

## CRITICAL CARE SUBCOMMITTEE

| MINUTES          | DATE<br>August 19, 2014   | TIME<br>10:30 a.m.   | LOCATION<br>ODPS – Division of EMS – Conference Room C4-9<br>1970 W. Broad St., Columbus, Ohio 43218 |
|------------------|---------------------------|--|--|
| <b>ATTENDEES</b> | <i>Committee Members:</i> | Julie Anne Rose, Chair Robert Barcus, Daniel Ellenberger, Amy Haughn, Adam Howard, Michael Jackson, Marisa Maxey, Stephanie Steiner, Linda Hines, William Longworth, Natasha Meinert, Keith Wohlever |  |
|                  | <i>(EMS) Staff:</i>       | Melvin House, David Fiffick, Connie White and Vesna Bogdanovska  |  |
|                  | <i>ODPS Staff:</i>        | None   |  |
|                  | <i>Visitors:</i>          | Kent Appelhans, Tim Pickering, Tom Allenstein, Stephanie Rutter, Susan Ciarlariello and Dustin Whitaker  |  |
| <b>ABSENT</b>    | <i>Committee Members:</i> | Brian Byrd, Lori Mizla, Steven Steinberg, Scott Swickard, Louise Weller Scott Swickard.  |  |

### A G E N D A   T O P I C S

| TOPIC             | <b><u>Welcome &amp; Review / Approval of June 17, 2014 minutes</u></b>  |          |
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| <b>DISCUSSION</b> | <p>The meeting was called to order at 10:38 am<br/>                     The meeting minutes from June 17, 2014 were reviewed and approved without change.</p> <ul style="list-style-type: none"> <li>• First: Linda Hines</li> <li>• Second: Keith Wohlever</li> </ul> <p>None Opposed, None Abstained, Minutes Approved.</p>                         |          |
| TOPIC             | <b><u>Good of the Order</u></b>   |          |
| <b>DISCUSSION</b> | <p>Mr. Fiffick opened the meeting with a discussion on the 5 year rule review .for MoICU, OAC 4766-4. Although the review is not due until April 2017 it is never too early to get started. Ms. Meinert and Ms. Hines volunteered to form a work group and start the process. Ms. Rose pointed out that anyone can participate in the work group.</p> |          |
| ACTION ITEMS      | PERSON RESPONSIBLE  | DEADLINE |
| None              | None  | None     |

| TOPIC             | <b><u>SCT Language changes</u></b>   |
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| <b>DISCUSSION</b> | <p>Discussion continued from the last meeting regarding the current “Scope of Practice” and distinguishing the differences between ALS and Critical Care transports.</p> <p>Mr. Appelhans advised he contacted the OAMTA and the OACCT as directed from the last meeting. He advised each organization to survey their members for comments on the scope of practice and how it relates to ALS and Critical Care transports. Mr. Appelhans confirmed he only received 2 responses.</p> <p>Discussion continued on the requirement of additional training for paramedic to perform skills outside the normal scope of practice of a paramedic, ALS Transport, but permitted through protocol from the medical director, SCT transport. Ms. Rose pointed out that there needs to be a clearer distinction between what a paramedic is permitted to do in the scope of practice and what additional training is needed in order to provide SCT transports. The current scope of practice does not clearly distinguish the two types of transports. Ms. Rose provided copies of the current scope of practice to illustrate. The use of ventilators by paramedics was brought up as an example. The term ventilator is a broad term. There are many types of ventilators on the market. There are ventilators strictly for cardiac arrests, others that are highly specialized and everything in between. The type of ventilator a service is using will dictate the kind of and amount of training needed. The scope of practice should</p> |

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define this or it should be taken out of the scope of practice for a paramedic.

There was also discussion on ALS units transporting patients, younger than 16 years of age, on ventilators. This is a violation of the scope of practice. The committee agreed this should not be allowed.

Another item discussed was the initiation and monitoring of Thrombolytic s. Services are being faced with patients that are at home, receiving Thrombolytic therapy and need to be transported in an emergency or non-emergency basis. Ms. Rose indicated that there is a current “white paper” written on the EMS web page. The paper is entitled “ Pre Hospital Transports of Patients with Pre-Existing Medical Devices or Drug Administration” from October 2013. In conclusion, the EMS provider confronted with a pre-hospital patient with a pre-existing physician-ordered medical device or drug administration not covered in the EMS provider’s respective scope of practice should provide usual care and transportation while maintaining the pre-existing MDDA, if applicable. Concerns or questions regarding real-time events associated with a pre-existing MDDA should be directed to the relevant Medical Control Physician. Concerns or questions regarding previous, recurrent, or future pre-hospital transportations with a pre-existing MDDA should be directed to the appropriate EMS Medical Director and legal counsel.”

The committee continued discussion on additional training noting that the training must be conducted and approved by the medical director well in advance of any transport. In other words, the training cannot be done at the time of a transport. The committee agreed

Ms. Rose and Ms. Maxey will contact the “Medical Oversight” committee to get their input on additional training for paramedics.

| ACTION ITEMS | PERSON RESPONSIBLE | DEADLINE |
|--------------|--------------------|----------|
| None         | None               | None     |

| TOPIC | <b><u>Appropriate use of Air Medical Services</u></b> |
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| DISCUSSION | <p>Mr. Appelhans asked for discussion on the appropriate use of air medical services. He received an e-mail from Ms. Maxey requesting the collection of data in order to determine if air medical services are being used correctly. Data needs to be collected on such things as, inter-facility transports, on scene transports, if actually needed on scene and patient discharge from ED after transport. The data can be used to determine if air medical services are being used appropriately as well as well as establishing state wide standards.</p> <p>It was pointed out that the Trauma Committee may have some of the data collected already.</p> |
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| ACTION ITEMS | PERSON RESPONSIBLE | DEADLINE |
|--------------|--------------------|----------|
| None         | None               | None     |

| TOPIC | <b><u>KKK / NFPA Standards</u></b> |
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| DISCUSSION | <p>Critical Care Subcommittee members are encouraged to stay for the Medical Transportation Committee Meeting and discuss for KKK / NFPA Standards, which was starting at 12:30 pm the same day.</p> |
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| ACTION ITEMS | PERSON RESPONSIBLE | DEADLINE |
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| None                | None  | None            |
| <b>TOPIC</b>        | <b><u>Open Discussion</u></b>   |                 |
| <b>DISCUSSION</b>   | Considering that this is a new committee, discussion continuing with looking for topics what needs to be addressed to this meeting.   |                 |
| <b>ACTION ITEMS</b> | <b>PERSON RESPONSIBLE</b>   | <b>DEADLINE</b> |
| None                | None  | None            |
| <b>TOPIC</b>        | <b><u>Adjournment</u></b>   |                 |
| <b>DISCUSSION</b>   | Meeting was finished at 12:15 pm.   |                 |
| <b>TOPIC</b>        | <b><u>Next Meeting</u></b>  |                 |
| <b>DISCUSSION</b>   | <p style="margin: 0;"><b><u>Tuesday, October 18, 2014 at 1:00 pm:</u></b>      Meeting Room C4-9&amp;10<br/> ODPS, Division of EMS,<br/> 1970 W. Broad St.,<br/> Columbus, Ohio 43223</p> |                 |
| <b>TOPIC</b>        | <b><u>Minutes Approved</u></b>  |                 |
| <b>DISCUSSION</b>   | _____   | _____           |
|                     | Julie Rose, Chair   | Date            |