



# County of San Diego

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## Medical Director's Update for Base Station Physicians' Committee June, 2012

**The Sidewalk CPR effort to teach 2012 people hands only CPR was a success!** A total of 3,048 people received the brief instruction and chance to practice the skill. Participants were involved and appreciated the information. A thank you is much deserved by all the sponsoring agencies where volunteers took the time to participate. Increasing the number of sudden death victims who receive bystander CPR will increase survival rates. Even the brief demonstration and skill practice should give potential rescuers the confidence to perform CPR in an emergency. At our EMS site we also gave a brief familiarity with the AED, including asking if they knew the location of their AED and how to use it. Many persons had seen or worked with one before.

**At the same time as Sidewalk CPR, San Diego Project Heartbeat announced the 100<sup>th</sup> save** from their community layperson AED program. Project Heartbeat has reason to be proud. On a personal note, I remember writing the first California AED approving legislation in the late 1980s, relying on dispersion through the community by laypersons. The administration and a legislator carried the bill which was very simple and took effect in 1988.

Again, **thanks to all the volunteers** who made Sidewalk CPR a success.

**Please remember to obtain field 12-leads** early after patient contact. The sooner a positive EKG is transmitted the sooner the hospital can activate the cardiac catheterization laboratory. The primary value of the EKG is identifying STEMI. The Base Hospital Nurse Coordinators believe this will contribute to patient care and shorten door-to-balloon times. Thanks for your cooperation.

**The Beacon EMS Hub project** continues to work on implementation of patient care record transfers, including 12-leads.

**The Golden Guardian drill on May 16, 2012** gave the county a chance to test systems for disaster response using different scenarios. A major focus was receiving patients from surrounding counties where the health system suffered major disruption. A large number of organizations took part in the medical portion of the drill.

**The Centers for Disease Control** and Prevention confirmed what we already knew: this year's influenza season was the lightest in a number of years. Details are available at the CDC website

[http://www.cdc.gov/mmwr/preview/mmwrhtml/mm6122a4.htm?s\\_cid=mm6122a4\\_w](http://www.cdc.gov/mmwr/preview/mmwrhtml/mm6122a4.htm?s_cid=mm6122a4_w).

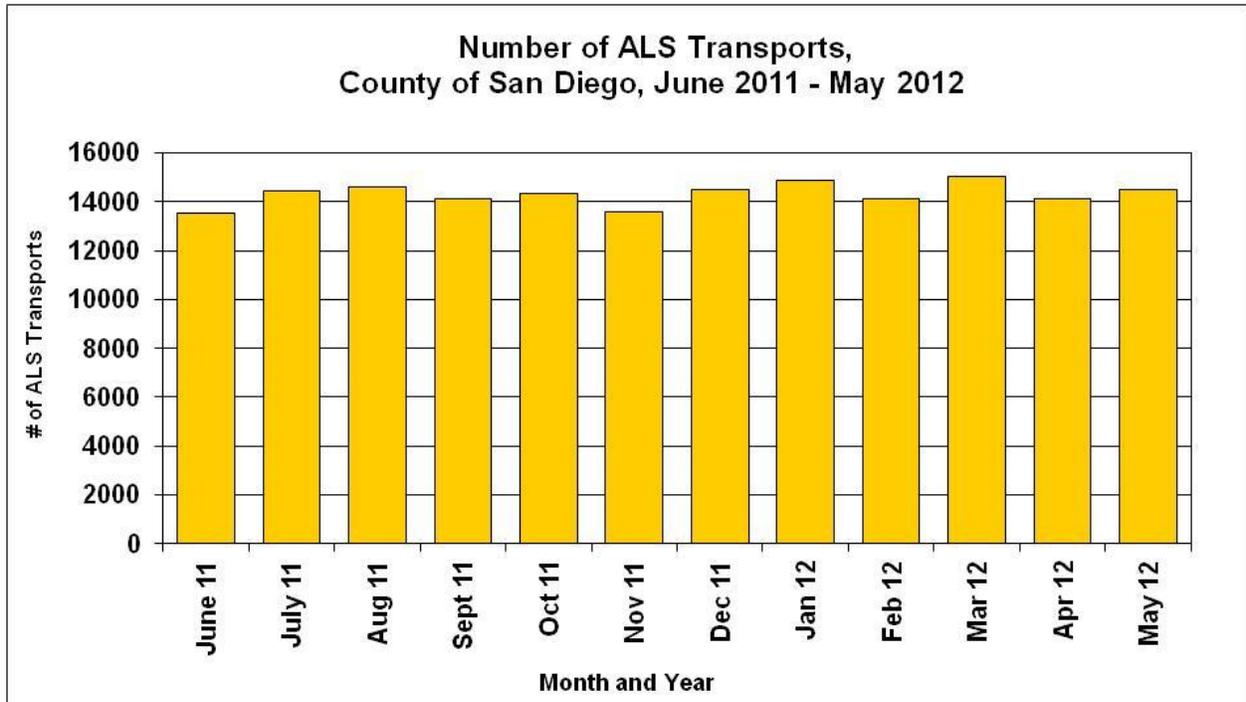
**The Postal Plan** is designed to deliver antibiotics to the public potentially exposed to an agent such as anthrax. The program is aimed at specified zip codes. It is one tool if large scale prophylaxis is needed. A recent drill tested the Plan with excellent results.

**Prehospital agencies are encountering more patients** with ventricular assist devices, LVAD or VAD devices. This year's update of the protocols addresses this issue. We will look at this more in the coming year, as devices and technology change.

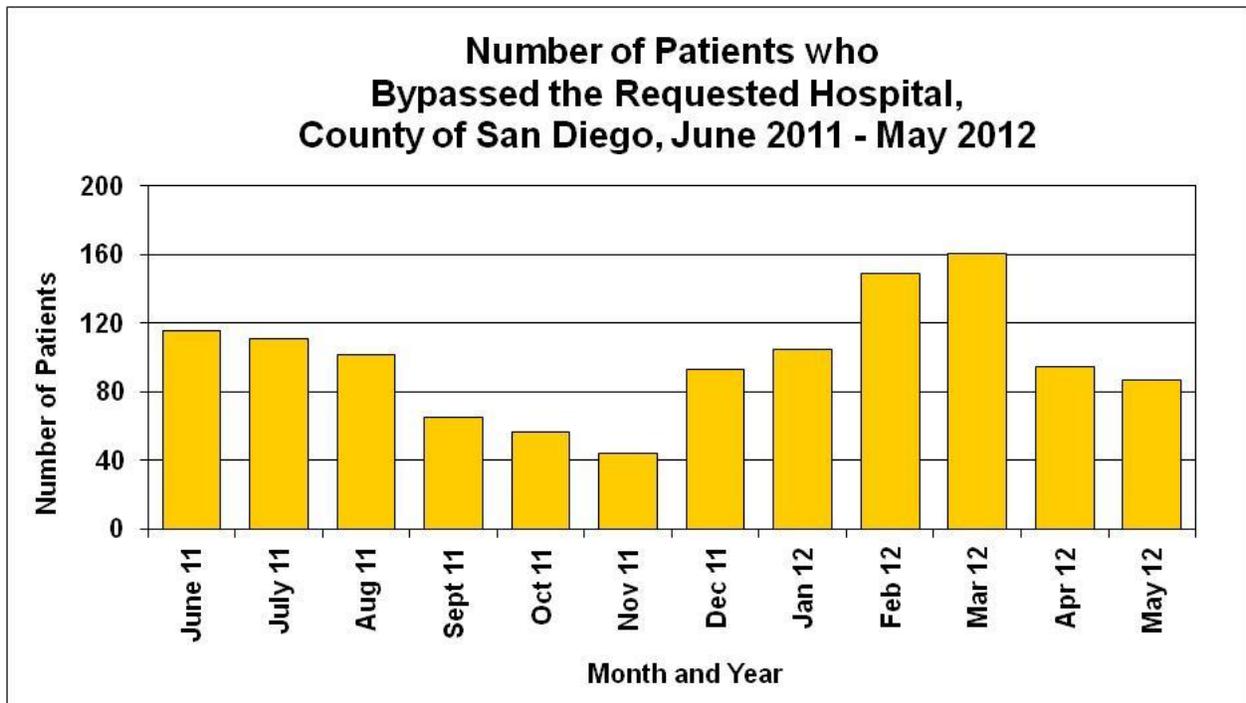
**The state continues releasing or readying for release numerous revised** or new regulations. These include proposed changes to the EMT, AEMT, and paramedic regulations. The proposed paramedic regulations included changes in interfacility transport, such as training and scope of practice. Proposed new regulations aimed at STEMI and stroke systems are near release, while other proposed regulations under consideration concern EMS systems and EMS for Children systems.

**The Joint Commission** released criteria for identification as a comprehensive stroke center. These centers will have a variety of imaging for stroke, and volume requirements for treatment of different types of strokes. We will evaluate the new category and see how it fits in our current stroke care system.

**The Emergency Nurses Association** national meeting is here in San Diego in September. Anyone interested in being an "ambassador" to help with guests can get free admission to the opening and closing receptions and the exhibits. If interested, contact Susan Smith, R.N., at EMS.

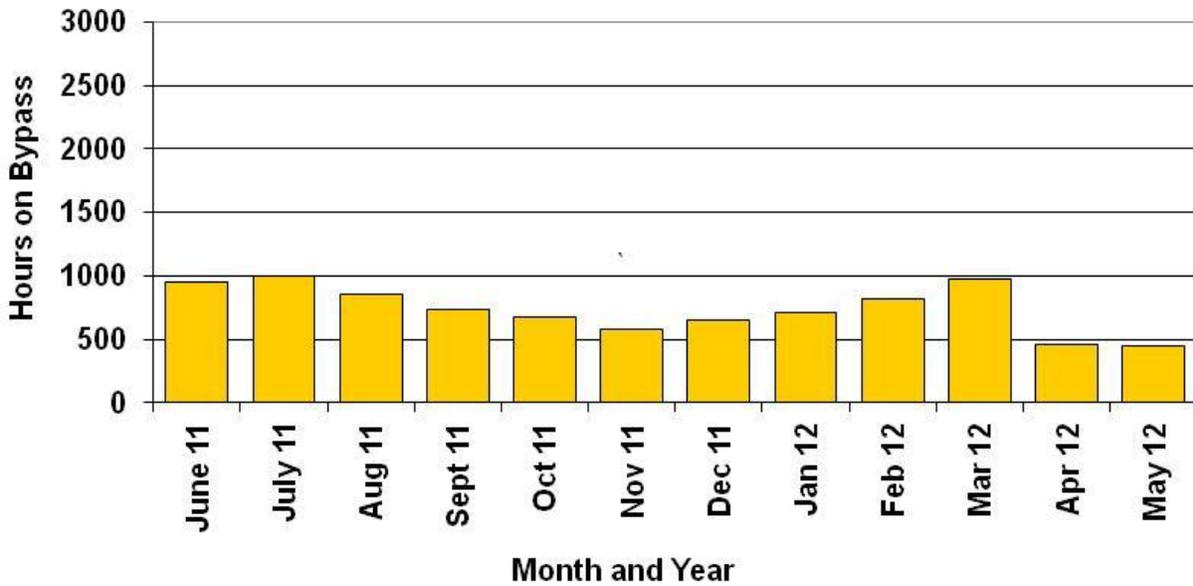


Source: County of San Diego, Health and Human Services Agency, Emergency Medical Services, MICN Records, June 2011 – May 2012 Note: Numbers based on Run Outcomes of Transport by Unit and Transport by Other



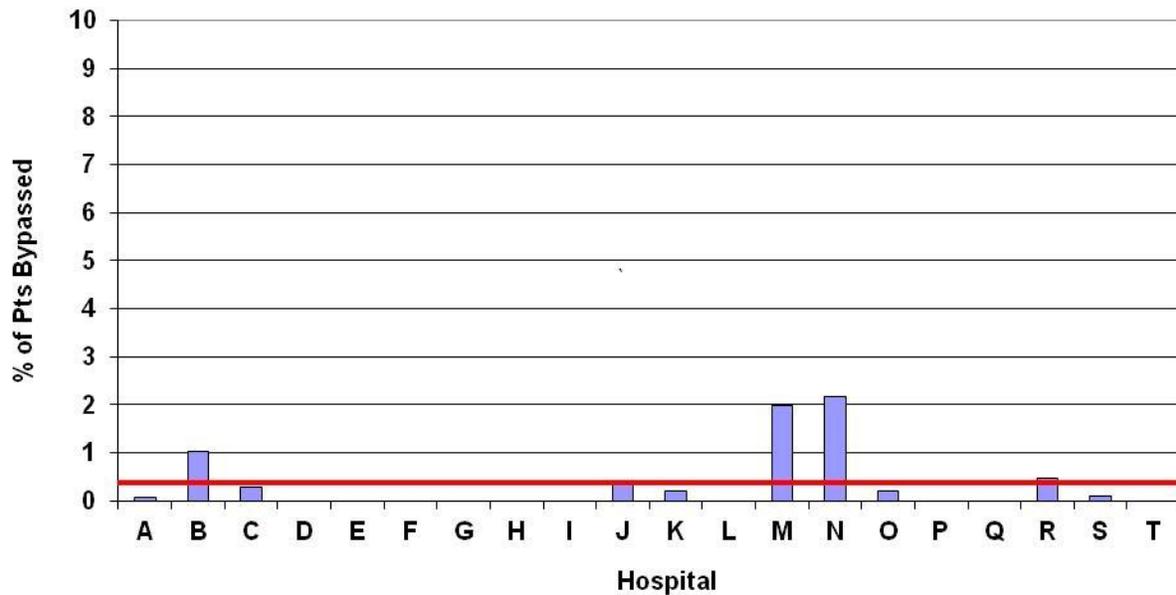
Source: County of San Diego, Health and Human Services Agency, Emergency Medical Services, MICN Records, June 2011 – May 2012 Note: Numbers based on Run Outcomes of Transport by Unit and Transport by Other

### Total Hours on Emergency Department Bypass County of San Diego, June 2011 - May 2012



Source: County of San Diego, Health and Human Services Agency, Emergency Medical Services, MICN Records, June 2011 – May 2012

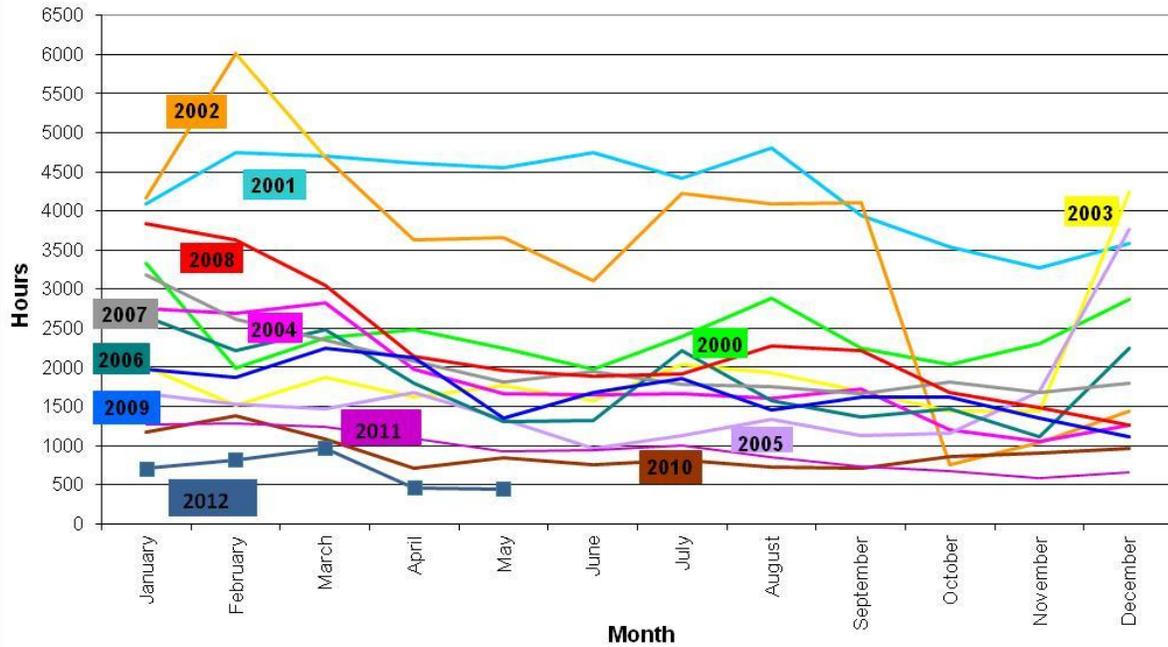
### Percent of Patients Bypassed per Hospital, May 2012



Note: The red line represents the mean value of percent of patients bypassed per hospital, May 2012

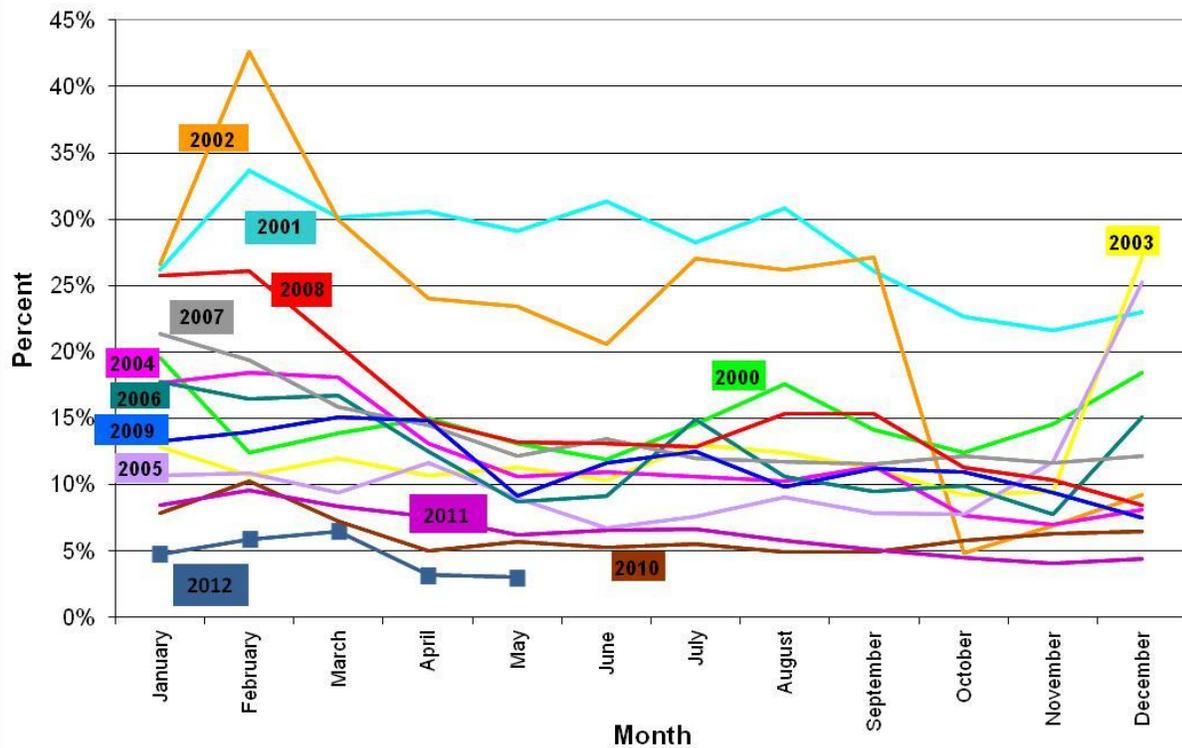
Source: County of San Diego, Health and Human Services Agency, Emergency Medical Services, MICN Records, May 2012  
 Note: Numbers based on Run Outcomes of Transport by Unit and Transport by Other

### Total Hours on ED Saturation by Month and Year, San Diego County, Jan 2000 - May 2012



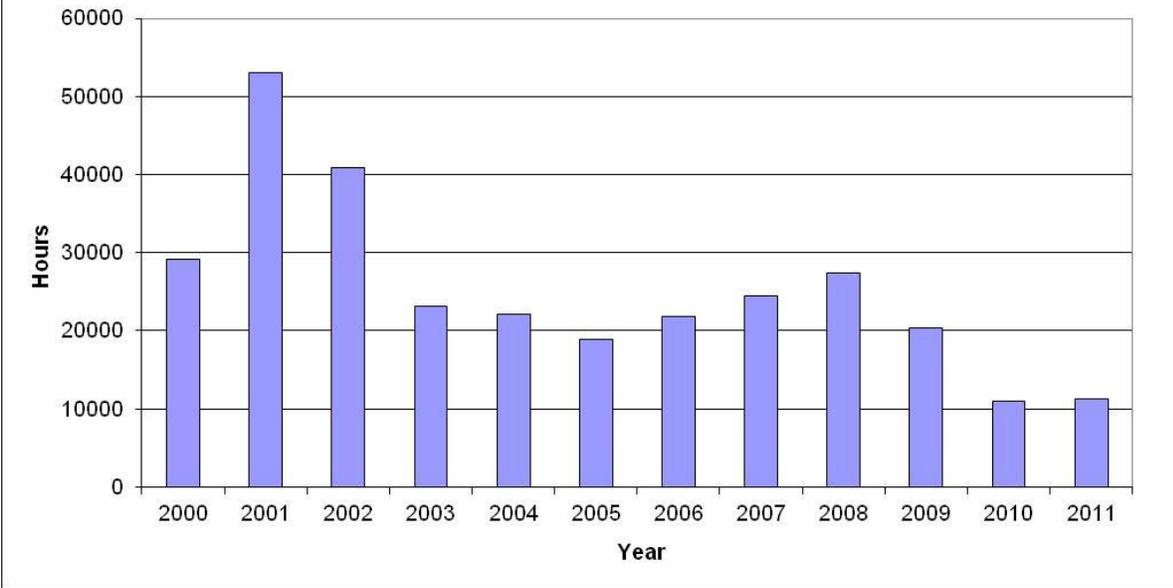
Source: County of San Diego, Health and Human Services Agency, Emergency Medical Services, MICN Records, Jan 2000 – May 2012

### Overall Percent Hours on ED Sat Per Month San Diego County, Jan 2000 - May 2012



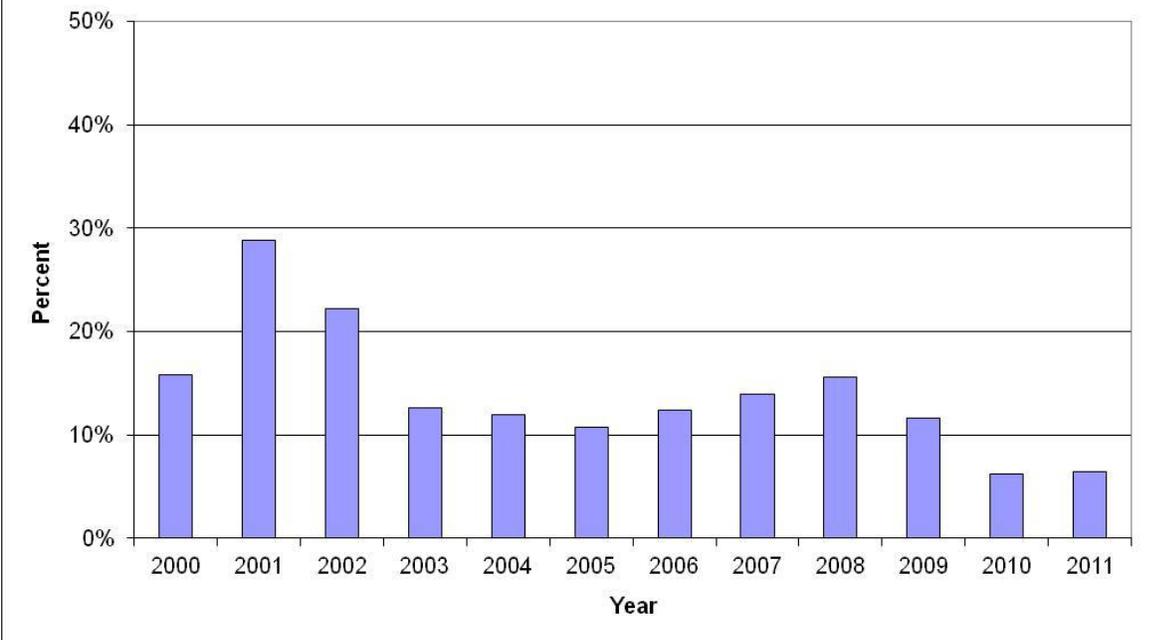
Source: County of San Diego, Health and Human Services Agency, Emergency Medical Services, MICN Records, Jan 2000 – May 2012

### Total Hours on ED Saturation by Year, San Diego County, 2000-2011



Source: County of San Diego, Health and Human Services Agency, Emergency Medical Services, MICN Records, 2000 – 2011

### Overall Percent Hours on ED Saturation by Year, San Diego County, 2000-2011



Source: County of San Diego, Health and Human Services Agency, Emergency Medical Services, MICN Records, 2000 – 2011