



Theron Becker 16:57

Weekly update from meeting notes:

- Per Dr. Nicholes: Let's leave the steroid options alone in respiratory distress protocol (after I asked what he thought about adding IV Decadron). IV Solu-Medrol is appropriate for COPD/asthma diseases and IV Decadron isn't showing much evidence with COVID, yet.
- Per Dr. Nicholes: Accessing ports by paramedics is still appropriate and OK but limit to only when vascular access is mandatory and medication administration is needed (after I asked about some chart reviews we've done where accessing ports seemed unnecessary).
- We continue to add oxygen to ambulances to facilitate high-flow transfers. All trucks are slated to get two M-tanks. We have a quote to hook both of them up (\$211 per truck) to allow easy switching while driving down the road. Also, Praxair will be switching all the M-tanks from steel to aluminum as they replace tanks from now on.
- Materials Management will be providing the nursing-version of Large and XLarge gloves as they are unable to get EMS-version right now.
- Next week's staff meeting will have Security here to help teach us how to keep ourselves and the ER safe when a patient has a weapon. How do we find it? What do we do with it once we find it? Etc.? We will cascade the info to the rest of the staff meetings over the next six weeks.
- We are working on getting replacement HEPPA filters for the ambulance air circulation systems. Working with MM and Fleet to get a solution.
- Crew Leaders are working on making sure everyone has charts locked within 24 hours. Please help them get this done.
- The NRP Healthstreams has been fixed. Log in, now to finish it if you have not already. Birth Place will log in and close out the hands-on piece tomorrow. They cannot do that unless you have finished everything else.
- The next competency dates have been set for Feb 9, 16, and 18 for the full-blown ventilator training.
- Trauma system at CMH now has a goal of pre-activation (similar to how we pre-activate STEMI). So, please remember to contact the ER as soon as possible with a trauma patient notification if it warrants trauma alert or activation. A quick radio notification from the field even before transport will help them a lot.