

**Northwest Community EMS System
PBPI Meeting Minutes
Wednesday, August 1, 2018**

Topic	Discussion	Actions/Follow-Up
Call To Order	Meeting called to order at 0906 hours.	
New Members & Guests	None	
Minutes & Agenda	No motion made to approve last month's minutes because we did not have a quorum. Postponed until next month. No additions to agenda.	
Old Business 2018 Sepsis Screen 2018 Naloxone 2018 Q2 Cardiac Arrest Data	<p>2018 Sepsis Screen - Jason is re-running sepsis reports based on more accurate hospital names (some hospitals have more than one name in ImageTrend). As a result we were not capturing all the "sepsis" patients in our system. Once we identify these patients, we need to tease through the data to see how many of our patients are septic or in septic shock and then how we are treating them. We want a baseline for now, then, the education for sepsis will take place in August, after which, we will re-evaluate this patient population to see if care is improving. ERs operate under 3 and 6 hour "sepsis bundles", and included in that is how much fluid the patients received. EMS (pre-hospital) fluids are included in their numbers, so the earlier fluids get started, the more precipitous the hospital can be with their sepsis care, ultimately improving pt. outcomes. Sepsis alerts are more important than ever, because the research is showing that the outcomes are vastly improved if antibiotics are on-board within 1 hour (not the current 6 hours), and if a sepsis alert is called in, hospital can get ball rolling on ordering antibiotics. PBPI and CARS feedback for this month's module was invaluable. Much of the education was driven by the data that PBPI and CARS provided, so this model of running screens a few months prior to an education being rolled out, will continue to be utilized. There is always the continued conversation about how we can train/teach/educate the medics and then have them retain the information. As a system, we are accountable for measuring our competency.</p> <p>2018 Naloxone - Naloxone data has been a huge help for education in an ongoing basis. The educators who compile the education find the data extremely valuable. The region is looking to formulate a handful of questions to gather data for overdose calls, in an effort to get a better idea of how much naloxone is being administered and by whom. There is also a desire to have a more coordinated relationship between EMS and law enforcement in giving some medications (naloxone, epi, etc),</p> <p>2018 Q2 Cardiac Arrest Data - Dr. Jordan talked about Q2 arrest data. This quarter's data included all arrests (traumatic arrest, those that were "worked" that probably should not have, etc), so, numbers reflect all those calls. ROSC numbers slightly lower than normal. However, those in pulseless V-tach or V-fib have much higher ROSC rates, but with these patients we still seem to be missing the Amiodarone. These are the arrests we have the greatest potential of saving, so it is imperative to follow the protocol.</p> <p>The ultimate goal is to transport some of these patients while actively arresting, (with mechanical compressive device in place), and get them straight to the cath lab.</p>	

<p>New Business 2018 Fentanyl screen</p>	<p>2018 Fentanyl screen – Looking at second quarter of 2018 for pain management. There is a lot of feedback from the medics in the field about how Fentanyl is ineffective (especially the IN route), but we continue to not give the full dose we are allowed to give, so it is hard to evaluate the accuracy of those claims. One item to add to the screen is the time between doses. Jason will make changes and send the screen out for completion this month.</p>	<p>Jason will modify the screen and instructions based on the discussion today. He will send out to group once finished. Members should complete screen and send back to Jason by end of month.</p>
<p>System Updates</p>	<ul style="list-style-type: none"> - New EMS rules are adopted, so system is updating their policies to reflect those new changes. New - SOPs will be rolled out in the next few months. 	
<p>From the floor / Closing remarks</p>	<p>None.</p>	
<p>Adjournment</p>	<p>Next Meeting – Wednesday, Sept 5, 2018 Meeting adjourned at 10:37 am. Minutes respectfully submitted by: Nichole Junge, RN, EMT-P</p>	