

## **EMERGENCY MEDICAL SERVICES MEDICAL CONTROL BOARD**

December 7, 2012

The Pinellas County Emergency Medical Services Medical Control Board met in a regular session at Public Safety Services, First Floor Conference Room 130, 12490 Ulmerton Road, Largo, Florida, at 9 A.M. on this date with the following members present:

Dr. Roberto Bellini, Mease Countryside Hospital  
Dr. Cecele Murphy, St. Anthony's Hospital (Conference Call)  
Mr. Brian Flynn, Palms of Pasadena Hospital  
Mr. Stephen Daugherty, Northside Hospital  
Dr. Joseph Namey, Pinellas County Osteopathic Medical Society  
Dr. Hiten Upadhyay, Bayfront Medical Center

### Members Absent:

Dr. Stephen Haire, Morton Plant Hospital (Vice-Chair)  
Dr. Henry Kurusz III, St. Petersburg General Hospital  
Mr. Keith Neeley, Bay Pines Veterans Administration Medical Center  
Mr. Glenn Waters, Morton Plant Mease Healthcare  
Dr. Paula Pell, All Children's Hospital (Secretary)

### Also Present:

Craig Hare, Public Safety Services  
Dr. Angus Jameson, Associate EMS Medical Director  
Dr. Donna Dooley, Associate EMS Medical Director  
Don Crowell, County Attorney's Office  
Mark Postma, Sunstar Paramedics  
Greg Woodrum, Public Safety Services  
Assistant Chief William Scott, Largo Fire Rescue

## **CALL TO ORDER AND ROLL CALL**

Mr. Flynn called the meeting to order at 9:45 A.M. Roll was taken and it was determined that there was a quorum present. There were six voting members in attendance.

## **APPROVAL OF MINUTES**

The minutes of the November 7, 2012 meeting were presented for approval. The minutes were approved unanimously.

## **2013 MEDICAL OPERATIONS MANUAL REVIEW OF PROPOSED CHANGES**

Mr. Crowell briefed that there is some language that needs to be added or reworded to update the protocols from a legal perspective. These minor changes will be part of the motion to approve along with Dr. Jameson's clinical updates.

Dr. Jameson briefed the Medical Control Board on proposed changes to the following protocols within the Medical Operations Manual:

Protocol 2.2 On-Line Medical Control (OLMC) – Hailing  
Protocol 2.3 On-Line Medical Control (OLMC) Consultation Criteria  
Protocol 4.4 Acceptance and Refusal of Care  
Protocol 4.5 EMS Cognitive Examination  
Protocol 4.6 Refusal of Care Algorithm  
Protocol 4.8 Inclusion and Exclusion Criteria for CPR  
Protocol 4.9 Do Not Resuscitate Orders  
Protocol 5.3 Abnormal 12 Lead ECG Findings  
Protocol 5.4 Cardiac Arrest Perfusion Program (CAPP) Foundation  
Protocol 5.6 Medical Cardiac Arrest  
Protocol 5.7 Acute Coronary Syndromes (ACS)  
Protocol 5.8 Tachycardia  
Protocol 5.10 Adult Post-Resuscitation Care  
Protocol 5.11 Ventricular Ectopy  
Protocol 5.12 Congestive Heart Failure/Pulmonary Edema/Cardiogenic Shock  
Protocol 5.21 Anaphylaxis and Allergic Reactions  
Protocol 5.25 Poisonings and Overdoses  
Protocol 5.26 Pain Management  
Protocol 5.29 Airway Obstruction  
Protocol 5.31 Stroke and Transient Ischemic Attack (TIA)  
Protocol 5.32 Hypertensive Urgency/Emergency  
Protocol 5.34 Nausea and Vomiting  
Protocol 5.38 Spinal Motion Restriction  
Protocol T.2 Tactical Incident Medical Supportive Care  
Protocol 6.3 Hospital Bypass and Selective Diversion Policy  
Protocol 8.16 NuMask  
Protocol 9.22 Haloperidol

There was discussion on the application of Do Not Resuscitate (DNR) Orders.

Dr. Bellini made a motion to amend Protocol 4.9 to say that if there is a relative at the scene, and they are stating that there is a DNR, that resuscitation should be stopped and On-Line Medical Control will be called and a physician can authorize it. Dr. Upadhyay seconded the motion and it passed unanimously.

Dr. Bellini made a motion that the changes to the protocols be approved as presented by Dr. Jameson. Dr. Namey seconded the motion and it passed unanimously.

## **OPEN FORUM**

Mr. Hare said that he and Dr. Jameson would be working to get the system on a longer plan for protocol improvements to avoid needing to call last minute meetings. Mr. Hare thanked the group for meeting on short notice.

Mr. Postma asked what the plan was for rolling out the protocol changes to the field.

Dr. Jameson answered that he would be meeting that afternoon with the EMS Coordinators to give them a similar presentation and make sure that they understood the rationale behind the protocol changes.

Dr. Jameson added that the CME staff is already beginning to develop training that integrates the protocol changes into future CME training. Dr. Jameson said that he anticipates the CME training to be ready to go somewhere around the middle of January 2013.

Mr. Postma reinforced that he is concerned that there are a lot of protocol changes being planned and because there are over 1,000 clinicians in the system he does not feel that online CME is adequate to educate the system.

Mr. Postma informed the Medical Control Board that from the perspective of his company it would cost from \$60,000 to \$70,000 dollars to bring in 600+ employees for a three hour training session.

Dr. Jameson addressed Mr. Postma's concern by stating that there are not that many clinical changes involved and that most of the five to ten changes are actually deletions or procedures that are being removed so the training is not as cumbersome as one might think and can be conducted online.

Dr. Upadhyay commented that the presentation that was given to the Medical Control Board today was very effective and he felt that if it was given to the field the changes would be easy to understand.

Dr. Jameson agreed and said that he would be giving additional presentations to system coordinators.

### **NEXT MEETING**

Mr. Hare briefed that staff would work to come up with a set quarterly meeting schedule for 2013 and would communicate those dates to the Medical Control Board as soon as they were available.

### **ADJOURNMENT**

Mr. Flynn adjourned the meeting at 10:40 A.M.

An audio recording of this meeting as well as any correspondence received is on file at Public Safety Services – EMS Division.