



**Peninsulas Emergency Medical Services Council, Inc.**

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**PEMS PIC Meeting Minutes**

A Subcommittee of the Medical Advisors Committee

Meeting Date:10-17-16

Meeting Location: PEMS

Chaired By: S. Beam

Begin Time: 10:18 a.m.

End Time: 11:20 a.m.

Minutes Submitted By: D. Thomas

Draft  Approved Date:

Members Present:	Members Absent:	Staff:	Others:
Beam, Shanon	Andrews, Jerry	Hoyle, Paul	Messina, Sal (Middlesex VRS)
Messina, Lorie	Baker, Greg	Thomas, Debbie	
	Berry, Wayne		
	Brann, Jimmy		
	Browne, Jeff		
	Burford, Amy		
	Burnette, Jane		
	Campbell, Sue		
	Carter, Ken		
	Frigge, Caren		
	Hall, Skip		
	Harper, Kimberly		
	Hogge, Lauren		
	Jowers, Karen		
	Kauffman, Janice		
	Laing, Jim		
	McGregor, Terrence		
	Miller, Lou Ann		
	Stojanov, Joe		
	Wilson, Debbi		

Item	Discussion	Action Required	By Whom/When
Call to Order	By S. Beam at 10:20 a.m.		

Item	Discussion	Action Required	By Whom/When
Introductions	Members introduced as listed above. No attendees via TC.		
Approval of Minutes	Minutes from the 7-11-16 meeting were reviewed and approved with addendum to include MIR review. P. Hoyle will take care of making change to the previous minutes	MIR addendum to previous minutes	P. Hoyle 10/20/2016
Membership Changes	D. Thomas assumes responsibility as PEMS representative to the PIC effective today. P. Hoyle will remain as PEMS point of contact for all MIR review and reporting.		
Staff Reports	<p>STEMI – D. Thomas reviewed a limited amount of STEMI data she received from MIH &amp; SHC facilities representing primarily Peninsula agencies. From the limited amount of data reviewed, it appears that EMS is:</p> <ol style="list-style-type: none"> <li>1) Getting EKG within 10 minutes</li> <li>2) Identifying STEMI in the field appropriately</li> <li>3) Giving ASA prior to arrival at hospital</li> <li>4) Minimizing transport times and transporting appropriately to help with a FMC to Cath of &lt;90 mins.</li> </ol> <p>MIH Reported that for the time period of April – June, 2016 there were 7 STEMI patients brought by EMS and 5 arriving via POV. Regional need to educate public on benefits of calling EMS vs. POV transport.</p> <p>Stroke Triage – P. Hoyle indicates that he has added the additional slides detailing agency data to last PIC meeting presentation. D. Thomas reports on the upcoming protocol changes to Stroke management/transport with regard to use of the RACE scale. S. Beam states we should begin educating providers on how to use the RACE tool now...but formal protocol roll-out education will begin in January, 2017 with protocol implementation in March, 2017.</p> <p>Trauma Triage – L. Miller provided data from RRMCC for field needle thoracotomies performed on patients who did not require it. Since the group was so small, we discussed briefly but will table further discussion of whether we need to provide better education for indications of field needle thoracotomies or whether we need to recommend changes to the PPP committee. – L. Miller will address all of this again at our next meeting.</p>		
Old Business	Discussed coordinating PI meetings with task force meetings. At this point, it is felt by PEMS Exec. Director that this wouldn't work as all TF meetings are quarterly-so is the PIC which would mean it would always fall on the same task force. In addition, the task forces would not be in a position to discuss other medical emergencies that might need PI review. For right now, it is felt we need to leave the meetings as they are.		
New Business	None.		
Good of the Order	<p><b>Important Dates:</b></p> <ol style="list-style-type: none"> <li>1) Dinner with a Doc featuring Dr. Ramikrishnan (RRMC) will be held at <b>Olivia's</b> Restaurant on Main Street in Gloucester VA. <b>October 25, 2016 at 6:30 p.m.</b></li> <li>2) PEMS Rural EMS Expo has been rescheduled for <b>March 11-12, 2016</b> to be held at Rappahannock Community College. Please save the date and spread the word.</li> </ol>		
Adjourn	Meeting was adjourned at 11:20 a.m.		
Closed Session	<p>P. Hoyle reviewed the following MIRs:</p> <ol style="list-style-type: none"> <li>1) 16-005 Mother/child transported separately without ID bands. Resolution through 2017 protocol changes.</li> <li>2) 16-007 Inconsistent documentation for narcotics usage. Found to be doc error. Referred to agency for action. No action required by PIC.</li> <li>3) 16-009 EMS cleared C-Spine on MVC patient w/ ETOH. Referred to agency for action. No action required by PIC.</li> </ol>		

<b>Item</b>	<b>Discussion</b>	<b>Action Required</b>	<b>By Whom/When</b>
	4) 16-010 VAMC requested 9-1-1 transport for non-emergent condition. Cleared by correspondence. No action required by PIC.		

Draft