

## **The 2018 Connecticut EMS Advisory Board, Medical Advisory Committee (CEMSMAC) Annual Report**

The CEMSMAC meets on a monthly basis to provide the Department of Public Health Commissioner, the CT EMS Advisory Board and other ad hoc committees with advice and comment regarding the medical aspects of their projects.

### **Current Voting Members:**

Region I: Douglas Latham, MD	Region II: David Cone, MD
Region III: James Castellone, MD	Region IV: Kyle McClaine, MD (Co-Chair CEMSMAC)
Region V: William Begg, MD	EMS-C: Mark X. Cicero, MD
OEMS Medical Director: Richard Kamin, MD (Co-Chair CEMSMAC)	

### **Mission Statement:**

To ensure that all elements of the Connecticut EMS System are medically current and valid including training, patient care protocols, telecommunications, medical equipment, regulations and performance standards as they relate to the nationally defined EMS Providers' Scope of Practice and the National EMS Agenda for the Future

### **Purpose:**

1. To serve as a unified voice for Emergency Medical Services Medical Directors in Connecticut representing their needs as may be determined by the membership; and, to serve as a forum for the exchange of ideas and discussion of matters of mutual concern.
2. To foster, encourage and promote the development of superior abilities, skills, qualifications and requirements within the emergency medical services system as they relate to patient care.
3. To review, advise and approve the functioning of the EMS System as it applies to the scope of practice of Emergency Medical Services personnel and to advise on medical content of dispatching and pre-arrival instructions.
4. To advise, review, and support the delivery of quality emergency medical services education as it applies to EMS instructional programs in relation to the execution of the National EMS Scope of Practice and the National EMS Education Standards.
5. To establish, advise and disseminate information and guidance on concepts of emergency medical services care to appropriate bodies, governmental, private and public.
6. To present reports, actions and recommendations to the EMS Advisory Board as indicated and/or to the Commissioner of Public Health if necessary.
7. To advise on medical impacts of operational performance standards e.g., response times, lights and sirens, destination facilities, staffing, etc.
8. To take an active role in promoting the adoption of such policies and practices by groups and agencies as will contribute to the maximum development of emergency patient care.
9. To review EMS research proposals and recommend approval or non-approval to the EMS Advisory Board.

### **Completed projects in 2018:**

- Statewide Minimum Equipment List for required equipment at all levels of EMS provider in CT
  - The 2019 Minimum Equipment List was reviewed, refined and sent to EMSAB for review/approval. Expected publication by the CT DPH Office of Emergency Medical Services
- EMS Management of Cavitary Wounds
  - Education program developed with State Education and Training Committee to be more focused and appropriate to EMS provider
- Revision Of State DNR/Discontinuation Of Resuscitation Document
  - Current document from 2010 was reviewed and updated
  - Revised version to be included in latest update to Statewide EMS Protocols
- Development of fire ground/emergency incident rehab protocol for Statewide EMS Protocols.
- Expansion of EMT Scope of Practice to include intra-muscular injection of epinephrine for anaphylaxis/severe allergic reaction

### **Ongoing Projects:**

- Connecticut Statewide EMS Protocols
  - Ongoing revision/refinement of Statewide EMS Protocols
  - Statewide Protocols Sub-committee continues to meet regularly to carry on review and refinement of Protocols
- EMS Hand-off Process
  - Multi-stakeholder group created at request of Emergency Department Directors group and CHA to refine hand-off process at EMS/hospital exchange in order to promulgate consistency to maximize quality of care
  - Concurrently being worked on by the EMSAB
- Review of Specialty Care Transport (SCT) in CT
  - Curriculum for SCT provider reviewed and refined
  - Next steps involve evaluating the need for SCT in CT and how to best develop operational and educational resources to meet needs identified
  - Concurrently being evaluated by the EMSAB
- Connecticut Stroke Systems of Care Development
  - CEMSMAC with specifically named deliverables in 2017 Public Act pertaining to Stroke care
    - CEMSMAC will continue to provide input as needed regarding development and implementation of best practice for patients with suspected stroke in the pre-hospital environment.

- EMS Destination Guidance
  - Desire to work towards establishing baseline for authority/obligation regarding EMS patient destination for patients that do not fit into currently regulated Trauma Triage process
- Emergency Medical Dispatch (EMD)
  - Evaluation of EMD policy in Connecticut regarding triage process and prioritization of medical needs
  - Evaluation of appropriate use of lights and sirens (“hot response”)
  - Plan to develop a position paper to clarify best practice standards to be promulgated

This report was reviewed and approved electronically by the voting members of the CEMSMAC