



REGIONAL PARAMEDIC ADVISORY COMMITTEE

Minutes- July 19, 2007

I. WELCOME

The meeting was called to order 0835 at by Carerie Kozak, RN

II. INDIVIDUAL / COMMITTEE REPORTS

A. Base Hospital Physician Report and CPAC Chris Kahn, MD

Dr. Kahn stated that Aspirin and Amniodorone would be added to the field medications paramedics can utilize for patients. These will be introduced with Fall Mandatory's.

Dr. Kahn discussed the status of the sale of Anaheim Memorial Hospital and how this may impact UCI Base. Also discussed was the position of the county to have AMMC come back up as a base hospital.

Dr. Kahn noted that July is a trying month and thanked everyone for their patience with the new residents in the Emergency Department. He encourages and welcomes open communication, no matter what the experience.

B. Orange County Communications Pat Campobasso

Pat reminded everyone that failsafe testing will start on Tuesday the 24th.

C. Stroke Great Save- presented by Dr. Steven Cramer

Dr. Cramer presented a case on a 48 yo female with acute brain attack. Great case and great save by the prehospital, ED and stroke team.

D. Base Hospital Coordinator Carerie Kozak, RN

New MICN's. Congratulations to 10 new UCI MICN's!! Maryle Olivier, Barbara Kaess, Hanadi Varvais, Peter McGann, Steve Carreon, Nicole Flores, Joy Po, Mary Slattery, Lauren Ramirez, and Patty Gleed. The MICN's in attendance were presented with their MICN pins by Carerie Kozak.

EMS week- Again this year, in celebration of EMS week, the county again hosted numerous events. This campaign honored the doctors, nurses, police officers and fire personnel and the EMT's who provide emergency services to the public. UCIMC hosted a luncheon catered by the Carl's Jr. Burger Mobile. A large turn out added to the fun had by everyone. A special award of appreciation was given to Carerie Kozak, UCI's Base Hospital Coordinator. EMS week culminated with a tailgate celebration at the Angel's baseball game on June 2nd that included food, entertainment. The general public was invited to join in with honoring their Emergency Services Personnel.

CTV- MTV Assessments- The BHC's are currently conducting an audit which looks at the assessment and designation of patients meeting trauma triage criteria. This should

be an interesting audit with a population between 300-400 patients. It was noted that there have been multiple incidences when patients meeting trauma triage criteria have been sent either BLS or ALS No Contact. Also that patients meeting CTV criteria are being designated as MTV (penetrating injuries). Adequate and thorough assessments need to be done to determine if the patient requires trauma triage and trauma designation. A trauma patient who had significant mechanism to cause injury must be exposed so an adequate trauma assessment can be performed. Base contact for designation would be indicated for these patients. The results of the audit should be completed by the end of July.

Request for Patient Follow Up Forms- Ever wonder what happened to that patient you cared for? Paramedics requesting follow up on patients can utilize these forms. They are located in the paramedic lounge and in the radio room. Once the forms are completed by the medic, they are left with the MICN. The MICN or BHC will complete the follow up and communicate the information back to you.

Backboards left at UCI – Carerie thanked the agencies that are picking up their equipment in a timely manner. Instead of averaging 40 backboards daily, UCI currently is holding 6 boards. Please continue to pick up your equipment in a timely manner. **Equipment left over 30 days will be donated.**

Standing Ovarions for Exceptional Performance:

Carerie presented three amazing cases:

Case #1- Orange Rescue 3- City of Orange Fire Department
Medic #1349- **Peterka** Medic #1540- **Shields**
OE1 crew -**Houk, Sherman and Bilek**
Date: July 13, 2007

[Patient at doctor's office with complaint of SOB.](#)

43yo female with difficulty breathing over the past two days. Discharged from St.Joes recently with history of PE. Patient went into full arrest at doctor's office. When medics arrived, patient was pulseless with agonal respirations. Skin signs were cyanotic.

[Your quick assessment and interventions were appropriate to the patient's condition.](#)

Patient was treated with high flow O2 BVM ventilations and CPR. Once patient was placed on monitor, V-fib was determined to be the underlying rhythm and patient was defibrillated. An IV was started and fluids and Lidocaine was administered.

[The care and treatment provided was excellent.](#)

Time from patient contact to 902-H- Scene time **20 minutes**

Base Hospital contact was made **13** minutes after patient contact. The information given gave a very clear picture of the patient, the presentation and ongoing assessment.

Time from patient contact to NRC- **24 minutes**

Patient was taken to CT and interventional radiology. Once she was stabilized, she was the CCU. Patient remains in the CCU. She is now extubated, awake and responding appropriately.

[You guys made a difference!](#)

Case #2- Grove Medic # 1 Garden Grove Fire Department
Medic #1635- **Pardoen** Medic #1336- **Fellner**
Date: May 21, 2007

[Patient complaining of chest pain over 2 days.](#)

65yo male with heavy chest pain and difficulty breathing over the past two days. Here on business from Houston. Patient had a HTN history. 12 lead EKG was non-specific reading NSR with possible anterior infarct. Skin signs were poor.

[Your quick assessment and interventions were appropriate to the patient's condition.](#)

Patient was treated with high flow O2 and NTG every 3-5 minutes. Patient's BP was initially hypertensive but came down following treatment. Although 12 lead EKG did not show STEMI, medics insisted that the patient bypass the nearest to go to a CVRC. The base hospital physician Dr. Burns concurred.

[The care and treatment provided was excellent.](#)

Time from patient contact to 902-H- Scene time **11 minutes**

Base Hospital contact was made **12 minutes** after patient contact. The information given gave a very clear picture of the patient, the presentation and ongoing assessment.

Time from patient contact to CVRC- **24 minutes**

Patient coded once he arrived in the ED, was stabilized and admitted directly to the cath lab. Was admitted to the CCU where a tandem heart was used.

Patient remains in the CCU and is waiting for transfer back to Houston for heart transplant. He is now extubated, awake and responding appropriately.

[You guys made a difference!](#)

Case # 3- AE1, AT2 Anaheim Fire Department

Medic #1675- **Klytta** Medic #869- **Shapen**

Date: May 9, 2007

[Motorcycle down on East bound 91.](#)

31yo female with difficulty breathing status post motorcycle crash. She was oriented X4 but lethargic. She had positive chest barrel hoop and lower back pain with multiple abrasions on her extremities. Her GCS was 15.

[Your quick assessment and interventions were appropriate to the patient's condition.](#)

Patient was designated a CTV. Transport to trauma center was expedited and treatment included oxygen, pulse oximetry, 2 large bore IV's and spinal immobilization.

[The care and treatment provided was excellent.](#)

Scene time **9 minutes**

Base Hospital contact was made 5 minutes after patient contact. The information given gave a very clear picture of the patient, the mechanism and her injuries.

Time from patient contact to PTRC- **21 minutes**

Patient admitted directly to OR. Listed are her underlying injuries:

- Pulmonary contusion with left hemothorax and right pneumothorax.
- Bilateral rib fractures
- Bilateral scapular fractures
- Pelvic fracture
- Ruptured bowel
- Grade 3 liver laceration
- Splenic injury with splenectomy.

Patient was transferred to ICU following surgery. She was discharged on day 14. She is making great progress.

[You guys made a difference!](#)

ALS NO CONTACT / ALS AIRWAY Information

	ALS Non-contact calls:	Base Contacted Calls
April	165 or 28 %	428
May	150 or 28%	395
June	130 or 25%	392

Airway Stats

April

Attempted ALS airways	26	
Successful ETT	19	
Successful Combitube	5	
Misplaced airway	0	
Successful airways placed	24/26	92%
%ETT Successful		
On 1st attempt	18/19	95%
EDD used for Verification	24/24	100%

May

Attempted ALS airways	28	
Successful ETT	18	
Successful Combitube	6	
Misplaced airway	1	
Successful airways placed	24/28	86%
%ETT Successful		
On 1st attempt	13/18	72%
EDD used for verification	16/24	66%

June

Attempted ALS airways	23	
Successful ETT	18	
Successful Combitube	4	
Misplaced airway	0	
Successful airways placed	22/23	96%
%ETT Successful		
On 1st attempt	17/18	94%
EDD used for verification	17/22	77%

★ **See Paramedic Pause Newsletter for further information**

E. Trauma Great Saves- Stephanie Lush, RN

Case #1 Anaheim 1 and AT2- **Klytta** and **Sharper**.

Presented the case of a 31 y/o female motorcycle accident case that was also the standing ovation. The case was presented in detail.

Case # 2 SAM 8- **Cooper** and **Rossman**.

Presented a case of a 25 y/o male found down with multiple stab wound to abdomen, throat and face.

Amazing Great Saves!!!

OTHER REPORTS

A. OCEMSA

Report given by Beverly Nighswonger

Data Standard Task Force- this committee is working together to standardize all the data that is collected.

Hypertonic Rock Study has been approved.

UCIMC and WMSA are rotating re-implanting schedule. This policy will be updated and included in the fall mandatory in-services.

The Reddinet version 4 upgrade was completed on June 13th. There have been some ongoing issues and a few adjustments have been made. The system is now on the microwave which is the main system. The redundant system is the internet. If any facility is having trouble with their Reddinet, please call the 800 number on the console tower.

Greg Boswell stressed the importance of doing thorough assessments on all patients. He pointed out the importance and gave the incident that occurred in England recently.

B. Saddleback Paramedic Training – no representative

C. Receiving Centers

1. Chapman Medical Center- No report
2. Medical Center of Garden Grove – No report
3. St. Joseph's Hospital– No representative

Fire Departments

1. Garden Grove- One in medic school
2. Orange City Fire- - One new medic. Putting together a committee to look at their PAU system.
3. Santa Ana Fire- no report
4. Anaheim Fire- Denise Mitchell reported: Our newest fire station, Twila Reid #11, was dedicated on July 15th. It's located across the street from WAMC in Twila Reid Park. Six AFD firefighters are doing well in paramedic training and will be beginning their field preceptor ships at the end of the month. Our new EMS educator, Kristin Thompson, has been well received by the firefighters. We're continuing to staff special medic units for all home Angel games, WWE, and any other special events with anticipated serious injuries.

D. Mercy Air– no report.

E. Ambulance Agencies & Law Enforcement Agencies– no representative

F. Roundtable- no further comments

G. Education- "Diabetic Drug Overdose and Metformin Case Review" presented by Dr. Jeffrey Suchard

H. Next RPAC October 18, 2007- Building #3- room 101

Respectfully submitted,



Carerie Kozak, RN, BSN, CEN, MICN

Base Hospital Coordinator



**REGIONAL PARAMEDIC ADVISORY COMMITTEE
UCI MEDICAL CENTER
July 19, 2007
ATTENDANCE**

BASE DIRECTOR: Chris Kahn, MD

BASE HOSPITAL COORDINATOR: Carerie Kozak, RN, BSN, CEN, MICN
Robin Houston, Administrative Assistant

EMS
Beverly Nighswonger, RN
Greg Boswell, RN

SANTA ANA FIRE DEPARTMENT
Rick Spitler, EMT-P
Chris Roelle, EMT-P

GARDEN GROVE FIRE
Richard Rounds, EMT-P
John Herrera, EMT-P
Tony Acosta, EMT-P
Pardoen, EMT-P

CITY OF ORANGE FIRE DEPT.
Shawn Smith, EMT-P
Rob Morris, EMT-P
Peterka, EMT-P

ANAHEIM FIRE DEPT
Denise Mitchell, RN
Chad Overn, EMT-P
Rick Cheatham, EMT-P
Noel Perkins, EMT-P
Kevin Klytta, EMT-P

ST. JOSEPH HOSPITAL
No attendance

CHAPMAN HOSPITAL
Tim Korber, MD

MEDICAL CENTER of GG
Dan Nadler, MD

MISSION HOSPITAL
Amy Berry, RN, MICN

OCC
Pat Campobasso

UCI MEDICAL CENTER
Leslie Barkauskas, RN, MICN
Maureen Berry, RN, MICN
Kevin Daley, RN, MICN
Lori Fish, RN, MICN
Jeffrey Suchard, MD
Christy Carroll, RN, MICN
John Urtu, RN, MICN
Mary Slattery, RN, MICN
Jennifer Sales, RN, MICN
Mary Conaty, RN, MICN
Peggi Berge, RN, MICN
Peter McGann, RN, MICN
Sanna Henzi, RN, MICN
Darlene Bradley, RN, MICN
Marla Gain, RN, MICN
Patty Gleed, RN, MICN
Hanadi Varvais, RN, MICN
Shandra Huddleston, RN, MICN
Michael Burns, MD
Maryle Olivier, RN, MICN
Stephanie Lush, RN
Scott Rudkin, MD
Mark Langdorf, MD
Dana Stradling, RN, CNS
Steven Kramer, MD
Jennifer Oman, MD