

**Northwest Community EMS System  
PBPI Meeting Minutes  
Wednesday, September 1, 2021**

Topic	Discussion	Actions/Follow-Up
<b>Call to Order</b>	Meeting called to order at 0902 hours.	
<b>New Members &amp; Guests</b>	New member Troy Olsen from Wood Dale Fire (new rep).	
<b>Minutes &amp; Agenda</b>	Motion to approve August minutes by Markus second by Tina. All in favor, motion granted, minutes approved. No additions to agenda.	
<b>Old Business Naloxone screen</b>	<p>(1/21 – 6/21) – For the first quarter of the year, we had 92 incidents with 87 given naloxone. We had 80.6% SOP compliance. IN is the most popular route, which is expected. 26 incidents where naloxone given PTA (law enforcement most prevalent of this group). Prior to arrival most common dose is between 2mg-4mg. Second most common is between 4-8mg. We still have an occasional dose of 0.4 documented, which needs to be addressed. We haven't had that dose for 3 yrs.</p> <p>For 2<sup>nd</sup> quarter, we had a total of 95 calls. Naloxone given 87 time in those calls. 25 time given PTA. SOP compliance 75% for this quarter. 14 of cases had PTA plus medic administration averaging total dose 6.5mg. 11 had PTA only. Avg dose given PTA 4.9mg. 62 patients only given naloxone by medics – avg dose in those calls was 2.2mg. Of these calls, 26 of the patients had a RR &gt;12.</p>	
<b>New Business Heart failure treatment query</b>	<b>Heart failure treatment query</b> – looking at all pts with suspected HF. Primary impression of HF (age greater than 12). Will exclude private agencies. Some of the fields will be age, 12 L done, previous cardiac hx, Pt acuity on arrival, pt disposition, how many got ASA, how many got NTG, CPAP administered, look for if NITRO is continued even after CPAP is on, if BP drops below 90 – remove CPAP, if capno was documented or not, vitals, lung sounds, IV success, etc. Some discussion about if we only search primary impression of heart failure (CHF), we might miss some of the patients that were treated per HF protocol, but maybe listed as cardiac or something similar. Taylor suggested adding acute pulmonary edema as a possible impression to pull into the query.	
<b>CARS Update</b>	<p>Adam said they went over the catheter sizes for the power tools – turned out to be a bigger task than what they anticipated, so for now it stays as is (free text field). They also discussed the law enforcement agency stuff which got changed up in ImageTrend, but is fixed now.</p> <p>Susie brought up one call where police gave Narcan a few times as the medics walked in, so it technically was not prior to arrival, but medics did not give it, so the times were messing up their report. At this point they decided to assign it to the medics and just explain in the narrative that it was actually police that gave it. It was an unusual circumstance, so not much to be done about it, just for FYI.</p>	
<b>Cardiac Arrest Comm</b>	Per Dr. Jordan – they are working on a universal feedback form that agencies can use to do post-arrest critiques.	
<b>System Updates</b>	IDPH is working on legislation for healthcare providers mandating vaccination. Markus asked if NCH is planning on giving booster shots to system members. Dr. J and Susan said yes, this is the plan. The shots may be administered off-site. Decisions should be finalized in the next few weeks. PM and EMT programs in progress.	
<b>Closing remarks</b>	None.	
<b>Adjournment</b>	Next meeting October 6, 2021 – motion to adjourn by Markus, second by Rick. Meeting adjourned at 0938. Minutes respectfully submitted by: Nichole Junge, RN, PM	