



Medical Direction and Practices Board

WHITE PAPER

Pediatric Evidence Based Guidelines: Assessment of EMS System Utilization in States (PEGASUS)

BACKGROUND

PEGASUS is a grant-funded cooperative agreement between the Health Resources Services Administration's (HRSA) EMS for Children program and the Texas Children's Hospital and Baylor Medical Center. The project supports national projects exploring the importance and value of evidence-based guidelines in pre-hospital medicine.

GOALS

The project developed evidence-based protocols for specific pediatric emergency conditions including: pediatric spine management, pediatric airway management, pediatric shock management, and pediatric anaphylaxis management.

In the fall of 2014, PEGASUS guidelines were deployed in Houston, TX, to beta test the protocols in an effort to address operational and educational challenges before pursuing a larger regional implementation. Building upon the lessons learned during the Houston rollout, the six New England states will each adopt the protocols during the second quarter of 2015.

The final steps of the project will be to measure patient outcomes and quantify the value of evidence-based guidelines for pre-hospital patients.

HOW IS MAINE INVOLVED?

Maine is one of the target states in which the PEGASUS protocols will be deployed; followed by measuring patient outcomes. Jon Powers, Maine EMS Data Coordinator, and Matthew Sholl, MD, Maine EMS Medical Director, are involved in the project as Co-Principle Investigators or Steering Committee members. Additionally, Dr. Sholl and Dr. Nate Mick were involved in the literature review and development of the guidelines.

BENEFITS OF PEGASUS

The PEGASUS project offers Maine and the other New England states an opportunity to better coordinate patient care over a large region and to begin to bring each New England state's protocols to a closer and more uniform content. Over the next protocol updates, each New England state will be working toward more uniformity. While there may always be regional

nuances to protocols, the specific medical steps necessary to care for patients are very similar; therefore the majority of the New England states EMS protocols will begin to look more alike.

The New England EMS Guidelines project provides both a potential for work load reduction in the building of protocols, and efficiencies in terms of provider practice in different states and sharing resources for training, QI, and evaluating patient outcome. While there are many projects looking at EMS practice, such as the Resuscitation Outcomes Consortium (the ROC) or the Pediatric Emergency Care Applied Research Network (PECARN); there are few projects reviewing pre-hospital care of patients under “real life” circumstances. The PEGASUS project will create the largest US population cared for under common EMS protocols, and will offer a unique opportunity to learn about the value and importance of pre-hospital medicine.

INTEGRATION WITH THE 2015 MAINE EMS PROTOCOL

All New England states will implement the PEGASUS protocols in the second quarter of 2015. For Maine, this will mean the 2015 protocol update will come in two phases. The PEGASUS protocols (and a few others) will be implemented on July 1, 2015. The remaining EMS protocols will take effect on December 1, 2015. Maine EMS, the MDPB, and the Maine EMS Education Committee intend to make this as easy as possible for both providers and services by offering the majority of the protocol education on-line in the months prior to each protocol update.

Maine EMS and the MDPB thank you for your involvement in this project. PEGASUS and similar projects across the country are essential to help evolve the EMS system and better defend the value of pre-hospital medicine.

For further information, please refer to your regional EMS office, the Maine EMS podcasts (available at MEMSEd and iTunes; and feel welcome to attend future Medical Directors and Practice Board meetings, which are held the third Wednesday of most months at Maine EMS in Augusta.