

**N.H. EMERGENCY MEDICAL & TRAUMA SERVICES  
COORDINATING BOARD**

**Conway Fire Department, Conway , NH**

**Approved Meeting Minutes**

**September 18, 2008**

**Members Present:** Steve Achilles (Chair), Doug Martin (Vice-Chair), Michael Cloutier, Jonathan Dubey, Matthew Goudreau, Janet Houston, Don Johnson, Michael Pepin, Suzanne Prentiss, David Strang, John Sutton, David Tauber

**Members Absent:** Al Burbank, David Duquette, Terry LeBlanc, Joseph Mastromarino, George Patterson, Dennis Tobin

**Guests:** Dan Ardus, Chris Beres, Kevin Drew, Sean Ellbeg, Jeanne Erickson, Matt Leavitt, Ray Leavitt, Jr, Doug McVicar, Rae Mello-Andrews, Solomon Rosman, Steve Solomon, Kelley Sweeney

**Bureau Staff:** Vicki Blanchard, Liza Burrill, Clay Odell, Eric Perry, Mike Schnyder

**I. CALL TO ORDER**

Meeting called to order at 1:10 PM by Chair Steve Achilles

**II. ACCEPTANCE OF 07/17/08 MEETING MINUTES**

**MOTION:** Motion made, seconded, and accepted to accept July 17, 2008 minutes of the NH Emergency Medical & Trauma Coordinating Board as presented.

**III. NH MEDICAL CONTROL BOARD REPORT – J Mastromarino**

Doug McVicar gave a brief overview of the morning session for J. Mastromarino. Drugs were reviewed and approved – IM Fentanyl, added Tetracaine as alternative for Proparacaine. Issues surround how protocols are interpreted – the new Scope of Practice seems to focus on treatments not methods. The Board is looking for guidance on equipment issues. Protocol 2009 timetable is on time and ready for January rollout.

**IV. NH BUREAU OF EMS REPORT - S. Prentiss**

The Bureau Chief asked for a moment of silence for Allan Bryant of Groveton EMS. Staff updates were given and the following updates to the website were mentioned:

High-visibility vests

(<http://www.nh.gov/safety/divisions/fstems/documents/noticevisibilityrequirements.pdf>)

Recall of Ferno 35X ProflexX Xframe Cots with serial numbers between 06 002156 and 07 054091

(<http://www.nh.gov/safety/divisions/fstems/documents/35XCustomerNoteandNoticeofinvestigation.pdf>)

**Other News:**

Hurricanes Gustav and Ike in Texas – Personnel and vehicles deployed from New Hampshire - American Medical Response (AMR) and Rockingham Regional Ambulance (RRA). No EMAC request. Note to agencies to not leave the State of NH unless request is processed via EMAC.

NREMT – S. Prentiss asked by the NREMT to assist them with ALS psychomotor skills test review and possible change.

S. Prentiss received Chief Medical Officer (CMO) designation from the Center for Public Safety Excellence (CPSE). This level designation was originally focused on the Fire Service, but the CPSE mission expanded to include excellence in EMS leadership. Tony Maggio from Barrington EMS is also a recipient of this designation this year.

Governor Lynch signed “EMS Provider Recognition Day” in to law (2008 SB525) on August 14, 2008, it will be the First Saturday in May of each year. NH Association of EMT's will be taking the lead in organizing events for that day (<http://www.nhaemt.org/>)

**Trauma Systems:**

Revisions continue with meetings and focus on hospital standards. Trauma Simulation project continues – second Sim Man purchased with Homeland Security funding with a plan for a lab to be set up at the Academy in Concord. Staff being hired and trained, and eventually this will be “on the road”.

The 8<sup>th</sup> Annual NH Trauma Conference – November 12<sup>th</sup> at the Inns at Mill Falls in Meredith - Sponsored by FST & EMS, NH Office of Rural Health and Primary Care, and Elliot Hospital

**Education Section:**

Refresher season – exam in lieu of refresher (more on this later in report)  
CBT Testing – new site: Conway Fire Station - Equipment purchased by funding from Office of Rural Health and Primary Care – The Systems Administrators will be SOLO.

*Instructor Insight* – 5<sup>th</sup> edition now published

“NHOODLE” is now providing continuing education in addition to refresher training. EMS Field Training underway – Fall presentations will focus on “Toxicology”. Winter presentations will be on “Pediatrics”. Three EMT-Basic RTPs are scheduled for October in Epping, Wolfeboro and Newport. For additional information contact Mike Kennard, Program Coordinator (603) 271-4568

PEETE (Practical Exam Evaluator Training and Education) has a new part time coordinator, Christy Dewey. The PEETE Train-the-Trainer for Instructors is scheduled for Sep 30<sup>th</sup> and January 2009. The program has been revised and a new video has been created.

National EMS Education Standards – final draft headed to NHTSA. The NH Team includes staff from Coordinating Board, Education Section and Field Services - Next meeting is September 30<sup>th</sup>

**Advanced Life Support:**

Protocol Development Committee is working on the finalization of 2009 edition of protocols, Rapid Sequence Intubation (Audit), RSI Assistant Program update, equipment survey, and updating narcotic agreements. RSI is prerequisite protocol and requires supervision over education, skills maintenance and record keeping. To date, 6 units have been approved to perform RSI.

Reminder to all UCDCs and Paramedics that the handling and possession of narcotics fall under Drug Enforcement Administration (DEA) and must be handled accordingly.

**Field Services:**

Reminder that September 30 is renewal / relicensure deadline for First Responders. Expirations of CPR cards continues to create licensing and TEMSIS access issues. In September over 300 notices were sent to providers reminding them that they are due to recertify their CPR. Beginning September 30<sup>th</sup>, 2008, NHBEMS will send postcard reminders (instead of letters) for CPR renewal. Also, formal letters will be sent to those who do not recertify their CPR, providing notice of loss of licensure, and deactivation in TEMSIS. Anyone found to be providing care without appropriate license will be placed under investigation. December 31 is license renewal deadline date for NH EMTs. March 31 is license renewal deadline date for EMTs.

EMS Investigations are ongoing. Vehicle inspections are ongoing. 2008 Emergency Response Guides are being distributed to all licensed units

2008 Annual EMS Award Recipients include:

- Pamela Mtichell/Richard Connolly Achievement Award – Campton-Thornton Fire Rescue
- BoundTree Corporation EMS Unit of the Year – McGregor Memorial EMS, Durham, NH
- EMS Educator of the Year – Herbert “Buzz” Shaw, III of Richmond, NH
- Lawrence A. Volz Heroism Award – no recipient for 2008
- David J. Connor Memorial EMS Appreciation Award “The Connor Honor” – Sue Prentiss of FST&EMS and Speare Memorial Hosp. Plymouth, NH
- David F. Dow Memorial Award EMS Provider of the Year – Jackie King, Bethlehem, NH

**Research & Quality Management (RQM) Section:**

TEMSIS – report by M. Schnyder

Work continues to bring all agencies on board with TEMSIS. The collecting of unused Field Bridge software licenses for redistribution.

Highway Safety Agency awarded \$500,000 for Federal 408 grant year - FSTEMS has requested \$125,000 for improvements to TEMSIS system. Bureau staff will meet with them to accept appropriate monies.

ImageTrend continuing with next major software release, due this coming year. The "Report Writer" section will be revamped.

Other upcoming RQM projects:

Improve TEMSIS

NHOODLE (online education) will be conducting testing this fall

Continued field visits with EMS units re: TEMSIS

North Country EMS Conference scheduled for October 16 -19 at the Attitash Grand Summit Hotel and conference Center – further information: Kurt Lucas at Littleton Regional Hospital - [klucas@littletonhospital.org](mailto:klucas@littletonhospital.org)

#### **V. COORDINATING BOARD PLANNING RETREAT – S. Achilles**

The one day retreat focused on 10 National Subsystem sections which include:

- System Leadership, Organization, Regulation & Policy
- Resource Management – Financial
- Resource Management – Human Resources
- Resource Management Subsystems – Transportation
- Resource Management – Facility and Specialty Care Regionalization
- Public Access and Communications
- Public Information, Education and Prevention
- Clinical Care, Integration of Care, and Medical Direction
- Information, Evaluation, and Research
- Large Scale Events Preparedness and Response

A sub-committee of Coordinating Board Members, which includes Don Johnson, Michael Pepin, Terry Leblanc, and Janet Houston will meet every other month to begin the prioritization process and report back to the Coordinating Board at their meetings. The bureau staff will work on developing the process to implement the Strategic Planning Project. S. Achilles asked that the November Agenda be changed to reflect Strategic Planning as a regular item.

#### **VI. EQUIPMENT LIST CHANGES & ADVISORY – D. Martin**

A four page document was handed out to meeting participants. S. Achilles suggested that the list be reviewed item by item for CB approval. Approvals were gained by simple majority of members present.

List and CB recommendations are:

- **EMT-Basic Equipment**
  - Portable Oxygen Equipment – change "minimum size 350 liters" to "minimum size 248 liters" (C-size tank) – CB approves recommended change
  - Portable Suction Equipment – change "capability 300 millimeters of mercury" to "capability adjustable from 80-300 millimeters of mercury" – recommend a compliance date of "12/31/2009 at the latest" – CB approves recommendation to change language (Note: in subsequent discussion and during review of EMT-Intermediate equipment list, D. Martin stated that "Every sunset date will be 2010" – time stamp 02:14:10)

- 6 foot oxygen tubing – removal - CB approves recommendation to remove
- 2 Simple, transparent masks – no recommendation, referred to CB for discussion – CB recommends that masks be kept on list
- 8 suction catheters sized as follows: wide bore, 5, 6, 8, 10, 12, 14, 16. CB accepts recommendation to change sizes to: Wide bore, 6, 8, 10, 12, 14.
- 2 complete blind insertion airway sets. Change to “2 alternative airway sets (not including oral and nasal airways)” – CB agrees in concept but research needed – may need to keep language of “blind airway”
- 6 triangular bandages. CB accepts recommendation to change to “4 triangular bandages OR 2 commercial slings”
- 6 Sterile occlusive dressings or plastic wrap – CB does not accept recommendation to remove – keep as is
- 1 adult-sized lower extremity traction device – suggest discussion by CB with input from MCB to possibly recommend addition of Pediatric traction device – CB does NOT recommend this addition
- 4 rigid cervical collars – CB accepts recommendation to change language to “minimum of 4 rigid cervical collars, covering sizes infant through adult”
- 1 full spine immobilization device – suggest CB discussion to add pediatric long board to list. CB does NOT recommend this addition
- 1 orthopedic scoop stretcher - CB accepts recommendation to leave this item as is and NOT require a scoop stretcher.
- 1 Poison Kit – CB accepts recommendation (with input from MCB) to remove this item.
- 1 pair latex gloves in BSI kit – CB accepts recommended change to read, “1 pair latex free exam gloves”
- 1 Hospital or commercially prepackaged obstetrical kit – CB accepts recommendation to leave these items as is.
- 2 penlight flashlights – CB accepts recommendation to add “or LED equivalent”
- Trauma scale and GCS references – CB accepts recommendations to remove this requirement.
- 2 sharps container – CB accepts recommended change of language to read, “2 sharps container for needle disposal, at least one of which is portable for scene use”
- 2 functioning hand held lights, with installed battery changer (s) or 2 D cell sized batteries and replacement batteries – CB accepts recommendation to change to “2 functioning hand held lights, either rechargeable or with spare batteries”
- 1 portable defibrillator – CB accepts recommendation to:
  - Remove language of “by December 31, 2008”
  - Change “meets FDA standards” to “capable of operating according to American Heart standards within 2 years”
  - Change “replacement batteries” to “replacement battery(ies)”

- 1 infant/child safety seat – CB accepts recommendation to change language to read “Commercial child safety restraint device(s) able to accommodate children between 5 and 80 pounds”
- 1 current copy of NH Patient Care Protocols – CB accepts recommendation to change language to read “1 printed or electronic copy of the current NH Patient Care Protocols”
- ANSI Safety Vests – discussion as to whether or not they should be required as part of the equipment list for ambulances.

**MOTION:** Motion made and seconded to add ANSI Safety Vests as part of the EMT-Basic equipment list for required equipment on ambulances. Passed by simple majority vote

ANSI Safety Vests – further discussion by CB regarding type, safety standards, number of vest to carry, etc.

**MOTION:** Motion made to recommend that a minimum of 2 type-2 ANSI/ISEA-compliant Safety Vests that meet the current federal standards be required on ambulances.

Motion by: Michael Pepin

Second by: David Tauber

Passed by simple majority vote with 1 abstention

- **EMT-Intermediate equipment**

- Micro administration sets – CB accepts recommendation to remove “micro sets” from the list
- Blood draw sample sets – CB accepts recommendation to remove “blood draw sample sets” from the list
- Approved medications as per “2007. . .” – CB accepts recommendation to change the numerical year to read “current protocols. . . “
- 2 each needles sized: 19g, 21g, 25g, 27g, filter needles – CB accepts recommendation to change sizes to include “2 each needles sized: 18g – 20g, 21g – 25g, filter needles or comparable devices”
- 4 nebulizer delivery devices – CB accepts recommendations to make the following changes:
  - Remove the parts list and change language to “4 complete nebulizer setups”
  - Remove “saline bullets”
- 1 pulse oximeter – CB accepts recommendation to make the following changes:
  - Add “with adult and pediatric sensors”
  - Move this item to the EMT-Basic list
- 1 current medication reference book – CB accepts recommendation to change to “1 current nursing medication reference book, either hardcopy or electronic”
- CPAP – CB accepts recommendation to add CPAP to the list and include a compliance date of no later than 12/31/2010
- Adult Intraosseous Device – CB, with input from MCB, accepts recommendation to add Adult Intraosseous Device (facilitated) to the list and include a compliance date of no later than 12/31/2010

- **EMT-Paramedic Equipment**
  - 2 cricothyrotomy sets – CB with input from MCB, accepts recommendation to require 2 cricothyrotomy sets that meet the standard of the NH EMS Medical Control Board (wire-guided, dilation-type devices)
  - Endotracheal tube sets – CB accepts recommendations to make the following changes:
    - Remove size 2.0 from the uncuffed tube size range
    - Remove sizes 5.0, 5.5, and 9.0 from the cuffed tube size list
  - 10 cc syringes – CB accepts recommendation to remove from the paramedic list as they are already included on the EMT-Intermediate list
  - 2 Laryngoscopes – CB accepts recommendation to add language to read, “2 laryngoscopes handles, in working order”
  - 9 laryngoscope blades – CB accepts recommendation to remove size #1 from the curved blade list
  - 2 end-tidal carbon dioxide detectors – CB accepts recommendation to add “or electronic ETCO2 monitor” to the language
  - 2 esophageal detector devices – CB accepts recommendation to remove this item
  - 7 nasogastric tube sizes – CB accepts recommendation to remove sizes 5FR and 6FR from the list
  - 1 manual defibrillator – CB actions are as follows”
    - Accept recommendation to change the word “batteries” to “battery(ies)”
    - Does **NOT** accept the recommendation to remove the following language, “extra pediatric electrodes” and extra adult electrodes” – Keep as is
  - 2 Hospital or commercially prepackaged needle decompression kits – CB accepts recommendation to LEAVE THIS ITEM AS IS, and NOT allow services to create their own kits.
  - 1 adult set of intraosseous needle with syringes – CB accepts recommendation to add pediatric I/O equipment to the Paramedic equipment list

**VII. NR EXAM-IN-LIEU OF REVIEW / DECISION – E. Perry**

At the previous meeting a decision was made to take time at this meeting to discussion and vote to accept one of the four options at the September meeting.

**MOTION:** A motion was made to accept Option 1: NREMT Exam-in-Lieu as the NH EMT refresher process for NH.

OPTION 1: NREMT Exam-in-Lieu [NREMT’s recommended process]

- Accept successful completion of NREMT Exam as proof of recertification
- NH Certificate of Completion issued upon receipt of required proof.

Motion made: Doug Martin  
 Seconded by: David Tauber

Discussion ensued, then motion Passed by a vote of 6 to 4 in favor of Option 1.

**IIX. NEXT MEETING REMINDER**

- November 20, 2008 at 1:00PM at the NHFA in Concord

**IX. ADJOURNMENT**

**MOTION:** Motion made and seconded to adjourn meeting at 4:15PM. Motion passed.

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**ON AGENDA BUT NOT COVERED**

- Scope of Practice – name changes
- Critical Care Paramedic
- Approval and posting of Meeting Minutes

**SUGGESTED TOPICS FOR UPCOMING MEETINGS**

- CPR Card requirement for licensing
- Protocols in Rules – review, discuss, agree
- EMT-Paramedic recertification process

Respectfully Submitted,

Suzanne M. Prentiss, Bureau Chief, EMS  
(Prepared by L. Burrill, Field Services Representative on September 23, 2008)  
(Reformatted by K. Doolan)