

## **Minutes of Municipal EMS Board Meeting held on January 23, 2007**

The January 23, 2007 meeting of the Municipal EMS Board was called to order by Dr. Michael Levy at 7:15am in Room 830, City Hall at 632 West 6<sup>th</sup> Avenue in Anchorage, Alaska.

### **Present**

Dr. Michael Levy, Chair  
Dr. Tim Silbaugh  
Dr. Sami Ali  
Dr. Matthew Wolf  
Tim Garbe, FF/PM

### **Excused**

Mary Leemhuis, RN  
Dr. Frank Sacco  
Dr. Richard Brodsky  
Dr. Keith Winkle  
Dr. Gilbert Dickie

### **Absent**

(Barbara Simonsen, RN  
has resigned EMS Board.)

### **AFD Staff**

Soren Threadgill, Deputy Chief of EMS  
Steve Poggi, Chief Medical Officer  
James White, Deputy Chief, Training  
Michael Crotty, Chief Medical Officer  
Jim Foster, Chief Medical Officer  
Molly Cullom, EMS Support Supv.  
Rhodora Mallari, EMS Data Associate

Erich Scheunemann, Chief Medical Officer  
Mark Monfore, Firefighter/Paramedic

### **Guest**

Denis C. LeBlanc, Municipal Manager  
Bruce Bartley, Chugiak VFD Fire Chief  
William Chadwick, Girdwood FD Fire Chief

### **Approval of Minutes from Last Meetings**

Approval of the November 28, 2006 Board minutes was postponed by Dr. Levy due to lack of quorum.

### **Agenda Changes & Approval**

No changes to Agenda.

### **Old Business**

#### **RMS Replacement Update: Presented by Mike Crotty, Chief Medical Officer**

- First Watch Biosurveillance software: Purchased and installed; interfaces are essentially written. Configuring the first custom trigger which would be a STEMI trigger to alert key players starting with Dr. Levy and possibly alerting some local cardiologists.
- The ePCR client: We have narrowed out two of four vendors, conducting oral interviews with top two next. Anticipate decision by end of week. Project budget consists of two grants: 2005/2006 State DHS grants, and the 2005 grant money must be expended by end of March. We are hoping to move forward this summer -- hopefully by July.

## **Reports**

### **Administration: Presented by Soren Threadgill, Deputy Chief of EMS**

- License/Certification renewals
  - AFD renewed its State certification to operate as an ALS Ground Ambulance provider in December 2006.
  - Transcare renewed its MOA license in December 2006.
  - Expiring MICP licenses renewed at the end of 2006.
- Credentialing Currency Competency project
  - Project starts on February 1<sup>st</sup>, entails that every operational line MICP is to get 10 patient contacts, initial assessment through transport, hand off to ED staff, and completion of PCR.
- Meeting Thursday to establish goals & objectives for 2007/2008 - will include on duty Ops BC's, all the CMOs, DC of EMS, Medical Director and the Fire Chief.
- Preparing the latest version of the MOM 2007; significant changes being made.
- Revivant AutoPulses are to be upgraded throughout inventory fleet to reflect the most current American Heart Association standards.
- First Watch configured soon for STEMI alert modification.
- New SOG titled Concealed and Unsecured Weapons to be published shortly: Will affect the ER when we bring in patients carrying a weapon – they are to contact security and can choose to contact APD. Security will meet the ambulance. There was an incident about one month ago and this policy will address such issues.
- We will be receiving three new ambulances in March. Chugiak VFD is slated for one and as well as Medic 11.
- Vasopressin memo: Went into affect yesterday and reflects the AHA standard. We will be using vasopressin for the first round medication in all pulseless arrests rather than epinephrine 1:10,000.
- CSP/Transfer Station update: Almost 20,000 intakes in 2006 with an average January high of 55. 86% of the nights a van has been pulled to staff the Transfer Station (equals 39 out of 45 nights). Transfer Station facility undergoing some safety upgrades - Chiefs Goodrich, Threadgill and AFD Liaison Molly Cullom met with NANA/Purcell management to review safety upgrades. AFD will put in a grant request for the video upgrade.

### **Medical Director's Report: Presented by Dr. Levy, AFD Medical Director**

- Other medical director's/VFD updates
  - Dr. Silbaugh (Transcare): Updating our standing orders, spending a little time with them with the new MOM to make Transcare in line with Anchorage Fire Department, otherwise no changes. Dr. Levy adds they'll work on together.
  - Chief Chadwick (Girdwood): Record number of calls last year reaching 330 responses. Continuing to take up the slack from south of Girdwood - Whittier situation is not any better. Almost 30 responses

so far for 2007. Dr. Levy asks if snow encumbering efforts - Chief Chadwick comments it's creating some real problems but they are set up with snow machines and sleds to at least evacuate patients.

- Ambulance wreck & injury last month: An AFD paramedic was significantly injured; others sustained injuries that required evaluation in the ER. We must continue to focus on safety in transports and for our people. Dr. Levy noted that Nadine Levick, scheduled for our June Resuscitation Conference, is a leader on ambulance safety.
- AFD released number of paramedic interns: Rhett Paulson and Paul Tutko finished their internships and two others were recently released. Another exit interview coming next week, so probably 6 new paramedics released within the month.
- Currency in credentialing component: Structure component has to do with old quality assurance issue. Its goal is making sure that people have had enough of their psychomotor-dependant skill set to be competent and evaluated. Another side is paramedics who are not working regularly on the MICU get the opportunity to ride periodically to keep skills current (CMOs, Engineer/Paramedics and Captain/Paramedics).
- Data project: We a talented paramedic on light duty (FF/PM John Baumeister) assigned to EMS Admin who is pulling data from the servers. We're now searching for intubation numbers, successes and not, sorted by MICP. Similarly with IV's, we can now sort and review.
  - Additionally, FF/PM Baumeister has found a better way to get/present time stats. We had concerns with previous methods that may have led to inaccuracies because of the way we staff ALS engines. Now we're leveraging this other project, intubations and IV's, and searching by the person's number and rank. This also can reflect ALS-designated rigs.
- Epstein template: We're having problems obtaining such data as accurate ROSC. We will begin notifying Dispatch of ROSC – another time stamp will be on the records.
- CARES Project: Starting to enter data into nationwide database – going well.
  - Hospital consent issues: ARH has finally signed off on the data use agreement. Need other two hospitals to find someone willing to sign.
- King airway - a better device than the combitube we're currently using. It's a little smaller, easier to carry, thinner and tapered so fewer insertion problems. Addresses a wider body habitus variety; we would like to transition to these.
  - Dr.Silbaugh asks if this is a new device. Dr. Levy indicates has been out for a couple of years and the military has adopted its use. Dr. Silbaugh asks if it's the same idea as a double chamber - Dr. Levy states is a double chamber but its one balloon, so a single inflation does both the pharyngeal and the esophageal cuff. It basically acknowledges that what you have is an in-place bag valve mask.
  - Talking to other people and other systems, reports are very good in success rates and a lot easier to use. Falls into the bigger issue nationwide whether EMS should/should not be intubating in the field;

some systems are actually going so far as using this device and not worrying about ET tubes and tracheal intubations. Something in evolution, but probably a good direction to go, per Dr. Levy.

- Chief Threadgill referenced vasopressin – we use vasopressin 2 doses in a asystole based on NEJM articles; there has been subsequent data which shows that we are not able to substantiate that. AFD data review shows 2 doses of vasopressin for asystole probably results in more patients transported to hospital with no better outcomes. Dr. Levy indicates we will move back to just single dose vasopressin use. Also to expand this vasopressin as the first line drug for basically all encountered rhythms, so PEA, systole and VFib and Pulseless VTach as just a way to simplify things. It may work better than epinephrine, the data certainly shows it works no less well than epinephrine.
- Old MOM will be replaced and be updated.
  - While it's been put out in memo form, realize if you look at the MOM 2006, we're delivering one shock, CPR prior to shock, etc... MOM still has 3 shocks.
- Hydroxocobalamin: There was interest about our expiring Lily kits for cyanide poisoning, replacing them with hydroxocobalamin. It's \$1000 per dosing, not been proven to be used, and has a 2 ½ year shelf life. Dr. Levy recommends letting it mature on its own.
- TB exposures: There's a increasing city-wide upsurge of confirmed cases, especially in high risk groups such as homeless populations:
  - Dr. Chandler with MOA DHHS sent out an informational note. AFD trying to increase awareness within transporting patients and anytime we are in face to face contact. To reduce exposure risks, people should be masked up; masked person may depend on setting, etc.
  - Were going to try to move into that with CSP as well. It's a more challenging population to mask, so requires the people taking care of them be masked.
- New MAB Chair needed: If you are interested or have recommendations, please provide information to Molly Cullom as point of contact for nominations; we can vote next time with a quorum.

**Training: (Not discussed.)**

### **New Business**

None

### **Calls for the 'good of the order'**

Barb Simonsen is legendary in real contributions to the organizations here and across the State. Need to figure out a way to recognize her as she so well deserves. John Hall is working on a plan – so it will be something good.

### **Adjournment**

The January 2007 EMS Board meeting was adjourned at 7:35 am without a motion.