

Regional MAC Meeting
May 27, 2009
Village Tavern Restaurant
Lock Haven, PA

Attendance:

Clifford Neal, Regional Medical Director
Jim Urban, S MEMSC Staff
Rich Kelley, Mt. Nittany Medical Center
Sandy Foster, Moshannon Valley EMS
Kent Knable, Centre LifeLink EMS
David Gingrich, Goodwill Hose Co. Ambulance
Rhoda Yoder, Lewistown Medic 29
Dave Jones, University Ambulance
Dan Probst, Lock Haven Hospital
Ron Shearer, Lock Haven Hospital
Ann Banfill, Lock Haven EMS
Gerard Banfill, Lock Haven EMS
Matt Rodgers, Lock Haven, EMS

Minutes from the meeting held at Mt. Nittany Medical Center were approved on a motion by Kent Knable with a second by Dave Jones. Motion passed.

State MAC:

Dr. Neal gave a report from the State MAC meeting. The revision to the Act is waiting to be signed by the governor. The goal was to have it signed during EMS Week, but that didn't happen. There were no major changes, but there was a minor change with the EVOC requirement.

There is funding available for Wellness and Safety Studies.

Medical Directors have been reviewing the use of lights and siren when transporting patients from the scene to the hospital. The reviews have shown that there has been no significant increase in patient survivals.

The Medical Directors recommended to make and AED a required piece of equipment for BLS.

The State MAC discussed the use of Physician Orders for Life Sustaining Treatment (POLST) for the prehospital providers. This document would give definitive directions for providers regarding treatment in the field. It was felt to be a better option than a living will since the form is pretty specific. Dr. Neal passed out a few copies of the POLST form. For more information Google POLST.

OSHA has been looking at EMS organizations that employ greater than 10 part time people. There has been a service in the state that has had a complaint lodged against them and was investigated by OSHA. That service was given a \$40,000 fine by OSHA.

CPAP for BLS:

Dr. Neal requested action on the Application for use of CPAP by BLS. The application has been completed and if anyone has any concerns please bring them up, because there are services that want to go forward with the program. Issues involving QA, Medical Director review and reporting and training was discussed. Following the discussion motion by Dave Jones , second by Rich Kelley to approve the application. Motion passed.

ETOH Study:

Dr. Neal presented a research proposal regarding the outcomes of patients that refuse EMS transport after alcohol ingestion. This is a proposal by Mark Jermusyk from Centre LifeLink. This is not similar to the study from the University. Discussion on the proposal ensued. A point that was made is that patient followup is voluntary, and could adversely affect the number of patients in the study.

CO Detectors:

Jim explained that Council is looking into the possibility of equipping all licensed ambulances and recognized QRS units with CO detectors for the first in jump kits. These detectors are for the safety of the crew and will alert the crew of a dangerous concentration of CO which will necessitate the transfer of the patient and the crew moving to a safe environment. Other regions have instituted this program and have had success. The monitors are basically two year disposable monitors. The monitors will not need to be calibrated, and if the monitors go off, they will reset themselves once moved to a clear atmosphere. A survey of region services was sent out and the response from the services have been positive. Before we can move forward with this project, approval must be received from the Board at the next meeting. Discussion followed.

Excited Delirium Protocol:

Dr. Neal presented the Excited Delirium Protocol that is being used by police and other law enforcement agencies. This was launched as a way to decrease the number of deaths while in police custody. This was presented as an FYI for committee members.

Captopril:

Kent Knable asked earlier in the week as to why Eastern EMS removed Captopril from the ALS units. Jim checked with Eastern EMS and was told that the service medical directors and ER physicians stated that it would not be useful on the units in the region because of the short transport/treatment times in the

field. The ALS services soon came on board with this and petitioned the ALS committee at the regional level. The ALS committee then decided to remove it from the ALS services region wide. Discussion followed.

There being no further business, meeting adjourned. Next meeting will be held in Juniata County on August 26, 2009 at 12:00 PM. Location to be announced.