EMERGENCY MEDICAL SERVICES COUNCIL
MINUTES
APRIL 22, 2005
150 North 18th Avenue, Suite 540-A

Members Present:		**Members Absent:**
Ben Bobrow (Chairman)	Janine Anderson	Bob Ramsey
Mark Venuti	Paul Coe	Willie Minor
Roy Ryals	Coy Amerson	Robert Costello
John Gallagher	Gary Bradbury	Mark Stroh
Kay Lewis	Joseph Gulotta	Neal Thomas
Richard Thacher	Kurt Krumperman	Thelma Brandon-Davis
Michael Ward	Daniel Spaite	Dina Rojas-Sanchez
Kevin Conn	Michael Hegarty	Marcia Barry
Taylor Payson	Charlie Smith	
Decker William		

I. CALL TO ORDER

Ben Bobrow, Chairman, called the regular meeting of the Emergency Medical Services Council to order at 11:05 a.m. A quorum was present.

II. DISCUSSION and ACTION ON JANUARY 21, 2005 MINUTES AND AGENDA

A motion was made by Mark Venuti and seconded by Kay Lewis to approve the minutes of January 21, 2005 with no corrections. **Motion Carried**

Ben Bobrow announced that agenda item VII. D. Presentation by Gordon W. Ewy, M.D., - "Cardio Cerebral Resuscitation and the New CPR" would be presented prior to Reports.

III. REPORTS

A. Report from the Office of the Director

- Niki O'Keefe, Deputy Assistant Directory, reported that Catherine R. Eden, Director, is retiring and her last day will be April 29, 2005. A new director has not been appointed, but the Governor has created a Search Committee to help conduct the selection process.
- Niki O'Keefe announced that the Trauma Legislation passed and that further discussions concerning the legislation would take place.

Chairman's Report

1. **Discussion on EMS Council Membership**
   - Ben Bobrow reported that there were no new EMS Council members, but that three positions still remain vacant; two lay person and one position for a Hospital Administrator with a community less than 500,000.

2. **EMS Regional Councils' Leadership Meeting**
   - Gene Wikle, Bureau Chief, hosted the Regional Council's Leadership Meeting on March 17, 2005 at ASU Downtown Campus. Ben Bobrow reported that the meeting was a success and that is will be conducted on a

semi-annual basis. The next Regional Councils' Leadership Meeting will be held in October 2005.

IV. MEDICAL DIRECTION COMMITTEE (MDC) RECOMMENDATIONS:

A. Discussion and Action on Revised Pediatric and Treatment and Triage Protocols

- John Gallagher reported that the MDC Committee suggested that PMD review the protocols and table the information to report to MDC and EMS.

B. Discussion and Action on Additional Recommendations to the Revised Treatment and Triage Protocols by Dr. Robert Berg and Dr. Marc Berg

- John Gallagher reported that MDC reviewed the protocols and the additional comments from Dr. Robert Berg and Dr. Marc Berg and suggested to PMD to table the information into one document and report to MDC and EMS.
- A motion was made by John Gallagher and seconded by Michael Ward to table the documents. **Motion carried.**

Item: Revised Pediatric and Treatment and Triage Protocols and Additional Recommendations to the Revised Treatment and Triage Protocols by Dr. Robert Berg and Dr. Marc Berg
Follow Up: Agenda Item EMS Council
Who: John Gallagher
When: Next Meeting- September 23, 2005

V. ARIZONA DEPARTMENT OF HEALTH SERVICES DISCUSSION AND ACTION ITEMS:

A. Introduction of new Bureau Staff

- Ben Bobrow introduced Rhonda Montgomery as the new Northern and Central Regional Liaison and Amanda Valenzuela as the new Program and Project Specialist for the Bureau of Emergency Medical Services

B. Status Report on Certification/Enforcement/Training Activities by Ron Anderson

- Ron Anderson presented and handed out documentation, which entailed 2005 year to date certification and telephonic activity, and enforcement complaint and resolution activity.

VI. OLD BUSINESS

A. Discussion and Action on RSI Pilot Update

- In the previous workgroup meeting, Sean Newton reported, that particular issues were addressed. Such as medical direction oversight and hot it will addressed, and the training requirements for paramedics. The task of the work group was to answer the questions addressed and relating to the issues.

- The studies in San Diego and Pittsburgh have shown alarming results in pre-hospital RSI intubation especially in traumatic brain injury patients. From these studies the workgroup has been able to step back, evaluate and realize the benefits, but need to have a full evaluation of the procedure.

- At this time, the work group is re-evaluating the process and implementation of process.

- The next workgroup meeting is scheduled for May 3 at 10:00 a.m., but may be revised.

- If anyone is interested in attending the meeting please contact Sean Newton.

B. Discussion and Action on EMT-B Administration of Epinephrine by Auto-Injector

- Sarah Harpring presented and discussed the EMT-B Administration of Epinephrine by Auto-Injector. She indicated that MDC approved the draft rules with out changes and asked that a recommendation be made as to whether the rules should be adopted as they appear.

- A motion was made by Michael Ward and seconded by John Gallagher to approve the draft. **Motion carried.**

C. Discussion and Action on Adopting GD-065-PHS-EMS: Drug Profile for Epinephrine Auto-Injector

- Sarah Harpring presented and discussed GD-065-PHS-EMS: Drug Profile for epinephrine Auto-Injector. She reported that MDC made changes to this drug profile to eliminate brand names. She asked that a recommendation as to whether to adopt this drug profile as a guidance document be made.

- MDC recommended eliminating the use of brand names throughout the document.

- A motion was made by Charlie Smith and seconded by Kay Lewis to adopt the drug profile as guidance documents with the corrections that were recommended by MDC. **Motion carried.**

D. Discussion and Action on EMT-B Carrying and Administration of Aspirin

- It was reported that in January 2002, MDC recommended that ADHS develop a method to allow EMT-Basics to carry and administer aspirin.

- The Education Committee, in February 2002, approved a motion to accept the drug profile for aspirin as a guideline for the initial providers and EMT-B refresher courses so that EMT-Bs could be allowed to administer aspirin to individuals with chest pain.

- In April 2002, EMS Council recommended that EMT-Bs be allowed to carry and administer aspirin for patients with chest pain.

- In June 2002, ADHS accepted the recommendations of MDC and EMS Council and amended what is now A.A.C. R9-25-503, Exhibit 1 by adding an EMT-B Drug List that included only aspirin. Previously there had been no drug list for EMT-Bs. ADHS' intention was thereby to authorize EMT-Bs to carry and administer aspirin. Because a protocol was not adopted at that time, some confusion existed about this.

- In March 2005, ADHS tried to resolve the confusion by adopting a protocol for EMT-B Carrying and Administration of Aspirin. The protocol was adopted effective April 1, 2005, as A.A.C. R9-25-510, which specifies that:

- An EMT-B is authorized to carry aspirin for administration to an adult patient suffering from chest pain.
- An EMT-B is authorized to administer aspirin only to an adult patient suffering from chest pain.
- An EMT-B's administration of aspirin to an adult patient suffering from chest pain is not an advanced procedure that requires administrative and on-line medical direction.
- An adult is someone who is 18 years of age or older.

- ADHS sent out a notice of the new rule in March 2005 and received a question regarding whether the Arizona EMT-B course needed to be changed to include specific aspirin training because aspirin is not included in the 1994 National Standard Curriculum and thus in the Arizona EMT-B course as described in the rule.

- Two issues were brought before the EMS Council for recommendation.
    1. Whether ADHS needs to specifically require in the rule that an aspirin curriculum be taught to EMT-Bs.
    2. Whether EMS Council believes that the aspirin curriculum that should be used is the current drug profile for aspirin (GD-026-PHS-EMS).

- The following recommendation were for changes to the drug profile by MDC:
    - Add verbiage specifying that the drug profile is specifically for EMT-Bs.
    - Strike out brand names in the profile
    - Eliminate "baby aspirin" and "pediatric" and "chewable" and use the dosage of 81 mg instead.
    - Eliminate "Baby" under Special Notes
    - Eliminate "Pain/discomfort/fever" dosage information under Adult Dosage
    - A motion was made by Kay Lewis and second by Charlie Smith to accept the drug profile with the recommendations made by MDC **Motion carried.**

E. Discussion and Action on SHARE Project-update by Dr. Bobrow and Ms. Lani Clark

- Dr. Bobrow reported an update on the SHARE Program. It was reported that the SHARE Program will be implemented as a state wide initiative.

- The SHARE Program includes cardio vascular disease and stroke care. The program consists of a combination of many agencies, public education, research, and creating effective public access defibrillation networks and utilizing the lay public as the ultimate network.

- In the last three months a secure operational database has been created. Meaningful data has been collected from facilities to have agreed to participate in the program.

- The goal is to integrate the registry into the 911 dispatch system. A 911 dispatcher would be able to pull up the database and know if an AED in located on the premises.

- A study is currently being done with middle school students and testing the students as to how well they retain the information in using an AED and CPR.

- Businesses who participate in the SHARE Program are awarded a certificate by the State indicating that they have registered their device with the program and have received training.

- The Governor and the Phoenix Suns have agreed to do an educational training video for the program.

- It was reported that many efforts have been put forth to work on grant opportunities to help collect the data for the program.

- It was reported that phase two of the SHARE Program is the A.S.P.I.R.E. Program. A.S.P.I.R.E. concentrates on stroke patients with a long term goal of helping under served areas that do not have stroke centers.

- Within the last few months 47 cardiac arrest incidents have been reported to the SHARE Program.

- A question arose as to whether this is the appropriate forum to decide whether or not to endorse the protocol that is in place in Tucson. It was suggested that the protocol be evaluated.

- A motion was made by Kevin Conn and second by Kay Lewis to have PMD evaluate the protocol and report back to MDC and EMS Council **Motion carried.**

Item: **Protocol for Cardiocerebral Resuscitation**
Follow up: **Agenda Item MDC**
Who: **PMD**
When: **Next Meeting – September 23, 2005**

F. No Diversion Update from Southern Region- Joe Gulotta

- It was reported that for six months Tucson was in a no divert trial. Only diverted for trauma and tracked the data during the six months.

VII. NEW BUSINESS

A. Discussion and Action on Calcium Gluconate Pilot Project Annual Update- Fire Chief, Gary Woods

- MDC approved renewal of the five year pilot project for Calcium Gluconate.
- A motion was made by Kay Lewis and second by John Gallagher to approve the renewal of the five year pilot project for Calcium Gluconate **Motion carried.**

B. Discussion and Action on Amyl Nitrite Pilot Project Annual Update- Fire Chief, Gary Woods

- It was reported that the Amyl Nitrite Pilot Project would expire in June 2003. The project was originally approved to run for five years.

- Amy Nitrite has not been used during the five-year lifespan of the project

- MDC approved the pilot project to run for an additional five years.

- A motion was made by Michael and seconded by Kevin Conn for Honeywell Fire

- Department to continue for another five years with the Amyl Nitrite Pilot Project **Motion carried.**

C. Discussion and Action on A.A.C. R9-25-503; Exhibits 1, 2, and 3 (Drug Lists)

- John Gallagher reported that the PMD Committee did not have the intent to have dosages listed, but only limited amounts in the drug list.

- A motion was made by John Gallagher and second by Kay Lewis to strike the listed dosages and have the minimum drug amount **Motion carried**.

VIII. EMERGENCY MEDICAL SERVICES COORDINATING SYSTEMS' REPORTS:

A. Presentation of and Discussion on Activities Report from Arizona Emergency Medical Services (AMES)

- It was reported the AEMS Odyssey Conference is going to be held June 9 – 10, 2005.

B. Presentation of and Discussion on Activities Report from Southeastern Arizona Emergency Medical Services (SAEMS)

- It was reported that Southwest Conference will be held on August 4th and 5th.
- Interstate 10 will be closed between Prince Road to 22nd Street in early 2006. EMS traffic having head through this traffic, design teams are working to resolve this situation.

C. Presentation of and Discussion on Activities Report from Northern Arizona Emergency Medical Services (NAEMS)

- It was reported that grant screening would be conducted on April 26, 2005.

IX. CALL TO THE PUBLIC

- It was reported that EMS Week will begin on May 15 -21. Each day will focus on a different aspect of EMS. Send your information to Rhonda Montgomery.

X. SUMMARY OF CURRENT EVENTS

- No reports given.

XI. ANNOUNCEMENT OF NEXT MEETING- September 23, 2005

XII. ADJOURNMENT

- Meeting was adjourned at 12:40 p.m.

Minutes approved by committee on October 21, 2005