

# Clinical Advisory Subcommittee of the Emergency Medical Care Committee



## Meeting Minutes

10:15 A.M., Tuesday October 11<sup>th</sup>, 2022

### Virtual Via Zoom

#### Members

- CHAIR: Dr. Stefan Teitge, *County Medical Society, ED Physician Dignity*
- Dr. Heidi Hutchinson, *ED Physician Tenet*
- Dr. Kyle Kelson, *ED Physician Tenet*
- Dr. Lucas Karaelias, *ED Physician Dignity*
- Lisa Epps – *Air Ambulance*
- Jeffrey Hagins – *Air Ambulance*
- Rob Jenkins, *Fire Service Paramedics*
- Nate Otter, *Ambulance Paramedics*
- Arneil Rodriguez, *Ambulance EMTs*
- Casey Hidle, *Lead Field Training Officer*
- Diane Burkey RN, *MICNs*
- Tim Benes, *Medical Director Appointee*
- Paul Quinlan, *Fire Service EMTs*

#### Staff

- STAFF LIAISON: David Goss, *EMS Coordinator*
- Vince Pierucci, *EMS Division Director*
- Tom Ronay, *Medical Director*
- Vacant, *EMS Coordinator*
- Rachel Oakley, *EMS Coordinator*
- Sara Schwall, *EMS Admin Assistant III*

#### Guests

Doug Weeda, *CHP*

AGENDA	ITEM	LEAD
Call to Order 1015	Introductions	Vince Pierucci
	Public Comment – No public comment	
Summary Notes	No Additions - Finalized	
Discussion	<p><b>Final Review of Draft Procedures:</b></p> <ul style="list-style-type: none"> <li>• Supraglottic Airway (SGA) Device #718, Endotracheal Intubation #717, Airway Management #602</li> <li>• SGA: Option for primary or back-up only. Primary would incorporate Cormack-Lehane Scale and SGA would be utilized if airway is a grade 3 or 4. Back-up only requires two attempts either visually or ETI placement. If attempts fail, SGA would be utilized.</li> <li>• Review of other CA counties utilizing SGAs (LA, Sacramento, Santa Barbara, Santa Clara).</li> <li>• Current SGA data shows 78% of CA counties use SGA as primary and 22% as back-up only.</li> </ul> <p>Discussion                      R. Jenkins – other counties noted SGA is the preferred method for cardiac arrest patients. Could there be an option in the policy for use of SGA with high-performance CPR.                      H. Hutchinson suggests moving away from the Cormack-Lehane scale to use more simplified guidelines.                      V. Pierucci – next steps are to take a recommendation from this committee to the operations committee and then to EMCC for approval. If approved, implementation could take place in July.</p>	David Goss

	<p>Further discussion will need to occur regarding SGA use in pediatrics.</p> <p><b>Introduction to Utilization of Preexisting Vascular Access Devices (PVAD):</b></p> <ul style="list-style-type: none"> <li>• Currently not permitted for use by ALS providers in SLO county.</li> <li>• Only 42% of counties use PVAD for unstable patients and only 15% permit use in long distance transfers</li> </ul> <p>Discussion of use of PVAD in SLO County and what restrictions should be considered. T. Ronay mentioned that most medics are not formally trained on differences in lines and ports.</p> <p><b>Future Items:</b></p> <ul style="list-style-type: none"> <li>• Utilization of Preexisting Vascular Access Devices (PVAD)</li> </ul>	
Adjourned – 1115	<b>Next meeting date</b> – Thursday, December 15 <sup>th</sup> , 2022, 1015 a.m.	