

## Maine EMS Trauma Advisory Committee

Meeting Minutes – Tuesday, April 24, 2018

**Present:** Tammy Lachance, Pete Tilney, Gail Ross, Ben Zetterman (Phone), Amy Fenwick (Phone), Pret Bjorn, Joe Rappold, Chris Pare, Julie Ontengco, Kate Zimmerman, Bruce Chung, Lyndsey Bragg, Shaun St. Germain, Geno Murray, Merica Tripp, Rick Petrie.

Topic	Discussion	Action/ Follow Up
Called to order at 12:30 pm	The meeting was called to order by Geno Murray.	None
Minutes from January 23, 2018	There were no changes requested to either the October 2017 or January 2018 Teleconference minutes.	Motion to Approve the October 2017 and January 2018 minutes as written (Bjorn/Lachance) All in Favor, no abstentions
Case Presentation	<p>Case Presentation: MMC (Dr. Rappold). Case presented involved a male with a stab wound to the left neck. Arrived at MMC after bypassing the local hospital (Local Hospital diverted the crew). Fortunately, no involvement of great vessels, but some airway compromise.</p> <p>Discussion about the potential for missed injuries in this type of trauma. The group reinforced that policy that certain patients should never be diverted from the closest ED (Airway compromise, Serious bleeding, etc.). Dr. Rappold also spoke about management of difficult airways. The group asked Dr. Zimmerman to take the issue of inappropriate diversion back to the MDPB for further discussion.</p> <p>Tammy also mentioned that the ACS changed requirements for highest level activation by removing penetrating injuries in extremities. She asked if anyone was changing their trauma triage protocol. All of the Trauma Centers are reviewing the update, but no one has made any changes yet.</p>	None

<p>Trauma Coordinator Team Meeting Update:</p>		
<ul style="list-style-type: none"> <li>• MCOT</li> </ul>	<p>TC's reported that we are in the early planning stages for the conference. The theme will be MCI, with the Medical Director involved in the Orlando nightclub shooting coming to present. Other suggestions were a speaker from the Blood Bank speaking about preparedness and response in MCI/multi-patient incidents, Checklist development for hospital use, and communication pitfalls. Dr. Rappold offered to present and Rick will meet with him to discuss topics. Pret recommended strongly that the RRC's and MEMA be involved in the planning process</p>	<p>None</p>
<ul style="list-style-type: none"> <li>• Trauma Center Updates</li> </ul>	<ul style="list-style-type: none"> <li>• MMC – Seeing an increase in visits. Trying to get the word out about TAT/RTTD to increase participation. ATLS classes scheduled for Sept. 17 &amp; 18, 24 &amp; 25. They are seeing an increase in requests for stop the bleed, and they are trying to re-energize the falls coalition.</li> <li>• CMMC – Working on a falls prevention program for dissemination in their communities. Planning for the re-verification visit in November. Dr. Burke has been named the interim Director of the Trauma Program.</li> <li>• EMMC – Planning for fall re-verification as well. Also experiencing a significant increase in requests for stop-the-bleed training. Ready to start using the Imagetrend data bank, but waiting</li> </ul>	<p>None</p>

	<p>for Maine EMS. In response to a question from S. St. Germain, MMC and CMMC also waiting for a business agreement from Maine EMS.</p>	
<ul style="list-style-type: none"> <li>• Stop the Bleed</li> </ul>	<ul style="list-style-type: none"> <li>• The Trauma Coordinators had a very successful day at the Legislature with the S-t-B program and Rick has received a request for follow-up training for the Sergeant at Arms personnel, and this has been scheduled.</li> </ul>	None
Membership List	<p>The group reviewed the membership list as presented. The TAC requested that Rick reach out to members who have not been at meetings in a while and see if they are still interested in the TAC, and bring the updated list back to the TAC in July.</p>	TAC members to submit potentials membership candidates to Rick
Transfer of Minor Head Injury Patients	<p>Amy Fenwick: The Trauma Centers are getting a lot of requests to transfer head injury patients to the TC based on mechanism alone, and many have relatively minor head injuries, putting a significant strain on the Hospital resources as well as the issues of moving patients with minor injuries long distances... The group decided that in order to identify the scope of the problem and plan a solution, they would need to collect some data. The Trauma Centers agreed to work with Amy to gather data.</p>	None
Trauma Manager Contract	<p>Shaun notified the group that he had made the decision to not extend the Trauma Manager Contract with Rick and had instead offered the contract to Kate Zimmerman, DO effective July 1, 2018. Shaun stated that they had no issues with</p>	None

	<p>the work Rick had done as the Trauma Manager, but they wanted to go in a different direction. Pret asked the basis of the decision, and whether or not the members of TAC had been consulted. Shaun replied that he hadn't realized that he should contact the TAC membership, that he would take that under advisement, but that the decision on who to contract with was his decision.</p>	
TAT/RTTD	<p>We have a July date for the TAT/RTTD program at RFGH, and Rick is still working with PBMC, Calais, DECH, and Inland.</p>	
<p>Other Business</p> <ul style="list-style-type: none"> <li>Spine Injury Study (Zimmerman)</li> </ul>	<ul style="list-style-type: none"> <li>Dr. Zimmerman gave a presentation on the MDPB re-doing the spine injury management study that had been done previously in Maine by Dr. Burton and Jay Bradshaw. She requested that the other Trauma Centers participate in the Data Collection. MMC offered to share their IRB approval with both CMMC and EMMC as both will need to get this as well.</li> </ul>	<p>Consensus from the TAC membership to support the project.</p>
Next meeting	<p>The meeting was adjourned at 1:30 pm by Geno Murray. The next meeting is July 24, 2018 at Maine EMS; 12:30pm to 2:30pm</p>	<p>Motion to adjourn (Lachance/Rappold) All in favor</p>

Minutes Accepted 7/24/18