



CENTRAL DUPAGE HOSPITAL EMERGENCY MEDICAL SERVICES SYSTEM

25 N. WINFIELD ROAD
WINFIELD, IL 60190

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EMS COORDINATORS MEETING

MARCH 21ST, 2019

1000-1230

CENTRAL DUPAGE HOSPITAL – EMS CONFERENCE ROOM

MINUTES – UNAPPROVED

CDHEMSS Updates

- Welcomes / Introductions Justin
- Attendees
 - Justin Williams CDHEMSS
 - David Diclementi Wheaton Fire
 - Dave Johnson Glen Ellyn EMS
 - Rhonda Bergstrom CDH ED
 - Bob Goepf Roselle Fire
 - Sean McGuire Superior Ambulance
 - Traci Bell CDH ECRN
 - Kevin Hames Carol Stream Fire
 - Marty Nelson Warrenville Fire
 - Vicki Kinder CDH ED
 - Laura Hanold DuComm
 - Tim Roman Winfield Fire
 - Tiff Clausen CDHEMSS
 - Chris Smith CDHEMSS
 - Kimberly Albright CDH MSU

EMS Charting

- ImageTrend Mutual Aid Update Justin
 - Build out for mutual aid billing data continues. This was more labor intense than previously thought. The “button” for selecting if the call was a non-resident with mutual aid given is active. The selections for which town mutual aid was given to is still being built. These will be “validated” fields, meaning they must be answered to achieve 100% on the report.
- Narcotic Records Justin



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- Vehicles used daily are doing a great job completing their narcotic checks. More attention needs to be given to reserve, or unstaffed vehicles, as those narcotics still need to be accounted for daily.
- ImageTrend is developing a report to query checklists. No timeline given, however once released the system and agencies can build compliance reports rather than daily spot checks.
 - Request for alerts if checks are not done by a certain time was made, ImageTrend aware of this request and is looking to build this in the future.

Paramedic Program Updates

- Progress of Class Tiffani
 - 16 students currently active in class.
 - Currently starting their respiratory clinicals
 - Tiff asked that if the providers in the field are seeing trends in care, or practice, to let her know so she can tailor education to her current students.

Region 8 Updates

- Reciprocity Justin
 - Region 8 is still moving forward with reciprocity. Systems are submitting their system entry tests and building a test bank. Once this is done they will have the questions validated by the medical director who will then make a recommendation on the final test (bank).
 - System entry for CDH on 04/02/2019 will use the current test based on the 2016 Region 8 SOPs.
 - System entry for CDH on 04/16/2019 may be based on the new SOPs depending on the timeline of the regional system entry test. Status of which test will be used shall be passed on to the coordinators by 04/02/2019.

General Information / Updates

- Equipment
 - Review Final 2019 Equipment Draft Justin
 - List was reviewed by group
 - Ask that colormetric be option for N/T if they can do inline or non-invasive was made. This was approved.
 - Ask that NS 100 ml bags (x2) be option for ALS T/P. This was approved.
 - Paper back up copy pars were reduced



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- Etomidate was removed from the backup drugs and placed as a primary need drug.
 - Request to add 16f OG as an option for intubated patients was made. This was taken to Dr. Graham after the meeting and was approved as an optional procedure pending training. This was added to the equipment list post meeting.
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- Pick Up Supplies for SOP Go-live Group
 - Printed SOPs
 - Printed copies requirement for all EMS licensed vehicles. System provided agency with a copy for each.
 - D10
 - 2 bags per ALS T/P, 1 bag per ALS N/T.
 - Ketamine
 - Will be distributed prior to go live once pharmacist returns
 - Updated In-Line Suction
 - Awaiting supplies. Will be distrusted once supplies are in. Reduces then necessary supplies to perform by 1. Color pictures on how to assemble will be included.
 - Updated Ducanto Catheters
 - Large rigid suction device. Allows for better clearing of the airway and less chance of clogging. Bob G to check on if ABMC will supply Roselle.
 - I-Gel suction
 - Request made to have Dr. Graham confirm if the I-Gel can be a “definitive airway” when requesting termination of resuscitative efforts in the field.
 - This was reviewed with Dr. Graham after the meeting and he believes this can be in place to call a patient in the field. He will reach out to his group and follow up should there be a change in this view.
 - Discussion that with the addition of mechanical CPR devices, scene time should be limited as crews can better ensure high quality CPR. There can be



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situations in which crews remain on scene due to safety or size issues.

- IDPH CEMP Justin
 - IDPH Site Survey documents reviewed. 1 EMS agency will be inspected during the system review process. This agency will be notified prior to the system and site inspection.
 - ½ the CDH agencies have turned in the required IDPH paperwork to the system. This need to be done within 1 week to ensure compliance with IDPH directive.
 - Records
 - CPR Records
 - These need to be up to date as part of the system and CEMP compliance. ½ CDH agencies have records current, other agencies asked to become complaint ASAP.
 - Provider Demographics
 - Ensure that staff rosters are current, please let system know if anybody needs to be removed.
 - System Inspection Plan
 - Review IDPH Document
 - Requested Documents
 - Ensure all materials are in
- Data Chris
 - System Data Reports
 - Chris shared current data points and metrics. Individual agencies will be receiving their reports. Chris asked if they would like them monthly or quarterly, with most asking for monthly reports to trend data and identify any changes or educational needs.
- Round Table Group
 - Tim asked for follow up on combative pediatric patients.
 - Rhonda will get EMS, Winfield, and Peds ED together offline to address
 - Bob stated that the has a BLS instructor class in April that he is opening to EMS Coordinators or their providers. He will send date to group. Class is \$500 via Addison TC. Plus a worldpointe cost.
 - Tim stated that NM will be having VAD training at Winfield and Wheaton due to increase in VAD patients at MJ. He will send the dates and times to the group for those who wish to attend. Dave



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mentioned that the acuity they are seeing from MJ is increasing and the training is a good start.