



Northern Virginia EMS Council
Performance Improvement and Trauma Committee
Fairfax County Fire Station 440
4621 Legato Road, Fairfax, VA 22030
June 12, 2019 Meeting Minutes

Those present were:

Beth Adams, Fairfax County Fire & Rescue, beth.adams@fairfaxcounty.gov
Stephanie Boese, Inova Loudoun Hospital, stephanie.boese@inova.org
Valentina Daly, Fairfax County Fire & Rescue, valentina.daly@fairfaxcounty.gov
Elizabeth Franco, Inova Regional Trauma Center, Elizabeth.franco@inova.org
Karen Kovach, Fairfax County Fire & Rescue, Karen.kovach@fairfaxcounty.gov
Kim Lonsinger, Sentara Northern VA Medical Center, kmlonsin@sentara.com
Michelle Ludeman, Northern Virginia EMS Council, Michelle@vaems.org
John Morgan, MD, Loudoun County Fire & Rescue, john.morgan@loudoun.gov
Melinda Myers, Inova Fairfax Hospital, Melinda.myers@inova.org
Brian Orndoff, City of Fairfax Fire Department, brian.orndoff@fairfaxva.gov
Kate Passow, PTS/AMR, kate.passow@amr.net
Daniel Rinehart, Loudoun County Fire & Rescue, Daniel.rinehart@loudoun.gov
Dynette Rombough, Sentara Northern VA Medical Center, dxrombou@sentara.com
Thomas Suttie, Loudoun County Fire & Rescue, Thomas.suttie@loudoun.gov
Caitlin Ward, PA-C, Arlington County Fire Department, EMS.PA.Fellow@gmail.com
David Wesley, Prince William County Fire & Rescue, dwesley@pwcgov.org
Ray Whatley, Alexandria Fire Department, Ray.whatley@alexandriava.gov
Laura Vandegrift, Northern Virginia EMS Council, laura@vaems.org
Scott Weir, MD, Fairfax County Fire & Rescue Dept, scott.weir@fairfaxcountygov.org

The PI and Trauma Committee meeting was called to order at 9:05 a.m. by Dr. Scott Weir and introductions were made around the room.

Meeting minutes from March 13, 2019, meeting were distributed via email prior to this meeting and unanimously approved with no changes.

Trauma Topic – Spinal Cord Injuries

Attendees from various agencies provided their data for this topic

Dr. Elizabeth Franco from Inova Fairfax Hospital reported the following:

- Spinal cord injuries made up 2% of trauma patients in CY2018
- Most were younger patients, making up more than 2.5 times more than elderly patients for the same diagnosis
 - Most were falls, even in the younger patients
- Spinal cord injuries were found at the following numbers and percentages per level
 - Cervical was 29 patients or 63%
 - Thoracic was 7 patients or 15%
 - Lumbar was 5 patients or 11%

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- Cervical and thoracic was 3 patients or 7%
- Thoracic and lumbar was 2 patients or 4%
- The average ICU length of stay for these patients
 - Cervical 7.8 days
 - Thoracic 7.4 days
 - Lumbar 8.4 days
- Most have an initial presentation with minimal neurological deficit
- Most of these patients require surgery
- There is a very low percentage that return to normal function seen in the cervical and thoracic injuries
- Most are discharged to acute or rehab

Stephanie Boese from Inova Loudoun Hospital reported the following:

- In CY18 they had one patient with a spinal cord injury
 - The patient was an 83 year old with multiple recent ground falls without EMS contact
 - Patient-reported upper extremity weakness
 - The patient was discharged to home after evaluation
- They have just hired a neurosurgeon so they will be able to see unstable spines in the future

David Wesley from Prince William County Fire & Rescue provided the following data:

- In the last 365 days, they have had 1435 suspected spinal patients
 - 802 had cervical collars placed on scene
 - 117 had full backboard immobilization
 - Most patients were over 60 years or older
 - 71% were falls from standing
 - Most MVA patients were younger patients with ages 48-59
 - Transported patients went to:
 - Sentara – 42
 - Prince William – 32
 - Fairfax Hospital by ground transport – 15
 - Fairfax Hospital by air –
 - Haymarket Medical Center – 13
- Prince William has adopted SSMR, Selective Spinal Motion Restriction. With SSMR, there are three methods
 - A. Full Spinal Motion Restriction.
 - Long backboard with a cervical collar.
 - Patient regulated SMR with a cervical collar
 - Patient regulated SMR without a cervical collar

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Kate Passow from PTS provided the following data:

- In CY2018 they had 30 transports, mostly to rehab at hospital discharge typically with other issues such as post spinal cord injury sepsis

Beth Adams from Fairfax County Fire & Rescue provided the following:

- In CY 2018 they had the following
 - 1 stabbing to the neck
 - 2 falls
 - 1 motorcycle accident
 - 6 catastrophic spinal cord injuries

Dan Rinehart from Loudoun County Fire & Rescue advised they were unable to drill down to spinal cord injury specifically and do not have information to provide

Medical Discussion – Drownings

Attendees from various agencies provided their data for this topic.

David Wesley from Prince William County Fire & Rescue advised of the following:

- In the last 365 days, they had 4 drownings
 - A 38-year-old female on a pond in winter month with alcohol and drugs on board. Possible suicide. Patient DOA when located
 - 3 with bystander CPR prior to EMS arrival; non-fatal incidents
 - Adult, spring/summer with an overturned kayak on the river and took in too much water
 - 18 year old in an indoor pool, drowning due to over-exertion
 - 16-year-old female in an outdoor pool, drowning due to over-exertion

Brian Orndoff from City of Fairfax Fire Department provided the following:

- In CY2018 they had one non-fatal incident
 - 21-year-old male in the military attempting to hold his breath as long as he could.

Kate Passow from PTS provided the following:

- In CY2018 they had 6 total
 - Three were psychiatric transports with drowning as their suicide attempt or planned suicide attempt
 - Three were children and were PICU transfers from Haymarket, Loudoun and Fair Oaks
 - A 7-year-old with bystander CPR performed prior to EMS arrival
 - A child “dunked for a minute” by grandma
 - A child with pulmonary vascular congestion on x-ray with possible aspiration

Valentina Daly from Fairfax County Fire & Rescue provided the following:

- In CY2018 they had 28 total patients
 - The majority were at a public pool during the summer months followed by “recreation area” drownings
 - The majority of patients were 18-35 years of age or 5-12 years of age

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- 16 were treated and transported
- 3 were DOA

Dan Rinehart from Loudoun County Fire & Rescue advised of the following:

- In CY2018 they had 6 drownings or near-drownings which is down from 11 in CY2017
 - 3 were children at a pool
 - 1 adult near drowning secondary to heroin use
 - 1
 - 1

Systems Discussion – Integrating hospital and EMS records bi-directionally

Dr. Andrew Minor, an Informatics Physician and Emergency Department Physician from Inova Fairfax provided a short presentation with discussion following

- They have been working for approximately 5 years to be able to have this information interface correctly
- They are currently working with ImageTrend and will start with the 5 largest EMS agencies that transport to Inova hospitals and branch out from there
 - It is not available on other software products such as SafetyPad
- An important part of this is the need to accurately match patient information
 - There is both a Medical Record Number (MRN) and Case-Specific Number (CSN)
 - The MRN is assigned to the patient upon their initial registration and is used for all cases and encounters
 - The CSN is case (or encounter) specific. A new CSN is assigned for each new encounter under the patient's MRN
 - They would like the agencies to use the CSN so the EMS records are correctly integrated within that case/encounter
 - In the next 6 months, ImageTrend will add a field for the CSN and the EMS note/narrative and EKGs can be imported directly into that case
 - CSN is a new field generated by Inova at the encounter and currently can be manually entered into the ePCR
- Currently, the information from the hospital to EMS is limited to data sharing and not yet capable of providing patient/call feedback to the EMS providers.
 - Dr. Miner will add that to the list of things to consider as it would be a valuable tool for the providers and agencies

Topics for the next meeting:

- Trauma
 - Motorcycle roadway crash data for CY2018 Q3, Q4 and CY2018 Q1, Q3
- Medical
 - Pediatric respiratory distress for CY2018 Q3, Q4 and CY2018 Q1, Q3
- Systems
 - Drug shortages, acquisition, and administration as well as shortage response strategies

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As a reminder, the meetings for 2019 will take place on the second Wednesday of the first month of each quarter as to not conflict with the trauma managers meetings and allow them to attend both. The 2019 Regional Trauma/PI meetings are as follows:

- Wednesday, September 11, 2019 – Station 440, 4621 Legato Road, Fairfax, VA 22030
- Wednesday, December 11, 2019 – Station 403, 4081 University Dr, Fairfax, VA 22030

The next Regional Trauma/PI Committee meeting will be on September 11, 2019, at 9:00 a.m. The location will be announced Fairfax County Station 440, 4621 Legato Road, Fairfax, VA 22030. An invitation with the location will be sent out before the meeting.

The meeting was adjourned at 11:31 am.

CERTIFICATION OF PERFORMANCE IMPROVEMENT AND TRAUMA 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 the Performance Improvement and Trauma Meeting of the Northern Virginia EMS Council on June 12, 2019. The minutes were officially approved on September 11, 2019, meeting of the Committee.

Craig Evans
Northern Virginia EMS Council

Date