

## **NH MEDICAL CONTROL BOARD**

**NH Fire Academy  
Concord, NH**

### **MINUTES OF MEETING November 21, 2013**

- Members present:** Tom D'Aprix – Chair; Kenneth Call, MD; Ray Kelly; David Hirsch; Jim Martin; Douglas McVicar; Thomas Trimarco; Jim Suozzi; Joseph Leahy; Mathurin Malby; Frank Hubbell .
- Members absent:** Patrick Lanzetta.
- Guests:** Mark Hastings; Steve Erickson; Jason Preston; Aaron McIntire; Bruce Goldthwaite; Jonathan Vacik; Michael Pepin; Kevin Blinn; Sue Prentiss; Stacy Meier; Eric Jaeger; Jeffrey Stewart; Jason Grey; Fred Heinrich; Richard O'Brien; Grant Turpin; Mary Ellen Gourdeau; Jeanne Erickson.
- Bureau Staff:** Bureau Chief Mercuri; Vicki Blanchard; Richard Cloutier; Chip Cooper; Shawn Jackson.

#### **Welcome:**

The meeting was called to order at 9:03 a.m.

Introductions were made.

Chair D'Aprix

#### **Approval of the September 19, 2013 Minutes**

#### **Bureau/Division Updates – Chief Mercuri**

A few things going on. There are a couple pieces of legislation; a bill right now that has been proposed to grandfather the intermediates. As it is written, it does not grandfather everyone, only a small group. It is not a bill we are in favor of. There is another bill, Physicians Order for Life Sustaining Treatment, in the works to create a registry in the state. How this will affect EMS is unclear at this point.

We will also be posting a position for EMS Deputy Bureau Chief. This position will primarily be Trauma, but will have additional duties making it a second in command. It is going through the H/R process at this time and should be posted sometime after January 1, 2014.

Trauma Conference is tomorrow. Eric Jaeger has done a fantastic job putting this together; getting speakers, providers and vendors. Should be a great conference.

Rules are still in progress and are with the department attorney at the moment.

Trauma Medical Review Committee is still working on updating the trauma system. Taking a look at the verification process and trying to get as many hospitals on board as we can.

AEMT: 20% have gone through the AEMT conversion. We strongly recommend taking the test prep first; before taking the registry test. The pass rate is about 72%, with national average at 53%. In addition, if there is any other assistance needed please let either Nick or Shawn know.

Community par-medicine: we are continuing the work that Clay started.

First part of 2014 we will be looking at a transfer summit.

Also, an affordable care act here the first part of 2014 with Chief DeAngelis.

Nick and Chip Cooper will be looking at data mining and how to move the system forward.

### **Coordinating Board Update – Hubbell:**

Chair D'Aprix apologized to Frank Hubbell for reporting an inaccurate number of board meetings that F. Hubbell had attended. Frank said that Nick had pretty much covered the updates for the coordinating board.

### **Trauma Medical Review Committee – Call:**

Ken Call had a brief update. He said a new sub-committee is being created for education to work on issues such as continuous CME for trauma and improve courses and conferences. There was discussion on how to improve the trauma registry.

### **Hospital Survey Review**

Janet Houston had updates for the survey. She said that NH has done slightly better than the national median; however there are still a significant number of NH hospitals that are at or below the median. She passed around a synopsis of the results.

### **Trauma Conference Update**

Eric Jaeger updated everyone on the upcoming Trauma Conference as follows: the date is November 22<sup>nd</sup> at the Mountain View Grand Resort in Whitefield. He says they have some terrific speakers lined up and will have more information for EMS providers this time. Dave Mooney, from Children's Hospital, will be there to talk about the Boston Marathon Bombings and the preparation for that kind of event and also the events of that day. They will also talk about the new spinal trauma protocol. There will also be paramedics and nurses speaking.

### **Protocols**

Jim Suozzi went over the changes and updates. There was an insert in everyone's packet. There was a discussion and review of the drafts submitted.

Anaphylaxis: This protocol was sent back to the Protocol Committee to produce evidence for or against Solumedrol for the anaphylaxis. The protocol committee's research revealed no evidence to support adding Solumedrol to the protocol. Additionally, the protocol was updated to emphasize at least 3 IM administrations of epinephrine IM prior to IV administration in refractory anaphylaxes. Accepted as presented.

Behavioral and Poisoning Protocols: Benzodiazepines IM dosing interval increased from 10 minutes repeats to 20 minute repeats. Accepted as presented.

Hyperglycemia & Hypoglycemia: The Diabetic Protocol was broken out into two separate protocols; accepted as presented plus adding a box for the definition of hypoglycemia.

Newborn Care: No change.

Newborn Resuscitation: Added silver swadder as an item to wrap the newborn.

Obstetrical Emergencies: Tabled until January.

Pain Management -Adult: There was a lengthy discussion on whether to remove Ketorolac from the protocol and add Ketamine and Hydromorphone. After much discussion it was decided to keep Ketorolac in the protocols, add Hydromorphone, and not add Ketmine. See motions below:

Motion was made by Frank Hubbell that ketamine is not ready for primetime; motion was seconded by Kenneth Call; motion passed unanimously.

Motion was made by Frank Hubbell to add Dilaudid; seconded by Ray Kelly. After some discussion motion passed unanimously.

Motion was made by Frank Hubbell to increase fentanyl dosage; seconded by Kenneth Call. After discussion motion passed unanimously.

Pain Management – Pediatric: No change.

Spinal Injury: The final draft of the Spinal Injury Protocol was presented and a motion was made to add in a statement that analgesics may be required for transport from facility to facility. Motion passed unanimously.

### **Critical Care Update**

Vicki Blanchard said they have developed a survey and will be sending it out probably within a week, which will give some data to report on next time.

### **New England Regional Protocols – Update**

Sue Prentiss brought everyone up to date on their involvement in the PEGASUS project. They met for the first time last week in Boston. The first part of the meetings was to school the group in how to appraise evidence and build evidence based guidelines. Sue is in the shock group and Eric Yeager is in the spinal protection group. They are in the phase of appraising literature. They will be meeting again in Texas in February and will be developing recommendations for performance. There will be another meeting in May.

### **Narcotic Diversion**

Chair D'Aprix wanted to hear from everyone on any perceived problems and ways to resolve them. There was a discussion about proof of use forms and documentation. Electronic documentation needs to be developed, tracked and people need to be educated on use of the documentation. Chair D'Aprix said he will work on getting himself and a few other board members invited to a Board of Pharmacy meeting and hopefully this will help things to move forward.

**Adjournment**: 11:50 a.m.

**Next Meeting**: January 16, 2014 – Fire Academy – Concord NH

Respectfully Submitted,

Tom D'Aprix, MD, Chairman

Prepared by:  
Denice McAdoo, Executive Secretary