



Peninsulas Emergency Medical Services Council, Inc.

PO Box 1297, 6876 Main Street

Gloucester, VA 23061

Office (804) 693-6234 - Fax (804) 693-6277

PEMS Pediatric Care Committee Meeting Minutes

A Subcommittee of the Board of Directors

Meeting Date: 11-15-22

Meeting Location: Virtual

Chaired By: S. Bartle

Begin Time: 10:05 AM

End Time: 11:56 PM

Minutes Submitted By: S. Craig

Draft **Approved Date:**

Members Present:	Members Absent:	Staff:	Others:
Bartle, Samuel (C) (TC)	Dalkin, William	Craig, Seth (TC)	Marquardt, Elizabeth (Sentara WRMC) (TC)
Burhop, James (VC) (TC)	Haggerty, Ashley	Pincus, Steve (TC)	
Ewers, Britney (TC)	MacLasco, Adam		
Louka, Amir (TC)	Moorey, William		
	Samuels, Gary		
	St. George, Dustin		

Item	Discussion	Action Required	By Whom/When
Call to Order	Meeting called to order at 10:05 am by S. Bartle.		
Introductions	Introductions were made online.		
Approval of Minutes	A. Louka made a motion to approve the minutes from July 20 th , 2022 and October 19 th , 2022. J. Burhop seconded the motion. The motion was approved unanimously.	Send final Minutes to S. Pincus	S. Craig
Membership Changes	A motion was made to add Elizabeth Marquardt from Sentara WRMC by S. Bartle. Motion was seconded and approved unanimously.	Update Roster	S Pincus/K Brophy
Staff Reports	S. Craig congratulated the PCC for winning the Governor’s Award for Outstanding Contributions to EMS for Children. S. Bartle recognized A. Louka for having the vision to get the Committee started. S. Bartle indicated that other regions are very interested in what is happening at PEMS. J. Burhop concurred that this Committee has made significant impact on the direction of prehospital pediatric care. B. Ewers is working on their pediatric trauma program.		

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	S. Bartle made a recommendation for the PCC to look at Pediatric cases that come up in the region, not punitively but to study how the protocol changes and new protocols impact care in PEMS. A. Louka offered to share the first case of an infant RSI case. He will also reach out to other OMDs in the region.		
Old Business	<p>a. Handtevy- some agencies in the region have been using it for awhile, some have just started, some have not incorporated it yet. No input today, Committee is willing to review it in MS Teams. A. Louka indicated that his crews are really enjoying the app. It will export data (meds, administration time, etc) to the ePCR. A. Louka expressed concern about the CPR component and ventilation rate. Handtevy is set at 10 BPM while PEMS is going to use 3 BPM.</p> <p>b. Pediatric Hypotension/Shock Protocol- A. Louka has revised the draft protocol to include a pump is preferred if available. He also indicated that the other significant change was to simplify the protocol, removing 10-20 mL/kg and just made it 20 mL/kg and increased max dose to 60 mL. S. Bartle emphasized the importance of continuous reassessment. A. Louka indicated the importance of training on treating kids, such as push/pull instead of 1000 L pressure bag infuser. S. Bartle agreed that there need to be safeguards in place to help prevent fluid overload. E. Marquardt suggested using the PEMS YouTube Channel. S. Bartle suggested making it very clear not to use a pressure bag. A. Louka indicated that it is in the PEARLS, but could be moved up into the protocol. J. Burhop agreed that it should be clear not to use a pressure bag. A. Louka asked about Epinephrine or Norepinephrine? The Committee agreed with keeping Epinephrine in pediatrics. S. Bartle is going to discuss with coworkers about aliquots instead of exact calculations. A. Louka also indicated that it could also be divided by age or weight. S. Bartle asked to highlight reassessment between each bolus.</p> <p>c. Pediatric Crush Protocol- Should it be 15 or 30 minutes? S. Bartle indicated that his colleagues did not have a preference on time, “it’s crushed when it’s crushed.” A. Louka suggested that EMS personnel contact MC early when suspected long extrication or crush. He will match the hypotension and shock fluid resuscitation guidelines. Emphasize importance of early recognition and intervention.</p> <p>d. Pediatric Sepsis Protocol- A. Louka indicated that the criteria was difficult to make easy to use. The new draft is significantly different than the previous one. If there are any criteria that could be eliminated, let Dr. Louka know. It was recommended to move the mentation towards the top of the criteria. J. Burhop suggested broadening the high risk patient to “technology dependent child” or something similar, and CP and sickle cell. May also include recommendation to contact MC when patient’s parents refuse transport.</p> <p>e. Pediatric Behavioral Emergencies Protocol- A. Louka added information regarding 14 years and older refusing care. A. Louka may copy over verbiage from other protocol.</p> <p>f. Neonatal Resus. Training- S. Bartle indicated that it ties into earlier discussion for prehospital and hospital setting. A. Louka offered to reach out to the VCU Neonatologist about helping with training. B. Ewers offered to help with</p>	<p>Discuss with coworkers the fluid resuscitation process recommendations</p> <p>Send drafts to S. Craig for dissemination to PCC</p> <p>Update verbiage for sepsis protocol.</p> <p>Review Sepsis Draft and email A. Louka feedback</p> <p>Review verbiage</p> <p>Reach out to VCU Neonatologist about NRP for EMS</p>	<p>S. Bartle/J. Burhop/ A. Louka</p> <p>A. Louka</p> <p>A. Louka</p> <p>PCC/ASAP</p> <p>PCC</p> <p>A. Louka</p>

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	implementing Neonatal Resusc. Training as an NRP instructor.		
New Business	<ul style="list-style-type: none"> a. S. Bartle asked what the group would like to do to assist other EMS regions? A. Louka recommended taking it the State Medical Direction Committee to offer help/resources. Locally A. Louka recommended just gathering data on most common peds call, medications administered other than Albuterol. b. S. Pincus suggested training on how to communicate/interact with parents of children with special needs. c. S. Bartle suggested making the next meeting in person and map out the direction/vision of the Committee. 	Gather data on what are common peds calls and med administrations beyond albuterol	PEMS PIC (S Craig)
Good of the Order	Next Meeting is scheduled for Wednesday January 18th, 2023 at 11:00 am. The Committee is considering meeting in person.		
Adjourn	Meeting was adjourned at 11:56 am		