



Peninsulas Emergency Medical Services Council, Inc.

PO Box 1297, 6876 Main Street

Gloucester, VA 23061

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

PEMS Pharmacy Committee Meeting Minutes

A Subcommittee of the Board of Directors

Meeting Date: 11-06-19

Meeting Location: PEMS

Chaired By: G. Blake

Begin Time: 3:07 PM

End Time: 4:13PM

Minutes Submitted By: J. Bendit

Draft Approved Date:

Members Present:	Members Absent:	Staff:	Others:
Blake, Greg (TC)	Beam, Bradley	Bendit, Jeffrey	Patterson, Brandon (TC)
Bridges, Wendy (TC)	Berry, Wayne		
Eaker, Mary	Harmon, Mike		
Efremidis, Laurie (TC)	Horton, John		
Elzarian, Ed (TC)	Langley, Cindy		
Harris, Sandra	Lawson, Cheryl		
Hopkins, Suzanne (Chair)(TC)	Olatunji, Kemi		
Javier, June (TC)	Rizzo, Sarah		
Kaplan, Marcus (TC)	Rowles, Charles		
Lyon, Sharon (TC)	Sim, Terri		
Perkinson, Lindsay (TC)			
Ryman, Kristy (TC)			
Sledge, Tyler (TC)			
St. George, Linda (TC)			

Item	Discussion	Action Required	By Whom/When
Call to Order	Meeting called to order at 3:07 pm. By G. Blake.		
Introductions and Membership Changes	Attendance as recorded above. Changes: Add Marcus Kaplan as the Sentara Norfolk General Hospital Pharmacy Licensed Pharmacist. Pharmacy representative: <ul style="list-style-type: none">MAC- Monthly meeting- T. Sledge volunteered. S. Harris 2nd. Unanimously approved.		

Item	Discussion	Action Required	By Whom/When
	<p>Next MAC MTG: December 10, 2019 1300.</p> <ul style="list-style-type: none"> • PPP- Quarterly meeting- G. Blake volunteered. S. Harris 2nd. Unanimously approved. <p>Next PPP MTG: November 14, 2019 1000.</p>		
Minutes	8-07-2019 Minutes approved as written. Motion to approve by J. Javier. 2 nd by T. Sledge. Approved unanimously.	Post Final Minutes	J. Bendit/11-7-19
Staff Report	<ul style="list-style-type: none"> • Contract Deliverables. 4th Quarter Hospital Exchange Program: PEMS Medication Box Plan, PEMS Medication Box Shortage Policy. Review for discussion and approval next meeting to forward to MAC. • Medication Boxes at PEMS. J. Bendit discussed Diversion issue affecting a “like” Council that potentially had some medication issues. They did not have a good tracking mechanism for their medication boxes. We are ahead of the game with the Clearly Inventory tracking system. This Council is currently implementing the Clearly Inventory program in their region. We are taking more steps by adding bi-monthly random inventory checks at the agencies and changing the PEMS Medication Box Plan to include this in the PEMS responsibilities, agency responsibilities, and hospital responsibilities. I conducted a random inventory at Hampton Fire and York County in October. York County was initially about 80% accurate initially and becoming 100% accurate after about a week. Hampton Fire was initially about 75% accurate initially and found all but 3 boxes by today’s meeting. There is concern for 1 box because it was issued to Hampton Fire by Sentara CarePlex on July 7, 2019. This is concerning because during recalls or changes in medication inventory have typically taken approximately 6 weeks to accomplish in the past. More to follow. Hospitals have the ability to do their own tracking by pulling data from Clearly Inventory and physically comparing to the boxes you have on-hand. I will put a bi-monthly check in the plan as well. 	Review Plans and vote prior to 4 th quarter	Pharmacy Committee/2-5-20
Old Business	<p>Discussion regarding the current and growing list of drug shortages-</p> <ul style="list-style-type: none"> • Haldol • Calcium Chloride • Ketamine (Shortage has improved slightly) • Magnesium Sulfate • Lidocaine • Dextrose abboject • Epinephrine • Dopamine • Amioderone • Ativan • Atropine • Sodium Bicarb Abboject <p>G. Blake stated that exterior 3x5 cards need to be used as addressed in the PEMS Medication Shortage Policy and by this committee in the past. When inventorying the PEMS Boxes, please ensure these 3x5 cards are updated to reflect accurately. L. Perkinson stated Epinephrine Abbojects are in shortage and asked if she needed to mix preloads. G. Blake and J. Bendit state it has been common to reduce 8 epinephrine to 6, 4, 2,</p>		

Item	Discussion	Action Required	By Whom/When
	and 0 if needed due to the back-up multi-dosed Epinephrine vial that is in the inventory. There is currently no need to mix any additional preloads of Epinephrine because of the 30ml vial.		
New Business	<p>Epi-pen potential options submitted by PPP to MAC for approval and addition to March 2020 Protocols:</p> <p>OPTION 1: Junior color-coded syringes. (CERTADOSE). CERTADOSE Representatives J. Lynch and C. Lowry present at PEMS to present CERTADOSE Pediatric Epi kits. Concern for cost. Discussion by several pharmacists in the meeting stated that they have concerns and recommend only putting the color-coded syringes only in the epinephrine kits with a 1mg/1mL vial into the PEMS Yellow Epi kits. J. Bendit mentioned possibility of placing this in the yellow epi-pen kits for BLS agencies.</p> <p>OPTION 2 (awaiting approval from MAC): EPI-RITE syringe. 1ml vial or 1ml ampule Epinephrine 1/10,000 or 0.1mg/1ml. Ensure filter needle with ampules and needle with 1ml EPI-Rite syringe. Administration doses with this system TBD and will potentially be in Protocol update. Training will be needed for all EMT providers that are eligible to give for anaphylaxis.</p> <p>All in the PEMS Pharmacy Committee liked the option 2 in order to reduce cost. J. Bendit recommended the assigned Pharmacist needs to attend the PPP and MAC Committees to address. They also like the idea of CERTADOSE only being placed in the few Epi kits in the region. They also would prefer option 2 EPI-Rite to be placed in all PEMS Medication Boxes if possible.</p> <p>J. Bendit stated that there was a recent incident involving a PEMS Medic and witness wastage at CHKD. TEMS is allowing a second EMT witness wastage due to the 2015 change in regulations. Virginia Administrative Code; Title 18. Professional and Occupational Licensing; Agency 110, Board of Pharmacy; Chapter 20. Regulations Governing the Practice of Pharmacy; 18 VAC110-20-500. Licensed Emergency Medical Services (EMS) Agencies Program A. 6. "Destruction of partially used Schedules II, II, IV, and V drugs shall be accomplished by two persons, one of whom shall be the EMS provider and the other shall be a pharmacist, nurse, prescriber, pharmacy technician, or a second EMS provider." J. Bendit wanted to note that this section also shows that the documentation shall be maintained in the pharmacy for a period of 2 years from the date of destruction.</p>	<p>Once MAC Approves, pharmacies to order for inclusion in Epi-kits</p> <p>Attend PPP and MAC for recommendations</p>	<p>Pharmacy Committee prior to March 2020</p> <p>Pharmacy Rep/Nov 19-Dec 19</p>
Good of the Order	<p>Important Dates:</p> <ul style="list-style-type: none"> • VAOEMS Virginia EMS Symposium November 6-10, 2019. • PEMS Annual Protocol update March 1, 2020. • PEMS Celebrate EMS Day at Busch Gardens May 16, 2020. <p>G. Blake wanted to state by the end of the meeting that there have been EMS Providers that came to the pharmacy to exchange the PEMS Anaphylaxis kits. They have stated at least 1 hospital has told these providers to go to RWRH pharmacy to exchange them. He asked that all hospitals exchange them as agreed upon by the PEMS Ambulance Restocking Agreements. It should not be sent to one hospital system when the patients are transported to those other hospitals with anaphylaxis as well.</p>		
Next Meeting	<p>Attendance verified as recorded above.</p> <p>The next meeting is scheduled for Wednesday, February 5, 2020.</p>		
Adjournment	<p>Meeting adjourned at 4:13 p.m. Motion by. S. Harris 2nd by T. Sledge. Unanimously approved to adjourn.</p>		

DRAFT