



W e s t c h e e s t e r R E M A C
General Meeting Minutes - March 16, 2009

Date: March 16, 2009
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. Karlene Chin
 Dr. Robert Marcus
 Dr. Emil Nigro
 Dr. Joseph Ponticiello
 Dr. Richard Marino
 Dr. Nicholas DeRobertis
 Dr. David Goldwag
 Dr. Tim Haydock

AFFILIATION:

Community Hospital at Dobbs Ferry
 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

Present
 Present
 Present
 Absent
 Present
 Present
 Present
 Present
 Present
 Present
 Present

NON-VOTING MEMBERS

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

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

VACANT
 Present
 Absent
 VACANT
 Present
 Present

GUESTS

Beth Sanger
 Dr. Brian Doran
 Joseph Bilotto
 Gilbert Styles
 Clint Thornton
 Jeff Casas
 Anthony Sutton
 Daniel Olmoz
 Malcolm Dixon
 Daryn Baia
 Rich Robinson
 Dr. Erik Larsen

North Salem VAC
 Greenwich Hospital
 Harrison EMS
 Hudson Valley Paramedics
 Mohegan VAC
 Port Chester/Rye/Ryebrook EMS
 WCDES
 WCDES / Regional EMS Office
 Transcare
 Empress EMS
 NYS DOH, Bureau of EMS
 White Plains Hospital

MEETING

Meeting was called to order at 9:012 AM by Chair Dr. Nicholas DeRobertis. It was determined that a quorum was present.

Minutes from the February 23, 2009 meeting were previously disseminated to the members. It was noted that in an effort to reduce paper consumption, paper copies of the meeting minutes will no longer be available the day of the meeting. Members were advised to print their own copies as needed and to review the minutes prior to the meeting. A motion was made and seconded to approve the minutes as written.



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SEMAC

Dr. Haydock reported that there has been no SEMAC meeting since February. The next SEMAC meeting is scheduled for June.

HOSPITAL DIVERSION

It was mentioned that hospital diversion reports comparing 2007/2008 was distributed to the members for review. A brief presentation of diversion data from 2009 was given by Dan Olmoz. It was noted that several hospitals had no diversion hours at all. However, the overall trend is an increase in total hours on diversion primarily due to a minority of hospitals with increasing diversion hours.

SUBCOMMITTEES

PROTOCOLS – In Dr. Cordi's absence, Dan Olmoz reported on the following:

Paramedic Protocols – discussion was had by the committee in regard to the SEMAC recommended reduced pediatric fluid volume changes. It was mentioned that any proposed changes to the paramedic protocols would require approval from SEMAC and would need to follow the accepted approval process. It was suggested that the protocols be rolled-out as approved previously by SEMAC and that any additional changes be researched and proposed separately. It was noted that the rollout materials currently being developed should discuss the pediatric fluid infusion issue.

Vasopressin – it was suggested that further discussion on the removal of Vasopressin be had prior to the next protocol modification.

Prehospital hypothermia post cardiac arrest – this issue continues to be discussed.

STEMI – It was mentioned that the STEMI TAG was scheduled immediately following today's REMAC meeting. There was a brief discussion regarding proposed hospital regulations recently distributed for discussion. It was noted that the proposal seemed to deal with state designation of cardiac care centers, however it's very preliminary. It was noted that one hospital's recent implementation of diverting STEMI patients has already received push back from some cardiologists. It was suggested that an invitation be extended to those cardiologists for conversation purposes. This suggestion was not widely supported. A lengthy discussion ensued about diversion of STEMI patients. It was mentioned that hospitals may use current protocols to allow medical control to divert EMS to PCI centers. Concern was raised in regard to the need to standardize the process and not leave it up to individual hospitals and physicians on duty at a given time. In the end it was suggested that the TAG continue with the development of a process and those interested in participating were invited to stay for the meeting.

EVALUATION – It was again reported that the Regional EMS Office received a letter of appeal of a previous determination made by the REMAC. It was mentioned that although the involved party was requesting to meet with the Regional EMS Council, the accepted process would require that the appeal be filed with the State. It was agreed that any appeal should follow the standard process yet anyone could attend a Council meeting and ask that their issue be heard. However, it was reiterated that any further determinations would need to come from REMAC as the Council is not required to take action.

INTERFACILITY TRANSPORT TAG – It was mentioned that a request was distributed to the members for participation on this newly created TAG. A meeting date is being proposed to initiate discussion and it is anticipated that a report will be available for the next REMAC meeting.



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SPECIAL COMMITTEES

HUDSON VALLEY REGIONAL TRAUMA ADVISORY COMMITTEE (RTAC) – It was reported that there has been no discussion since the last REMAC meeting.

HUDSON VALLEY / WESTCHESTER HELICOPTER COMMITTEE – A meeting was held at the HVREMSCO offices on February 27, 2009. The committee decided on moving forward with a study to evaluate helicopter utilization data throughout the two regions.

COMMUNITY HOSPITAL AT DOBBS FERRY

It was mentioned that the TAG met again to discuss the matter on March 16th. There was much discussion at that meeting in regard to a letter of response that was received from Mr. Ed Wronski of the NYSDOH. It was mentioned that the major focus of the TAG's discussion was on the facility's ability to handle critical care patients once the merger occurs on April 1st. The TAG considered recommending that all ambulances utilize medical control to discuss appropriate patient destination. That conversation then evolved to requiring that all ALS patients be transported to other surrounding area hospitals and CHDF would continue to receive BLS patients as is done currently. At the conclusion of discussions, the TAG believed that everyone was in full agreement of this proposal but following the meeting it was identified that the proposal was not fully understood by all those previously agreeing. Concern was voiced in regard to the number and type of patients that would be diverted away from CHDF. Discussion ensued regarding how the recommended proposal was arrived at. It was ultimately suggested that additional discussion be had by the TAG to come to agreement on a recommendation as soon as possible.

NOTICES OF INTENT

A notice of intent for PAD was received from the Pleasantville Recreation Department.

APPLICATIONS FOR SPECIAL PERMISSIONS (i.e. Albuterol, Mark I, EMTD)

No notices were received since the last meeting.

OLD BUSINESS

There was no discussion.

NEW BUSINESS

It was mentioned that the Regional Council has been working toward the development of a process to handle the requests of several EMS agencies with identified certificate of operating authority omissions. Due to a recent court case upstate, the NYS DOH has been ordered to no longer grant corrections to ambulance operating certificates under the grandfathering provision. Additionally, agencies around the state have run into difficulties related to billing because they are being told that they are billing for services in territory that is not listed on their certificate as issued by NYS DOH. It is believed that these omissions occurred at some point when the state began the ambulance certification process. These agencies are believed to have historically covered the territory in question, however it is not listed on their ambulance certifications.

It was announced that an application for the REMAC proprietary EMS constituency position was received from Mr. Ray Cordi. It was mentioned that although the position is currently vacant and has been for some time, according to REMAC by-laws, applicants are to be nominated by the constituency group. It was suggested that letters be sent from the Regional EMS office advising all proprietary EMS agencies of the pending application to allow for comments.

It was announced that a request for a municipal certificate of need at the advanced life support level was received by the Regional EMS office from the White Plains Department of Public Safety. According to the paperwork, it is the municipality's intent to establish a non-transporting ALS response team to handle hostile and hazardous



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environments. Current agreements for ambulance transport would remain in place. Current procedures for such an application call for approval by the NYS DOH for ambulance operating authority initially which will then be brought before the Regional Council for review in 2 years. ALS authority must be granted by the REMAC. A letter advising of the application process for REMAC ALS approval was sent to the department.

NEXT MEETING – Session was adjourned at 10:27 am. The next meeting is scheduled for Monday, April 20, 2009 at 9:00am.

PLEASE NOTE: A web cast of this meeting is available on-demand and may be viewed at <http://www.wremasco.org/>

Respectfully submitted by Daniel Olmoz