MEDICAL DIRECTION COMMITTEE

Office of Emergency Medical Services Embassy Suites, 2925 Emerywood Parkway, Richmond, VA 23294 Thursday, July 7, 2022

10:30 AM

Members Present:	Members Absent:	Staff:	Others:
Allen Yee, M.D., Chair	George Lindbeck, M.D. (Excused)	Debbie Akers	Sophia Dibich, OHHR
Stewart Martin, M.D.	Paul Phillips, D. O. (Excused)	Chad Blosser	Yi Ting Chiu, OHHR
Charles Lane, M.D.	Christopher Turnbull, M.D. (Excused)	Scott Winston	Greg Neiman
Wendy Wilcoxson, M.D.	Tania White, M.D. (Excused)	Mohamad Abbamin	Cathy Cockrell
ohn Morgan, M. D.	Samuel Bartle, M.D. (Excused)	Ron Passmore	Chris Christensen
E. Reed Smith, M.D.	Chief Eddie Ferguson (Excused)	Wanda Street	Donna Galgansi Pabst
Amir Louka, M.D.		Chris Vernovai	Jeffrey Bonavita
Asher Brand, M.D.		Karen Owens	Monty Dixon
cott Weir, M.D.		Jessica Rosner	Andrew Hartung
		Wayne Perry	Jeffrey Ferguson, M.D.
		Kelsey Rideout	
		Amanda Loretti	

Topic/Subject	Discussion	Recommendations,
		Action/Follow-up;
		Responsible Person
I. Welcome	Dr. Yee called the meeting to order at 10:30 a.m.	
II. Introductions	All attendees introduced themselves.	
III. Approval of Agenda	Approval of agenda	Approved by consensus
IV. Approval of Minutes	Approval of April 7, 2022 minutes. The minutes were approved.	Approved by consensus
V. Drug Enforcement	It was reported at the NASEMSO meeting in Charleston, SC that the document should be released in October,	
Administration (DEA) & Board	2022. Dr. Yee expressed the need for a grace period before implementation due to no information having been	
of Pharmacy (BOP) Compliance	received. Mr. Passmore stated that was his understanding, he has been participating in their meetings.	
Issues – Dr. Lindbeck		
Special Reports	a. Cardiac Patient Bill of Rights – Dr. Peter O'Brien	
	Dr. O'Brien had planned on addressing the committee. However, Dr. Wilcoxson spoke with him at length prior to	
	the meeting. Dr. O'Brien had been contacted by Dr. Gimple from UVA, a cardiac internationalist, with a request	
	to attempt to facilitate some sort of statewide standard for information sharing in the transfer of patients. After	
	discussion, it was determined that this issue is not an EMS issue but rather an inter-facility transfer of	
	admissions issue. Dr. Yee recommended referral of this matter to VHHA. Consensus agreement that no action	
	needed by MDC.	

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		Motion made and seconded to request a joint meeting with Rules and Regulations between October and January. Motion carried.
VII. Old Business	a. Chapter 32 Revision – Dr. Allen Yee Dr. Yee reported that a special meeting was conducted in June with Regulation and Compliance to look at Chapter 32. Medical Direction is requesting the ability to review Chapter 32 prior to being send to the Governor's Advisory Board. Mr. Passmore stated that the current process will send the final draft to the Rules and Regulations workgroup that allows them 90 days to review the final draft. In early January, they will meet and make an action item to bring before the Governor's Advisory Board in February. Discussion by committee concerning the desire to review the draft. Mr. Passmore stated that perhaps the two committees should meet again with the final draft between October and January. Suggestion by Ron Passmore to have a representative from Medical Direction serve on the Rules and Regulations Committee. Dr. Yee to address with the GAB Executive Committee. b. AEMT Scope of Practice – Epinephrine in Cardiac Arrest Dr. Yee stated that the idea of allowing AEMT's to administer Epinephrine in Cardiac Arrest that was agreed to at the last meeting had caused some concern and was removed from being placed on the updated SOP presented to the GAB. Opened the floor for discussion and consideration. The email from Dr. Ornato was shared with the committee. Lengthy discussion concerning the matter. Dr. Brand made a motion to reaffirm the decision to make Epinephrine IV at the Advanced EMT level, a red dot skill. IM epinephrine will remain a black dot for anaphylaxis. Motion seconded by Dr. Louka. Further discussion concerning IM for anaphylaxis and nebulized epinephrine for respiratory distress. Final motion was to add a red dot for IV Epinephrine in Cardiac Arrest for the AEMT and a red dot for Nebulized Epinephrine for the AEMT and a red dot for Nebulized Epinephrine for the AEMT for croup. Final motion carried.	
VIII. New Business	 a. Invasive Temperature Monitoring - Dr. Asher Brand Dr. Brand stated he had been asked about temperature monitoring (rectal, esophageal probes) and whether it needed to be added to the Scope of Practice document. After significant discussion it was decided this did not need to be placed on the SOP document. b. National Registry Resolutions - Dr. Charles Lane Dr. Lane brought to the attention of the committee the recent resolution proposed by the National Registry Board of Directors concerning the removal of the requirement that CoAEMSP accreditation would be required for students seeking to take the National Registry certification examination. The National Registry was approached by multiple states and organizations concerning issues with CoAEMSP and legislation proposed to go away from the National Registry as the certification examiner. Ms. Akers shared that Mr. Gary Brown, 	

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	this resolution. Motion and second that the Medical Direction states that are in opposition of the move from the requirement for CoAEMSP accreditation. Motion carried with one abstention. c. Oversight of EMS providers at facilities – Dr. Yee Dr. Yee posed to the committee a question concerning the oversight of EMS providers employed by facilities and whether there should be some level of oversight. Long discussion held. Opinions concerning whether these individuals are covered by the facility they are working under, whether in the prehospital environment the requirement for Community Paramedic and Home Care agencies who would need to be covered by the OLC. d. Medical Direction representation on other committees – Dr. Yee Dr. Yee asked the committee what other committees they felt that Medical Direction should have a seat on. Rules and Regulations, Air Medical, EMSC, and Trauma were all mentioned. Dr. Yee mentioned that work had already begun on review of the workgroups. e. Red Dot verification by EMS agencies and physicians – Dr. Yee Opened discussion concerning how the documentation of training should be maintained. Document makes it appear that you must have an individual letter for every provider. Mr. Passmore stated he would revised the requirement so that a single document could list all providers approved for the red dot procedures and formulary. Discussion about the ability to share information, training, etc. between medical directors, regions, etc. Ms. Akers stated that Mr. Blosser could provide a demonstration for the next Medical Direction Committee meeting on the use of Blackboard.	nesponsible i erson
IX. Research Requests	None.	
X. State OMD Issues – Dr. Ge		
	Not present but had not submitted any items for discussion.	
XI. Office of EMS Reports		
	a. Division of Accreditation, Certification and Education Education Program Manager – Chad Blosser Just completed an Education Coordinator Institute in June where 24 new educators were provided the information on current and future requirements of EMS education based on the adoption of the 2021 National EMS Education Standards. Scholarship – 1.8 million dollars was awarded in scholarships for the current fiscal year with the majority of that being paid to individuals enrolled in Paramedic programs and then EMT courses. Report is available online. 2021 National EMS Education rollout sessions will begin in July and the ACE division will be presenting a session almost every Friday up to symposium and again after symposium ending in mid-August. The implementation of the 2021 EMS Education Standards will be a requirement for everyone enrolling in a course effective January 1, 2023.	

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	Division Director – Debbie Akers The 16 th percentile report will be posted in the next week. She advised the committee that there had been a decrease in the pass rates for Paramedic programs and they may want to take a look at all programs that they are serving as medical director for. Symposium has been schedule and 347 classes will be offered this year. Due to the financial constraints that agencies and individuals are experiencing, the cost of the symposium for 2022 will be \$100. The Accreditation report is available online at the link provided and was forwarded by email to the committee earlier this week. b. Director/Asst. Director – Gary Brown	
	Not present c. Asst. Director – Scott Winston Advised the committee that the staff had returned to the office this week. Experiencing some latency in the network but otherwise things are running smoothly. Next Advisory Board meeting will be held on Friday, August 5 th at 10:00. State Health Commissioner Dr. Colin Greene is planning to attend that meeting. Following the Advisory Board meeting, Dr. Greene will be oriented to the Office of EMS, key programs and services provided by the Office of EMS. Encouraged the committee to review the quarterly report that is produced by the office. It is an excellent resource and provides the latest updates on all divisions of the Office of EMS.	
	 d. Associate Director – Adam Harrell Not Present e. Emergency Operations – Karen Owens Advised the committee that a new planner (Carrie Magner) had been hired by the office. She will be helping with preparedness on the disaster side but also looking at agency continuity. At the NASEMSO conference, there was a resolution that was supported by the board to look at the feasibility of an emergency support function specific to EMS and Disaster Response which would give EMS more of a voice especially at the federal level but also at the state level. July 16th is the national kick off of 988 which is the mental health three-digit number. The Marcus Alert is more Virginia based and 988 will be going into effect. Educational information will be put out about what 988 is, how it is used, and will use some of the national resources as they share and educate providers on this new contact line. Discussion concerning the routing of the telephone calls and not being answered in the geographic location the call is being placed from. Question from Dr. Yee concerning triage tags. Ms. Owens stated that currently there are no triage tags available 	

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	to provide the tags due to not being able to obtain the resources in the required time frame. Long discussion	
	concerning use of tags and the value of doing so. Ms. Owens asked that she be able to take this matter to the	
	Emergency Management Committee to research what other states are doing, what resources might be available	
	in place of triage states and bring it back to the workgroup.	
	f. CHaTR – Tim Perkins	
	Not present	
	g. Trauma Services – Mindy Carter	
	Not present	
	h. Regulation and Compliance – Ron Passmore	
	Reported that Regulation and Compliance has started posting the data compliance reports for agencies. Please	
	make sure you are reviewing the compliance by your agencies. Stated that there are agencies who are using	
	other reporting systems are showing 100% on their side but no records have been transitioned to the Office of	
	EMS due to mapping problems from their vendor to the state. Provided insight on where to find the report on	
	the OEMS website.	
XII. PUBLIC COMMENT	None.	
XIII. Quarterly Meeting Dates	October 6, 2022	
for 2022	January 5, 2023	
XIV. Adjournment	The meeting adjourned at 2:50 p.m.	

Respectfully submitted by: Deborah T Akers Division Director

Attachment A

Scope of Practice

Attachment B

National Registry Statistics

Attachment C

Accreditation Report

Attachment D

EMSSP Report