

8.f. GETAC EMS Medical Directors Committee Update to Council

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TEXAS
Health and Human
Services

Texas Department of State
Health Services

GETAC EMS Medical Directors

Priority Not Implemented
Priority Activities Recorded
Priorities Completed and being
Monitored

Committee Priorities	Current Activities	Status
Prehospital Stroke Recommendations	EMS Acute Stroke Routing Resource Documents for Pediatric Stroke. Mission Lifeline Algorithm Revisions. Voted on and Approved. EMS Acute Stroke Routing Resource Documents for Pediatric Stroke. Voted on and Approved.	
Pediatric Consideration for Consultation and Transfer Documents to Review	Will review and make recommendations on the following resource documents: a) Child Physical Abuse Toolkit b) American Burn Association Transfer Guideline c) Pediatric Interfacility Transfer Quality Improvement Plan	
Emergency Transport Task Force Discussion	Will assist with staffing of task force to develop and recommend interfacility transfer terminology.	

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Update on Wall Times in NCTTRAC	North Central Texas Trauma Registry Regional Advisory Council presented wall time performance/times for EMS/hospitals.	
Discussion on Safe Transport of Pediatrics in Ambulance	GETAC EMS MD Committee discussed specific language regarding safe transport devices without endorsement of specific device name/brand.	
Discussion on Practice of EMS Medical Direction under Texas Medical Board Rule 169	Develop a list of duties and expectation of Texas EMS Medical Directors, previously found in TMB Chapter 197. It would be best to place these duties and expectation in 157.11. This may also be an advisory or resource document.	

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Discussion on Acceptable EMS Medical Direction courses for ongoing EMS Medical Director CME requirements	<p>This rule was previously in TMB Chapter 197. A Texas Medical Director must within two years of becoming an off-line medical director: have 12 hours of formal CE; be EMS Board certified or complete a DSHS approved medical director course, and completed one hour of formal EMS CME every two years.</p> <p>Recommend to Council (to recommend to DSHS/TMB) the DSHS approved medical director course be NAEMSP Medical Director Course with additional Texas specific content and increased ongoing CME requirements . Ongoing discussions regarding specific educational course details to be shared November meetings.</p>	
Red Lights and Sirens (RLS) Position Statement	Discussed feedback from EMS committee and inclusion of transport in addition to response language. Workgroup with EMS committee to finalize statement in GETAC specific position statement format	

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GETAC Prehospital Whole Blood Transfusion Taskforce (PHWBTF)	Review/Discussion of Cost Survey data, development of pilot model, blood provider role, rotating sites PAR levels, and eligibility criteria for funding including required participation in regional whole blood committee.	
Develop a list of prehospital best practices	Develop resource documents for the State of Texas regarding prehospital care. Topics under consideration include but are not limited to treatment for heat mass-casualty incident (MCI), Prehospital sepsis treatment, Prehospital hemorrhagic shock treatment, prehospital clinical ultrasound program, Texas wristbands, Prehospital pediatric transport. Strong consideration will be given to evidence-based prehospital practice. These would be resource documents and would not replace or appropriate any EMS Medical Director's practice of medicine within their EMS agency as prescribed by Texas Administrative Code 169 or 157.	