

Medical Direction Committee Minutes
The Place at Innsbrook
July 13, 2006
10:30 AM

Members Present:	Members Absent:	Staff:	Others:
Kimberly Mitchell, M.D.	Norman Rexrode, M.D.	Warren Short	David Cullen
Sabina Braithwaite, M.D.	Cheryl Haas, M.D.	Tom Nevetral	Debra Akers
George Lindbeck, M.D.	Kenneth Palys, M.D.	Scott Winston	Matt Dix
Stewart Martin, M.D.	Barry Knapp, M.D.	Greg Neiman	Keltcie Delamar
Bethany Cummings, D.O.	David Lander, M.D.	Gary Brown	Jon Donnelly
Scott Weir, M.D.	John Potter, M.D.	Michael Berg	Heidi Hooker
James Dudley, M.D.	Drew Garvie, M.D.		
Ace Ernst, M.D.	Janet Henderson, M.D.		
Mark Franke, MD.	Asher Brand, M.D.		
Dave Garth, M.D.	William Hauda, M.D.		
Charles Lane, M.D.	Carol Gilbert, M.D.		
Peter Bruzzo, M.D.			
Theresa Guins, M.D.			
Cheryl Lawson, M.D.			

Topic/Subject	Discussion	Recommendations, Action/Follow-up; Responsible Person
1. WELCOME	Kim Mitchell, M.D. called the meeting to order at 10:35 A.M.	
2. INTRODUCTIONS	All of the attendees were asked to please introduce themselves. The chair thanked the public for attending and welcomed Charles Lane, M.D. as the new Western EMS Council representative.	
3. APPROVAL OF MINUTES	The minutes from the April 13, 2006 meeting were approved.	Motion by Scott Weir, M.D. to accept the minutes as recorded and seconded by James Dudley, M.D...Motion Passed
4. NEW BUSINESS		
Professional Development Committee Chair Report	James Dudley, M.D. advised that the Professional Development Committee (PDC) had met yesterday and reviewed several topics of interest: <ul style="list-style-type: none"> • 2000 versus 2005 AHA Guidelines were discussed in detail. • The program coordinator can immediately print each provider's letter of eligibility when the CSDR is marked passed. • Four ALS accredited training programs requested and were approved by the PDC to Pilot EMT-Basic competency based programs. • James Dudley, M.D. advised that there was a need for a representative of the Medical Direction Committee to serve on the EMS Instructor Credentialing Committee. He asked for a volunteer and Ace Ernst, M.D. graciously accepted. The PDC discussed when the 	

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	<p>appropriate time should be to transport the cardiac arrest patient to be included in the EMT-Basic curriculum.</p> <ul style="list-style-type: none"> James Dudley, M.D. also reminded the committee that the OMD Regulations were being revised and the Office needed input from the Medical Directors. Michael Berg, Regulation & Compliance Manager recommended that a meeting be done via a conference call on July 31 with any EMS physicians who are available. 	<p>James Dudley, M.D., made a motion to accept the Professional Development Committee’s recommendation that an EMT-Basic, using a 2005 AHA Guidelines compliant AED, initiate transport as soon as feasible after three (3) analyses by the AED, regardless of whether they receive a “Shock Indicated” or “No Shock Advised” message. Motion seconded by Stewart Martin, M.D...Motion passed.</p>
<p>a. Draft of review/evaluation panel for the State OMD</p>	<p>Kim Mitchell, M.D. advised the committee that Don Barklage, Jon Donnelly and Carol Gilbert, M.D. are very close to coming up with some guidelines for the State OMD position.</p>	
<p>b. Autopulse articles from JAMA discussion</p>	<p>Sabina Braithwaite, M.D. advised that she was concerned with the amount of RSAF monies that were being given out for the Autopulse device which costs about \$15,000.00 each. This is in light of the studies on the device that has not proven its efficacy for use. A position paper on the Autopulse should be prepared by the Medical Direction Committee for publication on this issue.</p>	<p>Sabina Braithwaite, M.D. made a motion that the Medical Direction Committee, based upon recent research, recommends that the Autopulse device be graded a “5” on the scale that is utilized for the RSAF grants. Seconded by Mark Franke, M.D... Motion passed.</p> <p>Motion made by Sabina Braithwaite, M.D. that the Medical Direction Committee make a request that the Financial Assistance Review Committee (FARC) obtain Medical Direction Committee’s input on any new medical devices to assist in determining the funding priority. Seconded by Cheryl Lawson, M.D...Motion passed.</p>
<p>c. Institute of Medicine Future of Emergency Care</p>	<p>The IOM’s <i>Emergency Medical Services At the Crossroads</i> addresses the strengths, limitations, and future challenges of EMS and draws upon a range of concerns. The executive summary can be downloaded free at: http://newton.nap.edu/execsumm_pdf/11629</p>	

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<p>d. Request for Legislative Issues for FLAP</p>	<p>The Chair of the Financial, Legislative and Planning (FLAP) Committee solicited information from each of the board members and the chairs of the committees with regard to legislative issues. Please forward any information regarding EMS issues you or your committee are aware of that will be introduced at the Virginia General Assembly during the upcoming session or any issues or proposed changes in Virginia Law that will affect EMS. Information should be e-mailed to Gary Dalton at gary@shentel.net</p>	
<p>5. OLD BUSINESS</p>		
<p>a. AHA/VDH Stroke Plan/Study</p>	<p>Sabina Braithwaite, M.D. gave a presentation on a preliminary stroke data study that she was working on based on data from the Virginia PPCR. Once she has had an opportunity to further refine the results she will provide a formal document for review.</p>	
<p>b. Pandemic Influenza Focus</p>	<p>Mark Franke, M.D. and Captain George Brown, City of Fairfax gave an overview of issues and concerns affecting localities in the face of the pandemic influenza issue. One of the issues taken from this presentation was the need for a health official within the Virginia Department of Health to make a formal health statement that during a pandemic influenza crisis that it is permissible to transport patients to a “Fever Center”.</p>	
<p>c. Scope of Practice Certification Levels in Virginia</p>	<p>Carol Gilbert, M.D. is chairing a subcommittee to investigate the National Scope of Practice Certification Levels Impact on Virginia EMS and the best method to address it. The subcommittee met on May 11th.</p> <p>The National Scope of Practice suggested four levels of EMS Certification: Emergency Medical Responder (EMR), Emergency Medical Technician (EMT), Advanced Emergency Medical Technician (AEMT) and the Paramedic (EMT-P).</p> <p>It was stated that the Virginia EMT-Enhanced level was close to the proposed Advanced EMT level. However, it would require additional time and money to achieve paramedic certification. The question was asked should Virginia encourage all Intermediate '99s to move to Paramedic to enhance the care in Virginia. Is it statistically significant to have an Intermediate '99 level versus a paramedic level? Is it not better to have a paramedic? It was stated that strictly having paramedics at the ALS level will not meet the needs of the rural areas so a mid level certification is necessary.</p> <p>The tiered college system allows EMT to Enhanced, Enhanced to Intermediate '99, Intermediate '99 to Paramedic. As the student progresses through the tiers he realizes that in one to two semesters he is capable of a new certification level. Enhanced skills versus the educational component are an issue. <u>High numbers at lower certification levels with a few paramedics may be the solution.</u></p>	

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	<p>Two models were discussed:</p> <table border="0" style="width: 100%;"> <tr> <td style="width: 50%; vertical-align: top;"> <p><u>MODEL A</u> EMT-Basic Advanced EMT Virginia Intermediate via accreditation Paramedic</p> </td> <td style="width: 50%; vertical-align: top;"> <p><u>MODEL B</u> EMT-Basic Advanced EMT Paramedic</p> </td> </tr> </table> <p>These two models will be discussed further to determine the advantages and disadvantages of each.</p>	<p><u>MODEL A</u> EMT-Basic Advanced EMT Virginia Intermediate via accreditation Paramedic</p>	<p><u>MODEL B</u> EMT-Basic Advanced EMT Paramedic</p>	
<p><u>MODEL A</u> EMT-Basic Advanced EMT Virginia Intermediate via accreditation Paramedic</p>	<p><u>MODEL B</u> EMT-Basic Advanced EMT Paramedic</p>			
6. ALS Training Funds Update	<p>Warren Short advised the committee that Chad Blosser had resigned from the Office and would be taking a position within State government working for the Department of General Services. Warren Short handed out the spreadsheet showing that out of the \$1.2 million dollars budgeted \$984,351 had been obligated and \$744,366.38 had been dispersed with \$455,633.62 remaining.</p>			
7. Accreditation Update	<p>Three Intermediate site visits have been completed in the last month (Rappahannock Community College, Norfolk Fire-Rescue and Southside Rescue Squad South Hill) with a fourth (Patrick Henry Community College) scheduled for July 17, 2006. Southside Rescue Squad became the first Intermediate Accredited Rescue Squad in the Commonwealth.</p>			
8. REGULATORY PROCESS	<p>Michael Berg, OEMS Regulation and Compliance Manager, would like to have a DRAFT of the next version of the EMS Regulations in the hands of the EMS Advisory Board (GAB) before the November GAB meeting. A sub-group is working on crafting new regulations to address legislation that passed and effective on July 1, 2006:</p> <p style="padding-left: 40px;">Need to write regulations to address the law that allows providers affiliated with an EMS agency and with agency and OMD approval, carry oxygen in their personal vehicles.</p> <p style="padding-left: 40px;">There will soon be a DRAFT of an informational memo that will go out to all Regional EMS Councils and EMS Agencies informing them that effective immediately Nurse Practitioners (NP) and Physician Assistants (PA) can sign as Practitioners on the PreHospital Patient Care Reports (PPCR). Regulation and Compliance will meet with the Board of Pharmacy to ensure both sets of regulations reflect this change.</p> <p style="padding-left: 40px;">The Board of Pharmacy agreed that if EMS providers are working under agency or Regional Council protocols when they administer medications or treatments, they can check the box next to “Standing Orders” and will not need to obtain a signature <i>unless</i> the provider has called and received orders from on-line medical control. The Office must write the regulations to address this change which is not in effect presently.</p> <p style="padding-left: 40px;">The MEDEVAC regulations are still in the Attorney General’s office awaiting their input.</p>			

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	<p>Division of Educational Development DRAFT regulations have been submitted to Regulation & Compliance. The Regional Council regulations have been signed by the Executive Branch. They must now through the sixty day review process. If no comments are received, they will go back to the Board of Health for final approval. OMD regulations are still being written. Once the DRAFT of all of the regulations have been approved by the committee, they will be printed and go to the Governor's Advisory Board. After that step they will go through the eighteen month Notice of Intended Regulatory Action (NOIRA) process.</p>	
<p>9. OFFICE STAFF UPDATE</p>	<p>Warren Short informed the committee the two new positions (Certification Test Manager and Training Funds Assistant) for the Division of Educational Development are presently awaiting approval.</p>	
<p>10. NREMT COMPUTER BASED TESTING UPDATE</p>	<p>Warren Short will be attending the first NREMT Rollout for Computer Based Testing (CBT) on July 31 – August 1 in Atlanta, GA and will have more to report on how the NREMT will incorporate CBT.</p>	
<p>11. CURRICULUM REVIEW</p>	<p>The ALS – Intermediate Curriculum Peer Review Committee met on May 11th in conjunction with the National Scope of Practice Impact Committee. Discussion centered on using the data derived from the competencies for the Intermediate curriculum to look at tweaking the competency numbers. The committee will meet again before making recommendations to the Medical Direction Committee.</p>	
<p>12. 2007 MEETING DATES</p>	<p>The committee advised that the present cycle for the meeting dates should remain with the exception of the January date in 2007 that conflict with the NAEMSP meeting. Therefore the 2007 meeting dates will be:</p> <ul style="list-style-type: none"> • January 18, 2007 • April 12, 2007 • July 12, 2007 • October 11, 2007 	
<p>16. PUBLIC COMMENT</p>	<p>None</p>	
<p>17. GOOD OF THE ORDER</p>	<p>It was announced by Theresa Guins, M.D. that Mr. Gary Brown received the <i>EMSC National Heroes Award for State EMSC Policymaker of Distinction</i> award. He is to be congratulated!</p>	
<p>18. ADJOURNMENT</p>	<p>NEXT MEETING October 12, 2006 10:30 A.M. The Place at Innsbrook</p>	