



# W e s t c h e e s t e r R E M A C

## General Meeting Minutes - May 17, 2010

**Date:** May 17, 2010  
**Time:** 9:00 AM  
**Location:** Westchester County Department of Emergency Services  
**Chairman:** Dr. Nicholas DeRobertis, MD

### MEMBERS

Dr. Mark Silberman  
Dr. Ron Nutovits  
Dr. Carlos Flores  
Dr. Paul Koltovich  
Dr. Robert Marcus  
Dr. Emil Nigro  
Dr. Joseph Ponticiello  
Dr. Richard Marino  
Dr. Nicholas DeRobertis  
Dr. David Goldwag  
Dr. Tim Haydock

### AFFILIATION:

Dobbs Ferry Community Hospital  
Hudson Valley Hospital Center  
Lawrence Hospital  
Mt. Vernon Hospital  
Northern Westchester Hospital  
Phelps Memorial Hospital Center  
Sound Shore Medical Center  
St. John's Riverside Hospital  
St. Joseph's Medical Center  
Westchester Medical Center  
White Plains Medical Center

### ATTENDANCE

Alternate-Present  
Present  
Absent  
Excused  
Present  
Present  
Absent  
Present  
Present  
Absent  
Present

### NON-VOTING MEMBERS

VACANT  
Dr. Joli Yuknek  
Dr. Richard Gallager  
Ray Cordi  
Roland Faucher  
Chief Anthony Chiarlitti  
VACANT  
VACANT

Medical Specialty (Trauma)  
Medical Specialty (Pediatrics)/WPHC  
Medical Specialty (Psychiatry) / WMC  
EMS – Proprietary  
EMS – Voluntary / MVFAVAC  
Police / Pleasantville PD  
Fire - Career  
Fire - Volunteer

VACANT  
Present  
Absent  
Present  
Present  
Excused  
VACANT  
VACANT

### GUESTS

Joe Bilotto  
Jeff Casas  
Richard Robinson  
Donald Cottle  
Dr. Michael Canter  
Daniel Olmoz  
Dr. Michael Guttenberg  
Kevin Gage

Harrison EMS  
Port Chester Rye Rye Brook EMS  
NYSDOH, BEMS  
Westchester EMS  
Greenwich Hospital  
WCDES  
St. Joseph's Medical Center  
NYSDOH, BEMS

## MEETING

The meeting was called to order at 9:18 AM by Chair Dr. Nicholas DeRobertis. It was determined that a quorum was present.

The minutes from the March meeting were disseminated to the members electronically and were approved as written.

## SEMAC

Dr. Haydock reported that SEMAC is scheduled to meet on May 25th. This will be the 2<sup>nd</sup> of three SEMAC meetings scheduled this year.

## SUBCOMMITTEES/TAG Reports

**PROTOCOLS** – Dr. Cordi reported on the following: *we were talking about patient contact and then the entire concept of EMS vocabulary actually came up because if we were tasked to do EMS vocabulary which patient contact is one of, then we felt further that we should be looking at the definitions as well as per our PCR's that our paramedics and EMT' fill out. So what is patient contact, what is on scene time? On scene time, is it when the ambulance stops or when the patient contact is made once again? And with that in mind, taking all of those words, trying to lay definition to them and incorporating them into our ALS protocol introduction which was the*



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*next thing that we were going to be looking at because when we were looking at our EMS vocabulary, we found that the data on the discrepancy between arrival at the emergency scene and first contact with the patient are still lacking. I sent out some articles that might be of interest to the rest of the REMAC here, published in our emergency literature and apparently the pre-hospital terminology is used but with lack of definition, making data capture variable among EMS agencies. There's still no set definition across the U.S. of these time intervals so we feel that we could actually take what we feel as a committee, presented to REMAC, general definitions, and seeing that with approval from the committee, that we can go forth and try to incorporate them into our protocol introduction. We did also incorporate a new term called patient access. We felt that would be well suited to our needs as well. The other terminology we left out that we were to share with EMS operations committee that meets after this which is the dispatch and priority resource utilization and so forth, and other things that we will be looking at for our next meeting or the interpretations of the protocols, the pediatric age 14 and younger. We're looking at that definition. Such things as medical authority on scene where you have a physician on scene that's not credentialed by OLMC. Should the medic actually contact OLMC first before taking care of the patient vis-à-vis the other physician. Other QA issues we would suggest of course, orders always being repeated, reiterated, not just under conflict of resolution as a standard of care such as taught in the pre-hospital curriculum. Adding MOLST orders to our introduction in addition to do not resuscitate orders. Under recordkeeping, see that every ALS PCR is to be signed and that needs to be looked at as well. And the great attempt, if we can do bi-annual update changes so we intend to try to meet or at least do this by email back and forth and meet maybe every 2 weeks even if it's by telephone.*

A brief discussion ensued regarding time intervals for EMS responses, defining them and reviewing information. It was mentioned that there exist difficulties in the region related to a lack of centralized dispatch often resulting in numerous transfers of calls between PSAPs. R. Faucher referred to an EMS system study commissioned by the County EMS Advisory Board and indicated that many of the items being discussed were also identified in the study. Concern was raised regarding duplicative efforts by the REMSCO and County Advisory Board and it was suggested that a meeting be set up to introduce the REMAC to the County Executive. A lengthy discussion ensued regarding whether to request the study report or a meeting with the County Executive first. A motion was made for the REMSCO to request a meeting with the County Executive to inform him of the role of the REMSCO and REMAC and to discuss the EMS study. The motion was seconded and approved.

**EVALUATION** –Dr. Haydock reported the committee has not received any reported incidents and has therefore not met. A brief discussion ensued regarding the responsibilities of the committee and how they differ from that of the Quality Improvement Committee. It was clarified that according to the REMAC by-laws, there exists a Quality Improvement Committee charged with managing quality improvement projects conducted by REMAC and a Credentialing Committee charged with coordination of credentialing and continuing medical education for EMS personnel and Medical Control Physicians. The Evaluation Committee is mentioned only in the advanced life support protocols for the purposes of investigating pre-hospital patient care related issues. It was recommended that a review of each of these committees' tasks be done and consideration be given to including the Evaluation Committee process to the by-laws and/or regional medical control plan.

It was mentioned that previously identified Credentialing Committee members were asked to reconfirm their willingness to participate with committee work. Activities have begun to update the regional credentialing process and manual.

**QUALITY IMPROVEMENT** – D. Olmoz reported on behalf of Dr. Yuknek that the Quality Improvement Committee has been presented with a revision of the regional QI guidelines and comments have been sought. It is hoped that a streamlined process will reinvigorate EMS agency participation which has continually decreased over time. It was noted that work being done by the Helicopter Committee on an analysis of pre-hospital trauma triage and transport is being utilized to satisfy the annual QI study required by NYSDOH. It is hoped that a final version will be available for review by July.

**STEMI TAG** – D. Olmoz reported that there have been no applications for STEMI program participation received by the Regional EMS Office. It was reiterated that EMS agencies need to work with their medical directors, local Medical Control Hospitals and CATH centers to establish policies and procedures. An application and collaborative agreement must be filed with REMAC prior to implementation.



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A brief discussion of local variations in communication procedures hospital receiving requirements was discussed.

**INTERFACILITY TRANSPORT TAG** – Dr. Guttenberg reported that the committee is attempting to move forward with identifying pertinent information and has been monitoring related activity at the State level. Additional meeting will be coordinated as soon as possible.

### **SPECIAL COMMITTEES**

**HUDSON VALLEY / WESTCHESTER HELICOPTER COMMITTEE** – D. Olmoz reported on behalf of Dr. Stuhlmiller that in addition to the continuation of the trauma study project, the committee has been working on updating the Regional Helicopter Utilization Guidelines.

**HUDSON VALLEY REGIONAL TRAUMA ADVISORY COMMITTEE (RTAC)** – No report

**DIVERSION REPORT** - D. Olmoz reported that a report was generated and distributed to REMAC for review with the meeting materials.

### **NOTICES OF INTENT**

**PAD** – PM Pediatrics, Mamaroneck; Golf Club of Purchase; Children's Village, Dobbs Ferry

**APPLICATIONS FOR SPECIAL PERMISSIONS (i.e. Albuterol, Mark I, EMTD)** – None

### **OLD BUSINESS**

D Olmoz advised that a data resulting from the CPAP pilot program was requested from Portchester and Harrison EMS and a presentation was prepared to be delivered. However, agency representatives were called away from the meeting, so a copy of the presentation will be distributed to REMAC for review.

### **NEW BUSINESS**

D. Olmoz reported – *the regional office did receive an application for REMAC membership. This is for a non-voting position. This would be career fire services constituency and the application comes from Eugene Kelly who's a firefighter with the Yonkers Fire Department. He's also a member of the regional EMS council and is currently chairing the operations committee that we were discussing earlier today. Notification was made to all career fire departments within Westchester County. We did receive one letter of support. We did not receive any letters against his application. So that comes forward to you as a voting matter. The motion was seconded and approved.*

R. Cordi of Empress EMS presented, for the REMAC's awareness, information on the services implementation of the Res-Q-Pod impedance threshold device and Res-Q-Guard for all cardiac arrests. A brief overview of the equipment and its function was given. A discussion ensued regarding inclusion and exclusion criteria. It was noted that the equipment is FDA approved. It is expected that the program will begin in approximately one month. Questions may be directed to R. Cordi for further information.

D. Olmoz commented on the REMAC's previous request for a status report on all Medical Control Physicians and pointed out that a number of physician's information needed to be updated in the data management system. A report based on current information provided to the regional office was compiled and distributed to all emergency department directors along with update forms for physician's needing to update contact information. Copies of the report were also distributed at the meeting.

Dr. DeRobertis advised the REMAC that in reviewing the current by-laws it has become apparent that an update is needed.



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D. Olmoz added – *according to the by-laws, currently the REMAC is supposed to have a Chair obviously, a Vice Chair and a second Vice Chair in addition to each of the Chairs of the standing committees which according to the bylaws that were adopted in 2002 are a membership committee, protocol committee, quality assurance committee and credentialing committee. That collectively would make up the executive committee. I believe that there's been some discussion that to make this a little bit more realistic, and have only a REMAC Chair, Vice Chair and the Chairs of each standing committees make up the Executive Committee. However, there doesn't seem to be a need for a membership committee any longer. I believe that was instituted just to get the REMAC up and running, once the region was created. So there would be a protocol committee Chair, quality improvement committee Chair and a credentialing committee Chair.*

Dr. DeRobertis asked that the current Vice Chair, Dr. Tim Haydock, remain as Vice Chair. A motion was made in this regard and was approved.

**NEXT MEETING** –The next meeting is scheduled for **Monday, July 19, 2010** at 9:00am.

Session was adjourned at 10:30am.

A webcast of this meeting is available at [www.wremSCO.org](http://www.wremSCO.org)

Respectfully submitted by D. Olmoz