



COUNTY PREHOSPITAL ADVISORY COMMITTEE

Wednesday, July 12, 2023 – 1:00 p.m.
Location: HCA Conference Room 433

MINUTES

MEMBERSHIP / ATTENDANCE

MEMBERS

- Theodore Heyming, MD
- Jon Cline MD
- Robert Granata, MD
- Matthew Hunt, MD
- Ikssoo Kang, MD
- Eric McCoy, MD
- David Ngo, MD
- Kelly Unger, MD
- Robert Katzer, MD
- Claus Hecht MD
- Shira Schlesinger, MD
- Julia Afrasiabi, RN
- Ruth Clark, RN
- Laura Cross, RN
- Cyndie Strader, RN
- Whitney Patnode, RN
- Jill Patt, RN
- Heidi Yttri, RN (excused)

REPRESENTING

- BHPD – Children’s Hospital of Orange County
- BHPD – Mission Hospital
- BHPD – Orange County Global Med. Ctr.
- BHPD – Hoag Hospital
- BHPD – St. Jude Medical Center
- BHPD – UCI Medical Center
- BHPD – Huntington Beach Hospital
- BHPD – Huntington Beach Hospital
- Anaheim Fire & Rescue
- Orange County Fire Authority
- Newport Beach Fire Department
- BHC – UCI Medical Center
- BHC – Orange County Global Med. Ctr.
- BHC – Mission Hospital
- BHC – Hoag Memorial Hospital
- BHC – Children’s Hospital of Orange County
- BHC – Huntington Beach Hospital
- BHC – St. Jude Medical Center

MEMBERS

- Jeff Lopez, EMT-P
- Dave Barry, EMT-P
- Patrick Dibb (excused)
- Patty Gleed, RN (excused)
- Justin Horner, EMT-P

REPRESENTING

- Representing Huntington Beach Fire Dept.
- Representing Anaheim Fire & Rescue
- EMT Training Programs
- Paramedic Training
- Fire Chiefs’ EMS Committee

HCA/OCEMS STAFF PRESENT

- Carl Schultz, MD
- Gagandeep Grewal, MD
- Mike Noone, NRPT
- Almaas Shaikh, MD
- Adrian Rodriguez
- Jason Azuma, EMT-P
- Philip Grieve, EMT-P
- Kristen Karpow, RN
- Drew Bernard
- Erica Moojen
- Eileen Endo
- Justin Newton

- EMS Medical Director
- Associate EMS Medical Director
- Assistant EMS Administrator
- Deputy County Health Officer
- EMS Performance Chief
- OC-MEDS Coordinator
- EMS ALS Coordinator
- EMS Systems & Standards Chief
- EMS Specialist
- EMS Office Supervisor
- Office Specialist
- Program Supervisor II

GUESTS PRESENT

NAME

- Errol Barrientos
- Abigail Baur, RN
- Sydney Bell
- Samara Eljaouheri
- Daniel Graham
- Bryan Johnson, RN
- Jodee Lejniaks, RN

REPRESENTING

- Emergency Ambulance Service
- Orange County Fire Authority
- UCI Medical Center
- Huntington Beach Fire Dept.
- Liberty Ambulance Service
- Orange City Fire Dept.
- Hoag Memorial Hospital

NAME

- Julie Mackie, RN
- Gerald Otteson
- Jenael Rosenberg, RN
- Kristin Thompson, RN
- Jacob Wagoner
- David Yoon
- Kim Zaky, RN

REPRESENTING

- Mission Hospital
- Mercy Air Service, Inc.
- Hoag Memorial Hospital
- Newport Beach Fire Dept.
- Lynch Ambulance Service
- Hoag Memorial Hospital
- UCI Medical Center

I. CALL TO ORDER

The meeting called to order by Dr. Robert Katzer who acted as Chair.

II. INTRODUCTIONS/ANNOUNCEMENTS

Dr. Carl Schultz introduced Kristen Karpow, RN, in position of EMS Systems and Standards Chief.

III. APPROVAL OF MINUTES – Shira Schlesinger

Minutes from the May 10, 2023, meeting approved as submitted.

IV. OCEMS REPORT

- Medical Director’s Report – *Dr. Carl Schultz reported:*
Seeking feedback regarding a number of policies issues that affect paramedics and prehospital community.
- Health Emergency Management (Disaster Report) – *Dr. Carl Schultz reported:*
Seeing low-level COVID cases. The COVID case reports from UCI now contain three lines instead of several pages. Transport volume is up.
- Ambulance Patient Off-Load Time – *Jason Azuma*
Presented the EMS website APOT data. White line shows total transport volume by month in system. It is higher on average now than pre-pandemic. Blue line is the 90th percentile APOT. Yellow line is the mean benchmark for APOTs. These data are current up to June 30.

- **Bi-Directional Data Exchange Project – Jason Azuma**
The project is rolling forward and trying to add all hospitals. The hospitals we are working with now are Kaiser (2), Prime (All), and Providence (most hospitals) and these facilities will be exchanging data. We are seeing progress as all hospitals are moving forward to participate.

Dr. Katzer received good feedback from physicians seeing live data. Starting to push the data out to the paramedics. Want an elite inbox to get feedback. Exists for EMTs and Medics.

Dave Barry mentioned that the barcode process worked sometimes and other times, not.

Jason Azuma is finding out that hospitals have multiple bar codes for different things. This is the biggest challenge for Medics.

- **Transition to NEMSIS V3.5 – Jason Azuma**
The Data Dictionary is ready. Training video tutorials are available and talk about implementation of new system. These are ready to go now for system vendors, all providers, 911, private BLS & ALS. OCEMS has created a chart with color-coded timelines to keep everyone on track. Policy 300.31 reporting conditions to validate run form. Validation rules were updated on 6/30/23.

V. **UNFINISHED BUSINESS**

- **Updated Burn Procedure – PR-03 – Dr. Carl Schultz**
This procedure will be posted October 1. An image of a palm has been added to remind the paramedics that the patient's palm size represents 1% of body surface area. Children's percent of body surface area numbers add up to 99%. 1% was not that critical. Looking at 10% or more as indicating need for burn center evaluation. Simple chart. It was suggested to label 1-4 years or 5-9 years. A question was asked to change head 20-16 to get extra percent. Dr. McCoy mentioned that it was decided to take off the fractions of .5 to make calculations simpler.

VI. **NEW BUSINESS**

- **Peds substance abuse - Dr. Carl Schultz**
The wrong version (SO-P-85) is attached. The intended version contained language requiring base hospital contact for only one toxic exposure. The subcommittee decided to recommend removal of requirement for BHC from the Suspected Stimulant Intoxication section.
- **ALS Intervention – AMA - Dr. Carl Schultz**
Currently, the performance of an EKG by paramedics, with a subsequent patient AMA is the only indication for base hospital contact. San Diego, Los Angeles & Riverside all have policies if patient signs out AMA after an ALS intervention, base hospital contact is required. Base hospital contact provides the opportunity to change the minds of 15-20% of patients who sign out AMAs. MICN or Physician has changed the AMA clinical outcome. Orange County EMS has not yet required this. Dr. Schultz wants to change OCEMS policy to require base hospital contact if an ALS procedure was done. One item listed as an ALS procedure, use solely of the cardiac monitor without getting an EKG, will be removed.

Dr. Julia Afrasiabi agrees, and with that exemption, she feels an ALS procedure should include anytime something is put on a patient, like pulse ox.

Jeff Lopez asked about the intend for making base hospital contact. Would not consider pulse ox an ALS procedure, but it takes an ALS person to interpret it, so it is. Placement of 3-lead monitor is not included. Dr. Schultz can live with just including obtaining a 12-lead EKG. Regarding use of glucometer, EMTs can now do glucometer checks. If use a glucometer and get reading less than 60 or more than 400, that would be considered an ALS procedure. A glucose reading of 200 is BLS procedure.

A recommendation was made to add administration of IV or IO. 5% dextrose solutions and normal saline to the line dealing with OCEMS-approved medication. Suggested to consolidate bullet points. Will do this.

Dave Barry – Albuterol administration is a daily occurrence. Patients get an initial dose of albuterol before medics get there. After albuterol, patient feels great to sign out AMA when medics get there. Is there a way around this? Dr. Schultz replied if albuterol is given by a person before medics get here and they then want to sign out AMA that would not trigger base hospital contact. Only if the albuterol is given by a paramedic would a subsequent AMA trigger base hospital contact.

Ruth Clark – Narcan is over the counter. If paramedic gives Narcan, it is a different thing. MICNs get calls for this. This is the same as albuterol. If someone is given Narcan by a non-EMS person before paramedic arrival, base hospital contact is not required. If given by an EMT/Paramedic, even intranasally, contact is required.

Julia Afrasiabi – excluding intranasal (naloxone), 4th open bullet from the top. Administration of OCEMS. Carrying intranasal naloxone only. Cannot get enough of 4mm box. If Paramedic gives it, then make base contact.

- West Anaheim Medical Center re-designation as CVRC – *Kristen Karpow*
WAMC underwent cardiac redesignation. Survey showed gap in two areas. First deficiency was lack of annual performance data submission. Second deficiency was lack of community outreach project. OCEMS is pleased with progress. One other recommendation was suggested to address ne other minor deficiency. The issue was problems with field transmission of EKGs. WAMC could receive the EKGs via fax but not electronically. The solution will be to create Zoll accounts for all the ED charge nurses. They were not capturing 100% of EKGs but this intervention should fix that. Refine & improve data submission compliance. Give 1-year conditional designation.
- Guest Speaker Presentation on Sepsis – *Jodee Legnieks, RN*
Philip Grieve introduced Jodee Legnieks, RN, Sepsis Program Manager at Hoag. Jodee gave an excellent presentation of Sepsis recognition and the many people behind this project. The power point will be made available on request.

VII. **Advisory Committee Reports**

- **Base Hospital Coordinators - *Julia Afrasiabi reported***
Competencies for MICNs segway into next fall class.
- **Orange County Nursing Leadership – *No report***
The ED Nursing Leadership has not selected a new representative yet.
- **Orange County Fire Chiefs EMS Committee - *Justin Horner reported***
Fire Chiefs met in June. Focus was on APOT. In addition, they are working to address increases in 911 IFT transports. One issue regards getting a copy of initial ePCR. The solution could be printing the ePCR. This would help the receiving hospital address the question, “Why didn’t you transport patient to us in the first place?” The answer is to do a merge before you leave the sending hospital.

CPR – Hbfd is working with hospital. Will meet again the first week in August.
- **Facilities Advisory Subcommittee – *Carl Schultz reported***
Policy 645 was reviewed and discussed. This is the policy that governs the revoking and suspending of all designated entities, including hospitals, training programs and providers. Addressed Chapman Global. Policy is 30 years old. In process of revising policy. Public comments will be solicited beginning sometime in August. This process will occur by establishing a public website to receive comments.

VIII. **NEXT MEETING** – Wednesday, July 12, 2023, at 1:00 p.m.

X. **ADJOURNMENT**

The meeting adjourned at 2:17 p.m.