



# Southwest Ohio Protocol Committee Minutes

June 24, 2022  
0900-1100  
Local 48



## ATTENDANCE

Woods Curry, Paul Gallo, Todd Burwinkel, Dustin Calhoun, Tom Charlton, Ken Crank, Tom Dietz, Brian Doering, Lauren Duffy, Bret Fogel, Marilyn Goin, Mark Johnston, Chris Kasperczyk, Curtis Kercheval, William Kossenjans, James Laidlaw, James Li, Walt Lubbers, Jennifer Mason, Miles Miller, Darren Mooney, Mel Otten, Todd Owens, Nathaniel Robertson, Tom Wagner, Debra Walker, Teryy Whiteman, Carstell Winston, Rhonda Wolfe, Shawn Wurzelbacher, Bryan Young, Haki Zuberi

Action Items	Person(s) Responsible	Target Date
Crime Scene/Assault/Abuse	Owens/Johann/Charlton	July 29
M419 Sepsis	Doering	July 29
S505 Prehospital Pain Management	Gallo/Owens	July 29
A106 Do Not Resuscitate Orders in the Field	Gallo/Calhoun	July 29
A110 Highly Infectious Disease Transport	Calhoun	July 29
SB200 Clinical Practice Standards	Gallo/Meade	July 29
M404 Congestive Heart Failure	Hill	July 29
M406 Hyper/Hypoglycemia	Hill/Stoffalono/O Neil	July 29
M408 Restraint Protocol	Charlton/Owens/Dauer/Calhoun	July 29
M409 Allergic Reaction	Williams	July 29
M417 Adrenal Insufficiency	Williams	July 29
P608 Pediatric Hypoglycemia and Hyperglycemia	CHMC	July 29
P617 Pediatric Psychiatric Protocol	CHMC	July 29
P618 Pediatric Restraint Protocol	CHMC	July 29
T703 Emergency Use of Central Access Device (CVAD) and Fistula	Johann	July 29
Appendix F: MCI protocol	Mack/Butcher	July 29
Consistent pediatric vital sign charts throughout	Crank	July 29

## ADMINISTRATIVE

**Appendices** – No updates or additions. **APPROVED.**

## NEW PROTOCOLS

**Assault/Crime Scene/Trafficking** - Dr. Charlton presented first draft as framework to work from - includes child, elder abuse, crime scene, sexual assault. Information for EMS to file concerns. Discussion should EMS be calling family services etc. or should this be a law enforcement call? Discussion on whether EMS should leave their introduced material on scene. Encouraged to have conversations with your local jurisdiction on this protocol once finished and published. Will continue conversation and edits- please if interested in working on this draft contact subcommittee members.

## PROTOCOL UPDATES/REVISIONS

**SB205 Hypotension/Shock** – No changes. **APPROVED.**

**M419 Sepsis** – Looking under initiation of IV fluids change Isotonic to Crystalloid. Need to clarify some language. Will format and bring back for approval. Doering will work on formatting to bring back.

**P607 Pedi Respiratory Distress (Asthma)** – Added option for Solu Medrol to be given IV- see note under Medications in EMS- **APPROVED.**

**S505 Prehospital Pain Management** – Discussion of increasing Ketamine dose from 0.1 to 0.2- Clarification on not having to administer Acetaminophen prior to Ketamine dosing. Added infusion details for Ketamine dosing and supportive care with monitoring and possible Zofran administration. Add note to say Preferred LR for mixing or 100 ml crystalloid. Gallo to clear up and bring back for approval. Discussed the use of a pain scale – mixed feelings.

Nitrous oxide???- In KY there is development of using this. Dr. Lubbers offering to help with protocol development for State of Ohio if anyone is interested. Could use it as adopted protocol if departments should choose. Discussion on control issues etc.

## PROTOCOL REVIEWS

**A106 Do Not Resuscitate Orders in the Field** – No report.

**A110 Highly Infectious Disease Transport** – No report.

**SB200 Clinical Practice Standards** – Changed title- removed language. Added about two sets of vital signs- Removed patient disposition section. But added back in refusal section. Discussion of making refusals standalone protocol. Agreed to make stand alone, still held within administrative section. Add under H add access to a copy of a completed EPCR.

**M404 Congestive Heart Failure** – No report.

**M406 Hyper/Hypoglycemia** – No report.

**M408 Restraint Protocol** – Physical restraint discussion with State of Ohio- from state- understanding that physical restraints are only for medical use, patients who are unable to make their own medical decisions- this would include suicidal patients per state. Devices must be quickly removable by someone who has no medical training. Group would like legal opinion on suicidal patients. Add in language- patients may not be transported handcuffed to an object i.e., cot. Dr. Charlton will add in additional language about manufactures guidelines.

Chemical restraint- Problem is midazolam dose of 10 mg is ineffective in some of the population. Briefly discussed options – 1. No changes 2. Addition of additional doses prior to contacting medical control 3. Introduction of additional medications. Plan is to create a subcommittee and will evaluate options. Group will bring back recommendations or other options for departments. If you have interest in being on the subcommittee -please reach out to Dr. Charlton or protocol chairs.

**M409 Allergic Reaction** – No report.

**M417 Adrenal Insufficiency** – No report.

**S502 Major Burns (Thermal or Electrical)** – Added rule of 9's for pediatric patients, will change Isotonic to Crystalloid. With change **APPROVED**.

**P603 Pediatric Bradycardia** – Changed max dose to 0.5 and gave heart rate ranges for age groups. **APPROVED**.

**P608 Pediatric Hypoglycemia and Hyperglycemia** - No report.

**P617 Pediatric Psychiatric Protocol** – No report.

**P618 Pediatric Restraint Protocol** – No report.

**T703 Emergency Use of Central Access Device (CVAD) and Fistula (Johann)** – No report.

**T709 CPAP Procedure Protocol** – **APPROVED**.

**T711 Intraosseous (IO) Access and Infusion Guidelines** – **APPROVED**.

**Appendix F: MCI protocol** – No report.

**Appendix G: Jump S.T.A.R.T (Rapid Pediatric Triage System)** – Fix language with most senior Paramedic. – Most experience? Clarification with group.

**Appendix N: Dog / Cat Care** – No changes, follows state law.

## **NEW BUSINESS**

ACS recently released the revised trauma triage guidelines. Unknown how much we can do until the state makes changes. Waiting to hear back from the state.

If people working on protocols, please make state agnostic as possible to help our partners in NKY and Indiana. Do we need ORC references? Will review for removal if can be removed.

## **NEXT MEETING**

**JULY 29, 2022, at Scarlet Oaks.**

**Future Meeting Dates** –August 6 (Local 48), September 30 (Scarlet Oaks)