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NASEMSO Model EMS Clinical Guidelines Project

January 15, 2014
6:00 – 9:00 PM
Work Group Meeting
San Ignacio Room
JW Marriott Star Pass Resort
Tucson, Arizona

Meeting Record

Attending – Carol Cunningham, Drew Dawson (NHTSA), Tony Demond, Mary-Katherine Harper, Rich Kamin (by phone), Kevin McGinnis (by phone), Douglas Kupas, Susan McHenry (NHTSA), Brian Moore, Joe Nelson, Manish Shah, Matt Sholl, Kathleen Adelgais (pediatric reviewer), Lorin Browne (pediatric reviewer), Mark Cicero (pediatric reviewer)

Call to Order and Roll Call – Dr. Cunningham called the meeting to order at 6:12 and asked members to introduce themselves. Three of the five pediatric reviewers joined the meeting. Drs Adelgais, Browne, and Cicero were recognized for their contributions to the effort.

Review/Approval of December 2 Meeting Record – The December meeting record was approved.

Review of Revised Timeline - Dr. Cunningham referred to the revised timeline that was distributed. Discussion followed regarding the release of the draft with some members requesting that the main stakeholders be notified before the general public is notified. Others felt it was not necessary to distribute the draft in different stages and may contribute to confusion. Drew Dawson suggested we send notice of its release to the trade press also. Susan McHenry offered to send NASEMSO the trade press list NHTSA uses.

Guideline Group Reports – Group Leads provided an updated wrap up report.

- <u>Cardiovascular</u> **Joe Nelson**, Eric Beck, Mary-Katherine Harper, Matt Sholl. Joe Nelson said that all the guidelines have been completed.
- <u>General Medical/Other</u> **Allen Yee,** Cunningham, Tony DeMond, Doug Kupas, Manish Shah. Allen said he thinks the guidelines have been completed but he is not sure about the abuse guideline.
- GI/GU/GYN Doug Kupas, Eric Beck, Rich Kamin. Doug Kupas reported he is not aware of any comments submitted on their group's guidelines, and that he has yet to connect with Eric Beck
- <u>Pediatric-specific</u> **Brian Moore, Manish Shah**. Brian said the pediatric guidelines are complete and all the comments have been addressed.
- Respiratory Joe Nelson, Eric Beck, Mary-Katherine Harper, Allen Yee. Joe Nelson said they
 have been completed. It was noted by reviewers that some of the comments have not been
 addressed.
- Resuscitation Eric Beck, Rich Kamin, Matt Sholl, Allen Yee. Matt Sholl said one problem has been the constant update in the literature on resuscitation.
- <u>Toxins/Environmental</u> Rick Alcorta, C Bates, T DeMond, C Cunningham, M Sholl, H Sibold.
 It was noted that there were many incompletes in the toxins/environmental folder that need to be addressed.

NASEMSO

NASEMSO Model EMS Clinical Guidelines Project

- <u>Trauma</u> Peter Taillac, Sabina Braithwaite, Eileen Bulger, Tony DeMond. Peter said trauma
 is complete but he just noticed there are comments from the pediatric reviewers that he
 will address. Peter plans to consult with Eileen Bulger about adding TXA to the trauma
 guidelines.
- <u>Universal/General Care</u> **Carol Cunningham**, Craig Bates, Harry Sibold. Harry will complete the functional needs guideline.

Discussion with Technical Writer, Kevin McGinnis – Kevin stated he is impressed with the work the group has completed. In preparation for this project, he reviewed the meeting minutes and main documents to gain a better understanding of the intent of the group. He recently completed the raw compilation of the guidelines, which was emailed to the work group earlier this week. It is his understanding that the end user will be the field EMS provider. The next step for him would be to standardize the writing style (voluminous vs. outline). Carol read through Kevin's questions:

- 1) Is the initial document as comprehensive as expected, half the size needed, twice the size needed? Members discussed and responded they are fine with the current length (220 pages), with the caveat that they do not see this entire document being copied and placed in a binder in the back of an ambulance.
- 2) Is the overall format acceptable or should it be re-organized? Carol said she liked that it began with Universal Care. Kevin commented that he has not yet attempted to list most of them in a rationale order. Group members said they will leave the order to Kevin's discretion.
- 3) What are the rules for removing incomplete guidelines at the time of publication for public review? Carol said she does not feel any should be removed, but asked Kevin to notify group leads when guidelines are incomplete. Discussion followed about whether titles of the guidelines could be altered or improved to better reflect the content of the guideline.
- 4) Is the target audience correctly identified (system medical directors and other leaders)? Yes.
- 5) Is the targeted end-user appropriately identified (field EMS practitioners)? Yes.
- 6) There are guidelines written in robust textbook style and others that are bulleted protocol style. How do we come to useful middle ground given the target audience and end user? Kevin added that not all guidelines are written in robust textbook style so that would need to be addressed if the group elects the robust form. Should the explanatory information be added to the pearls section while keeping the bulleted format? Carol also asked how to incorporate the EBGs released tomorrow. It was agreed that the elements of the EBG will be incorporated into the format already established. Carol volunteered herself and Rich to complete this effort of translating the EBG into the existing format.
- 7) Kevin will create an excel spreadsheet on guideline status. How should incomplete guidelines be addressed? Carol responded that the incomplete guidelines will be completed within a week.
- 8) As the guideline is edited, will the reviewer be the original author(s), section chairs, project chairs or the group as a whole? Carol responded that Kevin should send the original back to the author and copy Rich, Carol and the section chair.
- 9) If the technical writer disagrees with the original author, would the section chair or project chairs (co PIs) mediate? Carol answered that Kevin should send it to the Co-PIs for resolution.

Discussion of Next Steps

- Management of Incomplete/Missing Guidelines This was addressed previously. See above.
- Introduction Review and comment on draft Carol said she has received some feedback from members. Drew suggested replacing the reference to "NHTSA EBGs" with "National

NASEMSO

NASEMSO Model EMS Clinical Guidelines Project

- Prehospital Model EBG Process." Additional suggestions were made about clarifying in the last paragraph that the document is meant to be a "resource."
- **Glossary and Definitions** The group decided to wait to see if those submitting comments request a glossary or definitions.
- Medications It was agreed that a medication list was not needed as there are many available.
 If, however, this is requested in the stakeholder comments, Rich suggested using the already vetted medication list Allen Yee has. Allen will email it to the group for review.

REMINDER: Author and Contributor Information – Dr. Cunningham reminded members to submit their Author and Contributor Information Form to Mary or upload to box.com.

Long Term Considerations: Plans for Adding Guidelines, Updating Outdated Guidelines – Carol said that although funding is not assured for the next phase, if the project continues, she would like to hear from members who wish to continue participating.

Questions / Other Considerations – It was suggested that the May meeting be held 2 full days (May 7-8) with May 6 as the travel day. This will allow those coming from the west coast time to get to DC including the time change. Baltimore is also an acceptable area. Group members asked that the meeting not be held near the Dulles Airport. Kevin McGinnis will attend.

The meeting adjourned at 8:35 PM.

Save the Date: May 6 - 8, 2014 - Final Work Group Meeting, Washington, DC