Board-approved July 8, 2016

EMERGENCY MEDICAL SERVICES ADVISORY COMMITTEE
MEETING AGENDA
BOARD OFFICE

May 20, 2016
9 A.M.

Committee Members:
Kara Kohfield, Paramedic, Chair
Mohamud Daya, MD
Chris Poulsen, DO

Staff:
Joseph Thaler, MD, Medical Director
Netia N. Miles, Licensing Manager
Shayne J. Nylund, Committee Coordinator

Absent by Prior Notification:
Wayne Endersby, EMT
Mike Verkest, Paramedic

PUBLIC SESSION

1 Call Meeting to Order – Introductions/Attendance Kohfield

The Meeting was called to order at 9:00 a.m.

Members of the public introduced themselves:
Jan Acebo, Multnomah County Emergency Medical Services
Paul Bollinger, Health Share of Oregon
Jonathan Chin, Washington County Emergency Medical Services
Dave Lapof, Mid Columbia Fire and Rescue
Aaron Monnig, Multnomah County Emergency Medical Services
Mark Stevens, EMS Section Oregon Fire Chiefs Association
Margaret Strozyk-Hayes, Hamlet Fire and Rescue Department

Attendees arriving after introductions include:
David Lehrfeld, MD, Oregon EMS Trauma Systems

2 Meeting Minutes – Review of Board Approved Minutes from February 19, 2016 Kohfield

Ms. Kohfield moved to approve the February 19, 2016 minutes as written. Dr. Daya seconded the motion. The motion unanimously passed.
INFORMATIONAL ITEMS

3 Proposed Rules from Oregon Health Authority - OAR 333-250: Ambulance Service Agency Providing Secure Transport, Final Hearing Officer Report

Kohfield

COMMITTEE RECOMMENDATION: Ms. Kohfield reviewed the proposed rules OAR 333-250 from the Oregon Health Authority (OHA) and final hearing officer report. Informational item only. No action taken.

DISCUSSION ITEMS

4 OAR 847-035-0011: EMS Advisory Committee

FINAL REVIEW

Poulsen

The proposed rule amendment requires that the physician members of the EMS Committee have at least two years of experience actively practicing as Oregon EMS supervising physicians.

Dr. Poulsen reviewed the proposed changes to OAR 847-035-0011 before the Committee

COMMITTEE RECOMMENDATION: Dr. Daya moved the Committee recommend adoption of OAR 847-035-0011 as written. Dr. Poulsen seconded the motion. The motion unanimously passed.

In reviewing this rule, please consider the Fiscal Impact.

5 OAR 847-035-0030: Scope of Practice

FIRST REVIEW

Daya

The proposed rule amendment broadens the EMT scope of practice to allow blind insertion of any supraglottic airway device rather than limiting the scope to only cuffed pharyngeal airway devices. The proposed rule amendment also adds a provision to allow Paramedics to maintain ventilators during transport if the Paramedic is trained on the specific device and is acting under written protocol or direct orders.

Dr. Daya reviewed the proposed changes to OAR 847-035-0030. The EMT scope of practice OAR 847-035-0030(9)(c) currently reads: Insert a cuffed pharyngeal airway device in the practice of airway maintenance. A cuffed pharyngeal airway device is:

(A) A single lumen airway device designed for blind insertion into the esophagus providing airway protection where the cuffed tube prevents gastric contents from entering the pharyngeal space; or
(B) A multi-lumen airway device designed to function either as the single lumen device when placed in the esophagus, or by insertion into the trachea where the distal cuff creates an endotracheal seal around the ventilatory tube preventing aspiration of gastric contents.

The proposed revision to (9)(c) reads: Blindly insert a supraglottic airway device in the practice of airway maintenance. Subsections (A) and (B) would be removed. The Committee discussed the need to fully explain “airway maintenance.”
The proposed new addition to the Paramedic scope of practice would read: (12)(b) Maintain mechanical ventilation during transport if trained on the particular equipment and if acting under specific written protocols authorized by the supervising physician or direct orders from a license physician. The Committee discussed that “supervising physician” didn’t need to be stated in the new provision because the entire scope is under the authorization of the supervising physician. They also had concerns about the language “or direct orders from a licensed physician” and decided it should be removed.

COMMITTEE RECOMMENDATION: The Committee recommended changing proposed OAR 847-035-0030(9)(c) to read: Insert a supraglottic airway device to facilitate ventilation through the glottic opening by displacing tissue and sealing of the laryngeal area.

In addition, the Committee recommended revising the proposed new OAR 847-035-0030(12)(b) to read: Maintain mechanical ventilation during transport if trained on the particular equipment and if acting under specific written protocols. Forward to the Full Board for review.

6 Scope of Practice: Suction of a Patient with a Tracheostomy at the EMT Level Kohfield

The Committee reviewed correspondence from Tina Beeler, Paramedic, Clinical Education Specialist, West Region, who inquired if it’s within an EMT’s scope of practice to suction a patient with a tracheostomy. Ms. Beeler stated that under the current rule there’s no specific reference to trach patients. With input from the public, the Committee determined the last sentence of OAR 847-035-0030(9)(d), which reads: on the endotracheal intubated patient, was antiquated language and could be removed in order to allow for a broader interpretation.

COMMITTEE RECOMMENDATION: The Committee proposed to amend OAR 847-035-0030(9)(d) to read: Perform tracheobronchial tube suctioning. Forward to the Full Board for review.

7 Recommendation of Chris Poulsen, DO, to a Second Term Daya

COMMITTEE RECOMMENDATION: Dr. Daya moved to reappoint Dr. Poulsen to a second term on the Emergency Medical Services Committee. Ms. Kohfield seconded the motion. The motion passed with Dr. Poulsen abstaining. Forward to the Full Board for approval.

8 Public Comments Kohfield

No public comments were made during this portion of the meeting.

9 Confirm Next Meeting Date – August 19, 2016, 9:00 A.M Kohfield

By consent, the Committee approved the next meeting date as August 19, 2016.

ADJOURN at 10:14 a.m.