

Northern Virginia Emergency Medical Services Council

Meeting Minutes

EMS/Pharmacy Committee
Monday, October 1, 2018
10:00 am



City of Fairfax Fire Station 403
4081 University Drive
Fairfax, Virginia 22030

Attendees: (Alphabetical Order by last name) * indicates by phone

- Gill Abernathy* – Pharmacy Manager, Inova Health System
- Diane Buckley* – Pharmacy Manager, Sentara Northern Virginia Medical Center
- Millie Deya* - Pharmacy Manager, Novant Health UVA Prince William Medical Center
- Isaac Diehl – Supervisor, Medical Transport (Sentara)
- Karen Dunavant* – Director of Pharmacy, HCA StoneSprings Hospital
- Craig Evans – Executive Director, Northern Virginia EMS Council
- Raneesha Ford – Inova Fairfax Hospital
- Matt Fox – Captain, City of Manassas Fire & Rescue
- Brian Hricik – EMS Battalion Chief, Alexandria Fire Department
- Catherine Moore – Nurse Manager, Novant Health UVA Haymarket Medical Center
- Beth Wren - HCA Reston Hospital Center

Meeting Called to Order – 10:10 am

The minutes from the January 16, 2018, meeting were sent out by email for review. There were no questions, corrections or discussion. The minutes were unanimously approved.

Federal and State Updates

- Gill Abernathy advised that the DEA advised in August that they are proposing to cut opioid production quotas by 10-15% for 2019 so we can expect the supply to get tighter as we go into next year
- Craig advised there will be new EMS state regulations in the next 12-18 months but there isn't much that will apply to pharmacy regulations. They are not currently published online yet but should be in the next 6 months as they are in phase 2 now. Some of that will depend on what the DEA does and how that will affect EMS

EMS Pharmacy Policy

- Brian Hricik advised he has not seen any issues, complaints, etc., from Alexandria Fire Department. The form is working well, there have been no issues with the CSK packs, drugs, exchanges or forms.
- Craig advised that nothing has come up in the audits either so it appears to be working well for the providers and pharmacies. The EMS Chiefs meet monthly and this topic has been on their agenda for the last several months and they also have no complaints or issues with this.

- Brian Hricik also advised that Alexandria and several other departments are looking at digital access to drug box compartments that will show when the compartment is accessed and by which provider. They already have it in the City of Manassas, City of Manassas Park, Prince William County, and Loudoun County. This helps EMS tighten up security of the boxes and drugs contained within them.

Regional Forms Review

- Brian Hricik advised that he has not heard any changes or requests for modification of the forms. The OMDs all like it and have no concerns with it.
- Matt Fox stated that it's a very comprehensive and helpful list and he has not heard of any changes being requested.
- Craig advised that Inova had contacted him about some changes in their inventory and how it would affect EMS and he send him the forms and they were pleased with how comprehensive they were.

Drug Shortages

- Karen Dunavant from StoneSprings advised they still have Ketamine shortages and they're doing the best they can to get it and maintain stock and provide it but it's still in shortage nationwide.

Ketamine Concentrations

- Craig advised that the EMS leaders in the region started talking about Ketamine concentrations because the concentrations carried were designed for intramuscular use in behavioral patients but many agencies are now using it for pain management IV which is a much smaller dose. When they try to draw up these smaller doses for IV dosing it comes out to be 0.1cc. The question was whether there is a concentration, other than what is currently used, that can be for IV and IM dosing and not be such a small amount like 0.1cc. The regional OMDs were emailing amongst themselves and decided they are not very interested in putting two concentrations of Ketamine in the boxes because of the chances of drug errors, even though they do it for Versed, they do not want to do that for Ketamine. This is on their agenda for the October 17, 2018, meeting and they'll discuss it then. Craig will email the pharmacy group once the OMDs meet and decide.
 - Gill Abernathy advised that it's currently available in 10mg/ml, 50mg/ml, and 100mg/ml and EMS is currently getting the 100mg/ml. The 100mg/ml is also the only one that is available to the wholesaler that Inova uses, so their hands are tied as far as other options at the moment.
- Craig asked if pharmacy is opposed to having the two concentrations of Ketamine.
 - Gill Abernathy and Diane Buckley both advised they are and Diane added that she'd also like to see them go to one concentration of Versed for the same reason. Once you add multiple concentrations of any drug, it leads to medication errors.
 - Brian Hricik advised that one of the concerns with the Versed is that they give it IV and intranasal. Craig will research the regional data and see how often it's

actually given by the intranasal route and whether or not that could be a consideration for the Versed.

- Diane also advised that at Sentara they do use two different concentrations of Ketamine for the two different routes of administration in the hospital. They do not use it for behavioral emergencies, they use it strictly for pain.

Open Discussion/Roundtable

- Inova Fairfax Hospital just updated their Pixys systems, so please bear with them while they work through that.
- Brian Hricik asked that Craig describe the new FACT*R Blood Program to the group just for familiarity purposes
 - Background information - There was a prolonged extrication accident scene where several patients required on-scene blood transfusions. Currently PHI carries packed cells and plasma and provided their inventories at the scene of this incident but due to the length of the extrication process, there was a good possibility they would run out of blood resources on the scene and Dr. John Morgan (Loudoun County OMD) made contact with Fairfax Hospital and asked for blood products that could be delivered to the scene. They were able to get the blood from two different hospitals and get it delivered to the scene and saw that there is a valid potential for future needs and discussed how we should proceed as a region to have and provide blood components for other scenes of a similar nature
 - In the event that PHI is not available or they have run out of blood on a scene, how is our region obtaining blood products? Where do they come from? Who is responsible for dispensing them and what is the chain of custody?
 - Dr.'s John Morgan and Dan Avstreich (Fairfax County OMD) discussed how to proceed and negotiated a project for a "Field Available Component Transfusion Response" (FACT*R) with Inova Blood Donor Services and the Council has signed an agreement with Inova Blood Donor Services as follows:
 - The blood bank will keep a special box and have a list of quantities to put in the box and a timeframe of 15 minutes to turn the supplies around in.
 - When the blood is needed, the blood bank will be notified and will prepare the box with the pre-determined quantities and supplies and make it ready for pickup
 - Any items not used will be returned to the blood bank to be put back into the normal rotation so nothing is being wasted
 - An EMS physician would request the blood and take responsibility for it and this would activate the system
 - There will be an east site at Fairfax Hospital and a west site at Loudoun Hospital and the supply would come from the closes site
 - Based on the need, the blood bank would prepare two boxes, the large that is 15x15x15 and the small which is 12x12x12 that contain 5 units of packed red blood cells, 5 units of liquid plasma and 1 unit of platelets that will last for up to 12 hours. They have to pack both boxes with the appropriate blood components because they have to be stored at different temperatures

- The logistical portion from the EMS side is being worked on currently to determine how to “activate” the appropriate resources to pick up and deliver the blood whether by ambulance, helicopter or law enforcement partners
 - Once transported, blood is provided by local agency protocol
- QinFlow manufactures a blood and IV fluid warmers as well as a backup battery, mounting brackets and disposable cartridges.
 - The Council received donations from Telos and The Schaufeld Family Foundation to cover the costs of the warmers and accessories for just over \$18,000
- Loudoun County Fire & Rescue is starting training of all EMS Supervisors tomorrow so when the products arrive, they are ready to start using them.
- Fairfax County Fire & Rescue will start training on the systems soon
- The anticipation is that this will be a once or twice per year need, however, it could become more frequent in the future.
- This is the first program of its type in the DC Metro area

Meeting was adjourned at 12:09 pm

CERTIFICATION OF PHARMACY COMMITTEE MEETING

Northern Virginia EMS Council
 7250 Heritage Village Plaza, Ste. 102
 Gainesville, VA 20155

I, Craig Evans, Executive Director of the Northern Virginia EMS Council certify that the above minutes are a true and correct transcript of the minutes of a meeting of the Pharmacy Committees of the Northern Virginia EMS Council held at the City of Fairfax Fire Department, 4081 University Drive, Fairfax, VA 22030 on October 12, 2018, and that the meeting was duly called and held in all respects in accordance with the laws of the state of Virginia and bylaws of the corporation and that a quorum was present. The minutes were officially approved at the _____ meeting of the Pharmacy Committee of the Northern Virginia EMS Council.

 Craig A. Evans
 Executive Director
 Northern Virginia EMS Council

 Date