

PIERCE COUNTY EMS MPD BASE STATION MINUTES

January 18, 2018

Attendance:

Membership Attendance Roster on File

Call to Order

The meeting was called to order by Dr. Waffle at 8:30 am. Introductions were made around the room.

Previous meeting minutes were noted as being provided electronically and were approved as written.

Base Station Reports/Issues:

- A. **Good Sam, ~~Karrie Austin~~** – Karrie was not present, but Norma commented that Good Sam is working better with other area hospitals.
- B. **Madigan Army Health System, ~~Dr. Misner~~** – No representative present. Dr. Waffle mentioned that the train derailment brought up some issues on what can and cannot be done.
MAMC is doing a Base Station on trauma and looking at the use of some new tourniquets.
Regarding Stop the Bleed program, Norma advised that it needs to be taught to the citizens. The primary drawback is the cost of the tourniquet.
- C. **Mary Bridge, Cynde Rivers** – Cynde announced that Mary Bridge has hit the highest patient volume ever. They have over 200 patients per day. It is primarily due to medical conditions, not trauma. Cynde urged EMS personnel to protect themselves with masks, gowns and goggles as there has been an outbreak of pertussis. Mary Bridge has also opened two ED psyche beds and they are looking for funding to build more. Their last Base Station was in December and very well attended; their next Base Station is in March.
Regarding use of urgent care facilities, it is not making much of a difference in the EDs. Also, people seem to be getting sicker in general.
- D. **St. Anthony, ~~Karmela Little~~** – No representative present. They have built their 5th floor.

'Base Station Meetings Equivalent' Reports/Issues:

- A. **AMR/RM, ~~Kevin Heindel~~** – Not present. Dr. Ken Elam stated that they had a presentation by JW Foster on frostbite and hypothermia. He also brought up a recent medication error, where a patient was given an opiate instead of benzodiazepine. The question was raised: what is the baseline of medication error in EMS. Russ McCallion answered by giving statistics on error rates from a publication he recently read. Ultimately, error rates can be reduced significantly by doing a med check: two EMS personnel talking to each other about what they are doing, the medication and dose.
Regarding dosage errors, Dr. Stephen Friedrich proposed simplifying dosages to reduce complicated math calculations on scene. He would like to discuss this at a Protocol Committee meeting. Norma suggested asking the Council to fund a Culture of Safety Conference. Discussion followed. Norma stated that errors should be addressed as educational and not punitive. Dr. Waffle added that some errors are not simply human, but are system errors and the system can be improved.
- B. **Buckley, ~~Dr. Jeff Morse~~** – No representative present.
- C. **CPFR, Dr. Steven Friedrich** – Because of the memorial service, they moved their Base Station meeting to next Wednesday, the 24th. At 8:30, there will be a demo with the EZIO followed by their meeting at 10:00. Dr. Friedrich cited a tough case they had recently, involving a wrong way driver on 512. A woman died at the scene; it was a difficult extrication. Could she have been saved with amputation? This raises a lot of issues. Dan Beckman said that field amputation is generally used in cases of structural collapse. Dr. Friedrich agreed and added that it would require first responders to carry tourniquets and plasma on the rig. Discussion followed.

- D. ~~EPFR, Dr. Stephen Barnhart~~ – Not present. Russ said they are doing four Base Stations per year, each offered three times during the quarter.
- E. **Falck, Scott Jones** – No report.
- F. **GHFR** – Their Base Station is next week. They have a Special Ops Medic scheduled to speak on hypothermia and trauma.
- G. ~~GFR, Todd Jensen~~ – Not present. Matt Waltrip announced that they have merged their EMS training with Orting and have now expanded from 12 Base Stations per year to 16. The next one is on toxicology.
- H. ~~KPFR, Allister Stone~~ – No representative present.
- I. **OVFR** – Now combined with Graham
- J. ~~TFD, Dr. Gerecht~~ – No representative present.
- K. **WPFR, Dr. Friedrich** – Their Base Station was few days ago and they talked about trauma. Amy Turley, the rep for Zoll presented her product. Dr. Friedrich said they are considering an AED system change, but it is a big, costly decision. There was some input and comments from others present regarding their AED systems. Dr. Waffle asked if everyone could put their heads together and all get on the same page. That way they might negotiate a better price. Also, using the same system across the county would be ideal.

Unfinished Business:

A. Use of WATrac by EMS, Dr. Waffle –

It is being utilized by our nurses and improving patient access. But Dr. Waffle stated WATrac needs to be employed more by EMS, so he urged everyone to make sure the EMS community gets on board with it. Dr. Friedrich pointed out that the system is not user friendly for EMS responders. Bill Barber contended that it is being worked on and that they are addressing the issues, changing the color coding and making positive adjustments. He said the State is working with us to make improvements.

B. Trauma Triage Tool, Dr. Waffle –

Norma passed around a handout. It has been updated to correlate with the State's tool. There are a few minor edits made to this copy but it has already been updated to match the State. We are "trialing" it but it requires the State's approval to put into our protocols. We want to do a soft rollout and begin teaching it now in preparation.

New Business:

A. Amtrak MCI Overview from BS Perspective (not an AAR) –

Norma said that "Lessons Learned" from this even will be provided. Dr. Waffle added that the prehospital care was excellent and that everyone who was transported from the scene survived.

Unscheduled:

Norma showed an example of the stat bands used for patient tracking and how to use and store them on the rigs.

Also, Dr. Waffle passed out a DRAFT statement for the temporary use of Dilaudid when morphine and fentanyl are unavailable.

Announcements:

None

Adjournment:

Meeting adjourned 9:35 am.