

MEDICAL DIRECTION COMMITTEE
Office of Emergency Medical Services
Embassy Suites, 2925 Emerywood Parkway, Richmond, VA 23294
Thursday, October 6, 2022
10:30 AM

Members Present:

Allen Yee, M.D., Chair
 Stewart Martin, M.D.
 Charles Lane, M.D.
 Wendy Wilcoxson, M.D.
 John Morgan, M. D.
 E. Reed Smith, M.D.
 Amir Louka, M.D.
 Asher Brand, M.D.
 Scott Weir, M.D.
 Christopher Turnbull, M.D.
 Tania White, M.D
 Paul Phillips, D. O.
 Samuel Bartle, M.D
 George Lindbeck, M.D.
 Rahil Dharia, M.D.
 Eddie Ferguson

Members Absent:

None

Staff:

Debbie Akers
 Chad Blosser
 Adam Harrell
 Ron Passmore
 Gary Brown
 Cam Crittenden
 Scott Winston
 Karen Owens
 Melinda Carter
 Jasper Williams
 Chris Vernovai

Hybrid Offices:

Daniel Linkins
 Amada Loreti
 Wayne Perry
 Kelsey Rideout

Others:

Joann King
 Chris Christensen
 Jeffrey Ferguson
 Cathy Cockrell
 R. Jason Ferguson
 Greg Neiman
 Al Thompson
 Denise Ware
 Monique Dixon

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 Administration (DEA) & Board of Pharmacy (BOP) Compliance Issues – Dr. Lindbeck	Not much has changed from the last meeting. Agencies that are applying for CSRC’s are waiting months for visits from BOP.	
Special Reports	Needle Decompression Presentation	

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	<p>Dr. Young and Valerie Quick from UVa made a presentation (see attachments) on Over Utilization of EMS Needle Decompression.</p> <p>https://www.cureus.com/articles/102417-paramedic-understanding-of-tension-pneumothorax-and-needle-thoracostomy-nt-site-selection</p> <p>Valerie Quick presented material with input and a wrap up by Dr. Young. The floor was open for questions and discussion.</p> <p>Asher would like to create a “red dot” to the SOP for this skill. Dr. Lindbeck ask that we not create a red dot as those were limited to procedures which were tied to critical care transport.</p> <p>Motion: That Dr. Yee create a draft letter to be presented at the next meeting and then sent to OMD’s and EMS agencies—Yee amendment—work with TCC to create a joint letter that will work for OMD’s agencies and educators on this topic perils and merits of needle decompression.</p> <p>Ketamine Usage</p> <p>Dr. Yee, asked Valerie Quick about her inferred question of the comfort with the usage of ketamine when discussing needle decompression.</p> <p>Over usage of ketamine is a problem, system wide is one of her major concerns. A brief discussion ensued regarding the use of ketamine in Virginia, the intent for usage (why it was added to the SOP in the first place) and what can be done to help illuminate ED’s as to why EMS uses ketamine in the field.</p> <p>Ketamine continues to have a “bad rap” in the medical field, especially when it comes to use of the drug in the field.</p>	<p>Motion carried unanimously.</p>
VII. Old Business	No old business.	
VIII. New Business	<p>Ambulance Hold Times for ED’s</p> <p>Dr. Louka brought up that there are agencies in the Commonwealth that are struggling with being held for some length of time at the hospitals.</p>	

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	<p>Federal EMTALA laws-- https://www.cms.gov/Regulations-and-Guidance/Legislation/EMTALA--states that within 250 feet of the facility, the hospitals are solely responsible for the patient care, even if the patient is in the ambulance.</p> <p>PWC EMS Physician, Dr. Neha Sullivan spoke to the committee on her experience during the pandemic with EMTALA requiring that EMS crews leave patients outside until there is a room/bed available for them. The hospital have continued to follow this policy post pandemic. Patients are not visible to hospital staff during this time. Even the Physician has been turned away from the ED when taking patients in.</p> <p>There have been multiple e-mails, calls, etc with the hospital system and there has been no change at this hospital system. A federal complaint has been filed and there has already been VDH OLC involvement in this investigation.</p> <p>The committee asked several questions of Dr. Sullivan regarding the steps she has taken to date regarding this issue.</p> <p>Dr. Sullivan will meet with OEMS staff offline regarding this issue and how the Office can assist with this issue.</p> <p>Motion: Dr. Weir made a motion stating: “CMS has in 2000, 2006 and 2021 staked a position on this matter: <i>“EMTALA is triggered whenever a patient presents to the hospital campus, not just the physical space of the ED, that is, within 250 yards of the hospital. Hospital-owned or operated ambulances have an EMTALA obligation to provide medical screening examination and stabilization.”</i> and the state MDC agrees with this position.” Seconded by Dr. Morgan.</p> <p>Refusal by Parents of Children Under the Age of 6 Months</p> <p>Dr. Yee had a casual conversation with Dr. Barta regarding parents who have refused or declined treatment for children under 6 months of age and Dr. Barta has seen adverse outcomes due to these refusals. Should EMS be able to “refuse” a refusal by a parent for a patient under 6 months? If so, how would we implement this? Medical ECO?</p> <p>A vigorous discussion ensued between the committee members. MDC will keep this issue on their radar.</p> <p>TCC Report</p> <p>Dr. Lane introduced the new office policy for those in legal rec,</p> <p>Dr. Lane was again requested to serve as the liaison to TCC. The committee unanimously agreed.</p>	<p>Approved unanimously.</p>

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	<p>NREMT Resolution 13</p> <p>Dr. Yee made everyone aware that Resolution 13 was repealed by NREMT. The general consensus of the committee was that this was the right move on the part of NREMT.</p>	
IX. Research Requests	None.	
X. State OMD Issues – Dr. George Lindbeck		
	Dr. Lindbeck indicated that there was one SOP change request to add H2 blockers. Request is for adding PPI's to the H2 blockers line with black dots. Primarily for IV's and transport agencies.	Approved by consensus
XI. Office of EMS Reports		
	<p>1. ACE Division</p> <p>a. Education Program Manager – Chad Blosser, OEMS</p> <ol style="list-style-type: none"> i. The scholarship program is in its 5th full year. The report provided shows the distribution of funds through the 1st quarter of the year for FY23 of the scholarship program. ii. Of note are: <ol style="list-style-type: none"> 1. We are ahead of years past with just shy of \$1 million dollars in funds distributed in the 1st quarter. 2. Main certification levels using the program continue to be EMT and Paramedic students. iii. Education Coordinators <ol style="list-style-type: none"> 1. We have 690 certified Education Coordinators in Virginia. iv. Education Coordinator Certification Program <ol style="list-style-type: none"> 1. As of October 5, 2022, there are 210 candidates in the pipeline to become Education Coordinators in Virginia. Of these 210 candidates, there are <ol style="list-style-type: none"> a. 9 candidates are fully eligible to attend the next EC Institute. b. 65 candidates have not completed any of the requirements of the program c. 175 candidates who have not completed their required NREMT testing. v. EC Institutes <ol style="list-style-type: none"> 1. The ACE Division just completed an institute in Fredericksburg in late September. 26 new educators added to the system. Candidate preparation was excellent and it appears as though the EC Mentorship process is beginning to meet its original intention. 2. The next institute is scheduled for late January in SWVA at the Southwest Virginia Higher Education Center. 3. We are currently in the planning stages for Institutes for the remainder of the 2023. vi. EC Updates 	

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	<ol style="list-style-type: none"> 1. Due to the COVID extension of EC certification expirations in June 2022, 98% of EC's all recertified at the same time and in the same year. We will only hold 4 EC Updates in 2023 due to this—these will be spread across the state: one is SWVA, one in the Shenandoah Valley, one is Western and one in either Southside or the Hampton area. vii. 2021 NEMSES Rollout <ol style="list-style-type: none"> 1. Conducted 5 rollouts to date: Hampton, Virginia Beach, Fredericksburg, Weyers Cave, and Roanoke. b. Division Director – Debbie Akers, OEMS <ol style="list-style-type: none"> i. Accreditation report highlights include: AEMT in Northern Neck Paramedic program in Newport News seeking LoR. ii. Debbie provided an update on the current status of the EMS Symposium and attendance. iii. Under 16 & 18 olds for enrollment in BLS and ALS courses based on a high school student and the iv. EMT student clinical rotations continue to be a problem—there is an expectation that students be placed on a clinical environment for at least 5 live patient contacts. v. NASEMSO AEMT Student Minimum Competencies were discussed. More will be released in the near future as NASEMSO finishes up its work on this process. 2. State Medical Director – Dr. George Lindbeck – No report. 3. EMS for Children <ol style="list-style-type: none"> a. Chris Vernovai provided an update for EMS for Children. 35 seats remaining for EMS Symposium. b. Child restraint systems for agencies, contact Dave Edwards. c. Final year of funding for HRSA grant. New grant application is being finalized. Any ideas for new programs, contact Dave Edwards. 4. CHAtR Division <ol style="list-style-type: none"> a. MIHC program applications need to be submitted to OEMS ASAP. b. HandTeavy is available for all ALS agencies in the Commonwealth for free. 5. Regulation & Compliance – Ron Passmore <ol style="list-style-type: none"> a. Final Chapter 32 draft was finished on Tuesday, October 4, 2023. <ol style="list-style-type: none"> i. Goes through GAB at their May meeting. ii. Goes to BOH September 2023 for approval. <ol style="list-style-type: none"> 1. New DIBR Process. SOP Formulary & Procedures—any changes must be approved through regulatory <ol style="list-style-type: none"> a. 90-day process 6. EMS Administration - Gary Brown <ol style="list-style-type: none"> a. OEMS has met with acting Chief of Police in Norfolk regarding symposium safety. They will target the true problem spots while Symposium is being conducted and step up security in the area. a. GAB Bylaws have been reviewed and approved. 	

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	<ul style="list-style-type: none"> b. GAB workgroup looking at the composition of the advisory board: <ul style="list-style-type: none"> i. Should it be a policy board? ii. Elevate EMS to a Department? iii. Health and Human Resources? Public Safety? c. OEMS leadership participated in the VA Fire Services Council meeting in Oilville, VA. <ul style="list-style-type: none"> iv. Meeting took place last week of September. v. Create an annual legislative packet. <ul style="list-style-type: none"> 1. Requesting that EMS be designated as an essential service. 2. Seeking a budgetary increase. Have not had one in 20 years. Crosswalk table being developed. 3. All participants agreed that these two items should move forward to the GA. 4. Elevate EMS to a Department status will be mentioned in the legislative packet. 5. Next meeting November 17th and 18th at the Embassy Suites in Richmond. b. Scott Winston <ul style="list-style-type: none"> i. Cancer presumption update was provided. ii. VDFP looking to add personnel to VLORS. c. Adam Harrell <ul style="list-style-type: none"> i. The OEMS Epi Group is working on dashboards to provide data to EMS Physicians. ii. Integration of EMS data with hospital data (Hospital Data Exchange) is in progress with 5 hospitals online now and others coming online over the next few weeks. d. Karen Owens <ul style="list-style-type: none"> i. Ebola is back. She provided a brief update and indicated that VDH and OEMS will continue to monitor and reach out to EMS Physicians as needed. ii. Five (5) airports will be used for all people from Uganda. Dulles is one of these hospitals. iii. VHHA Ebola update will occur on Friday, October 6, 2023. iv. PSAPS will again be requested to a change questions they are asking those who call. 7. Other Office Division Directors. <ul style="list-style-type: none"> a. Trauma & Critical Care <ul style="list-style-type: none"> i. Trauma committee meetings will take place the week after symposium leading up the EMS Advisory Board meeting. ii. Getting back on track for trauma center reviews and will be caught up by spring 2023. 	
XII. PUBLIC COMMENT	None.	
XIII. Quarterly Meeting Dates for 2023	<ul style="list-style-type: none"> • January 5, 2023 • April 6, 2023 • July 6, 2023 • October 5, 2023 	
XIV. Adjournment	The meeting adjourned at 2:12 p.m.	

Respectfully submitted by:
Chad Blosser
Education Program Manager, ACE Division

DRAFT

Attachment A

Scope of Practice

Attachment B

National Registry Statistics

Attachment C

Accreditation Report

Attachment D

EMSSP Report