NH EMS Medical Control Board

MEETING MINUTES (Approved)

# **September 15, 2022**

9:00AM

NH Fire Academy Classroom 2

Quorum: 9 members required (currently 14 positions on the MCB)

#### **Members Present:**

Robert Rix (Chair), Michelle Nathan (Vice Chair), Marc Grossman, David Hirsch, Patrick Lee, Jim Suozzi, Tom Trimarco, Jon Gray, Frank Hubbell, John Freese

#### **Members Absent:**

Josh Morrison, Brian Sweeney, Jared Blum

### NH FST&EMS Staff:

EMS Chief Romanello, EMS Medical Director Joey Scollan, EMS Captain Vicki Blanchard, Matthew Robblee, Liz Goguet, Joe Cartier, Mike Mulhern, Crystal Tuttle (Recording Secretary)

Meeting called to order at 9:05 AM by Chair Rix

# 1) Welcome/Membership

a) Vice Chair and Chair positions are due for re-nomination (March 2023). All interested parties should let the Board know by the November 17<sup>th</sup> meeting. Interested parties can reach out to Crystal about the process.

### 2) Approval of the minutes

a) A motion was made (Hubbell/Nathan) to accept the minutes from July 21, 2022.

# 3) Division/Committee Reports

- a) Bureau of EMS Chief Romanello
  - i) COVID protocols were extended through September 30<sup>th</sup>. If the public health incident is lifted, the Bureau of EMS will make recommendations and establish communications.
  - ii) Specialty Services Mike Mulhern is newest hire for the Bureau of EMS. MIH part time position still available. The North Country open position will be moved to the Concord office, and one will remain in the North.
  - iii) Wheelchair van services throughout the State have been sent certified letters stating that they need to be licensed through the Division of FSTEMS, and rotary wing services are also being licensed. This is an ongoing process.
  - iv) Clinical systems had a minor setback with the makeup of the review team, the team will be reassembled and continue.
  - v) EMS draft rules regarding Educational Training Agency's (ETA) are currently at legal for review.
  - vi) Continuing education continues to grow and approve. The Bureau is moving forward with the Paramedic to RN program.

# 4) CB Report- John Freese

a) Nothing to report, no meeting held.

### 5) TMRC Report- Tom Trimarco

- a) Pre hospital sub-committee is working on education for the trauma system statewide, and matching skills to designation levels of the hospitals.
- b) TMRC needs to provide a member for the MCB board, they have nominated Dr. Sweeney.

#### 6) Old Business

a) Protocols- Jim Suozzi

# Allergic Reaction/Anaphylaxis – Adult

• Moved Albuterol up to EMT

### Spinal Injuries – Adult & Pediatric

### In General:

- Added "Adult & Pediatric" to title
- Removed the "Purpose" statement
- Removed Red Flag
- Word-smithing

# EMT/AEMT/Paramedic Standing Orders:

• Moved extrication and apply adequate padding bullets below applying a collar bullets.

Amendment: Add a red flag stating, "Elderly patients are a high risk for occult cervical spine fractures despite absence of neck pain. Consider placing a collar on all older patients (e.g., 65 years or older) who have a high mechanism of injury." Hubbell/Suozzi

# Airway Management Protocol – Adult

# **Airway Management Protocol – Pediatric**

Bullets were rearranged and/or added to both Adult & Pediatric to better align the two

# **Endotracheal Tube Introducer "Bougie"**

Added pediatrics

# **Indications:**

Removed bullet saying unable to fully visualize vocal cords

# <u>Limitations</u>

- Changed the wording "should not" to "cannot"
- Added a bullet for pediatric

#### Procedures:

- Word-smithed bullets 3, 5 & 6
- Moved bullet 7 up from 9

# **Tracheostomy Care**

# EMT/AEMT Standing Care - Procedure:

• 3<sup>rd</sup> bullet added "humidified if available" referencing oxygen

### 12-Lead Acquisition

## <u>Indications:</u>

• In ROSC bullet added "at least 8 minutes post ROSC"

#### **Gastric Tube Insertion**

No changes

#### **Intraosseous Access**

• General word smithing of redundancies and saline reference to fluids

### **Equipment:**

- Primed IV tubing bullet added "for alert patients with 2% lidocaine (preservative free)
- Changed 10 mL syringe with 0.9% NaCL to IV flush
- Removed "1 vial" in lidocaine bullet
- Removed 5 mL in syringe bullet

### Approved sites:

• Removed the whole section

### Procedure:

- Added to first bullet, "at sites where the provider has been trained."
- Bullet 1 removed (to lay patient supine)
- Bullet 3 changed "prep the site" to "cleanse the site"
- Bullet 7 removed reference to IV pumps

# **Quantitative Waveform Capnography**

No changes

#### **Taser**

Removed the protocol and added the removal procedure to Policy Custody protocol

# **Police Custody**

#### Tasers (Conductive Electrical Weapon):

- Removed reference to Tasers Procedure
- Added Procedure for Removal

## **Vascular Access via Central Catheter**

Recommend developing an online module

# <u>Procedure for implanted catheter (Port-a-Cath, P.A.S. port, Medi-port):</u>

- Bullet 10 expanded on why having the patient cough may help.
- Bullet 10 added another sub-bullet to have the patient lift their arms.

A motion was made (Hubbell/Freese) to accept Protocols. Passed unanimously.

### 7) New Business

- a) Adding a recruitment and retention section to the MCB agenda to address the provider crisis.
- 8) Topics Ad Libitum
- 9) Adjournment
  - *i)* **Vote:** Motion made (Suozzi/Trimarco) to adjourn the meeting at 12:20 PM; passed unanimously.
  - ii) Next Meeting: November 17, 2022 Classrooms 5 & 6