South Carolina EMS Advisory Council Meeting Virtual TEAMS Meeting June 10, 2021 10:00 am

MEMBERS PRESENT	MEMBERS ABSENT	DHEC STAFF
Ed DesChamps, MD, Chair	Ryan Barnett	Rich Wisniewski
Garrett Clanton, MD	Spencer Robinson, MD	Jessica Schmittle
David French, MD	Debbie Hession	Karen Moore
Britton Herbert	Chris Bowers	John Thivierge
Ellen Ruja	John Williams	Connie Thompson
Chris Cothran	Kelly Carlton	
Mark Self	Brett McGary, MD	
Richard Mann	Antoine Kelly	
Matt Morris	Debbie Hession	
Ryon Watkins	Austin Mandeville	
Scott Stoller	John Lawson	
Crystal Youmans	Phil Clarke	
	Charles Dixon	

NOTE: Did not have written attendance list-used the "roll call" during one of the votes on a motion. MWN

AGENDA ITEMS	DISCUSSION/ACTION	
CALL TO ORDER		
	Dr. DesChamps called the meeting to order.	
FREEDOM OF INFORMATION ACT	Ms. Thompson read the Freedom of Information	
2077 0177	Act.	
ROLL CALL	Ms. Thompson called the Roll.	
APPROVAL OF MINUTES	The minutes were approved.	
Promulgation 101 (Update)	Russel Morrison presented the Promulgation 101	
DHEC STAFF REPORTS		
Requests for Changes in Medications	Mr. Wisniewski reminded the Council there is a process for the addition or changes in medication doses. These requests must go through the Medical Control Committee. In the case of a true emergency and there is a shortage from suppliers, please email him and an exception will be considered.	
Trauma Funds	Ms. Moore has been working on the Trauma allocation numbers for the Trauma Grant. As soon as DHEC has a budget, the grant letters will be mailed.	
Upcoming Town Hall Meeting	Mr. Wisniewski announced a Town Hall meeting would be be scheduled for September, with sessions in the daytime and evening. A TEAMS option will be offered for both.	

Fire/Rescue Conference

Mr. Wisniewski stated EMS will have a booth at the upcoming Fire-Rescue Conference, held in the Columbia Metropolitan Convention Center.

EMS Open Positions

Mr. Wisniewski said the Division has three open positions, including the two interim positions being held by Mr. Thivierge and Ms. Moore. Additionally, the Compliance Manager position has been modified and will also be responsible for Training and Training programs.

Image Trend

Mr. Wisniewski reported there an issue with imports and exports from ESO to Image Trend. Mr. Wisniewski said he received notification ESO had sent the 2020 data. He requested an update on when EMS would receive the rest of the historical data.

Mr. Wisniewski continued, saying since EMS has moved to the Image Trend system, all applications can be submitted online, except for state only licenses. As of July 1, the Division will no longer be accepting paper applications.

EMS Main Phone Number

Mr. Wisniewski said EMS is no longer using the phone tree for the EMS main phone number. The main phone number (803-545-4204) now rings on Ms. Thompson's and Ms. Neely's desk phones and they route the calls. The caller will now speak with a live person, which should improve our responsiveness and reduce unnecessary transfers.

Committee/Council Reports

Medical Control Committee
Pilot Program: Gastric Tube
Reinsertion

Aaron Dix proposed a Pilot Program to allow Prisma Ambulance Service EMS to reinsert gastric tubes at specified nursing or extended care facilities. These facilities would have access to a mobile radiology vehicle to ensure the tube was inserted correctly. The intent is to prevent patients who needed to have tubes reinserted to be transported to the ER and instead be able to stay at the nursing facility.

Mr. Watkins seconded the motion.

Discussion followed.

The motion passed, with 1 "no" vote.

Surgical Cricothyroidotomy

Dr. DesChamps stated the Trauma Advisory Council had approved recommendations for the training materials for surgical

cricothyroidotomies. This was also approved by the Medical Control Committee. Recommendations included: *1-2 years observation period to determine the population need and rate of occurrence of cases where surgical airway would be perforable or cases where there was a death due to inability or oxygenate/ventilate. *Additional endpoints must be developed to perform PI on this procedure. *Surgical Cricothyroidotomy should be taught by surgeons who are familiar with neck anatomy and regularly operate on the neck Mr. Self seconded the motion from the MCC. Discussion followed Motion failed, it will go back to TAC and MCC. Discussion followed. **Training Committee** Mr. Head, representing Ms. Smith, had no report. **Trauma Advisory Council** Ms. Moore said the last TAC meeting was in April. There is no July TAC meeting as the Regional Committee on Trauma meeting is scheduled for the same time. Ms. Moore added the Trauma Registry was still in the RFP process. **EMS for Children** Ms. Moore reported there was no EMSC meeting in April but does plan to meet in July. Ms. Moore has joined a national collaborative that focuses on Pediatric Emergency Care Coordinators at EMS agencies. She has asked current Pediatric Emergency Care Coordinators in the state to join as well. **Stoke Advisory Council** Mr. Thivierge said the Stroke Advisory Council met on April 8th. The Council created a Bylaws subcommittee and an EMS Access and Transportation subcommittee. Mr. Thivierge added, the EMS Access and Transportation subcommittee met on May 13 and discussed interfacility transports for stroke patients. Mr. Thivierge reported on July 1st, St. Francis in downtown Greenville will convert from a Comprehensive Stroke Center to a Primary Stroke Center. That will leave only one Comprehensive Stroke Center in the Upstate. **Data Committee** No report.

OLD BUSINESS	
Posterior Stroke Pilot Program	Dr. DesChamps stated Dr. Fabiano proposed a pre-hospital Pilot Program involving posterior stroke patients. When brought to the MCC, it was decided this was an expansion of an exam for these patients, as it did not involve changing any medications or procedures. MCC approved it, but no motion is needed from the Advisory Council.
Nitro Project	Dr. DesChamps said Dr. Fabiano also wanted to add IV Nitro to the State Formulary. This would be used for certain patients with congestive heart failure. Dosage: 1 mg dose with repeated doses every 5 minutes x 3. The Advisory Council accepted, and Dr. Fabiano will be notified.
TXA	Dr. DesChamps reminded the Council that any service can be added into the Lexington Pilot if they meet the criteria. Agencies must contact Mr. Wisniewski to be added
Regulation Discussion and Review	Discussion followed
Adjourned	

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