Pre-Hospital Committee Meeting Summary 10:30 a.m. – May 20, 2025

EMS Agency / FRO Attendees

Kevin Deramus, Washington County EMS
Adam Gallagher, Robertson County EMS
Jason Giles, College Station FD
Sheri Guerra, Hilltop Lakes VFD
William Houston, St. Joseph EMS
Melissa Kendrick, AirMed 12
Chris Lamb, Bryan FD
David Lozano, TAMU EMS
Billy Rica, St. Joseph EMS
Josh Varner, College Station FD

Hospital Attendees

Alissa Akers, Erin Gaas, Burleson St. Joseph Amber Heredia, Baylor Scott & White CS Ashley Johse, St. Joseph College Station Brandi Mendoza, Baylor Scott & White CS Patti Parks, Baylor Scott & White Brenham Shelby Reed, Baylor Scott & White CS Courtney Saunders, St. Joseph CS

Medical Directors / Physicians

Dr. Aaron Buzzard

Dr. Matthew Curnutte, Baylor Scott & White

Other Attendees

Bryan Ruemke, Washington Co OEM

BVRAC Staff

Rebecca Hill John Heritage

I. Discuss providing EMS CQI filters for review

Need to consider data points from GETAC: whole blood, red lights & sirens, etc.
 <u>Action</u>: Anyone interested in participating in a workgroup to consider EMS CQI
 filters should reach out to Kevin Deramus <u>kderamus@washingtoncountytx.gov</u>

II. Definition of MCI Events / Creating Events in Pulsara for Hospital Awareness

- Need to define MCI and how/when to notify hospitals
- State definition of MCI It overwhelms local resources
- Defining this will be difficult and education will be needed. Concern was also shared when multiple hospitals are involved and one is passed to take a patient to another hospital. This will need to be discussed as well.

<u>Action</u>: Billy and Noah will review data from previous incidents and seek lessons learned, etc. They will bring any findings to the next committee meeting.

III. MIST / Time Out Process

- Most feel that it has gotten worse in the last month from both sides
- Reasons offered include: no one in the room, how quickly notification is received, time of day, severity and staffing.
- May need to start the report with the nurses doctors can come in when able.
 But doctors do like to get the information first hand.
- Need to be consistent. May need to look at acuity levels to see if a doctor needs to be present. Is there a person that always needs to be present?
 <u>Action</u>: Everyone review 10 people and bring back three issues to the next meeting.

<u>Action</u>: Mr. Deramus will work with doctors to define when they should be present.

IV. Whole Blood Task Force

- Whole Blood Conference is coming up.
- Expecting \$10 million bill to pass in state for statewide implementation

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<u>Action</u>: Need to consider setting up a regional taskforce/group. We need a lead hospital

V. Pulsara – There are some new things in the works.

VI. Open Forum

- Seeking information on how pediatric patients arrive in facilities. Just need a one day count.
- GETAC Committee is looking at use of red lights and sirens. This is either a clinical decision or an operational decision. This will include all first responders.