

## MEETING DETAILS

EMS ADVISORY COUNCIL	
DATE	Thursday, 09 December 2021
TIME:	1000 Hrs
LOCATION	Columbia Mills & Virtual
RECORDING:	Mary Neely -

## ATTENDANCE

Members Present	Members Absent	Guests
Ed DesChamps, MD	John Williams	Kate Smith
Britton Herbert	Kelly Carlton	Marcus Barnes
Chris Gainey, MD	Brett McGary, MD	Benji McCollum
Kim Graham	Spencer Robinson, MD	Michael Hatfield
Ron Cain	Ryan Barnett	Phil Head
Todd Bridges	John Lawson	Steve McDade* (Proxy – Henry Lewis)
Chris Cothran	Phil Clark	Rob Wronski
Mark Self	Charles Dixon	John LeBlanc
Austin Mandeville	Chris Bowers	
Richard Mann		Mary Neely – DHEC
Ryon Watkins		John Thivierge – DHEC
Scott Stoller		Karen Moore - DHEC
Crystal Youmans		

\*Proxy for members will be noted with an asterisk \*.

## AGENDA:

ITEM NO.	TOPIC	PRESENTER	DISCUSSION	MOTION
1.	<b>Call To Order</b>	Dr. DesChamps	10:03	
2.	<b>Freedom of Information Act</b>	Ms. Neely	Read & Acknowledged	
3.	<b>Roll Call</b>	Ms. Neely	See Attached Record	
4.	<b>Approval of Minutes</b>	Dr. DesChamps	Minutes of 09-09-2021 Under Peds – Pg 4 – Spinal Motion Restriction corrected from Spinal MOBILE Restriction	<b>Motion to Approve:</b> M. Self 2 <sup>nd</sup> : Scott Stoller Approved by Acclamation.
5.	<b>DHEC STAFF REPORTS</b>	Thivierge		
5.1.		Thivierge	<ol style="list-style-type: none"> <li>1. Process of filling position for EMS-C; Stroke/STEMI/Sepsis Coordinator; Midlands Inspector.</li> <li>2. Regulation 61-7 – Tabled. Will go to DHEC Board in January 2022.</li> <li>3. Trauma Registry has been approved.</li> <li>4. Internal process revision on Investigations/Inspections.</li> </ol>	
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6.	<b>COMMITTEE/COUNCIL REPORTS</b>			
6.1.	EMS Medical Control Committee	Drs. DesChamps/Clanton	<ol style="list-style-type: none"> <li>1. Met November 2021.</li> <li>2. Approved Blood Administration and TXA. <ul style="list-style-type: none"> <li>• Thought we might approve CRIC project – but there was additional discussion about the ability of the Department to Regulate</li> </ul> </li> </ol>	

			<p>Crics and/or any procedure. We have asked Rich to ask the Office of General Counsel to provide formal opinion as to the authority of the Department to regulate. There is question as to whether we have the authority to restrict anything that is taught at the NREMT level.</p> <ul style="list-style-type: none"><li>• Mr. Cothran. Question as to the authority of State and State Medical Director to regulate.</li><li>• Dr French: Not whether the state has authority to regulate – but whether the Local Medical Control can set the level of participation.</li><li>• Dr. Gainey: Large part of discussion centered around being a COMPACT State. That the State could not restrict anything below the level of the NREMT Standards.</li><li>• Request DHEC OCG formal opinion on authority to regulate and if OGC feels we do not have such authority – request opinion from the Attorney General.</li><li>• Wronski: Provider in GA cannot come to SC and give Blood based on their GA certification. This is privilege to practice. They have privilege to practice under their Home State protocols in SC.</li><li>• Design was for allowance of resources from out of state for assistance in time of need.</li><li>• Previously have felt that the Department could set requirements for training, recertification, and education, and</li></ul>	
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			<p>requirements for performance of a given procedure.</p> <ul style="list-style-type: none"> <li>• Wronski: The State Medical Control Physician with the Medical Control Committee and Advisory Council shall set the Scope of Practice for all providers in SC.</li> <li>• One of benefits of COMPACT was reporting to the National Practitioner Data Base.</li> </ul>	
6.2.	EMS Training Committee	Maj. Smith	<ol style="list-style-type: none"> <li>1. Educational components for Blood Administration and TXA. Training module has been completed for Blood. Training module from Lexington approved. The entire package is ready.</li> <li>• Both of these were previously approved to move forward once Training modules and Protocols approved.</li> <li>• No motion necessary as previously approved by Medical Control and Advisory Council.</li> <li>• Department to release the information when Protocols are in the appropriate format.</li> </ol> <ol style="list-style-type: none"> <li>2. TC: Working on Institutional Data Information.</li> <li>3. Department to put out information for resiliency training.</li> </ol>	
6.3.	Data Oversight Committee	Mr. Shivar	N/A	
6.4.	Trauma Advisory Council	Ms. Moore	<ol style="list-style-type: none"> <li>1. Wrapping up Trauma Registry RFP process. Intent to award on Monday with contract to be in place in January 2022.</li> </ol>	

			<ol style="list-style-type: none"> <li>2. Redesignated Lexington Medical x 1 year ending in 2022. 1 year due to COVID.</li> <li>3. Redesignated Piedmont Medical Center x 2 years (April 2023).</li> <li>4. Working on Membership List. Added 10 new members in October 2021.</li> <li>5. More open positions in January 2022.</li> </ol>	
6.5.	EMS-C	Ms. Moore	<ol style="list-style-type: none"> <li>1. Peds Symposium in Charleston – 03/05/2022. In person &amp; virtual. CME information pending. Karen will send out information. <ul style="list-style-type: none"> <li>• Pediatric Training on Line – Partnered with USC School of Medicine for CME. Will be providing 1 x / month – 12 sessions – i.e. 12 hours/annually. Will be live and housed online at EMS-C Website.</li> </ul> </li> <li>2. Pediatric Spinal Motion Restriction Protocol – Working group is working on this.</li> </ol>	
6.6.	Stroke Committee	Mr. Thivierge	<ol style="list-style-type: none"> <li>1. Stroke AC met in October 2021 virtually. <ul style="list-style-type: none"> <li>• Updated SC State Stroke System of Care Map. On EMS Portal as well as DHEC Web site.</li> <li>• Dr. Westerkam left committee.</li> <li>• Dr. Angela Walker at Prisma Health/Encompass is appointed as rehab physician from Hospital Association.</li> </ul> </li> <li>2. Next meeting for 01/13/2022.</li> <li>3. Dr. Webb has taken a position at Trident.</li> </ol>	
6.7.	SC EMS Association	Mr. Lewis		
6.8.				
7.	<b>OLD BUSINESS</b>	Dr. DesChamps	<ol style="list-style-type: none"> <li>1. Membership updates – Advisory Council. Most positions will expire at the end of 2022. Need reappointments.</li> </ol>	

			<ul style="list-style-type: none"> <li>• Dick Mann: Working with SCEMSA on update appointments. Waiting on responses from 3 Rescue Squads. 3 Private EMS providers; 1 from Public EMS – 2 candidates pending.</li> <li>• New Appointments: Dr. Galen DeHay – SC Tech Schools; Ron Cain – SC Emergency Management Division.</li> <li>• McDade: Rescue Squad: Dick Mann; Grant Cogdill (Landrum Rescue 11); Private EMS – Russ Cobb; Aaron Dix; Randy Bowers; Public EMS – Ryon Watkins; Jim Edge; Crystal Youmans.</li> </ul> <p>2. Appointment of Secretary: Mark Self.</p>	
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8.	<b>NEW BUSINESS</b>	DesChamps	<ol style="list-style-type: none"> <li>1. Blood Administration - Approved</li> <li>2. TXA - Approved</li> </ol>	
8.1.		John LeBlanc / Phil Head	<ol style="list-style-type: none"> <li>3. John LeBlanc – Nitrous Oxide Presentation for Basics. Large portion of ALS Backups were called for Pain Management. Felt that allowing Basics to provide Nitrous would reduce the need for ALS backups. Administered via demand valve. Working out very well. More expensive that starting IV and using opioids.</li> </ol> <ul style="list-style-type: none"> <li>• Everyone had to have training including proper documentation. Continued to be covered in orientations.</li> <li>• Nitrox Units – blends N2O with oxygen.</li> <li>• Units are sealed after use.</li> </ul>	<p><b>MOTION:</b> STOLLER: Approve N2O for BASICS Statewide 2<sup>nd</sup>: Dick Mann Motion to follow the Greenville Training Module, QA, Protocols.</p> <p>Motion approved by Acclamation. No negatives or abstentions.</p>

			<ul style="list-style-type: none"><li>• Require check-off sheet</li><li>• Document in Patient Care Report.</li><li>• Usage form required for each usage. IF seal is broken at anytime there must be a form completed.</li><li>• 100% QA on all calls where N2O is used.</li><li>• 195 patients met the requirements – 16 were not included due to other contraindications. Some were equipment failures – due to loss of a gasket that was being discarded in the field.</li><li>• Of 179 – 137 patients got pain relief. Of the fraction that did not get pain relief ALS was called for a small amount.</li><li>• No significant Adverse Events.</li><li>• Medical Control felt that a Tiered System was not needed – that Basics in any system could provide. That restriction to Tiered Systems would restrict access to large portions of the state.</li><li>• McCollum: Reduction of ALS being called for Pain Management – Of 179 patients only 12 required ALS Backup.</li><li>• No voiced concerns about expanding this protocol to ALL BASICS for Pain Management.</li><li>• Chris Gainey: Should this go to Training Committee for development of training protocols.</li><li>• Will send package to Training Committee to put the package together.</li><li>• This will be approved when developed by Training Committee</li></ul>	
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8.2.		M. Self	EMS Symposium Tuesday—Saturday. At least 2 and maybe 3 different registrations that will be necessary. Send out an email on how to do the registration. Information is on SCEMSA website. Also on the DHEC EMS Portal/Website.	
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9.	<b>NEXT MEETING</b>		Scheduled for Symposium. Issue is cost of the Internet. Will have a poll to schedule next EMS Advisory Council. Possibly 03/03/2022; 03/17/2022; or 03/31/2022.	
10.	<b>ADJOURN / TIME</b>			Cothran – Motion to Adjourn. 11:15 Hours