

Standing Agenda Items

Agenda Review, Terry Fairbanks, MD

Minutes, Terry Fairbanks, MD –

- o Motion to accept the minutes; All ayes
- o Minutes accepted

Correspondence / Announcements, Terry Fairbanks, MD

- o REMAC has accepted the resignation of Zach Hettinger as he is leaving to take a job in Washington, DC
- o His letter is being passed around; his resignation takes effect after this meeting
- o He has sent his proxy, Elizabeth Murray who is interested in applying for one of the at-large positions
- o She is a pediatric emergency physician & is joining SMH's faculty
- o Elizabeth worked at Brighton FD for 12 years and now serves as Medical Director for Brighton Ambulance & Brighton FD
- o Rochester General Hospital has selected Mike Santiago as their representative
- o Mike was a Rural Metro paramedic for several years before he went to med school
- o Welcome to new EMS Physician, Tony Tostakos, who is currently working at Unity
- o Jeremy and I invited him here to get him interested in REMAC; hopefully he will apply for an at-large position
- o Tony is from the Rochester area and has been involved at Brighton Ambulance for 15 years
- o The agenda will be slightly altered as a few people need to leave early
- o Bill Sheahan has been named as Educator of the Year for New York State – Congratulations Bill

- o A letter soliciting applications or interest for the two at-large seats is being distributed
- o Letters of interest are due back at the beginning of August and we will vote at the next MLREMS meeting
- o You all elect your own officers; MLREMS elects your membership
- o In addition, the Chair position for REMAC has been solicited to a few people
- o It is a job that requires quite a bit of time; the only person who expressed interest in being the Chair of REMAC is Dr. Shah
- o Unless anyone else is interested, I look to nominate Dr. Shah to replace Dr. Fairbanks as Chair

- Motion made
- Moved and Seconded
- Only physician members of REMAC can vote on this; ask for a show of hands
- Six physicians in favor; Dr. Cushman abstains
- Dr. Shah is named new Chair for REMAC

Medical Directors' Report, Jeremy Cushman, MD

- o A few advisories for EMS providers are important from last week – the MOLST form is out
- o Also, Midazolam – a few people still had 5mg in their heads
- o There are two drug shortages affecting our EMS providers – epinephrine 1:10,000 in prefilled syringes; should be restocked in mid July
- o The other is D50, a drug we don't use is also short
- o Our hospitals have been hoarding both drugs for us as a precaution
- o New 700 Series for NIMS – not required by the state
- o Letters have been sent to all physicians regarding the base station test; the test must be completed in order for physicians to answer the medical control phone in any one of the four medical control facilities

- o Please take note of the state enforcements on the back of your agendas

Tracy DeMarse

- o Jennifer Williams, one of our secretaries is leaving at the end of July
- o We are actively looking for her replacement; we hope to have someone in place in a few weeks
- o We are working on updating all of the committee/subcommittee information
- o I have been working on EMS Charts to take care of some reporting issues we've been having

Associated Reports

Council (MLREMS), Paul Bishop

- Council & REMAC have been involved in the strategic planning
- There are a number of active committees, most importantly Systems Operating
- The NEG Committee is being vacated by Bill Sheahan as he is leaving his position at Livingston County
- His position will be assumed by Reg Allen
- The Systems Committee is reviewing the last application from NEQ which was deemed incomplete
- The PEER Committee has finished with the STEP Conference

MHA TAG, Mark Tornstrom (Chair)

- In regards to the MHA Tag report – since our last meeting, we presented at staff
- Based on the comments, which are being circulated, it was well received; people want more information
- A special thank you to Drs. Nasra & Kamen who presented to the group on this issue
- Announcement – I am leaving my position at Monroe Ambulance; I will remain active in the area
- I will be working from home with the new position I am taking; I will continue to work with Monroe Ambulance on a part time basis
- I will be leaving my seat and current position as vice chair of REMAC

- Terry Fairbanks – Last REMAC meeting for me as I have taken a job in Washington, DC
- Before Mark leaves, I wanted to publicly thank him for his help as the REMAC Vice Chair; he's done a great job

State Council Meetings, Jeremy Cushman, MD

- SEMAC minutes were discussed at length re: demonstration projects and hypothermia/therapeutic hypothermia is still experimental and therefore, not a “standard of care”
- The State still requires demonstration projects to be offered by each region
- They are no longer accepting these demonstrations on therapeutic hypothermia – therefore we are awaiting the results from Buffalo, Albany, and FDNY projects
- SEMAC also discussed the trauma triage algorithm promulgated by the CDC
- The Finger Lakes region has won a small battle re: the approval of Ketamine
- The Bureau of Narcotic Enforcement has approved their request with very strict guidelines for the use in the system with the previous precedent for fentanyl
- We have no intention of adding Ketamine to our regional protocols
- SEMAC is down to three meetings a year

SEMScO Report, Tim Czapranski

- A memorial was held during EMS week for three EMS providers who passed away
- Providers are encouraged to attend these memorials/ceremonies when possible
- Vital Signs 2010 – will be held in NYC August 26th - 29th
- The Sheraton Hotel is being used for housing – already 80% booked; if you haven't already, book now
- The hotel is by Times Square so be aware of the parking situation – very expensive/limited
- Should anyone be interested in the Ketamine, there is a policy statement on the NYS Bureau of EMS website; policy statement 10-04
- A regional concern: mutual aid was at a standstill in some parts of the state when the State Office of Medicaid Services & Insurance Programs stated that EMS Agencies that responded outside of their primary operating territory would be doing so at their own risk re: payment/financial services as it may be considered fraud
- The Office of Health Insurance Programs has since clarified and decided that you can go outside your territory on a mutual aid response, can bill for those services – and this would be perfectly legal
- DOH Attorney, Joe Carmel, gave a very informative PPT presentation at SEMAC re: MOLST and Health Care Decisions; it can be found on the NYS DOH website
- 5,000 students sat for the May 28th State EMS Exam – this may be a record number
- Visit, www.health.state.ny for an indication of how well the state has done re: creating regional trauma centers
- Federal law – States must report adverse actions taken against a physician; effective March 1st, 2010
- National Practice Data Bank; accessible to all employees; Bureau of EMS plans to comply with the law

- Unattended and unsecured ambulances are a big issue to the Bureau of EMS; safety factors
- Next SEMAC and SEMSCo meetings are October 5th and 6th

State Actions, Jeremy Cushman, MD

- None

REMAC Sub-Committee Reports

Terry Fairbanks, MD

- The sub-committee structure has changed to be more in line with where we are
- Four years ago sub-committees were formed to have work occur outside of REMAC
- You don't have to be a member of REMAC to be on a sub-committee
- We encourage our EMS providers to be involved in regional leadership
- One of the powers given to the Chair of REMAC is to select and appoint committees and sub-committees
- The protocol committee and policy committee and STT committee have now been combined into one: Protocols & Policies Sub-committee with Dr. Cushman as the Chair
- ALS, Protocol & Policy, and QA sub-committees will stand
- MHA Tag & Regionalization Tag will remain

ALS Subcommittee, Julie Jordan (Chair)

- The Preceptor Policy was sent out for everyone to review about a week ago
- It is up before the REMAC for action
- Everyone should have looked at it by this point; we hope to entertain a motion to accept it at the REMAC level
- Moved; Shah & Thompson; All Ayes in favor; Motion Carries
- Dr. Cushman will use his judgment as to when this policy will take effect

Pharmacy Subcommittee, Mike Kuder (Chair)

- No meeting was had, but there has been a lot of communication re: the recent shortage of preloaded syringes
- The shortage is effecting different hospitals and different times
- Some hospitals are posting signs near restocking stations

Protocol Subcommittee & Advanced Practices, Jeremy Cushman (Chair)

- Informational item: The Protocol & Policy Sub-committee will now have standing meetings via "Go-To Meetings"
- They will be announced to the committee members as well as the REMAC itself
- Action Item: Revision of the refusal to treatment and transport policy
- MHA Tag: a lot of work has gone into this; a pod cast should be coming soon which will assist in the application of this policy
- Motion to accept; All those in favor say "aye"; Ayes; Motion carries
- Protocol for transport was previously approved; no changes from the MHA tag
- Agencies & Medical Director should do QA and education on this within your agencies; make sure everyone is on the same page

Quality Assurance Subcommittee, Manish Shah, MD (Chair)

- Committee has been working on one major project: that is leveraging off some national stuff done on performance benchmarks within quality assurance issues
- There is a seconded motion that comes up from this subcommittee re: chart lock times
- Agencies who offend the chart lock time rule three months in a row are referred to the QA Committee for discussion and review
- We are monitoring these cases closely, but ask to loosen the restriction somewhat
- At the discretion of the committee, this comes as a seconded motion
- All those in favor say "aye"; All Ayes; Motion carries
- Agencies must ensure that all providers have completed the spinal immobilization pod cast

Regionalization TAG, Julie Jordan (Chair)

- We've already had MHA & Regionalization Tags

GRQC Committee Update, Manish Shah, MD

- No report

ePCR TAG, Zach Hettinger, MD

- No report

Old Business

- No report

New Business

- Dr. Rueckmann and myself are requesting the REMAC waiver for a number of providers overseen by a single physician
- Under NYS Law, a single medical director can cover no more than 100 ALS providers, but that can be overridden by REMAC
- Dr. Rueckmann has an agency with a highly variable ALS Group that will be below or slightly higher than 100 from time to time
- We are both asking to waive the 100 provider limit for the Agency Medical Director, so we can continue to provide medical direction to those agencies which are slightly larger than average
- We would like to entertain a motion to accept this waiver
- So moved; Bruce Thompson; Seconded – discussion
- The spirit of this NYS law is not directed toward people like Drs. Cushman or Rueckmann
- The spirit of this rule is more directed toward the once-a-year sign the paper medical directors
- Here we have the opposite situation where the medical directors give a lot of attention to their agencies and providers
- **Tim Czapranski:** I feel two things: the state doesn't go into the issue of frequency of utilization of ALS
- So you could have 100 ALS providers that are used infrequently, therefore the demands of the medical director would not be great
- As Jeremy mentioned, the fact that they double count providers is inappropriate
- I feel as though the motion is appropriate and I support it
- As far as numbers are concerned, I just worry about the University having a monopoly on large numbers of EMS corps – it's good for other people to be involved in EMS aside from the University
- **Terry Fairbanks:** what I've seen over the years, the dilemma from the medical directors of agencies is more getting other physicians in the community involved; lack of resources
- We've has to ask Jeremy to take on several agencies as of late simply because there was no one else to do it; we would like for other physicians in the community to be involved
- Voting on two things: the 100 number of ALS providers and the 10 EMS Corps –
- Motion; All those in favor say "aye"; All Ayes; Two abstentions; Motion carries
- Next item of new business – special election for Zach's position; I will hand it over to the new REMAC chair, Dr. Shah
 - Dr. Shah: thank you to everyone on the REMAC for your hard work; our success is based on everyone's dedication
 - A special thanks to Terry; we're going to miss you; thank you for your hard work over the years
 - Move to adjourn; All in favor

Hospital & EMS Leadership Meetings,

- No report

RHIO, Manish Shah, MD (for Jeremy Cushman, MD)

- Nothing new re: RHIO

Applications –EPI & Albuterol-, Jeremy Cushman, MD

- The State has required two things of Ambulances effective April 1st : that they carry AEDs & Epi-pens
- Because of this, we have had a wave of Epi-pen authorizations come through
- I have reviewed all of the applications and have approved them
- BLS and ALS Agencies need to make sure they always carry epinephrine with them; it is required