



REGIONAL PARAMEDIC ADVISORY COMMITTEE MINUTES

August 21, 2007

I. **Welcome** – Mary Massey

II. **Medical Director's Report** – Dr. Zarate

- A. Introduction Dutch Brenenstall, new ED Director replacing Angeli Leggitt who took another position in education within the Memorial Care System.
- B. PRC call panels are lacking a complete complement of specialists. The problem is worsening and affects the EMS system by increasing the need for IFTs and making it more difficult to take care of patients with needs for specialist intervention or follow-up.
- C. Base Physicians are looking at adding aspirin and Amiodarone to field medications paramedics can utilize for patients next year.
- D. The Resuscitation Outcomes Consortium Study (ROC) has been approved with NIH (the use of hypertonic saline) and is in the investigational Review Board process. Our participation should start in approximately six weeks to two months, probably some time this fall.
- E. ReddiNet Version 4 update. There have been several ongoing issues and adjustments. The microwave is the main system with Internet as back-up. One of the advantages of the new system is that HAvBED requirements can be met on the system. Problems with the conversion have included showing hospital status incorrectly, either up or down, affecting receiving centers and diverting more patients.

III. **Report** – Dr. Stratton

- A. **Mandatory Inservices.** Mandatory Inservices are being planned by EMS for January and February 2008 and a second update is scheduled for June and July 2008. Earlier Mandatories will hopefully avoid problems with scheduling during the height of fire season. Material to be covered in the first inservice will include:
 - i. Clarification of existing policies and treatment protocols
 - ii. Administration of aspirin for acute coronary syndrome. ASA decreases mortality by about twenty-five percent in these patients.

- iii. Use of Amiodarone for refractory ventricular fibrillation. Amiodarone does not increase survivability out of the hospital but does improve conversion out of ventricular fibrillation. The high cost has decreased as Amiodarone is now off patent and problems with the need to mix in the field has been overcome with the new preload, pre-mixed syringe.
 - iv. Use of short term tourniquet in uncontrolled extremity hemorrhage. The war in Iraq has demonstrated benefits to tourniquet use in these situations.
 - v. Hypertonic saline use
- B. EMS is working with the Board of Supervisors on ambulance rates. There have been many questions on rationale for a rate increase. Orange County pays below the Western United States standard. EMS is trying to represent the ambulance companies and the EMS community; otherwise, we may end up with gaps in coverage.

IV. Paramedic Liaison Nurse/QI Report - Mary Massey

- A. MTV Audit – Carerie Kozak is putting together the audit that looks at assessment and designation of patients meeting trauma triage criteria
- B. UCI has ten new MICNs. Stop in the radio room and introduce yourselves when you bring a patient in.
 - a. Maryle Oliver
 - b. Mary Slatery
 - c. Steve Carreon
 - d. Patty Gleed
 - e. Lauren Ramirez
 - f. Peter McGann
 - g. Barbara Kaess
 - h. Hanadi Varvais
 - i. Joy Po
 - j. Nicole Flores
- C. Reimplantation T-15 has minor language changes suggested. There are a limited number of surgeons willing to participate in this program. (Two at WMSA and two at UCIMC). Only five percent of patients referred to the centers for replant care actually go to surgery. At this point UCIMC and WMSA are alternating call days and information will be included in the 2008 Mandatory inservices and will recommend Base contact to determine receiving center.
- D. CVA. There are approximately five thousand CVAs per year in the county. EMS and various committees are looking at the advantages of stroke centers versus non-stroke center care.
- E. Statewide Medical Health and Disaster Exercise for 2007. The Statewide Exercise is scheduled for October 25th from 0500-1700. The scenario calls for multiple IAPs, shift changes and reporting off to oncoming HICS personnel and is designed to meet several Joint Commission, NIMS and NFPA requirements for hospitals.

- F. Howard Adams was recognized on August 16th at Saddleback College for his outstanding service and achievements.

VI. Other Agency Reports -

- A. **Anaheim Memorial Medical Center** – The hospital sale did not go through at this time. The State Attorney General did not approve the sale. The state will provide additional information in September.
- B. **Anaheim Fire** –
- i. The Twila Reid Station, Station 11 was dedicated on July 15th. The station is located across from WAMC in the Twila Reid Park
 - ii. The department will be hiring 6-8 firefighter/medics
 - iii. Six firefighters are in medic school and are currently in their field preceptorship and doing well
 - iv. Anaheim Fire ran on five field births in August
 - v. Denise is now a grandmother on August 18th to Logan Ryan, who weighed in at 6 lb, 13 oz and had Apgars of 8 and 9. He was born at Kaiser Anaheim.
- C. **Anaheim General** – No representative
- D. **Kaiser Permanente/Anaheim** – The Irvine Kaiser Hospital is scheduled to open in May and building is progressing on the Kraemer facility. Kaiser Hospital- Anaheim, will be implementing the new ESI (emergency severity index) triage system as of September 1st 2007. This is an evidenced based 5 tier triage system with >90% inter-related reliability. It will help to streamline our front end processes.
- E. **West Anaheim Medical Center** – No representative
- F. **Western Medical Center, Anaheim** – No representative
- G. **OCC** – No representative
- H. **Mercy Air** – No representative

Education: Sam Stratton, MD
12 Lead EKG

Attachments:

June, July and August Anaheim Fire The Messenger
Orange County Cool Centers
OCEMS July 11 CPAC Report
Timely Topics in Emergency Care