

**Base Station Physicians' Committee (BSPC) - 2009 Meeting Minutes**

BSPC Minutes - January 20, 2009

BSPC Minutes - February 17, 2009

BSPC Minutes - March 17, 2009

BSPC Minutes - April 21, 2009

BSPC Minutes - May 19, 2009

BSPC Minutes - June 16, 2009

BSPC Minutes - July 21, 2009

BSPC Minutes - August – no meeting

BSPC Minutes - September 15, 2009

BSPC Minutes - October 20, 2009

BSPC Minutes - November 17, 2009

BSPC Minutes - December – no meeting



NICK MACCHIONE, FACHE  
DIRECTOR

WILMA J. WOOTEN, M.D., M.P.H.  
PUBLIC HEALTH OFFICER

# County of San Diego

HEALTH AND HUMAN SERVICES AGENCY

PUBLIC HEALTH SERVICES

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Base Station Physicians' Committee  
Judd Glasser, M.D., Chairperson  
c/o Emergency Medical Services  
6255 Mission Gorge Road  
San Diego, CA 92120  
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## BASE STATION PHYSICIANS' COMMITTEE MEETING

### Minutes

Tuesday, January 20, 2009

#### Members Present

Davis, M.D., Dan – UCSD/Mercy Air  
Glasser, M.D., Judd – Tri-City  
Grad, M.D., Michele – Palomar/Pomerado  
Graydon, R.N., Cheryl – Palomar  
Kramer, M.D., Mark – Sharp Memorial  
Linnik, M.D., Bill – Sharp Grossmont  
MacPherson, Gary – Co. Paramedics Agencies Comm.  
Reilly, M.D., Ian – Scripps La Jolla  
Schwartz, M.D., Brad – American Medical Response  
Workman, R.N., Debi – Palomar College  
Zahller, M.D., Steve – Scripps Mercy

#### County Staff Present

Haynes, M.D., Bruce  
Royer, R.N., Diane  
Smith, R.N., Susan  
Stepanski, Barbara

#### Recorder

Rupp, Merle

#### Guests Present

Aker, R.N., Donna Kelly – UCSD ROC  
Anderson, R.N., Marilyn – Vista Fire  
Barnes, R.N., Melanie – S.D. Med. Serv. Enterp.  
Bourdon, R.N., Darlene – Scripps Mercy  
Broyles, R.N., Linda – AMR/RCCP  
Buono, M.D., Colleen – UCSD/Palomar College  
Cerrone, R.N., Sharon – Mercy Air  
Collins, R.N., Marissa – Tri-City  
Conover, Bill – Camp Pendleton Fire  
Dotson, R.N., Melody – UCSD  
Eldridge, R.N., Leslie – Sharp Memorial  
Foehr, Rick – EMSTA College  
Howard, R.N., LuAnn – Scripps La Jolla  
Johnson, Wayne – S.D. Med. Serv. Enterprise  
Majerczak, R.N., Karen – Tri-City  
Maxwell, Paul – AMR/NCTI  
McNabb, Stephen – Mercy Air  
Meadows-Pitt, R.N., Mary – Sharp Grossmont  
Mottet, R.N., Mary – S.D. Med. Serv. Enterprise  
Murphy, R.N., Mary – CSA-17  
Quinn, R.N., Michele – Children's  
Rosenberg, R.N., Linda – Sharp Memorial  
Ross, Alyssa – City of San Diego  
Scott, Chris – North County Fire  
Seabloom, R.N., Lynne – Oceanside Fire  
Steen, R.N., Pam – Mercy Air  
Voigt, Michelle – UCSD  
Vogt, Rick – San Marcos Fire

## **I. INTRODUCTIONS/ANNOUNCEMENTS**

Judd Glasser, M.D., Chair, brought the meeting to order at 11:00 a.m. Attendees introduced themselves.

## **II. APPROVAL OF MINUTES**

**MOTION made by Michele Grad, M.D., Seconded by Steve Zahller, M.D., to approve the Minutes of November 18, 2008 as submitted. MOTION carried.**

## **III. MEDICAL DIRECTOR'S REPORT (Bruce Haynes, M.D.)**

New County EMS Staff: Susan Smith, R.N., and LeAnne Lovett-Floom, R.N., recently joined County EMS staff as Quality Assurance Specialists. Ms. Smith will be working on the prehospital side and Ms. Lovett-Floom on the disaster side.

Sharp Memorial: Congratulations to Sharp Memorial for their new emergency room and hospital.

Flu Season: An upward increase in emergency department visits occurred about two weeks ago, accompanied by an uptick in influenza isolates. Both have returned to lower levels now but walk-in patients appear to be keeping emergency rooms busy with respiratory and respiratory with fever issues. The Center for Disease Control (CDC) has stated that it's too early in the flu season to know whether or not the vaccine this year matches the isolates.

Hospital Capacity Plan: The Hospital Capacity Plan has been distributed throughout the County. Dr. Haynes encouraged hospital personnel to review the Plan. County EMS hopes that each hospital will involve their entire hospital to find solutions to crowding and implement the American College of Emergency Physicians (ACEP) overcrowding guidelines, moving admitted patients out of the emergency department quickly, moving elective procedures later in the week from Monday, and facilitating earlier in-patient discharges before noon. The important point is to try to avoid off-load delays this year. County EMS has been reviewing how many patients are being held in emergency departments in the mornings. This information should be passed along to satellite hospitals.

STEMI System Update: Door-to-balloon times remain superb for activated cases from the field and outcome measures are within the range expected for excellent performance.

Bypass Statistics: The number of ALS (Advanced Life Support) transports has been very stable recently and the number of patients bypassed from their hospital of choice is very low as well as the total number of hours hospitals have been on bypass.

Good Samaritan Ruling: About a month ago the Supreme Court of California issued a four to three decision, that an individual assisting people at the scene of an accident is only protected for medical or first aid care, not rescue activities. The Supreme Court ruled that Section 1799.102 applies only to emergency care and that pulling someone out of a car is not medical care.

**IV. BASE HOSPITAL NURSE COORDINATOR'S REPORT (Cheryl Graydon, R.N.)**

Results from a Prehospital Patient Care Records Focus Audit will be presented at the PAC meeting this date. The Base Hospital Nurse Coordinators are working with Barbara Stepanski, County EMS, in getting the audit completed.

**V. POLST (Physician Order for Life Sustaining Treatment) (Bruce Haynes, M.D.)**

The POLST law took affect January 1, 2009. Section A at the top of the POLST form is where the patient fills out whether or not they want to be resuscitated or not. Section B lists medical interventions choices; Comfort Measures Only, Limited Additional Interventions and Full Treatment. Section C is for Antibiotics, Section D for Artificially Administered Nutrition and Section E, Summary of Medical Condition and Signatures. The POLST form is also used in nursing homes and hospitals.

**VI. ROC (Resuscitation Outcomes Consortium) UPDATE (Dan Davis, M.D.)**

The Hypertonic Saline Study underwent a voluntary suspension based on concerns from the Institutional Review Board (IRB) but has since been given the go ahead for the traumatic brain injury side; however, no new information has been received regarding the shock side of ROC. ROC is beginning to work with agencies to make sure their paramedics go on line and do their re-training. The re-training goes over the revised criteria focused on the head injury side and anybody with hypotension. The program is only for stable patients with blunt head trauma for now.

The City of San Diego is in the middle of training for the Cardiac Arrest Study and hopefully the program will be up and running by the end of January or the middle of February, 2009. There will be a site visit from the National Institute of Health (NIH) next week.

**VII. MERCY AIR AEROMEDICAL SAFETY ISSUES (Stephen McNabb)**

Stephen McNabb, Southern California Program Aviation Manager was introduced. Mr. McNabb has been a pilot for fifteen years. The following are highlight comments from Mr. McNabb's presentation:

- Mercy Air was acquired by Air Methods Corporation in 1997.
- Began in Littleton, Colorado in 1980 and is now the largest air ambulance provider in the U.S. and fourth largest helicopter operator in the world.
- There have been over 100,000 patients flown.
- Air Methods has bases in 42 states.
- There are 99 community bases and 155 hospital bases.

- There are 134 community-based aircraft and 180 hospital-based aircraft.
- California has 56 HEMS (Hospital Emergency Medical Services) bases with 82 helicopters.
- Nationally HEMS has 699 bases, 840 helicopters, and 400,000 patients flown.
- HEMS safety is largely regulated at a federal level.
- Aircraft accidents and incidents are jurisdiction of the NTSB (National Transportation Safety Board).
- From 2002-2004, 55 HEMS accidents occurred, killing 54 and seriously injuring 19.
- In 2006, there were two HEMS accidents with just four fatalities.
- In 2007, there were two HEMS accidents with just seven fatalities.
- In 2008, through October, there have been seven accidents with 28 fatalities.
- From 1991-2008, pilot error (CAT) was responsible for 27% of accidents, pilot error of 18% of accidents where the unit struck an object and 27% pilot error on procedures. Mechanical failure accounted for 22%.
- The NTSB requires all HEMS flights be conducted under Part 135, requires a flight risk evaluation for all HEMS missions, requires HEMS companies to use full-time flight dispatch, and requires the use of TAWS (Terrain Awareness and Warning System).
- Approximately 50% of accidents occur at night.

**VIII. OPTIONS FOR INTRANASAL DRUG DELIVERY (Judd Glasser, M.D.)**

**ACTION: Deferred to a later BSPC meeting.**

**IX. REVIEW OF PROTOCOLS FOR 2009-2010**

The following protocols were revised and some revision suggestions were made:

S-120, S-121, S-122, S-123, S-124, S-126, S-127, S-129, S-130, S-131, S-132, S-136, S-137, S-138, S-139, S-140, S-141 and S-142.

P-104a (ALS Skills List) was also reviewed.

**X. HEALTH ADVISORY COMMITTEE ON THREATS (HACOT)  
(Linda Rosenberg, R.N.)**

Dr. Haynes reported that HACOT has decided that the committee is too big and has been trying to do too much so recent discussion has been on changing HACOT's focus and meeting less often. They also want to rely on the Disaster Council to discuss to address those type of issues.

**XI. SAN DIEGO HEALTHCARE DISASTER COUNCIL  
(Linda Rosenberg, R.N.)**

HPP (Hospital Preparedness Program) Year Seven is starting. Most of the contracts with hospitals have been signed and returned to County EMS so hospitals are beginning to spend their allocated funds.

The State-wide Golden Guardian drill in November, 2008 was a success with the County opening the Medical Operations Center (MOC). The Medical Reserve Corps helped set up for surge capacity and an alternate care site was set up in San Marcos for patients to be brought to. The State also opened a 200-bed hospital in Riverside. Participants in the drill were forced to abandon their cell phones, land-line phones and Web EOC but amateur radio staff helped out a great deal. The nursing homes have developed regional coordinators with 20-30 nursing homes under the jurisdiction of one regional coordinator and their participation is a first.

Ms. Rosenberg volunteered to bring a list of drill dates to the next BSPC meeting.

**XII. ITEMS FOR FUTURE DISCUSSION**

Dr. Haynes will present a STEMI summary some time in the future.

An Autopulse presentation by John Davidson, Chula Vista Fire for March, 2009.

Pediatric protocols should be presented in February, 2009.

UCSD has a Journal Club and Dan Davis, M.D. is hosting it on January 27, 2009 with an EMS focus beginning at 6:00 p.m. Will be held at McGregor's Grill near San Diego Qualcomm Stadium.

**XIII. SET NEXT MEETING/ADJOURNMENT**

The next meeting was scheduled for Tuesday, February 17, 2009, 11:00 a.m. at the Sharp Spectrum Auditorium, 8695 Spectrum Center Court, Kearny Mesa, San Diego.

The meeting adjourned at 1:35 p.m.

Respectfully submitted,

Merle Rupp, Board Secretary  
County EMS



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### Minutes

Tuesday, February 17, 2009

#### Members Present

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Grad, M.D., Michele – Palomar/Pomeroado  
Graydon, R.N., Cheryl – Palomar  
Kramer, M.D., Mark – Sharp Memorial  
Linnik, M.D., Bill – Sharp Grossmont  
MacPherson, Gary – Co. Paramedics' Agcs.  
Madati, M.D., Jamil – Children's  
Marugg, Jim – S.D. Co. Paramedics' Assoc.  
Reilly, M.D., Ian – Scripps La Jolla  
Workman, R.N., Debi – Palomar College  
Zahller, M.D., Steve – Scripps Mercy

#### County Staff Present

Haynes, M.D., Bruce  
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Smith, R.N., Susan  
Stepanski, Barbara

#### Recorder

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#### Guests Present

Barnes, R.N., Melanie – S.D. Med. Serv. Enterprise  
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Broyles, R.N., Linda – RCCP/ AMR  
Collins, R.N., Marissa – Tri-City  
Dotson, R.N., Melody – UCSD  
Howard, R.N., LuAnn – Scripps La Jolla  
Idman-Gervais, Dianne – Sharp Grossmont  
Joshua, Alfred – UCSD  
Kelly, R.N., Donna – UCSD ROC  
Kiefer, Karen – Julian/Cuyamaca Fire Protection Dist.  
Kusman, Travis – American Medical Response  
Lemire, Harold – San Diego Fire Rescue  
Meadows-Pitt, R.N., Mary – Sharp Grossmont  
Murphy, R.N., Mary – CSA-17  
Ochs, R.N., Ginger – San Diego Fire Rescue  
Price, Devin – Southwestern College  
Quinn, R.N., Michele – Children's  
Reade, Frank – San Marcos Fire  
Rosenberg, R.N., Linda – Sharp Memorial  
Sallee, M.D., Don – Naval Medical Center San Diego  
Scott, Chris – North County Fire  
Seabloom, R.N., Lynne – Oceanside Fire  
Smith, Mitch – San Marcos Fire  
Steen, R.N., Pam – Mercy Air  
Vivieros, R.N., Dinarte – Children's  
Vogt, Rick – San Marcos Fire

**I. CALL TO ORDER/INTRODUCTIONS/ANNOUNCEMENTS**

Judd Glasser, M.D., Chairperson, brought the meeting to order at 11:10 a.m. Attendees introduced themselves.

**II. APPROVAL OF MINUTES**

**MOTION made by Michele Grad, M.D., Seconded by Steve Zahller, M.D., to approve the Minutes of January 20, 2009 as submitted. MOTION carried.**

**III. MEDICAL DIRECTOR'S REPORT (Bruce Haynes, M.D.)**

Data Update: Transports increased slightly during the month of January, 2009. The number of patients who bypassed their hospital of choice and the total hours hospitals were on bypass in January both increased also. There haven't been many offload delays reported recently. The Emergency Medical Oversight Committee (EMOC) recently discussed the "no diversion" concept and possibly trying it in April, 2009. Hospital Administrators will be discussing it next week.

Influenza Update: The number of isolates has increased recently. A lot of work was done on the Hospital Capacity Plan last autumn so that work will pay off.

Hospital Stroke Centers: Some hospitals continue to become certified as stroke centers by the Joint Commission. Two more are scheduled to have site visits and two others have applications pending.

CARES (Cardiac Arrest Registry to Enhance Survival): Jim Dunford, M.D., has been working on this and County EMS will work with him so every hospital can enter the cardiac arrest data.

Discipline Changes for Paramedics: A change is expected in 2010 in the State regulations regarding the process for discipline of EMT's and paramedics.

**IV. BASE HOSPITAL NURSE COORDINATOR'S REPORT (Cheryl Graydon, R.N.)**

The BHNC's are working on the addition to the Recertification policy and an audit for this year. Suggestions for audits are welcomed.

**V. 5150 PRESENTATION (Marshall Lewis, M.D.)**

Marshall Lewis, M.D., County Behavioral Health Services, distributed a 5150 Training handout draft, dated September 17, 2008, to attendees. Dr. Lewis has been in the role of Clinical Director of Mental Health and Alcohol and Drug Services, under the umbrella of Behavioral Health, since January, 2008. Dr. Lewis previously worked in Stanislaus and San Francisco Counties prior to coming to San Diego where interpretations of 5150's were quite different. The contract for Patient Advocacy Services with the University of San Diego has expired and the new contract was recently awarded to Jewish Family Services. The following subjects are covered in the handout:

- 5150 Definition and Scope
- Obtaining 5150 Designation
- The Elements of a Valid 5150
- Presentation to a Designated Facility
- Duties and Options Available to the Designated Facility
- Health and Safety Code 1799.111 – Detention for up to 24 Hours
- 5150 Immunity
- Rights of Detained Individuals
- 5150 Seclusion and Restraint
- Firearms and Other Weapons
- Minors

Also listed on the draft were the following attachments but were not part of the handout:

Attachment A: Application for 72-Hour Detention for Evaluation and Treatment

Attachment B: San Diego County Board of Supervisors Resolution

Attachment C: Involuntary Patient Advisement

Attachment D: List of LPS-Designated Facilities

- Dr. Lewis encouraged hospitals to have their lists up to date as far as personnel authorized to write 5150's.
- Designations are for a specific facility.
- A certification would be considered good if written at one facility in a large organization such as Scripps.
- If a person stops en route to an LPS designated 5150 facility to be seen in an emergency room, then the 5150 holds, but if admitted overnight to a medical facility, the 5150 expires.
- Sworn police officers can write 5150's.
- Physicians cannot authorize a 5150 over the phone.

## VI. **ROC (Resuscitation Outcomes Consortium) UPDATE** (Dan Davis, M.D.)

In the past month ROC had a site visit. The over-riding theme was that the site visitors were impressed with the potential of the site and also in the level of enthusiasm that everyone displayed. The site visit was divided between the City of San Diego and the non-City/County agencies. The site visitors brought along individuals to try and lend advice to our system, recognizing that the San Diego site has a number of unique challenges that other sites have faced, particularly in regard to the number of small agencies that exist in San Diego County.

Most of the agencies are back up and running in the Hypertonic Saline Study; however, a few are still working to complete the 90% training mark.

No further information has been received on the Shock side of ROC.

## **VII. REVIEW OF POLICIES AND PEDIATRIC PROTOCOLS**

The following pediatric protocols were reviewed and minor revisions were suggested: S-161, S-162, S-163, S-164, S-165, S-166, S-168 and S-172.

The following policies were reviewed and minor revisions suggested: S-402 and S-414.

## **VIII. OPTIONS FOR INTRANASAL DRUG DELIVERY (Judd Glasser, M.D.)**

Intranasal medication administration offers a truly needleless solution to drug delivery. Highlighted comments from Dr. Glasser's presentation include but are not limited to the following:

- Problem: The CDC estimates that there are 600,000 percutaneous injuries each year involving contaminated sharps. Technological developments can increase protection.
- HIV positive patients are high risk patients.
- High risk environments include altered patients (combative), scene control issues, and moving ambulances.
- Advantages include the nose is a very easy access point for medication delivery, no special training is required, no shots are needed, is painless and eliminates any risk of needle stick to the medical provider.
- Compared to oral medications, intranasal medication delivery results in faster delivery to the blood stream, higher blood levels, no destruction by stomach acid and intestinal enzymes, and no destruction by hepatic first pass metabolism.
- The Mucosal Atomization Device (MAD) is a broad 30-micron spray that ensures excellent mucosal coverage.
- Conclusions include that IN naloxone effective route had an 83% response in the field, is an inexpensive device and may decrease prehospital blood exposures.

## **IX. ADVANCED EMT SCOPE OF PRACTICE, POLICY B-451**

Dr. Haynes addressed policy B-451 which is currently being reviewed at the State level. The position will be utilized primarily in rural areas of San Diego County.

## **X. SAN DIEGO HEALTHCARE DISASTER COUNCIL (Linda Rosenberg, R.N.)**

A functional pandemic drill is scheduled for June 18, 2009 in which most hospitals are playing in some type of communication role at least.

All the contracts have been signed for HPP (Hospital Preparedness Program) and hospitals have been spending their allotments from the State. The State is pushing for hospitals to have Memorandum of Understandings or an agreement with other hospitals to loan each other equipment in times of need.

**XI. ITEMS FOR FUTURE DISCUSSION**

A presentation will be given on Auto Pulse at the March 17, 2009 meeting.

Dr. Haynes and Dr. Glasser will collaborate on a summary of the STEMI program some time in the near future.

Dr. Dunford recommended the concept of a “resuscitative center” and interest in developing “cooling centers.”

Dr. Dunford also recommended reviewing Amiodarone again.

**XII. SET NEXT MEETING/ADJOURNMENT**

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Barnes, R.N., Melanie – S.D. Med. Serv. Ent.  
Batil, Patrick – Palomar College  
Bourdon, R.N., Darlene – Scripps Mercy  
Boyce, Marjorie – Palomar College  
Broyles, R.N., Linda – AMR/RCCP  
Buono, M.D., Colleen – UCSD/Palomar College  
DiBernardo, Tory – Palomar College  
Dotson, R.N., Melody – UCSD  
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Hinton, William – Mercy Air  
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Idman-Gervais, Dianne – Sharp Grossmont  
Johnson, Wayne – S.D. Med. Service Enterprise  
Judd, Justin – Palomar College  
Klingensmith, Todd – S.D. Co. Paramedics' As.  
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Smith, Mitch – San Marcos Fire  
Steen, R.N., Pam – Mercy Air  
Strelkaskas, Danielle – Nav. Med. Ctr. S.D.  
Vogt, Rick – San Marcos Fire

**I. CALL TO ORDER/INTRODUCTIONS/ANNOUNCEMENTS**

Judd Glasser, M.D., Chairperson, brought the meeting to order at 11:10 a.m. Attendees introduced themselves.

**II. APPROVAL OF MINUTES**

**MOTION made by Jamil Madati, M.D., Seconded by Steve Zahller, M.D., to approve the Minutes of February 17, 2009 as submitted. MOTION carried.**

**III. MEDICAL DIRECTOR'S REPORT (Bruce Haynes, M.D.)**

New County EMS Employee: Janet Wicjorek, R.N., was introduced as new to County EMS. Ms. Wicjorek transferred from Public Health Administration where she worked on a number of high profile projects. She has had hospital experience, and was an operating room nurse. She will be working with trauma and the CIREN (Crash Injury Research and Engineering Network) program, the grant program with UCSD for automotive injury prevention.

Other Employee Updates: Due to budget limitations and administrative restructuring within Public Health, EMS recently lost four student workers and three other part-time employees. The student workers processed the bubble forms submitted by agencies/hospitals for prehospital data collection. Current clerical staff in the front office reception area are now being cross-trained to work on the bubble forms which has led to reduced hours open to the public.

Change in EMS Reception Hours for Processing Certifications and Re-Certifications: The front office area for processing certifications and re-certifications will now operate on limited hours. Open hours will be Monday through Thursday, 8:00 a.m. – 4:00 p.m. but closed on Fridays. These new hours will begin on Monday, March 30, 2009. Please notify your employees or students.

Influenza Update: The flu season has been mild so far this year with the number of isolates reported in the community being low.

Bypass Trial: EMOC (Emergency Medical Oversight Committee) has been discussing a no-bypass trial; however, hospital administrators have expressed reluctance to proceed with a trial at this time. In the Hospital Capacity Report, the hospitals enter the data for patients waiting for ICU, telemetry and hospital beds twice a day. The data entry has improved and is helpful but 8:00 p.m. data entry could improve. Emergency department holds tend to consistently include high numbers of telemetry patients.

Sexual Assault Concerns: Sexual assault examiners have concerns that evidence is being lost when patients go to emergency departments, now that forensic exams are no longer performed by the emergency department. County EMS staff will be meeting with them.

**IV. BASE HOSPITAL NURSE COORDINATOR'S REPORT (Cheryl Graydon, R.N.)**

The BHNC's will be working with County EMS staff on the hospital designation report.

**V. ROC (Resuscitation Outcomes Consortium) UPDATE (Dan Davis, M.D.)**

Have been working on renewal applications with ten different sites so no sites will get dropped. The application will be submitted in a month or so and the renewal will be in another year and one-half.

Enrollment is very important in bringing up both the City and County on the Hypertonic Saline trials; enrollment continues at about the same rate for the head-injured patients. The criteria is head-injury without any documented hypotension to the point of enrollment.

The Shock Side of the study was halted in autumn, 2008.

The Cardiac Arrest Study has now brought the City of San Diego up and they have been enrolling 15-20 cases a week. The other seven agencies in the County have continued to enroll patients. In a recent National Institute of Health (NIH) visit, it was recommended strengthening the feedback for the different agencies participating in ROC, specifically in regard to the CPR process and ROC is working on ways to do that.

**VI. AUTOPULSE AND LUCAS PRESENTATIONS (Colleen Buono, M.D., UCSD, Chief John Davidson, Chula Vista Fire/Mary Murphy, R.N., CSA-17)**

Colleen Buono, M.D., UCSD/Palomar College, stated that AutoPulse and LUCAS are two new devices that are being studied and tried for mechanical CPR.

Chief John Davidson, Chula Vista Fire, explained that AutoPulse has a band that wraps around the chest, runs on a battery and costs between \$11,000 and \$15,000, plus \$125 per band, per patient. At the present time, a study of 1,000 patients nation-wide is going to be reviewed.

Chula Vista Fire started using AutoPulse on August 21, 2008 and for six months there were 53 patients that met the criteria. The ROSC (Return of Spontaneous Circulation) rate went from 8% to 41.5%. There has been noted a significant reduction in pauses during cardiac compressions. With the use of AutoPulse, pauses such as down stairways, through narrow hallways, etc. are eliminated. It is also a benefit to crew and patient safety. The AutoPulse automatically does the sizing and circumference configurations.

Mary Murphy, R.N., CSA-17, stated that the LUCAS device has a piston with a plug and runs on compressed air or oxygen. Cost is around \$12,000 to \$14,000 inclusively. The LUCAS studies that have been done show positive results and can improve ROSC results. The LUCAS machine is easy to get on the patient within 10-15 seconds and practical for the field and has three switches. Statistics show that 25% of all back injuries occur directly related to CPR so there is a big benefit for the patient being belted in.

**VII. COUNTY EMS PDA/PRINTER COMMITTEE (Rick Vogt, San Marcos Fire)**

This committee has been tasked with looking for a solution for prehospital documentation being left at the hospital by transporting agencies. The committee has been staffed with hospital and County EMS staff and transporting providers with varied technology. The group has met twice with very good dialog both times. The goal is to provide a County-wide standard for medics to provide documentation with a web-based repository for documentation to access the patient's record at any time.

The Committee has both short and long term goals. A short-term goal is looking at July 1, 2009 when infra-red based printers go away at the hospitals. Long-term goals include reviewing the viability of what San Diego Fire and Rescue is doing with UCSD.

**VIII. SNAKE BITE ANTIVENIN STUDY (Colleen Buono, M.D.)**

A flyer was distributed titled "Rattlesnake Antivenom Research Study" which included a letter to emergency department medical directors stating that the Division of Medical Toxicology at UCSD Medical Center and Rady Children's Hospital are the local participants in a multi-center, phase III study of an experimental rattlesnake antivenom. The study is looking for subjects who have been bitten by a rattlesnake. The patient may be referred if deemed to be medically stable for transport up to two hours to an outside facility and if private vehicle transport by a friend or family member is available. The subject will be interviewed and consented for the study. Study-related drugs and procedures will be provided at no cost and the subject is eligible for up to \$200 for participation. Patients can be anywhere from 2 to 80 years of age. Contact Alexander Miller, M.D. at (619) 290-1163, Jean Marshall, R.N., at (619) 290-2960 or Richard Clark, M.D. at (800) 596-5023.

**IX. POLICY B-451 (Bruce Haynes, M.D.)**

Dr. Haynes distributed a draft of this policy for the Advanced EMT, a position that will primarily be utilized in rural areas. This will allow EMT's with some additional training, to perform selected ALS interventions. **ACTION: Unanimous approval was given on this policy.**

**X. SAN DIEGO HEALTHCARE DISASTER COUNCIL (Linda Rosenberg, R.N.)**

Hospitals continue to spend grant monies by August, 2009.

A table-top pandemic drill is planned for March 23, 2009, a precursor to the June 18, 2009 State-wide drill.

**XI. ITEMS FOR FUTURE DISCUSSION (Judd Glasser, M.D.)**

A review of STEMI Receiving Centers data some time in the future.

Address the issue of amiodarone in the prehospital arena.

Resuscitation Receiving Centers to be reviewed.

Marcy Metz, R.N., Chief, County EMS, announced that negotiations are continuing for a Memorandum of Agreement with First Watch. Meetings are held every two weeks.

Jim Dunford, M.D., City of San Diego, stated that the CARES Initiative appears to have approval from hospital chief executive officers. The next step will be identification of the contact staff at each hospital, then the CARES staff will begin initially with the City of San Diego, then the County.

**XII. SET NEXT MEETING/ADJOURNMENT**

The next meeting was scheduled for Tuesday, April 21, 2009, 11:00 a.m. at the Sharp Spectrum Auditorium, 8695 Spectrum Center Court, Kearny Mesa, San Diego.

The meeting adjourned at 1:35 p.m.

Respectfully submitted,

Merle Rupp, Board Secretary,  
County EMS



# County of San Diego

## HEALTH AND HUMAN SERVICES AGENCY PUBLIC HEALTH SERVICES

1700 PACIFIC HIGHWAY, SAN DIEGO, CALIFORNIA 92101-2417  
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NICK MACCHIONE, FACHE  
DIRECTOR

WILMA J. WOOTEN, M.D., M.P.H.  
PUBLIC HEALTH OFFICER

Base Station Physicians' Committee (BSPC)  
Judd Glasser, M.D., Chairperson  
c/o Emergency Medical Services  
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San Diego, CA 92120  
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Emergency & Disaster Medical Services  
HIV, STD and Hepatitis  
Immunization  
Maternal, Child and Family Health Services  
Public Health Laboratory  
PH Nursing/Border Health  
TB Control & Refugee Health  
Vital Records

## BASE STATION PHYSICIANS' COMMITTEE MEETING

### Minutes

Tuesday, April 21, 2009

#### Members Present

Dunford, M.D., Jim – City of San Diego  
Glasser, M.D., Judd – Tri-City  
Grad, M.D., Michele – Palomar/Pomeroado  
Graydon, R.N., Cheryl – Palomar  
Linnik, M.D., Bill – Sharp Grossmont  
MacPherson, Gary – Co. Paramedics Agencies Comm.  
Madati, M.D., Jamil – Children's  
Marugg, Jim – S.D. Co. Paramedics' Association  
Reilly, M.D., Ian – Scripps La Jolla  
Zahller, M.D., Steve – Scripps Mercy

#### County Staff Present

Haynes, M.D., Bruce  
Pate, R.N., Rebecca  
Smith, R.N., Susan  
Stepanski, Barbara

#### Recorder

Rupp, Merle

#### Guests Present

Allington, R.N., Linda – Carlsbad Fire  
Anderson, R.N., Marilyn – Vista Fire  
Barnes, R.N., Melanie – S.D. Med. Serv. Enter.  
Bei, Robert – Alvarado  
Bourdon, R.N., Darlene – Scripps Mercy  
Broyles, R.N., Linda – RCCP/AMR  
Bryant, Tim – Palomar College  
Buono, M.D., Colleen – UCSD  
Conover, Bill – Camp Pendleton Fire  
Dotson, R.N., Melody – UCSD  
Foehr, Rick – EMSTA College  
Harmon, Joe – Palomar College  
Hinton, William – Mercy Air  
Howard, R.N., LuAnn – Scripps La Jolla  
Hudnet, Carlen – S.D. Med. Services Enterprise  
Hunt, Bryan – Palomar College  
Kelly, Kevin – Alvarado  
Love, Julie – Palomar College  
Majerczak, R.N., Karen – Tri-City  
Meadows-Pitt, R.N., Mary – Sharp Grossmont  
Mottet, R.N., Mary – S.D. Med. Serv. Enterprise  
Murphy, R.N., Mary – CSA-17  
Ochs, R.N., Ginger – San Diego Fire Rescue  
Ordman, David – Palomar College  
Osterberg, Ian – Palomar College  
Pham, M.D., Angela – UCSD  
Rosenberg, R.N., Linda – Sharp Memorial  
Roy, Michael – Palomar College  
Sallee, M.D., Don – Naval Med. Ctr. San Diego  
Scott, R.N., Chris – San Diego Fire Rescue  
Seabloom, R.N., Lynne – Oceanside Fire  
Valenta, Andy – Palomar College  
Vivieros, R.N., Dinarte – Children's  
Vogt, Rick – San Marcos Fire

**I. CALL TO ORDER/INTRODUCTIONS/ANNOUNCEMENTS**

Judd Glasser, M.D., Chairperson, brought the meeting to order at 11:10 a.m. Attendees introduced themselves.

**II. APPROVAL OF MINUTES**

**MOTION made by Jamil Madati, M.D., Seconded by Steve Zahller, M.D., to approve the Minutes of March 17, 2009 as submitted. MOTION carried.**

**III. MEDICAL DIRECTOR'S REPORT (Bruce Haynes, M.D.)**

Privacy Laws Impacting Patient Follow-up: Two new California laws, AB 211 and SB 541 that took effect January 1, 2009, strictly limit what information about a patient can be released. Penalties for violating the provisions of these laws are severe with potentially substantial monetary fines up to \$250,000 and referral to a licensing agency for action against one's health provider license. Fire EMS and CPAC Committees have reviewed this issue and are formulating plans to respond. EMS is working with the Hospital Association on this.

Sexual Assault Evidence: The County's Sexual Assault Response Team wants to improve the preservation of evidence in sexual assault victims before they arrive for the forensic examination. Sexual assault should be reported as soon as possible to the police agency where the crime is alleged to have occurred. HIPAA concerns are not an issue when a crime is being reported. Please call Ruth Duke, R.N., EMS, for questions or information at (619) 285-6410.

Flu Season: The flu season continues to be very mild this year, and isolates of true influenza have dropped dramatically. The amount of influenza-like illness reported from emergency departments is the lowest in several years. Despite this, the system reports being quite busy the last few weeks. Hospitals are encouraged to continue to enter their admission hold report data twice a day.

**IV. BASE HOSPITAL NURSE COORDINATOR'S REPORT (Cheryl Graydon, R.N.)**

The results of two audits will be presented at PAC this date.

**V. ROC (Resuscitation Outcomes Consortium) UPDATE (Dan Davis, M.D.)**

(Jim Dunford, M.D.): The City of San Diego has been enrolling patients aggressively. Gary Vilke, M.D., is in charge of working with the outlying agencies and working with those who are not yet enrolled.

**VI. COUNTY EMS/PDA PRINTER COMMITTEE (Rick Vogt, San Marcos Fire)**

The Committee has developed a potential solution to the prehospital provider's ability to provide documentation to the hospital. Recommendations will be presented at next month's BSPC meeting of May 19, 2009. The recommendations will involve a small investment on the part of the providers which should benefit all.

**VII. AMIODARONE IN THE PREHOSPITAL ARENA (Judd Glasser, M.D.)**

Discussion ensued on the use of Amiodarone and Lidocaine. New preparations have come out recently that may have increased the cost. It was suggested to wait and see how ROC reviews it. Amiodarone is rarely given to pediatric patients and would only be given in consultation with cardiologists. Some pharmacies that have been contacted have shown Amiodarone being considerably more expensive than Lidocaine.

**VIII. SAN DIEGO HEALTHCARE DISASTER COUNCIL (Linda Rosenberg, R.N.)**

The Disaster Council is currently in HPP Year Seven grant mode. Work invoices and deliverables can be submitted to the County in advance instead of all at once to keep the workload for the County more manageable. Ms. Rosenberg volunteered to send out a list of all County drills if anyone is interested. Sharon Carlson, R.N., is now the new Director of Disaster Services for Sharp Healthcare. She was the clinical lead nurse at Sharp Grossmont prior to that. The next drill is scheduled for June 18, 2009 and will be a pandemic influenza drill. Most of the hospitals are participating with most conducting a table top exercise.

EMAN will be switching over to the state-wide network CAHAN (California Health Alert Network) in a few months. For further information, contact Ms. Rosenberg. Web EOC is also used for communicating between hospitals during drills.

**IX. ITEMS FOR FUTURE DISCUSSION (Judd Glasser, M.D.)**

There is an interest in developing receiving centers for cardiac arrest patients.

The possibility of resurrecting the EMS Games.

A review of the results of CPAP for the first six months.

A review of STEMI data.

(Other): San Diego is one of four cities selected to participate in a site review for CPR with the new guidelines to be announced for 2010-11. Some of the criteria that will be considered is “how safe are you as a community,” “do you have public access to a defibrillator program,” “are you training children in CPR and AED’s,” etc.

**X. SET NEXT MEETING/ADJOURNMENT**

The next meeting was scheduled for Tuesday, May 19, 2009, 11:00 a.m. at Tri-City Medical Center, 4002 Vista Way, Oceanside, California.

The meeting adjourned at 1:35 p.m.

Respectfully submitted,

Merle Rupp, Board Secretary,  
County EMS



# County of San Diego

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PH Nursing/Border Health  
TB Control & Refugee Health  
Vital Records

## BASE STATION PHYSICIANS' COMMITTEE MEETING

### Minutes

Tuesday, May 19, 2009

#### Members Present

Davis, M.D., Dan – UCSD/Mercy Air  
Glasser, M.D., Judd – Tri-City  
Graydon, R.N., Cheryl – Palomar  
Kramer, M.D., Mark – Sharp Memorial  
Linnik, M.D., Bill – Sharp Grossmont  
Madati, M.D., Jamil – Children's  
Marugg, Jim – S.D. Co. Paramedics' Association  
Reilly, M.D., Ian – Scripps La Jolla  
Workman, R.N., Debi – Palomar College  
Zahller, M.D., Steve – Scripps Mercy

#### County Staff Present

Haynes, M.D., Bruce  
Smith, R.N., Susan  
Stepanski, Barbara

#### Recorder

Rupp, Merle

#### Guests Present

Aker, R.N., Donna Kelly – UCSD ROC  
Allington, R.N., Linda – Carlsbad Fire  
Anderson, R.N., Marilyn – Vista Fire  
Barnes, R.N., Melanie – S.D. Med. Serv. Enterprise  
Bourdon, R.N., Darlene – Scripps Mercy  
Brown, Mark – National Polytechnic College/Science  
Broyles, R.N., Linda – RCCP/AMR  
Buono, M.D., Colleen – UCSD  
Conover, Bill – Camp Pendleton Fire  
Curnow, Robert – Mercy Air  
Foehr, Rick – EMSTA College  
Hinton, William – Mercy Air  
Howard, R.N., LuAnn – Scripps La Jolla  
Kiefer, Karen – Julian/Cuyamaca Fire Prot. Dist.  
Majerczak, R.N., Karen – Tri-City  
Meadows-Pitt, R.N., Mary – Sharp Grossmont  
Mottet, R.N., Mary – S.D. Med. Serv. Ent./CSA-17  
Pringle, John – San Diego Fire  
Seabloom, R.N., Lynne – Oceanside Fire  
Simmons, Todd – UCSD  
Vogt, Rick – San Marcos Fire

### **I. CALL TO ORDER/INTRODUCTIONS/ANNOUNCEMENTS**

Judd Glasser, M.D., Chairperson, brought the meeting to order at 11:10 a.m. Attendees introduced themselves.

### **II. APPROVAL OF MINUTES**

**MOTION made by Jamil Madati, M.D., Seconded by Steve Zahller, M.D., to approve the Minutes of April 21, 2009 as submitted. MOTION carried.**

### **III. MEDICAL DIRECTOR'S REPORT (Bruce Haynes, M.D.)**

Swine Flu (H1N1) Update: As of this date, there have been 116 confirmed cases in San Diego County. Six deaths have occurred in the U.S. Public Health is testing only hospitalized cases and notifying schools if there is a known case.

Protocol Updates: The protocols are finalized for 2009 and have been distributed.

EMT Optional Scope: Program policies passed the review of the Emergency Medical Care Committee (EMCC) and information on training programs will be forthcoming.

Trauma Reviews: The trauma hospital reviews, conducted every three years, have been completed and all hospitals did well.

UCSD Residents in Field: Colleen Buono, M.D., UCSD, will be placing some emergency medicine residents in the field out on emergency units for field experience.

Certifications: Channel 10 San Diego will be doing a short story on the late evening news this date regarding EMT's or paramedics that have been certified or re-certified, despite a negative episode that may have occurred many years ago in their past.

### **IV. BASE HOSPITAL NURSE COORDINATOR'S REPORT (Cheryl Graydon, R.N.)**

No report.

### **V. ROC (Resuscitation Outcomes Consortium) UPDATE (Dan Davis, M.D.)**

Both hypertonic saline trials are completed and represent the largest prehospital trauma trials ever performed. The Shock Trial was stopped in fall 2008. The monitoring board made a recommendation that the Traumatic Brain Injuries Trial also be halted. Additional data was requested on both the prehospital and inpatient settings. Their review was finished about a month or two ago but it was determined that the Shock Trial should not be re-started and was stopped for futility. There was no difference in the patients that received hypertonic saline and those that received normal saline in the 28 day reporting period.

The next Cardiac Arrest trials are at least a year off although the Data Safety Monitoring Board meets again in fall 2009 and is considering Amiodarone and Prehospital Hypothermia. Once enrolled, the question is should these patients only go to a hospital that can cool the patient. Continuous Chest Compressions is also being considered.

On the Trauma Side, giving estrogen in a high dose, pentoxifylline for traumatic shock and limited fluid resuscitation for traumatic shock are being considered as trials.

**VI. PDA PRINTER COMMITTEE REPORT (Rick Vogt, San Marcos Fire)**

In January, 2009, a committee was formed of the San Diego County Fire Chiefs EMS Section to review documentation of PPR's (prehospital patient records) and to develop a recommendation regarding the PPR's being left in emergency rooms. Committee membership was Chief Vogt, Lynne Seabloom, R.N., Oceanside Fire, John Pringle, San Diego Fire, Darlene Bourdon, R.N., Scripps Mercy, Cheryl Graydon, R.N., Palomar and Rebecca Pate, R.N. and Susan Smith, R.N., County EMS.

County EMS Policy S-407 requires that prehospital providers leave printed documentation with the hospital emergency department staff prior to departing the facility. The Committee recommended that a solution be found that met the criteria of interoperability, reliability, cost effectiveness and consistency.

Recommendation: If prehospital providers can find a way to upload at least a draft version of the PPR in the field and get it up to the server, then there's a way for the emergency department to download from that printer, and those documents could be printed at the hospital. Prehospital providers need to pay for the upgrades and software licenses to enable PPR uploading in the field; with this recommendation hospitals would need to dedicate an inexpensive computer workstation with an internet connect direct to field providers. This option could be implemented within 60 days.

**VII. COLLABORATIVE (Dan Davis, M.D.)**

Dr. Davis reported that some agencies could be brought in to provide input into training and set up a model similar to what was used in Seattle. He suggested that the Train-the-trainer model could be considered as well as consolidating educational curriculum and standardizing performance improvement efforts. A monthly meeting could be held prior to BSPC each month with a 30-minute data review and review ten different topics a year. Also, an annual continuing education conference could be held for EMS providers. If placed under the ROC umbrella, there would be no cost while working with the paramedics union and soliciting sponsorships. Dr. Davis further suggested that oversight could come from a BSPC subcommittee, linked with ROC and the UCSD Center for Resuscitation Science and work in collaboration with the County to fit into that model.

**VIII. ART/BART TRAINING (Dan Davis, M.D.)**

ART and BART Training stands for Advanced and Basic Resuscitation Training. Dr. Davis reported that some agencies currently supporting these are the Joint Commission, UCSD Medical Center, the VA Hospital, and Mercy Air. Los Angeles County, Ventura County and Santa Barbara County are considering ART/BART. Dr. Davis also reported that the National Association of Public Hospitals is on board and the Council on Accreditation of Aeromedical Services as well as the American Board of Internal Medicine and American College of Cardiologists.

**IX. STEMI PRESENTATION (Barbara Stepanski, County EMS)**

The STEMI system has now been in place for two years (2007-2008) and still operating with the original thirteen STEMI Receiving Centers (SRC's). Total number of SRC cases was 1,837; 77% arrived by 9-1-1, 18% arrival by other (walk-ins) and 5% inter-facility transfers.

Of the 9-1-1 cases, 77% were prehospital activated and 76% of those went to the cath lab and 65% of those had PCI done. Overall the number of 9-1-1 cases increased by 51 from 2007 to 2008.

Mean Door-to-Balloon (DTB) time for activated cases was 65.6 minutes in 2007 and 59.2 minutes in 2008; a decrease of 6.4 minutes. Non-activated cases, mean DTB was 95.5 in 2007 and 87.2 in 2008; a decrease of 8.3 minutes. Mean DTB for walk-in cases was 87.1 in 2008 (this data was not collected in 2007).

Of 9-1-1 activated cases about 20% were false positive.

**X. SAN DIEGO HEALTHCARE DISASTER COUNCIL (Linda Rosenberg, R.N.)**

No report.

**XI. ITEMS FOR FUTURE DISCUSSION**

A report from the County Paramedics Agencies' Committee when available regarding items discussed in the Collaborative section of these minutes.

Ian Reilly, M.D., Scripps La Jolla, will present a literature search review on Amiodarone at the next BSPC meeting of Tuesday, June 16, 2009.

**XII. SET NEXT MEETING/ADJOURNMENT**

The next meeting was scheduled for Tuesday, June 16, 2009, 11:00 a.m. at Sharp Spectrum, 8695 Spectrum Center Court, Kearny Mesa, San Diego, California.

The meeting adjourned at 1:45 p.m.

Respectfully submitted,

Merle Rupp, Board Secretary,  
County EMS



# County of San Diego

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Vital Records

## BASE STATION PHYSICIANS' COMMITTEE MEETING

Minutes

Tuesday, June 16, 2009

### Members Present

Davis, M.D., Dan – UCSD/Mercy Air  
Dunford, M.D., Jim – City of San Diego  
Glasser, M.D., Judd – Tri-City  
Grad, M.D., Michele – Palomar/Pomerado  
Graydon, R.N., Cheryl – Palomar  
Kramer, M.D., Mark – Sharp Memorial  
MacPherson, Gary – Co. Paramedic Agencies' Comm.  
Madati, M.D., Jamil – Children's  
Reilly, M.D., Ian – Scripps La Jolla  
Zahller, M.D., Steve – Scripps Mercy

### County Staff Present

Haynes, M.D., Bruce  
Smith, R.N., Susan  
Stepanski, Barbara

### Recorder

Rupp, Merle

### Guests Present

Aker, R.N., Donna Kelly – UCSD ROC  
Allington, R.N., Linda – Carlsbad Fire  
Anderson, R.N., Marilyn – Vista Fire  
Barnes, R.N., Melanie – S.D. Med. Serv. Enterprise  
Bourdon, R.N., Darlene – Scripps Mercy  
Brown, Mark – Nat. Polytechnic College of Science  
Broyles, R.N., Linda – AMR/RCCP  
Buono, M.D., Colleen – UCSD  
Dotson, R.N., Melody – UCSD  
Howard, R.N., LuAnn – Scripps La Jolla  
Hudnet, Carlen – S.D. Medical Services Enterprise  
Johnson, Wayne – S.D. Medical Services Enterprise  
Klingensmith, Todd – S.D. Co. Paramedics' Assoc.  
Kusman, Travis – American Medical Response  
Majerczak, R.N., Karen – Tri-City  
Meadows-Pitt, R.N., Mary – Sharp Grossmont  
Mottet, R.N., Mary – S.D. Med. Serv. Ent./CSA-17  
Ochs, R.N., Ginger – San Diego Fire Rescue  
Pringle, John – San Diego Fire Rescue  
Roach, R.N., Lori – Loma Linda Univ./Palomar  
Rosenberg, R.N., Linda – Sharp Memorial  
Salazar, M.D., Anthony – UCSD  
Seabloom, R.N., Lynne – Oceanside Fire

## I. CALL TO ORDER/INTRODUCTIONS/ANNOUNCEMENTS

Judd Glasser, M.D., Chairperson, brought the meeting to order at 11:10 a.m. Attendees introduced themselves.

## **II. APPROVAL OF MINUTES**

**MOTION made by Jamil Madati, M.D., Seconded by Michele Grad, M.D., to approve the Minutes of May 19, 2009 as submitted. MOTION carried.**

## **III. MEDICAL DIRECTOR'S REPORT (Bruce Haynes, M.D.)**

Swine Flu (H1N1) Update: There has been a little bit of success in developing a recombinant vaccine which will hopefully be ready in fall, 2009. Surveillance continues.

Stroke Update: A deadline of July 1, 2009 has been set to begin triage of acute stroke patients with symptom onset within the last three hours. Eleven hospitals have primary stroke certification from the Joint Commission. Three other hospitals have been reviewed and a fourth is set to be reviewed. Stroke patients with the symptom onset criteria will be taken to one of these designated stroke centers.

## **IV. BASE HOSPITAL NURSE COORDINATOR'S REPORT (Cheryl Graydon, R.N.)**

The BHNC's will present two audits at the PAC meeting this date: Midazolam and CPAP.

The BHNC's are asking that when BLS agencies call in they identify which agency they are with. Using the agency name has not been the habit of most BLS rigs and private companies, creating additional difficulties because the PPR's are not regularly left at the hospital.

The BHNC's completed the April, 2009 PPR audit with data from most of the hospitals showing the range runs from 52% to 92% for the PPR's being left at the hospital with the patient.

## **V. ROC (Resuscitation Outcomes Consortium) UPDATE (Dan Davis, M.D.)**

Work is continuing on the new protocols. ROC Prime is still going strong with the hope that sometime in the next three to four months some observational data will be collected for trauma patients that would include some other types of patients such as head-injured.

## **VI. AMIODARONE REVIEW (Ian Reilly, M.D., Scripps La Jolla)**

Dr. Reilly presented a power point presentation with the themes of:

- Drug therapy in cardiac arrest has a poor track record.
- Is Amiodarone a better anti-arrhythmic agent than lidocaine?
- Does survival to hospital admission matter?

Dr. Reilly reviewed statistics from seven articles dating back to 1981. It was stated that a patient could be given up to 600 milligrams of Amiodarone before you hit the maximum compared to Lidocaine being two bottles of 50. Dr. Davis added that a higher dose of a new formulation would be easier to give in the field and more effective. This will be reviewed at the peer review committee this summer and will have to get FDA approval to

be done as a study. Dr. Glasser stated he felt it would be prudent to await the results of that study as the protocols couldn't be changed until next year anyway.

**VII. SAN DIEGO HEALTHCARE DISASTER COUNCIL (Linda Rosenberg, R.N.)**

The hospitals and clinics are working to finish all their purchases and submit their invoices to County EMS staff for the HPP Year Seven grant by the June 30, 2009 deadline.

There will be a debriefing on Thursday, June 18, 2009 for hospitals, clinics and agencies to discuss their experience with the H1N1 experience. This date was originally set aside for a state-wide pandemic exercise, but the State recommended utilizing the H1N1 experience instead. Hospitals will maintain their own stockpile of Tamiflu for possible future use.

The Medical Examiner's Mass Fatality Plan will be presented at the next Disaster Council meeting on June 17, 2009. The Mass Fatality Plan was a grant requirement for the County.

The Healthcare Disaster Council is putting together some hazardous vulnerability assessments and ranking them in appropriate order and will provide education for emergency departments and disaster staff.

**VIII. ITEMS FOR FUTURE DISCUSSION**

The Emergency Medical Oversight Committee (EMOC) continues to discuss the possibility of a no-bypass trial. BSPC should have a definite interest in that.

A representative from the Sexual Assault Response Training (SART) program will make a presentation at the next BSPC meeting of July 21, 2009.

Dr. Dunford added that a brief video on spinal mobilization could be presented some time in the future.

Dr. Dunford stated that he has only received names of about nine people who have been nominated to be CARES representatives at hospitals and hoped that the BHNC's could provide him with more. A recent CARES meeting was held in Washington D.C. sponsored by the American Heart Association. CARES is a way in which every community in America can have the capability to know their cardiac arrest survival rate.

A STEMI System of Care summit was held at the State level last week and a discussion was held regarding the 13 most northern counties of California and San Bernardino County and what they're doing with their STEMI systems.

**IX. SET NEXT MEETING/ADJOURNMENT**

The next meeting was scheduled for Tuesday, July 21, 2009, 11:00 a.m. at Sharp Spectrum, 8695 Spectrum Center Court, Kearny Mesa, San Diego, California.

The meeting adjourned at 12:35 p.m.

Respectfully submitted,

Merle Rupp, Board Secretary,  
County EMS



# County of San Diego

HEALTH AND HUMAN SERVICES AGENCY  
PUBLIC HEALTH SERVICES

1700 PACIFIC HIGHWAY, SAN DIEGO, CALIFORNIA 92101-2417  
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WILMA J. WOOTEN, M.D., M.P.H.  
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Emergency & Disaster Medical Services  
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Immunization  
Maternal, Child and Family Health Services  
Public Health Laboratory  
PH Nursing/Border Health  
TB Control & Refugee Health  
Vital Records

## BASE STATION PHYSICIANS' COMMITTEE MEETING

Minutes

Tuesday, July 21, 2009

### Members Present

Davis, M.D., Dan – Mercy Air  
Dunford, M.D., Jim – City of San Diego  
Graydon, R.N., Cheryl – Palomar  
Grad, M.D., Michele – Palomar/Pomerado  
Linnik, M.D., Bill – Sharp Grossmont  
MacPherson, Gary – Co. Paramedics Agencies' Comm.  
Madati, M.D., Jamil – Children's  
Reilly, M.D., Ian – Scripps La Jolla  
Zahller, M.D., Steve – Scripps Mercy

### County Staff Present

Haynes, M.D., Bruce  
Pate, R.N., Rebecca  
Smith, R.N., Susan  
Stepanski, Barbara

### Recorder

Rupp, Merle

### Guests Present

Anderson, R.N., Marilyn – Vista Fire  
Barnes, R.N., Melanie – S.D. Med. Serv. Enterprise  
Bourdon, R.N., Darlene – Scripps Mercy  
Brown, Mark – National Polytechnic Coll./Science  
Broyles, R.N., Linda – AMR/RCCP  
Buckley, M.D., Kevin – Naval Med. Ctr. S.D.  
Buono, M.D., Colleen – UCSD  
Conover, Bill – Camp Pendleton Fire  
Dotson, R.N., Melody – UCSD  
Eldridge, R.N., Leslie – Sharp Memorial  
Howard, R.N., LuAnn – Scripps La Jolla  
Hudnet, Carlen – S.D. Med. Serv. Enterprise  
Idman-Gervais, R.N., Dianne – Sharp Grossmont  
Johnson, Wayne – S.D. Med. Serv. Enterprise  
Majerczak, R.N., Karen – Tri-City  
Moran, Dennis – UCSD  
Mottet, R.N., Mary – S.D. Med. Serv. Ent./CSA-17  
Pringle, John – San Diego Fire Rescue  
Ross, Alyssa – City of San Diego  
Scott, R.N., Chris – San Diego Fire Rescue  
Seabloom, R.N., Lynne – Oceanside Fire  
Serra, John – UCSD  
Tadros, Anthony – UCSD  
Trayers, Fred – Naval Medical Center San Diego  
Vivieros, R.N., Dinarte – Children's  
Vogt, Chief Rick – San Marcos Fire

## I. CALL TO ORDER/INTRODUCTIONS/ANNOUNCEMENTS

Ian Reilly, M.D., substituting for Judd Glasser, M.D., Chairperson, brought the meeting to order at 11:10 a.m. Attendees introduced themselves.

## II. APPROVAL OF MINUTES

**MOTION made by Jamil Madati, M.D., Seconded by Michele Grad, M.D., to approve the Minutes of June 16, 2009 as submitted. MOTION carried.**

## III. MEDICAL DIRECTOR'S REPORT (Bruce Haynes, M.D.)

New Military Representative: Dr. Haynes introduced Kevin Buckley, M.D., the new Naval Medical Center Medical Director who replaces Don Sallee, M.D., who has been deployed.

Paramedic/EMT Programs: Dr. Haynes announced that a new paramedic training program was approved in the county. It is the National Polytechnic College of Science. Their application was reviewed and it met the State and local requirements. In particular, they had provisions for clinical and field internship. The county cannot determine if there is need for a new program, but whether the applicant meets the requirements.

Mark Brown introduced himself as the Director of a new training program and stated that he began his career as an Oceanside lifeguard and became a paramedic in 1979 and worked for various companies including Hartson's and AMR. He has now worked for the College for eight years and the College is a subset of National University. Concerns have been expressed by some that it is already difficult for agencies to place interns with the current number of training programs, with some students having to travel to Arizona to complete their internship. **ACTION: Wayne Johnson, San Diego Medical Services Enterprise, suggested that the Emergency Medical Care Committee, Education and Research Subcommittee meet and review this situation.**

Flu Update: In the most recent set of isolates from the State Lab, 98% were confirmed to be H1N1. Public Health conducted a large meeting recently including law enforcement, hospitals and EMS regarding dealing with the flu in the fall. Procedures remain in place and recommendations for dispatch notification have been disseminated. It is anticipated that there will be two different shots for H1N1 in the fall and an additional shot for the seasonal flu.

Capacity Plan: The Capacity Plan group met and is looking at the First Watch data. The updated Capacity Plan will be released later this summer or fall, 2009.

Stroke System Update: The Stroke System started on July 1, 2009 with fifteen hospitals. Naval Medical Center San Diego is expected to join the system at some point. The "Other 1" category is being utilized on the QCS exclusively for stroke receiving status. If unable to accept a stroke patient, "NO NEURO" should be entered in the "Other 1" column, including if down for CT.

Protocol Updates: The protocol updates went into effect July 1, 2009. Clarifications have gone out regarding questions that have come up.

**IV. BASE HOSPITAL NURSE COORDINATOR’S REPORT (Cheryl Graydon, R.N.)**

The BHNC’s will be presenting “Multi-Patient Incident Audit” this date at the PAC meeting to follow this meeting.

The data will be compiled for an “Interfacility Audit” in September, 2009. The BHNC’s are also working on “I.O.’s.” Other audits that will be completed in the near future are “CPR” and “CPAP.”

**V. ROC (Resuscitation Outcomes Consortium) UPDATE (Dan Davis, M.D.)**

In the non-city of San Diego agencies that are ROC Prime trial locations, the ITD valves are off the rigs temporarily in response to the Study Monitoring Committee. A ROC internal group identified that the reported rate of cardiac arrest had dropped substantially in the non-city agencies based on what had been reported in the larger data base in previous years.

In the future, ROC patients may be tagged and ROC staff can query the data base for ROC patients to be more efficient. In the meantime, the agencies are providing early versus later data analysis. ROC goes out and retrieves the files of those patients and enters those into the registry data base.

The trauma trials ceased in the spring. The goal was to come up with some observational trauma studies to better identify patients who are in traumatic shock and those could be done potentially with waivers of informed consent.

A resuscitation trauma study will be moving forward and this study is going on in Dallas right now.

**VI. SART (Sexual Assault Response Team) PRESENTATION  
(Sue Dickinson R.N., B.S.N., Palomar/Pomerado Forensic)**

Ms. Dickinson explained there are two SART facilities in the North County; those being Palomar and Pomerado for people 14 years and older. In addition, Independent Forensic Services in San Diego will see those age 14 and older and Rady Children’s Hospital from birth to 17 years of age. The following are other comments:

- Independent Forensic Services is privately owned.
- SART grew out of the name to serve assault victims in a more humane and timely manner and to assist the judicial process.
- SART recognizes the chain of custody and recognizes this is a public health safety issue.
- In the early days, there was use of the emergency department, and the detailed examination was not ideal in the ED setting. Also, staff were not fully trained to complete the evidentiary examination.
- Exams were done in the emergency department and long waits experienced due to the triage process and sometimes evidence was lost.
- The initial component of SART is law enforcement and a SART medical provider along with a victim advocate.

- Now examiners must complete a training course, work as per diem staff and must continually update their knowledge through continuing education classes, readings and professional organizations.
- Sexual assault is a reportable crime by law.
- Evidence samples used in cases include hair, nails, urine, blood, and victim's clothing, etc.
- SART does not test adults for sexually transmitted diseases but does test for pregnancy. SART does test children for STD's.
- DNA is a wonderful tool that is now standard in sexual cases.
- 96% of victims are females, 4% males.
- Hospitals are encouraged to report potential sexual assaults that occurred outside the U.S. or state borders, even if police decline to follow up.
- Urine specimens should always be given to the police and labeled appropriately. The patient should not wipe themselves, or bathe.
- It is important to collect clothing if it needs to be removed for treatment.
- Clothing should be placed in a paper bag (preferred unless soaked with blood or other fluids) and should be labeled and given directly to the police.
- Any swabs that are used should be retained for the SART team.
- For hepatitis testing, refer to Public Health or other provider of choice.
- The Sexual Assault Nurse Examiner is available 24 hours a day, seven days a week.
- SART is authorized and paid for by law enforcement.

## **VII. SAN DIEGO HEALTHCARE DISASTER COUNCIL (Linda Rosenberg, R.N.)**

(Reported by Leslie Eldridge, R.N.): The County Office of Emergency Services (OES) is planning on distributing wildfire information house-to-house County-wide to areas that have wildland-interface on July 25 and August 1, 2009 as part of their public awareness campaign. DVD's will be included.

The Hospital Coordinators of the California Health Alert Network (CAHAN) are meeting on August 4, 2009 to review the roles of the HICS (Hospital Incident Command System) system and further enhance and/or develop a computerized system.

The Golden Guardian drill is scheduled for May, 2010 but no November, 2009 drill this year. Naval Medical Center San Diego is going to conduct a surge drill and hospitals are invited to participate in November, 2009.

The HPP (Hospital Preparedness Program) Year Eight application has been sent to the State and then goes to the federal government for review. The County is awaiting approval on that. San Diego County should receive approximately a half million dollars for pandemic flu assistance.

## **VIII. ITEMS FOR FUTURE DISCUSSION**

None.

**IX. SET NEXT MEETING/ADJOURNMENT**

The next meeting was scheduled for Tuesday, September 15, 2009, 11:00 a.m. at Sharp Spectrum, 8695 Spectrum Center Court, Kearny Mesa, San Diego, California.

The meeting adjourned at 12:45 p.m.

Respectfully submitted,

Merle Rupp, Board Secretary,  
County EMS



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Vital Records

## BASE STATION PHYSICIANS' COMMITTEE MEETING

Minutes

Tuesday, September 15, 2009

### Members Present

Davis, M.D., Dan – UCSD/Mercy Air  
Glasser, M.D., Judd – Tri-City  
Grad, M.D., Michele – Palomar/Pomeroado  
Graydon, R.N., Cheryl – Palomar  
Kramer, M.D., Mark – Sharp Memorial  
Linnik, M.D., Bill – Sharp Grossmont  
Madati, M.D., Jamil – Children's  
Marugg, Jim – S.D. Co. Paramedics' Association  
Reilly, M.D., Ian – Scripps La Jolla  
Schwartz, M.D., Brad – American Medical Response  
Workman, R.N., Debi – Palomar College

### County Staff Present

Haynes, M.D., Bruce  
Smith, R.N., Susan  
Stepanski, Barbara

### Recorder

Rupp, Merle

### Guests Present

Aker, R.N., Donna Kelly – UCSD ROC  
Bourdon, R.N., Darlene – Scripps Mercy  
Broyles, R.N., Linda – RCCP/AMR  
Buckley, M.D., Kevin – Naval Med. Ctr. S.D.  
Buono, M.D., Colleen – UCSD  
Conover, Bill – Camp Pendleton Fire  
DeMarco, T.J. – Palomar College Intern  
Denhalter, Joseph – Palomar College Intern  
Dotson, R.N., Melody – UCSD  
Foehr, Rick – EMSTA College  
Harris, Kellen – Palomar College Intern  
Howard, R.N., LuAnn – Scripps La Jolla  
Hudnet, R.N., Carlen – S.D. Med. Serv. Enterprise  
Idman-Gervais, R.N., Dianne – Sharp Grossmont  
Klingensmith, Todd – S.D. Co. Paramedics Assoc.  
Majerczak, R.N., Karen – Tri-City  
Miller, Cameron – Palomar College Intern  
Ochs, R.N., Ginger – San Diego Fire Rescue  
Patel, Beene – UCSD  
Quinn, R.N., Michele – Children's  
Rosenberg, R.N., Linda – Sharp Memorial  
Ruiz, Tyler – Palomar College Intern  
Rundle, James – Palomar College Intern  
Schoenheit, Fred – North County Fire  
Seabloom, R.N., Lynne – Oceanside Fire  
Serra, John – UCSD  
Stonecipher, R.N., Joanne – Southwestern College  
Vogt, Chief Rick – San Marcos Fire

**I. CALL TO ORDER/INTRODUCTIONS/ANNOUNCEMENTS**

Judd Glasser, M.D., Chairperson, brought the meeting to order at 11:10 a.m. Attendees introduced themselves.

Dr. Glasser thanked Ian Reilly, M.D. for Chairing the last BSPC meeting in his absence.

**II. APPROVAL OF MINUTES**

**MOTION made by Michele Grad, M.D., Seconded by Ian Reilly, M.D., to approve the Minutes of July 21, 2009 as submitted. MOTION carried.**

**III. MEDICAL DIRECTOR'S REPORT (Bruce Haynes, M.D.)**

EMS Staff Member Overseas: Rebecca Pate, R.N., serving in the Navy Reserve, has been deployed and is now serving in Afghanistan. Ms. Pate may be away on duty for a year.

Trauma System Anniversary: This year marked the 25<sup>th</sup> anniversary of the San Diego County Trauma System. The County Board of Supervisors honored trauma staff with a plaque for their work. The Trauma Research and Education Foundation has produced a video about the trauma system in San Diego. The video is approximately 25 minutes in length and is being shown on the County television network.

Flu Updates: As of this date (September 15, 2009), twenty-one San Diego County residents have died from the H1N1 virus. Testing is now limited to hospitalized and fatal cases, there have been 1,179 cases with 262 hospitalized cases. The average age of cases is 25 years old with a range from four months to 89 years.

Pregnant women, health care providers, household contacts, caregivers for children younger than six years of age, persons six months to 24 years of age, and persons 25 to 64 years of age with medical conditions are the order of priority for receiving the H1N1 vaccine. During this pandemic, the State will temporarily authorize an expanded scope of practice to paramedics to facilitate vaccination of their work force.

The County Public Health Department has lecturers available to give presentations on H1N1 if anyone is interested. For suspected cases in the field, Public Health is recommending aerosol precautions with gowns, gloves and N-95 masks.

Dr. Haynes recommended attendees visit the CAHAN (California Health Alert Network) website for up-to-date information.

Capacity Task Force: The Capacity Task Force met and is making some changes to the plan which should be finished soon. A local emergency no longer has to be declared for hospitals to use surge tents.

Stroke: A total of 15 hospitals qualified to receive acute stroke patients as of July 1, 2009. Naval Medical Center San Diego will likely be added to the system in the future. Triage criteria in the treatment guidelines are assessment with the prehospital stroke scale for symptom onset in the previous three hours. Base hospitals may extend the three hour limit to three and-one-half or four hours with the goal administration of the medication as quickly as possible.

Paramedic Program: Recently the National Polytechnic College of Science was approved as a paramedic training program in San Diego County.

Patient Destination Reports: Barbara Stepanski, County EMS, ran a data review which demonstrated a total of 16,000 uses for 2009 out of close to 127,000 calls (about 12%). A continued review over the next month will occur. **ACTION: Place on BSPC agenda for the next BSPC meeting of Tuesday, October 20, 2009.**

Good Samaritan Update: Last year the California Supreme Court ruled that a person could provide first aid at the scene of an accident but rescues, such as pulling a person out of a vehicle was not protected. Went back for re-trial and was split into bills. Neither bill progressed. No changes or new information at this time.

Plavix/Coumadin: Trauma surgeons have varied opinions regarding patients who are on Plavix or Coumadin, that fall down and hit their head or have a minor injury. From a survey that Cheryl Graydon, R.N., Palomar Hospital assisted with, five base hospitals designate these patients as trauma resource patients one way or the other, and a couple pick the best hospitals for them to go to with neuro-surgical back-up, unless they're obviously major trauma. Discussion will continue at MAC (Medical Audit Committee). Ms. Stepanski is reviewing cases to see how many cases there may be in the system, but polling the prehospital triage is difficult because it's not a separate assessment. However, she is working to compile cases by querying various fields and reviewing on a case-by-case basis.

Ginger Ochs, R.N., San Diego Fire Rescue, inquired about the status of blunt trauma pronounced on scene. **ACTION: Dr. Haynes will follow-up on that which may be being reviewed by County Counsel.**

#### **IV. BASE HOSPITAL NURSE COORDINATOR'S REPORT (Cheryl Graydon, R.N.)**

The BHNC's are currently compiling data for the Interfacility Transports report and hopefully will be ready for the October, 2009 PAC meeting.

Some BHNC's will be going to CEMSIS (California EMS Information System) training and will become super-users.

Ms. Graydon welcomed suggestions for future reviews.

**V. ROC (Resuscitation Outcomes Consortium) UPDATE (Dan Davis, M.D.)**

The National Institute of Health (NIH) will release study review results in late 2009; however, some preliminary results have been shared with San Diego ROC. The two hypertonic saline studies were stopped and there is a push for an observational study which would link the largest prehospital data collection tool to inpatient material with the goal of refining entry criteria for future studies.

In the meantime, the trauma interventional studies planned for ROC are being fleshed out and that includes the Shock Study offered by Dr. Coimbreau with the head injury study with the initial data collected in Dallas.

On the Cardiac Arrest Study, enrollment is continuing and the group is working with one of the agency data collection vendors to test a catchment area in real time. The City of San Diego is enrolling in both studies.

For the ROC Airway Study, the incidence of airway bleeds needs to be reported. Cases are being gathered together for review as it is a unique situation with prehospital, the emergency department and inpatient records to see whether this bleeding is coming from use of the King Airway or whether the bleeding is coming from above the vocal cords. Dr. Davis will continue to work with Dr. Haynes on this.

In the upcoming Cardiac Trials, Amiodarone is being reviewed using the new formulation which would recommend administering it sooner and allow for higher doses. In the Hypothermia Trial, for patients that have a pulse in the field, they will use a bluish-type of device.

Most sites have done CPR-related studies looking at no ventilation CPR; due to previous concerns an additional study of this type is unlikely to go forward.

**VI. SHOCK PROTOCOL (S-138) (Judd Glasser, M.D.)**

Dr. Glasser brought several questions forward regarding Shock Protocol S-138. He requested a review of fluid bolus amounts in different types of shock at the next protocol revision.

**VII. SAN DIEGO HEALTHCARE DISASTER COUNCIL (Linda Rosenberg, R.N.)**

Wilma Wooten, M.D., County Public Health Officer, spoke at the last Disaster Council meeting regarding H1N1.

Most hospitals will be sending staff to learn more about the Mass Fatality Plan and the Emergency Death Registration System, an electronic system for recording deaths in disasters. This eliminates the physician having to sign off on a death certificate as physicians will be able to sign off electronically.

Many hospitals will be conducting at least a table top drill on Thursday, October 15, 2009.

A larger Golden Guardian drill is scheduled for May, 2010 with a dirty bomb scenario.

San Diego County has applied for additional grant money from the CDC specific to H1N1.

Year Eight HPP (Hospital Preparedness Program) is in its' eight year application process.

**VIII. ITEMS FOR FUTURE DISCUSSION**

None.

**IX. SET NEXT MEETING/ADJOURNMENT**

The next meeting was scheduled for Tuesday, October 20, 2009, 11:00 a.m. at Sharp Spectrum, 8695 Spectrum Center Court, Kearny Mesa, San Diego, California.

The meeting adjourned at 12:45 p.m.

Respectfully submitted,

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County EMS



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## BASE STATION PHYSICIANS' COMMITTEE MEETING

### Minutes

Tuesday, October 20, 2009

#### Members Present

Davis, M.D., Dan – Mercy Air/UCSD  
Dunford, M.D., Jim – City of San Diego  
Graydon, R.N., Cheryl – Palomar  
Kramer, M.D., Mark – Sharp Memorial  
Kusman, Travis – Co. Paramedics Agencies' Comm.  
Linnik, M.D., Bill – Sharp Grossmont  
Madati, M.D., Jamil – Children's  
Marugg, Jim – S.D. Co. Paramedics' Association  
Schwartz, M.D., Brad – American Medical Response  
Zahller, M.D., Steve – Scripps Mercy

#### County Staff Present

Haynes, M.D., Bruce  
Smith, R.N., Susan  
Stepanski, Barbara  
Thomas, R.N., Pauline

#### Recorder

Rupp, Merle

#### Guests Present

Aker, R.N., Donna Kelly – UCSD ROC  
Allington, R.N., Linda – Carlsbad Fire  
Anderson, R.N., Marilyn – Vista Fire  
Barnes, R.N., Melanie – S.D. Med. Serv. Enterprise  
Bennett, M.D., Don – Naval Med. Ctr. San Diego  
Bourdon, R.N., Darlene – Scripps Mercy  
Broyles, R.N., Linda – AMR/RCCP  
Buckley, M.D., Kevin – Naval Med. Ctr. San Diego  
Buono, M.D., Colleen – UCSD  
Dotson, R.N., Melody – UCSD  
Galluci, Joseph – Palomar College  
Howard, R.N., LuAnn – Scripps La Jolla  
Hudnet, R.N., Carlen – S.D. Med. Serv. Enterprise  
Idman-Gervais, R.N., Dianne – Sharp Grossmont  
Kelly, Chuck – Palomar College  
Klingensmith, Todd – S.D. Co. Paramedics' Assoc.  
Lamond, Amanda – UCSD  
Maciel, Maciel – Palomar College  
Marchi, Greg – Palomar College  
Meadows-Pitt, R.N., Mary – Sharp Grossmont  
Miller, Ashley – Palomar College  
Mottet, R.N., Mary – S.D. Med. Serv. Enterprise  
Murphy, R.N., Mary – CSA-17  
Ninberg, R.N., Lori – Children's  
Ochs, R.N., Ginger – San Diego Fire Rescue  
Quinn, R.N., Michele – Children's  
Rosenberg, R.N., Linda – Sharp Memorial  
Schoenheit, Frank – No. Co. Fire Protection Dist.  
Scott, R.N., Chris – San Diego Fire Rescue  
Seabloom, R.N., Lynne – Oceanside Fire  
Stonecipher, R.N., Joanne – Southwestern College  
Sullivan, Don – American Medical Response  
Violante, Andrew – Palomar College

**I. CALL TO ORDER/INTRODUCTIONS/ANNOUNCEMENTS**

Bill Linnik, M.D., substituting for Judd Glasser, M.D., Chairperson, brought the meeting to order at 11:10 a.m. Attendees introduced themselves.

**II. APPROVAL OF MINUTES**

**MOTION made by Jamil Madati, M.D., Seconded by Jim Marugg, to approve the Minutes of September 15, 2009 as submitted. MOTION carried.**

**III. MEDICAL DIRECTOR'S REPORT (Bruce Haynes, M.D.)**

H1N1 Swine Flu Update: Surveillance of the H1N1 flu has been accelerated at the County. There have been 1,411 cases recorded in San Diego County thus far, although that number could be low as specific H1N1 testing is currently done only on hospitalized patients. There have been 769 males and 581 females with H1N1. A little less than half of the cases have been military personnel. There have been a total of 24 deaths recorded in San Diego County. The range of illness in age is two weeks to 89 years with the average age 26. The average age of death is 46.

County EMS released personal protective equipment guidance in the last few weeks. The new definition of a suspected case was changed by the State to include any patient less than 60 years of age with a fever of over 100 and cough, removing the sore throat component. Cal-OSHA recently passed the aerosol transmissible regulations and imposed the higher standard for any contact with the patient who is a suspected case. Cal-OSHA also gave guidance for re-using N-95 masks saving non-used ones for high-risk patients such as tuberculosis or invasive procedures. Health care workers can now return to work after 24 hours when they no longer have a fever without the use of fever-reducing medications. The County is attempting to obtain more masks and equipment. There are discussions going on to have POD's (Points of Dispensing) set up around the County to give the H1N1 vaccine. In some cases, paramedics are being approved to give the H1N1 vaccine.

Some seasonal flu vaccine has arrived and is available.

Hospital Capacity Plan: The Committee has been working on the Plan for some time. Revisions are being made in regard to surveillance and monitoring employee absenteeism.

A couple of hospitals discovered that using surge tents for additional capacity was quite valuable, including setting up a separate tent for short term treatment after going through the first tent for triaging.

Offload Issues: Offload delays will be watched carefully this winter.

Overcrowding Summit: Great presentations were made at this year's summit. Roneet Lev, M.D., talked about her survey of the emergency departments and Dan Gross, Executive Director, Sharp Healthcare discussed legislation currently in progress. Peter Viccellio, who's been doing hallway beds for years, discussed how patients are admitted and inpatient criteria. Billy Mallon talked about the surge planning in Los Angeles County.

Pearls for PAC: PAC Co-Chairs Steve Zahller, M.D., and Darlene Bourdon, R.N., along with Susan Smith, R.N., and Dr. Haynes are trying to provide more information in the Pearls and looking for ways to improve their effectiveness. Enhancing the distribution is being reviewed.

#### **IV. BASE HOSPITAL NURSE COORDINATOR'S REPORT (Cheryl Graydon, R.N.)**

The BHNC's will be giving a presentation at the PAC meeting this date on Interfacility Transports.

The BHNC's would like to know the requirements from the County or through BSPC on equipment lists and the requirements for adding additional equipment.

The BHNC's are also looking for clarification on the respiratory policy for Albuterol and Atropine. They are also requesting clarification on mild, moderate, and acute status as there appears to be different versions of "mild" in the field.

#### **V. ROC (Resuscitation Outcomes Consortium) UPDATE (Dan Davis, M.D.)**

The National Institute of Health (NIH) is meeting to discuss funding for ROC next week. The Data Safety Monitoring Board meets this week to review the ROC prime data and hopefully there may be some news from the Data Monitoring Board this week.

#### **VI. PATIENT DESTINATION REPORTS**

Dr. Haynes opened the discussion on patient destination reports by requesting input from the group on what they feel would improve the use of this type of radio report. Ms. Graydon stating that in her area some agencies do it and others don't and to have clarification on when it is appropriate to use.

Melody Dotson, R.N., UCSD, stated that destination reports help her out a lot but they should only be for mild status. Mary Meadows-Pitt, R.N., Sharp Grossmont, added that American Medical Response and Barona do destination reports for Grossmont and it's gone very well. Darlene Bourdon, R.N., Scripps Mercy, added that destination reports are a great idea because of the call volume. LuAnn Howard, R.N., Scripps La Jolla, stated that the majority of their agencies do have PDR's and would hate to lose that as it saves time for the MICN.

**ACTION: Dr. Haynes stated he would make the effort to come to the next BSPC meeting on November 17, 2009 with a draft policy.**

**VII. SDBREATHE (Ginger Ochs, R.N.)**

Ginger Ochs, R.N., San Diego Fire Rescue brought up the issue of the Toomey device not being used by agencies much anymore due to the advent of CO2 and the King Airway. Ms. Ochs stated that the Toomey device is an expense for the agencies and requested it be reviewed whether it still needs to be part of the required inventory. Ms. Ochs reviewed San Diego County's mnemonic SDBREATHE and felt that size, depth, lung sounds and abdominal sounds were the important documentation pieces. Ms. Ochs suggested at some point in the future, changing the mnemonic to be more user-friendly, and a little quicker.

**VIII. SAN DIEGO HEALTHCARE DISASTER COUNCIL (Linda Rosenberg, R.N.)**

A drill was conducted on October 15, 2009 called a "shake-out drill." Sharp Memorial performed the radio part. The next drill should be May 17-19, 2010.

The Hospital Preparedness Program (HPP) is in the process of writing the paperwork for the HPP Year Eight grant. The funds from HPP Year Seven have been distributed to the hospitals. Many hospitals are using monies for N-95 masks. The federal government is asking hospitals to report their bed status every week on Tuesday before noon and also for 72-hour projections.

**IX. ITEMS FOR FUTURE DISCUSSION**

SDBREATHE, what's going to happen with hospital capacity plans, patient destination reports and offload topics will be among issues to be discussed at the November 17, 2009 BSPC meeting.

Jim Dunford, M.D., City of San Diego, stated that San Diego is going to have an Emergency Cardiac Care Update conference in December, 2010. The committee working on it will be looking at San Diego to demonstrate their "heart-healthiness" such as access to schools and CPR efforts. Their focus is how to get citizens involved knowing CPR and calling 9-1-1. Dr. Dunford is the contact person.

Dr. Dunford stated that most of San Diego hospitals have signed up for CARES (Cardiac Arrest Registry) and it is hoped there will be system-wide approval for all the hospitals linked to the City of San Diego Cardiac Registry.

Dr. Haynes introduced Pauline Thomas, R.N., who has been appointed to a temporary position of EMS Coordinator during Rebecca Pate's military deployment. Ms. Thomas has been working for EMS on the disaster preparedness side of the house and did some outstanding work with fires, compiling a complete coordination system with skilled nursing facilities. Ms. Thomas has worked in emergency departments throughout the County and was a emergency department supervisor at Paradise Valley Hospital.

Michele Quinn, R.N., Children's Hospital, introduced Lori Ninberg, R.N. who will also be a representative from Children's at these meetings.

Kevin Buckley, M.D., Naval Medical Center San Diego, introduced Don Bennett, M.D., to the group. Dr. Bennett was a former paramedic.

**X. SET NEXT MEETING/ADJOURNMENT**

The next meeting was scheduled for Tuesday, November 17, 2009, 11:00 a.m. at Sharp Spectrum, 8695 Spectrum Center Court, Kearny Mesa, San Diego, California.

The meeting adjourned at 12:45 p.m.

Respectfully submitted,

Merle Rupp, Board Secretary,  
County EMS



# County of San Diego

## HEALTH AND HUMAN SERVICES AGENCY PUBLIC HEALTH SERVICES

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HIV, STD and Hepatitis  
Immunization  
Maternal, Child and Family Health Services  
Public Health Laboratory  
PH Nursing/Border Health  
TB Control & Refugee Health  
Vital Records

## BASE STATION PHYSICIANS' COMMITTEE MEETING

### Minutes

Tuesday, November 17, 2009

#### Members Present

Buono, M.D., Colleen – UCSD  
Dunford, M.D., Jim – City of San Diego  
Glasser, M.D., Judd – Tri-City  
Grad, M.D., Michele – Palomar/Pomerado  
Graydon, R.N., Cheryl – Palomar  
Kramer, M.D., Mark – Sharp Memorial  
Kusman, Travis – Co. Paramedics Agencies' Committee  
Linnik, M.D., Bill – Sharp Grossmont  
Madati, M.D., Jamil – Rady Children's  
Marugg, Jim – S.D. County Paramedics' Association  
Reilly, M.D., Ian – Scripps La Jolla  
Schwartz, M.D., Brad – American Medical Response  
Workman, R.N., Debi – Palomar College  
Zahller, M.D., Steve – Scripps Mercy

#### County Staff Present

Haynes, M.D., Bruce  
Smith, R.N., Susan  
Stepanski, Barbara  
Thomas, R.N., Pauline

#### Recorder

Rupp, Merle

#### Guests Present

Allington, R.N., Linda – Carlsbad Fire  
Anderson, R.N., Marilyn – Vista Fire  
Arnold, Doug – Palomar College  
Auten, Jonathan – Naval Medical Center San Diego  
Bourdon, R.N., Darlene – Scripps Mercy  
Bromley, Nicholle – UCSD  
Broyles, R.N., Linda – AMR/RCCP  
Buckley, M.D., Kevin – Naval Med. Cen. San Diego  
Conover, Bill – Camp Pendleton Fire  
Dotson, R.N., Melody – UCSD  
Davis, M.D., Dan – Mercy Air/UCSD  
Eldridge, R.N., Leslie – Sharp Memorial  
Foehr, Rick – EMSTA College  
Hitchcock, Kevin – Poway Fire  
Howard, R.N., LuAnn – Scripps La Jolla  
Idman-Gervais, R.N., Dianne – Sharp Grossmont  
Johnson, Wayne – S.D. Medical Services Enterprise  
Kiggins, Danielle – UCSD  
Klingensmith, Todd – S.D. Co. Paramedics' Assoc.  
La Chusa, Curtis – Palomar College  
Majerczak, R.N., Karen – Tri-City  
Meadows-Pitt, R.N., Mary – Sharp Grossmont  
Moles, Cory – Palomar College  
Moritz, Paul – North County Fire  
Murphy, R.N., Mary – CSA-17  
Neuman, Ashley – Palomar College  
Ninberg, R.N., Lori – Rady Children's  
Oakland, Doug – Palomar College  
Ochs, R.N., Ginger – San Diego Fire Rescue  
Quinn, R.N., Michele – Rady Children's  
Rosenberg, R.N., Linda – Sharp Memorial  
Seabloom, R.N., Lynne – Oceanside Fire  
Snow, Kathleen – Palomar College  
Stonecipher, R.N., Joanne – Southwestern College

**I. CALL TO ORDER/INTRODUCTIONS/ANNOUNCEMENTS**

Judd Glasser, M.D., Chairperson, brought the meeting to order at 11:10 a.m. Attendees introduced themselves.

**II. APPROVAL OF MINUTES**

**MOTION made by Mark Kramer, M.D., Seconded by Cheryl Graydon, R.N., to approve the Minutes of October 20, 2009 as submitted. MOTION carried.**

**III. MEDICAL DIRECTOR'S REPORT (Bruce Haynes, M.D.)**

Flu Update: Visits for influenza-related chief complaints rose substantially at surveillance emergency departments starting in mid-September, but leveled off the last couple of weeks. Visits have been higher among the younger group affected by the flu, 0-14 years and 25-64 years of age. Flu-related visits show the 0-14 and 15-24 year olds with the highest percent. There have been approximately 600 patients hospitalized in San Diego County with 34 resident deaths and four non-resident deaths. The average age of cases is 26 years, with a range of two weeks to 93 years.

An early delivery of the H1N1 vaccine was about 20,000 doses which went out primarily to high risk clients followed by a later delivery of between 88,000 and 100,000 doses which was delivered mostly to hospitals for staff and patients. Public Health Centers were opened up and the County vaccinated 57,000 people in the high-risk categories. Marcy Metz, R.N., Chief, County EMS, provided coordination at the County's Departmental Operations Center and many County EMS staff delivered vaccine and ran points of distribution.

Hospital Capacity Plan: Has been revised and distributed. Changes included monitoring of staff illness levels and looking at illness and hospitals as a marker. An important part of the diversion plan is that hospitals take their own patients, even if they are on emergency department saturation. State Licensing has okayed the use of surge tents, however they have to be inspected and approved by the local fire department before they are erected. The surge tents can be used for outpatient treatment and short term triage.

Paramedic Internships: The Emergency Medical Care Committee (EMCC) Education and Research subcommittee is looking at issues surrounding the internship placement of paramedics and EMT's in the County.

Taser Issue: Dr. Haynes spoke with the Sheriff's Department regarding the removal of the taser probes; law enforcement does not remove them. Law enforcement prefers to take everyone to the hospital who's been tasered.

Date from Los Angeles County: Brad Schwartz, M.D., American Medical Response, stated that he is involved with Kaiser Permanente call center where they have been receiving about 4,000 calls a day as Kaiser covers half a million people. **ACTION: Dr. Schwartz will send that data to Dr. Haynes.**

**IV. BASE HOSPITAL NURSE COORDINATOR'S REPORT (Cheryl Graydon, R.N.)**

The Base Hospital Nurse Coordinators (BHNC) have been working with the County to send a letter to the dispatch agencies so the BHNC's can present data on interfacility transfers on a monthly basis. Ms. Graydon thanked Mary Mottet, R.N., San Diego Medical Services Enterprise (SDMSE), for going through her material. The BHNC's met with County staff to review last year's information on PAC cases and that will be presented in the future. Also, members were requested to let the BHNC's know if they have issues with the King Airway.

**V. ROC (Resuscitation Outcomes Consortium) UPDATE (Dan Davis, M.D.)**

The National Institute of Health (NIH) has indicated that ROC is approximately 99% approved for renewal for six years. The Data Safety Monitoring Board made the recommendations which the NIH accepted. From the data reviewed, all of the patients did much better than expected with a much higher survival rate.

Dr. Davis just returned from the AHA (American Hospital Association) meeting where ROC was featured in all the presentations and Hypertonic Saline data was presented and a Phillips Study data. San Diego ROC presented an alternative to ACLS data and an award for top paper at the meeting was received by San Diego ROC.

On the Peer Review Committee, all the studies are on the trauma side, and they're looking at estrogen for head injury and shock and something for traumatic shock with the idea of limited fluids for traumatic shock versus a normal aggressive or normalized blood pressure or hypotension.

At this time, Dallas, Texas is collecting data on the cardiac arrest side.

Amiodarone has a new formulation. The study for Amiodarone would accelerate the dosing.

There is also a hypothermia review going on also using topical pads that are laid over the surface of the patient to cool them. Discussion has included whether the extra five to ten minutes in the field cooling the patient make a difference.

San Diego ROC may or may not be able to conduct the third cardiac arrest study and is looking at continuous compressions which the City of San Diego already does.

**VI. PATIENT DESTINATION REPORTS**

Susan Smith, R.N., County EMS, stated that after reviewing teaching material she noticed trends that appeared to demonstrate that criteria in patient destination reports has expanded the definition. She asked if attendees would let her know if they felt there were certain ALS skills or medications that should be in the patient destination report that are not currently there.

**VII. SDBREATHE (Ginger Ochs, R.N.)**

Dr. Haynes reported that he took the suggested modified SDBREATHE information to the EMS Fire Chiefs and the County Paramedics Agencies Committee for their input and they were in support of it. Both groups suggested using the acronym LEADSD. It was suggested that the changes could be implemented on July 1, 2010 with the new protocols for the new fiscal year.

**VIII. MENTAL HEALTH DIRECTOR MICHAEL KRELSTEIN, M.D.**

Dr. Glasser introduced Dr. Michael Krelstein, Director of the San Diego County Psychiatric Hospital. Dr. Glasser reminded attendees that there had been previous discussion at the BSPC meetings regarding patients being sent to the County Psychiatric Hospital without previous medical clearance and this is not acceptable. Dr. Krelstein introduced Dr. Brian Thompson from the County Psychiatric Hospital as well. The following are comments from Dr. Krelstein:

- County Psychiatric Hospital has an urgent care walk-in area as well as a 50-bed hospital.
- Recently the hospital was noticing more patients arriving that were in real sad shape medically and the hospital has no “medical” emergency room.
- Many patients with both psychiatric and medical problems arrive at the hospital on a “5150 status” with many experiencing agitated delirium.
- 9-1-1 is called when patients arrive with serious medical problems.
- Fortunately there have never been any fatalities in the hospital’s emergency psychiatric unit but many near misses.
- Police officers are generally very good and will call ambulances for hospital staff to expedite the patient being transported to a medical hospital.
- UCSD Medical Center does a phenomenal job taking the psychiatric patients.
- Paramedics do not transport patients to the psychiatric hospital.
- Police officers are generally called for these patients due to suicidal attempts or patient overdoses.
- The psychiatric hospitals sees between 13,000 and 14,000 patients a year.

**IX. SAN DIEGO HEALTHCARE DISASTER COUNCIL (Linda Rosenberg, R.N.)**

Hospital and clinic contracts have been submitted to the State for funding which is anticipated soon for HPP (Healthcare Preparedness Program) Year Eight. Hospitals are collecting bed data weekly reviewed by all the emergency departments and is submitted it to the federal government.

The Golden Guardian drill is being planned for May, 2010.

**X. ITEMS FOR FUTURE DISCUSSION**

Place Patient Destination Reports on the agenda for January 19, 2010.

**XI. ELECTION OF CHAIR FOR 2010**

**ACTION: Ian Reilly, M.D., Scripps La Jolla, was chosen as Chair of BSPC for 2010.**

Dr. Glasser was thanked for chairing the last couple of years.

**XII. SET NEXT MEETING/ADJOURNMENT**

The next meeting was scheduled for Tuesday, January 19, 2010, 11:00 a.m. at Sharp Spectrum, 8695 Spectrum Center Court, Kearny Mesa, San Diego, California.

The meeting adjourned at 12:45 p.m.

Respectfully submitted,

Merle Rupp, Board Secretary,  
County EMS