Connecticut Trauma Committee ZOOM Meeting March 6, 2023

Present:

Shea Gregg, Chairman; Monika Nelson, Recorder; Nick Aysseh, Bethany Ayotte, David Bailey, Samantha Barbieri, Kim Barre, Carina Biggs, Jay Bresky, Angela Brown, Sean Caffyn, Emily Christison-Lagay, Alfred Croteau, James Doddington, Jonathan Gates, Jess Gildea, Ron Gross, Matthew Hornick, Peter Ingraldi, Vijay Jayaraman, Gary Kaml, Matthew Lissauer, Eliza Little, Renee Malaro, Jessica Mancarella, Adrian Maung, Ryan Millea, Nancy Moreau, Tricia Morrell, Manuel Moutinho, Paul Possenti, John Quinlavin, Karl Schmidt, Kevin Schuster, David Shapiro, Tara Vanderbes, Heath Walden, Sharon Weintraub.

Meeting called to order at 14:01

TOPIC	ISSUE	DISCUSSION	ACTION
Approval of minutes		Motion to approve minutes from the January 2023 meeting made by C. Biggs. A. Maung seconded. None opposed.	Minutes approved.
Introductions	Any new first- time attendees	Jessica Mancarella, TPM from L&M Hospital introduced self. Reported L&M Hospital, part of the Yale New Haven Health network is working to become a Level III Trauma Center, with a consultative ACS visit scheduled for March 2024. Emily Christison-Lagay and Matthew Hornick are new to the committee as representatives from Yale Children's.	
Gratitude/Success Sharing	Recognitions	Kevin Schuster was recognized as newly appointed Chief of Surgery at Bridgeport Hospital. Ron Gross was recognized and appreciated as being extremely supportive in assisting EMS in CT.	
OEMS Report		No report or update.	
CEMSMAC Report		No new update.	
EMS Advisory Board Report		Noted that several legislative bills were discussed, and a new EMS bill will be discussed during the legislative update.	
State Trauma Registry Update		E. Little updated that the Data Task Force was formed and the first meeting will take place on March 29 th at 2pm. No other new updates.	
ACS COT		J. Gates was on call and reported no new updates. R. Gross reported that this past weekend, Trish O'Neill from the ACS COT and her husband were killed in a car crash. ACS COT	
		sent out email notification, and family asked if	

Legislature		anyone wants to donate in her honor to the Trauma Global Foundation Fund. It was discussed that a tribute slide should be presented in her honor at the upcoming CT Trauma Conference. R. Gross mentioned that he will be doing a presentation and has devoted a slide to her as they he had the honor of teaching the first DMEP course with Trish. S. Gregg presented Proposed Bill No. 6539 – bill supporting the sharing of EMS data. Reported that CEMSAB group will be watching this bill and asking for clarification to see how/where it progresses. J. Quinlavin reported that the timing of this bill is close to the EMS workgroup that was put together in order to improve informationsharing. It was stated that DPH is collecting a lot of data from patient care reports (PCRs), and this would make it for this data to be more easily accessible. Clarification reported that there was a process to request data from the DPH, but with this bill, the data that is submitted to the DPH and analyzed will be able to be accessed easier to drill down the trauma data. E.Little reported the DPH would support this bill. K.Schuster asked if there will be a determination if this is HIPPA compliant as trauma data may be easily identifiable in certain parts of the state. E.Little reported that the DPH works with IRB committee to suppress small numbers, and does not see this being an issue with the overall EMS data, but may be an issue with specific trauma cases/data. Discussed possibly having someone from IRB on the on the data task force, and was stated this would be assessed. B. Cournoyer not present for legislative update	
Old Business	Pre-Hospital Protocol	from the CHA. No new update. Will be discussed in New Business.	
Gray Book – 2022 Standards discussion	Updates Statewide Radiology sharing	New 2022 Standard CD 3.6 – Remote Access to Rad Imaging – need for radiographic sharing requirement. No new update, but will remain on the agenda.	
Injury Prevention Update	Stop the Bleed	L&M: J. Marcarella reported started STB courses in October with the Mohegan Sun tribe. UConn: holding group sessions to train more STB instructors and obtain funds for training kits. St. Francis: reported weekly program with High School students. R.Gross also reported	

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	Not One More –	working with CAGV to provide testimony, written or verbal, on March 9 th against gun violence. R.Gross forwarded email and it was sent out to the committee during meeting for everyone to receive and see the information discussed. A.Croteau recognized J.Gildea, J.Tabak, and M.Nelson for being involved with STB courses in schools and Scouts, especially for young people within our communities. D.Shapiro asked that all that hold and complete STB course to please do so by formally documenting them on the STB website in the instructor portal. Also reported that a new STB update is coming out this Fall 2023 and that it will include more visual education. J. Doddington also reinforced need for testimonies on March 9 th . Also reported that there was good CT trauma representation at the Northwell Health Conference. J.Gates provided update as the grant is in it's	
	Healthcare Heroes Campaign	3 rd year. Looking at different innovative ways this year as well as videography options. Also looking at wrong-way driving issue as these drivers are often impacted by drinking. Data from past years reported as in 2022 there were about 900 calls to the police reporting wrong-way driving, and 23 fatalities from wrong-way driving. Which was an increase from prior years.	
	Fall Prevention	No new update.	
	Hospital Violence Intervention Program (HVIP)	No new update other than above.	
New Business	STB equipment/ education bills	S.Gregg reported on 4 new bills that deal with hemorrhage control, that can be divided into two categories: 1. Bill supporting hemorrhage control equipment to be required at business/new buildings. 2. Bill supporting required hemorrhage control education for all those in grades 9-12 in schools. Discussion where the biggest opportunity would be for this committee – which bill to support. Should we go after equipment needs or education needs? A.Croteau reported education should be the priority as we teach that you do not need lots of fancy tools to do these skills, and that the foundation of hemorrhage control is educating the public.	

	TXA protocols	R.Gross reported that we should support both as we already do education and should continue it, but we need the equipment to be accessible as well for this program to be successful. D.Shapiro reported that we are the educators and the time commitment to educate or trainthe-trainer is ours to own, with the plan to maintain the course as free of charge. Stated we should wholeheartedly support both of these bills, and reiterated again that the new STB course will be more visual and include more inclusivity. It was also stated that we do not want businesses opposed to this as it may have a financial demand/burden with the requirement to have kits available at buildings/businesses. S.Gregg will draft a letter to the Public Health Committee chairs regarding these 2 bills – one for education and one for equipment, and everyone will have an opportunity to sign this in support. TXA protocols from other states were presented in regards to CT stance on pre-	S.Gregg to draft a letter to the Public Health Committee chairs regarding support for both equipment and education of hemorrhage control.
Open Forum		hospital use of TXA. Question was raised by S.Gregg if this committee should re-look at TXA protocols in the field. R.Gross reported that yes, it deserves a relook as the down-side effects of TXA are minimal and that this is a medication that should be given within the first hour of injury. S.Gregg asked if there is any opposition to reviewing this and put a TXA protocol in front of the committee again – no voiced opposition. D.Bailey was tasked with bringing a TXA protocol forward for the committee to review. D. Bailey and S.Caffney provided an overview to the committee on this and TXA, with support of civilian data. It was reported that one hospital in the state is already implementing this process, which they have a right to do, but that it would be beneficial to standardize this across the state. None.	D.Bailey to bring pre-hospital TXA protocol to committee for review.

Meeting adjourned at 15:04.

Respectfully submitted, Shea C. Gregg, M.D.