

## CLINICAL ISSUES COMMITTEE MINUTES

<b>Committee Minutes</b>	Clinical Issues Committee Meeting
<b>Date</b>	December 1, 2021
<b>Time</b>	10:00 am CST
<b>Location</b>	665 Mainstream Drive, Iris Room
<b>Participants</b>	Members present: Dr. Joe Holley, Jeffrey Feike, Hunter Earnes, Kevin Nooner, Randy White, Dr. Kevin Brinkman, Dwight Davis, Kevin Spratlin, Brandon Ward, Tim Booher, Angela Bowman, John Dabbs, Hugh Laxton, Mike Revell, Gary Ross, Mark Wilkinson

<b>Overall Lead</b>	<b>Topic</b>	<b>Summary / Decision</b>	<b>Assignments / Next Steps</b>	<b>Responsible Person</b>	<b>Time Frame</b>
Dr. Joe Holley	<b>Roll Call</b>	The meeting was called to order by Dr. Holley at 1009. Dr. Holley conducted a roll call, and a quorum was present.	n/a	n/a	n/a
Dr. Joe Holley	<b>Old Minutes</b>	Minutes were presented and elicited any feedback or corrections. With minor spelling corrections and a correction of the next meeting date to December 1, 2021, the Minutes approved unanimously.	n/a	n/a	n/a
Dr. Joe Holley	<b>COVID Impacts</b>	<p>Dr. Holley provided an update. Omicron variant not currently found in the United States. Concerns are that there are many mutations and appears to be more infectious, having three sites that attach to the cell instead of two. Preliminary data is not showing a significant increase in severity of illness. The boosted vaccines appear to be effective, but data is limited. Anticipate another surge related to this variant.</p> <p>Brandon Ward shared that all executive orders expired Nov. 17 at midnight. Emergency Rule was issued extending the content in the executive order regarding the utilization of operators on EMS units. Services need to submit plan to the Office.</p>	Recommendations for rule changes	Dr. J. Holley	Next CIC meeting

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		<p>Emergency Rule expires after 180 days. Operators are required to have CPR certification but are not licensed to perform patient care. Operators should not be used to complete daily ambulance checks as they do not have knowledge of medical devices. There have been concerns from billing companies stating Medicare denied claims stating there was only one licensed personnel on the EMS unit which violated state rules. Services may need to educate on the emergency rule. The Office of EMS can assist in sharing this information.</p> <p>Emergency Order expired allowing EMS to administer COVID-19 vaccines. Current EMS rules require vaccinations occur in a clinic with oversight. There is a federal executive order allows for healthcare workers to administer COVID-19 vaccines. If this order were to expire, we would be limited to our current state rules. Discussion if we should propose a rule change to the Board of EMS to allow for EMS to administer vaccines. EMS services have successfully administered the COVID-19 vaccine while under these orders. There were often requests for influenza vaccine by EMS which was not authorized. Will consider this with recommendations to the next rule-making meeting. Motion for CIC to prepare a list of issues that need to go rulemaking by the Board of EMS to include the administration of vaccinations by EMS by K. Spratlin, with second by M. Revill.</p>			
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		<p>The Office of EMS does not require EMS personnel to be vaccinated against COVID-19. The Office does not intend to review complaints related to vaccine mandates.</p> <p>Continuing to see patients that have avoided care due to concerns around COVID-19 are now seeking care and many whose disease processes have advanced. The shortage of health care workers has compounded the overall situation and very concerning with the omicron variant.</p>			
Dr. Joe Holley	<b>NAEMSP Website</b>	<p>Updated recommended essential equipment list for EMS was published last month. Article related to use of red lights and sirens for emergency response was published that demonstrated responses were very common (&gt;80%), but life-saving interventions were less than 7%. These will be distributed to the committee.</p>	n/a	n/a	n/a
Dr. Joe Holley	<b>Single Pole Traction Splint Device</b>	<p>Recommendation was presented to the EMS Board that the single pole traction splint device was not an adequate traction device. This recommendation was not based on evidence but anecdotal evidence/opinion only. Motion by T. Booher, with second by A. Bowman, to retract recommendation to the EMS Board that single pole traction devices are not adequate traction devices. Discussion points:</p> <ul style="list-style-type: none"> <li>• Potential that this is a training/competency issue rather than an issue with the device itself. Research is available demonstrating</li> </ul>	Retraction of recommendation to EMS Board	Dr. Joe Holley	EMS Board meeting on 12/8/2021

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		<p>that there is often the misapplication of traction splints. Consideration to add specific education/competency if utilizing this device.</p> <ul style="list-style-type: none"> <li>• The device may be used as pediatric split when not fully extended.</li> <li>• Concerns expressed by air ambulance operators regarding the additional space requirement.</li> <li>• This recommendation for the equipment list applies to ground ambulances only, but this would create a situation where equipment was allowed on air ambulances but not on ground ambulances.</li> <li>• ACS statement from 2014 states traction splints as optional.</li> <li>• EMS-C performance measures include a measure for EMS services to demonstrate competency on pediatric specific equipment. This device could be included in that metric.</li> </ul> <p>Motion carried.</p>			
Dr. Joe Holley	<b>Changing THC Rules/Decriminalization</b>	<p>Information was presented to the Board. Messaging from the Office of EMS was sent stating that CBD oils may contain THC resulting in a positive drug screen. Office of EMS will continue to advocate for exclusion for healthcare personnel in any legislation decriminalization of the use of THC.</p>	n/a	n/a	n/a
Dr. Joe Holley	<b>NG tube insertion</b>	<p>Already in scope of practice. No discussion.</p>	n/a	n/a	n/a
Dr. Joe Holley	<b>Old Business</b>	<p>Discussion related recommendation to remove the to the “rubber-band” or “R.A.T.S.” tourniquet from the equipment</p>	<p>Recommendation to EMS Board to</p>	<p>Dr. Joe Holley</p>	<p>EMS Board</p>

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		list. The ACS recommends “commercially produced windless, pneumatic or ratcheting devices” with demonstrated efficacy to occlude arterial flow. Motion by M. Wilkinson, with second by J. Feike, to include the verbiage from the ACS in the equipment list. Motion carried.	include ACS language		meeting on 12/8/2021
Dr. Joe Holley	<b>New Business</b>	<p>M. Reville requested information related to administration of blood in prehospital. Williamson County EMS is in second year of trial with good results that were presented to the Board of EMS. The administration of blood is restricted to Critical Care Paramedics by scope of practice. Mark King would be willing to share information on the program at Williamson County EMS for anyone wanting to propose a pilot program. Discussion around recommending blood administration as an approved practice to the Board of EMS. Dr. Holley suggested that any pilot program with administration by non-critical care paramedics come back to CIC.</p> <p>Recognition of upcoming retirement of Randall Kirby and his impact on the EMS community and profession. Motion by T. Booher, with second by R. White, to recognize his many contributions at the next EMS Board meeting.</p>	Recommendation to recognize Randall Kirby	Dr. Joe Holley	EMS Board meeting on 12/8/2021
	<b>New Business: Next meeting</b>	Next meeting likely to be on February 8 or 15, 2022. Date and location to be confirmed.	n/a	n/a	n/a
	<b>Adjournment</b>	Motion to adjourn by M. Revill, with second by A. Bowman. Meeting was adjourned by Dr. Holley at 1134.	n/a	n/a	n/a

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Minutes recorded and submitted by Kevin Nooner. Minutes are not necessarily recorded in order of discussion.