



**PREHOSPITAL MEDICAL ADVISORY COMMITTEE MEETING AGENDA (PMAC)**

PMAC MEMBERS PER POLICY 8202:

Air Transport Provider Representative  
11-Kent McCurdy

American Medical Response  
5-Douglas Key

BLS Ambulance Service Representative  
12-Lori Lopez

Cathedral City Fire Department  
5-Justin Vondriska

Corona Regional Medical Center  
1-Robert Steele, MD  
4-Tamera Roy

County Fire Chiefs' Non-Transport ALS Provider  
10-Vacant

County Fire Chiefs' Non-Transport BLS Provider  
9-Phil Rawlings (Vice Chair)

Desert Regional Medical Center  
1-Joel Stillings, D.O.  
4-Kristie Borba

Eisenhower Health  
1-Mandeep Daliwhal, MD  
4-Susan Young

EMT / EMT-P Training Programs  
6-Maggie Robles

EMT-at-Large  
13 David Olivas

Paramedic-at-Large  
14-Sarah Coonan

Hemet Valley Medical Center  
1-Todd Hanna, MD  
4-Victoria Moor

Idyllwild Fire Protection District  
5-Patrick Reitz

Inland Valley Regional Medical Center  
1-Zeke Foster MD  
4-Daniel Sitar

JFK Memorial Hospital  
1-Troy Cashatt, MD  
4- Molly Leddy

Kaiser Permanente Riverside  
1-Jonathan Dyreyes, MD  
4-Carol Fuste

**This Meeting of PMAC is on:**  
**Monday, April 23, 2018**  
**9:00 AM to 10:30 AM**  
**The Towers of Riverwalk**  
**4210 Riverwalk Parkway, Riverside**  
**First Floor Conference Rooms**

- 1. CALL TO ORDER & HOUSEKEEPING (3 Minutes)**  
Misty Plumley
- 2. PLEDGE OF ALLEGIANCE (1 Minute)**  
Zeke Foster, MD (Chair)
- 3. ROUNDTABLE INTRODUCTIONS (5 Minutes)**  
Zeke Foster, MD (Chair)
- 4. APPROVAL OF MINUTES (3 Minutes)**  
January 22, 2018 Minutes— Zeke Foster, MD (Attachment A)
- 5. STANDING REPORTS**
  - 5.1.** Trauma System—Shanna Kissel (Attachment B)
  - 5.2.** Stroke System— Dan Sitar (Attachment C)
  - 5.3.** STEMI System— Dan Sitar (Attachment D)
- 6. Other Reports**
  - 6.1.** EMCC Report—Kristen Clements
- 7. DISCUSSION ITEMS, UNFINISHED & NEW BUSINESS (60 Minutes)**
  - 7.1.** CQI Update – Lisa Madrid (Attachment E)
  - 7.2.** Education / Policy Update – Misty Plumley (Attachment F)
  - 7.3.** EMD Update – James Lee (Attachment G)
  - 7.4.** MCI Policy Planning Update – Dan Bates
  - 7.5.** Voting Member Review (Training Program Managers Rep.) – M. Plumley
- 8. REQUEST FOR DISCUSSIONS**  
Members can request that items be placed on the agenda for discussion at the following PMAC meeting. References to studies, presentations and supporting literature must be submitted to REMSA three weeks prior to the next PMAC meeting to allow ample time for preparation, distribution and review among committee members and other interested parties.

Loma Linda University Med. Center Murrieta

1-Kevin Flaig, MD  
4-Kristin Butler

Menifee Valley Medical Center

1-Todd Hanna, MD  
4-Janny Nelsen

Kaiser Permanente Moreno Valley

1-George Salameh, MD  
4-Katherine Heichel-Casas

Palo Verde Hospital

1-David Sincavage, MD  
4-Carmelita Aquines

Parkview Community Hospital

1-Chad Clark, MD  
4-Guillean Estrada

Rancho Springs Medical Center

1-Zeke Foster, MD (Chair)  
4-Sarah Young

Riverside Community Hospital

1-Stephen Patterson, MD  
4-Sabrina Yamashiro

Riverside County Fire Department

5-Scott Visyak  
8-Tim Buckley

Riverside County Police Association

7-Sean Hadden

Riverside University Health System Med. Center

1-Michael Mesisca, D  
4-Kay Schulz

San Geronio Memorial Medical Center

1-Richard Preci, MD  
4-Trish Ritarita

Temecula Valley Hospital

1-Pranav Kachhi, MD  
4-Jacquelyn Ramirez

Trauma Audit Comm. & Trauma Program Managers

2-Frank Ercoli, MD  
3-Charlie Hendra

Ex-officio Members:

1-Cameron Kaiser, MD, Public Health Officer  
2-Reza Vaezazizi, MD, REMSA Medical Director  
3-Bruce Barton, REMSA Director  
4-Jeff Grange, MD, LLUMC  
5-Phong Nguyen, MD, Redlands Community Hospital  
6-Rodney Borger, MD, Arrowhead Regional Medical Center

Members are requested to please sit at the table with name plates in order to identify members for an accurate count of votes

Please come prepared to discuss the agenda items. If you have any questions or comments, call or email Misty Plumley at (951) 201-4705 / [mplumley@rivco.org](mailto:mplumley@rivco.org). PMAC Agendas with attachments are available at: [www.rivcoems.org](http://www.rivcoems.org). Meeting minutes are audio recorded to facilitate dictation for minutes.

**9. ANNOUNCEMENTS (15 Minutes)**

This is the time/place in which committee members and non-committee members can speak on items not on the agenda but within the purview of PMAC. Each announcement should be limited to two minutes unless extended by the PMAC Chairperson.

**10. NEXT MEETING / ADJOURNMENT (1 Minute)**

July 23, 2018—4210 Riverwalk Parkway First Floor Conference Rooms

PMAC Draft Minutes  
January 22, 2018

TOPIC	DISCUSSION	ACTION
1. CALL TO ORDER		
2. PLEDGE OF ALLEGIANCE	Dr. Zeke Foster led the Pledge of Allegiance.	
3. ROUNDTABLE INTRODUCTIONS	Self-introductions were facilitated by Dr. Zeke Foster.	
4. APPROVAL OF MINUTES		The October 23, 2017 PMAC meeting minutes were approved with no changes.
5. STANDING REPORTS		
5.1 Trauma System Updates	Standing report reviewed. Tourniquets taken to TAC. Ketamine Trial Study begins April 1 <sup>st</sup> , REMSA point of contact is Henry Olson. Conditions of Participation letters must be returned.	Information only.
5.2 Stroke System Updates	Stroke regulations have been approved but are not out for final publication, remain unpublished. REMSA is building the Stroke re-alignment based on these regulations. REMSA is in the process of getting a stroke registry up and running, potentially for data submission by 3 <sup>rd</sup> quarter 2018. Move to mLAPSS with REMSA Treatment Protocol. Stroke Coordinators meeting will be prior to Stroke System Committee Meeting.	Information only.
5.3 STEMI System Updates	Regulations at the CA EMSA level are in progress. CARES Data registry data collection is a priority, REMSA EMS Specialists will be reaching out to PRC and BH staff for data entry. Next STEMI meeting announced. STEMI Coordinators will have their own meeting prior to the STEMI system meeting. For CARES Data we initiated in 2016 at approx. 50% review, increasing percentages of compliance in recent time. Emphasis on transport providers at first and now also first responder data, this will continue to be a priority project for REMSA. CARES data registry will have auto export with ImageTrend, but work still needed with EMS Providers and PRC/BH teams.	Information only.
6. OTHER REPORTS	There were no other reports at this time.	
7. DISCUSSION ITEMS, UNFINISHED & NEW BUSINESS		
7.1 CQI Updates	EMSA Core Measures updated provided. Core Measures were in development as of	Information only.

PMAC Draft Minutes  
January 22, 2018

	December, EMSA projected a new update by end of January 2018.	
<b>7.2 Education Update</b>	<p>PUC Training Update provided. Train the Trainer session for PUC timing reviewed. Education being finalized with capnography discussion later in PMAC Agenda for January 2018.</p> <p>Policy and Procedure Changes reviewed.</p> <p>Questions about Ketamine Data collection clarified, data collection spreadsheet is different from TXA. Ketamine Trial Study is not to prove analgesic effects of ketamine, study focus is to prove paramedic's ability to administer ketamine and patient response to therapy.</p>	Information Only.
<b>7.3 EMD 90-Day Summary Report</b>	<p>James Lee presented an EMD 90 Day Summary Report highlighting resource triage initiatives put in place in July 2017.</p> <p>Summary data was consistent with National averages, data is reproducible from other EMS Systems as expected. Dr. V encourages adoption of EMD Processes throughout REMSA, encourages all PSAP's to adopt EMD functionalities in the short term.</p>	Information Only.
<b>7.4 End Tidal CO2 Discussion</b>	<p>Dr. Davis from Riverside County FD presented information and data review regarding efficacy and reliability of waveform capnography related to endotracheal tube placement confirmation and diagnostically monitoring hemodynamic instability. Dr. Davis highlighted reliability of technology, functionality and interoperability of sidestream monitoring.</p> <p>Discussion amongst attendees regarding noted CQI issues related to waveform capnography.</p> <p>Discussion regarding use of colorimetric devices (reliability, functionality, ease of use).</p>	<p>PMAC members recommended to remove anticipated/planned P&amp;P move to required colorimetric detector and waveform capnography.</p> <p>Recommendation to revise Performance Standard verbiage for PPV to further mandate use of waveform capnography. Continued recommendation to educate and training thoroughly this PUC cycle on use of waveform capnography in all airway and ventilation procedures.</p>

PMAC Draft Minutes  
January 22, 2018

<b>8. REQUEST FOR DISCUSSIONS</b>	Dr. Zeke Foster noted vacancies in current PMAC structure, requested review of positions open / those whose term may be nearing end.	Action at PMAC in April 2018.
<b>9. ANNOUNCEMENTS</b>	CE Course offerings were announced from EMS System Partners.	Information only.
<b>10. NEXT MEETING/ADJOURNMENT</b>	April 23, 2018 4210 Riverwalk Parkway First Floor Conference Rooms.	Information only.

DRAFT

**FOR CONSIDERATION BY PMAC**

DATE: April 16, 2018

TO: PMAC

FROM: Shanna Kissel, RN, Assistant Nurse Manager

SUBJECT: Trauma System

1. EMSA approved TXA for Local Optional Scope in March. The state is looking at the inclusion criteria for administration. Similar to current policy, change would be to drop age to be consistent with REMSA definition.
2. Tourniquet presentation was done at Feb TAC Meeting. Committee approved adding into REMSA drug and equipment.
3. Ketamine Trial study began on April 1, 2018 for pain associated with acute traumatic injury and acute burn injury, to date there has been one administration.

ACTION: PMAC should be prepared to receive the information and provide feedback to REMSA.

**FOR CONSIDERATION BY PMAC**

Date: April 23, 2018

TO: PMAC

FROM: Dan Sitar, Specialty Care Consultant, RN

SUBJECT: Stroke System

1. State Stroke regulations were approved by the State finance committee and are now open for public comment through May 6th. The updated proposed text can be accessed at: <https://ems.ca.gov/public-comment/>
2. Stroke registry: Collaboration beginning with ICEMA to develop registry forms and data reports. Hospital data report built to begin gathering data elements for 2018.
3. LAMS scale to be implemented tentatively October 1<sup>st</sup>.
4. Quarterly data reports to move to Google Data Studio format to be more interactive and contain more detail.
5. Stroke Committee agendas, meeting minutes, draft and final quarterly reports can all be found on [www.remsa.us](http://www.remsa.us) site at this link: <http://www.remsa.us/documents/programs/stroke>
6. The next Stroke meeting will be held in the Vineyard room at 4210 Riverwalk Parkway on May 24th, 2018 from 1:00 to 3:00 PM.

Action: PMAC should be prepared to receive the information and provide feedback to the EMS Agency

**FOR CONSIDERATION BY PMAC**

Date: April 23, 2018

TO: PMAC

FROM: Dan Sitar, Specialty Care Consultant, RN

SUBJECT: STEMI System

1. State STEMI regulations were approved by the State finance committee and are now open for public comment through May 6th. The updated proposed text can be accessed at: <https://emsa.ca.gov/public comment/>
2. STEMI registry: Collaboration beginning with ICEMA to develop registry forms and data reports.
3. CARES registry data completed for 2017 and validated national report published.
4. Proposed policy updates.
5. Quarterly data reports to move to Google Data Studio format to be more interactive and contain more detail.
6. STEMI Committee agendas, meeting minutes, draft and final quarterly reports can all be found on [www.remsa.us](http://www.remsa.us) site at this link: <http://www.remsa.us/documents/programs/stemi>
7. The next STEMI meeting will be held in the Vineyard room at 4210 Riverwalk Parkway on July 26th, 2018 from 10:00 to 12:00 PM.

Action: PMAC should be prepared to receive the information and provide feedback to the EMS Agency





April 12, 2018

Dear Stakeholders,

I want to keep you all informed. The EMS Authority released the new CORE Measure report. Please see the link on the CQILT page at REMSA.US. REMSA will develop reports in Report Writer and test them, once this has been completed I will inform you and ask that each provider agency do the same so we may authenticate the measures and data before we report them to the state. The due date has been changed to June 30, 2018. If there are issues with the measures we need to track and state them in detail, so that we may improve upon the measures please provide me with as much feedback as possible so I may report any issues to EMSA. EMSA stated the 2017 data year will be used as a test year to validate these measures, so it is very important we invest time into reviewing the data the measure produce. As of January 1, 2018 every EMS patient contact needs to be documented on Image Trend in order for us as a county to be compliant with EMSA'S data reporting requirements for NEMSIS 3.4, if patients are not being documented on the NEMSIS 3.4 system ( Image Trend) then data cannot be reported on for those patients. It is a REMSA requirement to provide this data as stated in policy 7101. I will keep everyone updated on our progress.

Thank you,

Lisa Madrid – Paramedic  
EMS Specialist – CQI Coordinator/EMS Educator  
Riverside County EMS Agency  
Emergency Management Department



**FOR CONSIDERATION BY PMAC**

DATE: April 23, 2018  
TO: PMAC  
FROM: Misty Plumley, Senior EMS Specialist  
SUBJECT: Training and Education Update

First Quarter PUC 2018 updates were released and training completed by providers prior to March 31, 2018.

**Unfinished Training/Education/Policy Updates:**

- Tourniquet recommendation: TAC approved the use of the SWAT-T Tourniquet and the addition of the SOFT-T device. REMSA would like to add these devices into REMSA 3301 Drug and Equipment List, without being brand specific if possible.

**New Training/Education/Policy Updates:**

In an effort to update several policies to current standards of care and address system CQI issues REMSA will be conducting a 4<sup>th</sup> Quarter training initiative focused on additional policy and procedure updates continuing our momentum from Spring 2018.

These next policy updates plan to address the policies, with adjunctive education for the below:

- REMSA 4102 Universal Patient Protocol (specifically patient types requiring BH contact)
  - o The STEMI System Committee has made a recommendation to PMAC that BH contact no longer be required in the case of a paramedic identified or ECG monitor identified STEMI. BH contact would still be allowable, and encouraged in cases where paramedic judgment identifies BH contact as necessary.
  - o The STEMI System Committee has also made a recommendation that ALL cardiac arrest patients be transported to STEMI Receiving Centers, this transport should occur without a requirement for BH contact.
- REMSA 4503 Suspected Stroke
  - o Addition of and implementation of the LAMS screening
- REMSA 4702 Labor and Delivery
  - o Add additional information related to childbirth complications assessment and treatment (i.e. prolapsed cord presentation)

Training and Education would also address the policies below:

- REMSA 4407 Neonatal Resuscitation
- REMSA 7301 Orotracheal Intubation / REMSA 7309 Post ETI Confirmation and Monitoring

**ACTION:** PMAC recommendation needed as above. Information should be reviewed and a PMAC recommendation issued.

**FOR CONSIDERATION BY PMAC**

DATE: April 23, 2018  
TO: PMAC  
FROM: James Lee, EMS Specialist  
SUBJECT: EMD Update: MPDS Card set 14 – Local Medical Control: Submersion  $\geq$ 6hrs.

Current Medical Priority Dispatch System (MPDS) Card set 14 Drowning/Near Drowning/Diving/Scuba Accident protocol suggests local medical control to define submersion  $\geq$ 6hrs as an obvious death. Currently, REMSA does not categorize submersion  $\geq$ 6hrs as an obvious death criteria within REMSA protocols. For the purpose of MPDS, EMS Agency is seeking input from system providers.

ACTION: PMAC should be prepared to receive the information and provide feedback to the EMS Agency.