

Maine EMS Trauma Advisory Committee
Meeting Minutes - Tuesday, July 27, 2010

Present: Pret Bjorn – Chair, Norm Dinerman Joanne Lebrun, Harry Grimmnitz, Rick Petrie, Gail Ross, Carlo Gammaitoni, Heather Cady, Doris Laslie, Shelley Sides, Kim McGraw, Chris Pare, Julie Ontengco, Joshua Dickson, Parke Oldenburg, Sandy Benton, Geneva Sides, David Clark.
Staff: Kerry Pomelow, Kevin McGinnis.

Topic	Discussion	Action/Follow up
Introductions	The meeting was chaired by Norm Dinerman, sitting in for Pret Bjorn. Members and others in attendance were introduced.	
Minutes of 4/27/10	MOTION: To approve 4/27/10 minutes (Grimnitz, Ontengco).	Approved.
Case Review	Case presented by EMMC staff. The discussion reflected an interest in further discussion on LifeFlight of Maine (LOM) data use to help determine Trauma System needs and TAC guideline needs. Also indicated interest in possible demo video on pelvic binding for TAC website.	CMMC will present in October. LOM CPC data use for setting Trauma system and TAC guideline needs to be agenda topic at next meeting. TCT to consider Bjorn/Oldenburg pelvic binding video and Bjorn's "before/after" pelvic fracture pictures for demo on website.
Trauma Coordinator Team (TCT) – Data and Benchmarking	Data and Benchmarking – ED Interval – Time from admission to Trauma System Hospital (TSH) to transfer to Trauma Center (TC). Pret displayed charts with ED interval experience for the three trauma centers. CMMC's region had an average ED interval of just over 90 minutes, while that of the other two regions was over 150 minutes. Discussion ensued about the contributing factors to these figures, including CMMC's relatively smaller region, the presence of CMMC ED physicians in many referring hospitals, and the difference that knowing when first TC contact by referring hospital might have made in analyzing these data. On this latter point it was noted that data have been hard to get but that we have encouraged their recording in the general	The TCT will discuss our ability to analyze TSH by TSH performance. TCs have developed processes to notify TSH contacts when a transfer case has ED Interval > 2 hours for a patient with ISS > 15 when no mitigating parallel processing steps have been employed. The TSHs should handle their own reviews without TC follow-up. Progress on this will be reported annually in April with other data

	<p>trauma referral guideline.</p> <p>The TAC discussed Total Time interval. It was concluded that there is difficulty in detecting which of many factors contribute to delay and that we need to drill down further. The TCT will continue to discuss this. It was suggested that LOM data might be useful to look at (as also suggested above).</p>	<p>presented from the previous year.</p> <p>TCT to discuss further.</p>
Consensus Statement and Clinical Advice Guidelines Development	<p>Consensus Statement and Clinical Advice for TSHs – Draft documents were circulated for burns, pain management, and the general process for consideration and approval of Consensus Statements.</p> <p>Extensive discussion ensued surrounding the burns document and the issue of recommended initial contact point for burns. This was not resolved and the TCT was asked to discuss the tabled document and present a recommendation. Joanne Lebrun suggested switching sections D and E in the document and this was the consensus. Time ran out before other documents could be discussed.</p>	<p>Consensus Statement Actions:</p> <p>Burns and other documents to be reviewed by TCT and presented for action in October.</p>
Rural Trauma Development Course	<p>First course was held at Maine Coast Hospital on March 18th. Very successful. Next course is expected in conjunction with the Samoset EMS conference, the Friday following the MCOT meeting (11/12).</p>	
TA Program	<p>Mid Coast is scheduled for November 4 for a revisit. Materials are out to SMMC and Pen Bay for visits.</p>	
Other Business	<p>Julie Ontengco reported that input for the trauma protocols was solicited from all three TCs and delivered to the Maine EMS MDPB. Kevin reported that there will be no change in the TAC meeting date after much discussion.</p>	
Adjourn		<p>Meeting was adjourned at 2:45.</p>

Next Meeting: October 26th, 2010. 12:30 – 2:30 at Maine EMS. Lunch will be provided.