow up re: CaGluc vs CaCl (cost, field stability, etc.) for Green section
 - a. Dr. Pieh motioned to use CaGluc with dosing to be determined as the front line choice. Seconded by Dr. Nash Unanimous
 - 3. Contact with psychiatrists re: Depression/SI screening BC/KZ
 - a. Nothing new to report
 - 4. Radiation protocol TP
 - a. Dr. Pieh has nothing new to discuss and does not anticipate further changes
 - 5. Min/max RR for brain herniation TP
 - a. The recommendation is to stick with capnography as the decision point. Concern was expressed over the differentiation of condition without this tool.
 - ii. Pink Section discuss the group's review of the document to date re: the pink updates
 - 1. This has been reviewed by a handful of individuals with some comments back to editors
 - iii. Cuffed vs uncuffed endotracheal tubes the MDPB and Maine EMS will work to correct the conflict between standard of care and rule. We will work a process to allow services to transition. It is the MDPBs intent that all endotracheal tubes have a cuff.
 - iv. Pediatric Transport protocol Marc gave the background and perspective on the benefits of this protocol.
 - 1. The group will formally review this at their next meeting as it was not previously available for review.
 - v. Red Section Review Pieh/Bohanske
 - 1. Benign early repolarization should be covered in education.
 - 2. Sgarbossa Criteria other mimics etc whitepaper
 - 3. Death TOR Will be reworked as a mock up for review to try to alleviate conflict and will be brought back.

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- 4. Norepinephrine will be a standing order with FYI to consult with more definition around how to utilize the new symbol
- 5. Diltiazem vs Metoprolol no differences in head to head trials
 - a. Should we remove OLMC to fix the issue of local preference refusal? Will discuss this next meeting.
- d. Assignment of White Paper & FAQ Authors/Timeline
 - i. M-CPR Dr. Bohanske Dr. Pieh
 - ii. Portable CO Monitors accuracy Dr. Zimmerman, Dr. Collamore
 - iii. Use of Naloxone with overdose Dr. Collamore & Dr. Zimmerman
 - iv. Burns Dr. Pieh, Dr. Sholl
 - v. Dexamethasone PO of IV dose in kids with croup... Dr. Nash
- e. FAQ
 - i. Cardizem vs. Beta Blockers MB2
 - ii. Portable CO Monitors accuracy Dr. Zimmerman, Dr. Collamore
 - iii. Medication shortages Dr. Nash and Dr. Sholl
 - iv. Warmed IV Fluids Dr. Nash
 - v. Cuffed Tubes Dr. Saquet Marc

Old Business

- 1) Ops Awards ceremony we would love MDPB members to be present. Survey on how we transmit PCR to the hospital
- 2) Education Met to begin discussing the protocol update.
- 3) QI meeting today no new activity since last meeting
- 4) Community Paramedicine met Monday and created a workplan that they will take to the board

1257 Dr. Pieh, Dr. Bohanske

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