



Southwest Ohio Protocol Committee Minutes

April 26, 2019

0900-1100

Blue Ash Fire Department



Attendance

Woods Curry, Paul Gallo, Larry Baibak, Michelle Barrett, Justin Benoit, Michael Bilkasley, Kelly Brookbank, Todd Burwinkel, Rob Butcher, Dustin Calhoun, Ken Crank, Brian Doering, Lauren Duffy, David Geiger, Royce Goodpaster, Amy Graham, Dan Mack, Tyler Marsan, Joe McElroy, Jason McMullan, Darren Mooney, Mathew Neth, Mel Otten, Shane Packer, Ross Pawlak, Jennifer Ploeger, Joel Pranikoff, Matthew Roberts, Ben Shapiro, Paul Spellman, Michael Spigner, Joe Stoffolano, Kevin Uhl, Amanda Ventura, Dillon Vidourek, Scott Williams, Bryan Young, Alex Zozula , Haki Zuberi

Action Items	Person(s) Responsible	Target Date
Pediatric Sepsis Protocol	Ken Crank & CHMC	June 21, 2019
Syncope (or include with AMS)	Joe Stoffolano	June 21, 2019
OB and GYN	Dr. Pranikoff & Dr. Ventura	June 21, 2019
P612 update	Michelle Barrett & Dr. Zozula	June 21, 2019
M411 update	Dan Albertz , Dr. Otten & Michelle Barrett	June 21, 2019
M403 Update	Dr. Spigner	June 21, 2019
T701 update	Brian Doering , Dr. McMullan, CHMC	June 21, 2019
S506 Remove TXA maintenance infusion	Ken Crank & Michelle Barrett	June 21, 2019
Adult Quick Reference update	Dane Fienning	Sept. 20, 2019
P607 and M403 inconsistencies	Ken Crank	June 21, 2019
TXA Checklist update	Paul Gallo	June 21, 2019

New Protocols

A. Pediatric Sepsis

Still in progress; will work on placing in into the adult sepsis.

B. Syncope

Still in progress, will be prepared for next meeting

C. End-of-Life Care/Palliative Care

ODH/State met in Columbus and approved form changes. Changes will occur officially in September and this Protocol will mirror state changes. Specific changes will be brought to our next meeting. If interested in attending next meeting, see Brian Doering. Items will be forward to the committee.

D. OB and GYN

Imminent delivery protocol adjusted and combined with pregnancy complications. Preeclampsia is with seizures. Seizures and Hemorrhaging still need adjusting, group will meet to clean up. Seizures- discussion of adding options for blood pressure control. Also, there was discussion on

Midazolam vs. Mag for seizing pregnant patients. The age of fetal viability was changed from 24 to 23 weeks. Discussion of protocol length and complexity. Discussion on adding in APGAR score for reference. Added maternal considerations for cardiac arrest, same as trauma section. Will continue to work on this and bring it back to the group next meeting.

Protocol Updates/Revisions

A. **S505 and P612 pain management changes**

Add in Acetaminophen for Adults. Will look at dosing and frequency for opiates. There is interest in adding Acetaminophen for Pediatrics as well. Will look at adding in suspension and pill dosing for weight based peds. IN Ketamine discussion- Put off currently due to difficulty of dosing and experience using Ketamine. S505 Adult pain management **APPROVED**. Dr. Zozula and CCHMC will bring back Pediatric for approval.

B. **M411 – Glucagon and Calcium Gluconate dosing & Conflicting naran doses in M411 and P611**

Protocol cleaned up for the appropriate emergencies we encounter. See (I) about calling poison control center. Naloxone should be changed to max 4mg across the board to accommodate naloxone administration devices often available only in 4mg doses.

C. **S500, T701, T710 Updates**

Waiting for CCHMC recommendations for needle decompression

D. **Trauma protocol for > 60 with CVA or CHF**

Added CHF and CVA to special considerations. Lengthy discussion on geriatric trauma age. Decision to keep at 65.

E. **P604 – dose for Adenosine in steps 4 and 5**

APPROVED with changes.

F. **S506 – Pediatric maintenance infusion of TXA**

Will be taking out maintenance infusion, will clean up and resubmit.

G. **Quick Reference Update**

No update.

H. **A105 and C308 inconsistencies**

Dr. Calhoun planning to go through entire protocol to clean up inconsistencies with oxygen administration and will come back to the committee.

I. **Magnesium for Asthma**

Changes made that Pharmacist recommended. Added IV mag for Asthma treatment. See (P) for dosing. Discussion for listing treatment in order of ease of administration. Discussion of adding “anticipate” repetitive albuterol treatments to give steroids. Also, discussion of adding what “impending” respiratory failure looks like. Will update and bring back to group.

J. P607 and M403 inconsistencies

No clarification was made. There was confusion in the field on which protocol to use for a 16 year old. P607 states 3-16 years old and M403 is ≥ 16 years old.

K. King Airway use

Removed "King Airway" and replaced with generic "Supraglottic/Extraglottic Airway."
APPROVED.

New Business

A. TXA Checklist

The TXA checklist was not updated last year to reflect the addition of the pediatrics. Checklist to be updated for next meeting.

B. Capnography use in pediatric seizure patient

Childrens Hospital staff reminded EMS to use capnography in the pediatric seizure patient to monitor ventilation status.

C. Zofran for pediatrics

Added in 3 months and above to age; will clarify all rights and routes.

D. ODPS PECC program

The Ohio Department of Public Safety EMSC is asking to EMS Agencies to identify individuals who regularly do follow ups with Cincinnati Children's to register as the Pediatric Emergency Care Coordinator. In doing so you will receive information from the EMSC . Please take a few minutes to fill out the survey. The link is <https://www.ems.ohio.gov/emsc-pediatric-registration.aspx>

NEXT MEETING

JUNE 21, 2019 at Blue Ash Fire Department at 0900.