

RMD:RAP February 2022

Hi all-

Here is a snow day February update for the latest WRETAC, state and RMD activities.

WCEMSLC meeting:

- We are changing the date and time on the spring WCEMSLC meeting (and WRETAC meeting) due to some scheduling conflicts with Delta Trauma Conference. Please update your calendar!
- The WCEMSLC will be held to follow the conference at Delta County Hospital from 1500-1700 on Friday May 6th. As always, there will be a call in option available. But hope that you may be able to take advantage of the morning education before the meeting!

WRETAC updates

- The WRETAC is supporting a grant submission from Montrose Regional Health and DCAD to support a fulltime crew for behavioral health transports in the region—including patients on M1 hold from hospital to psych facility, patients needing transport to CSU for evaluation or even hospital/CSU transfer to home after stabilization. Unclear when we will hear about approval, but has awesome potential to improve care for patients in the region.
- CARES participation is ongoing. Thanks to everyone for their continued compliance. The CARES coordinator position will now be hosted by Eagle County Paramedics, not Starting Hearts.

RMD group/ EMPAC updates

- Protocol updates:
 - a. As of Jan 1st: PDF of changes attached.
 - b. There are about 30 changes, most of which involve care of agitated patients and post sedation monitoring
- All state data reporting should now be done through ePCR. There were mandatory training sessions for this process—but if you missed them, the state has recorded them so you can watch. Let me know if you need access.
- The state of Colorado is considering hosting a state sponsored Medical Directors Course similar to the NAEMSP medical directors course. If this would be helpful to you—please let me know so I can advocate for it!
- Ketamine Investigatory Review panel concluded their process. Big take aways include:
 - a. Diagnosis of “Excited delirium” is rejected as being prone to bias and implicit racism. DMEMSMD are now using “Hyperactive delirium with extreme agitation”
 - b. Ketamine is an important tool for prehospital care when a patient requires immediate evaluation and stabilization and hasn’t responded to other measures

- c. Recommended a standard sized based dosing for small/med/large women (250mg/350mg/450mg IM) and men (300mg/400mg/500mg IM)
- d. Recommend licensing ambulances at the state level to increase oversight
- e. Recommend more training and oversight of individual medical directors
- f. This all being said: HB 21-1251 still outlaws the use of ketamine for extreme agitation and all waivers in the state remain invalid. CDPHE will consider the recommendations of the panel, with input from the community and experts to determine if ketamine can be used (legally) in the future in limited circumstances with increased training and oversight.

COVID Updates for EMS

- Crisis Standards of care for EMS have been deactivated by the state on Feb 17th.
- As of April 15th 2022, the scope of practice increase for EMTs to administer vaccinations will expire. (Still in scope for AEMT and up). If this is problematic for your system— please let me and Dr Beckman know, as if there is enough demand, they might consider its permanent addition in SOP.
- As of April 30th, 2022 the scope of practice increase for EMT-I/P to administer monoclonal antibodies for COVID-19 is expiring (still in scope for community paramedics).
- Paxlovid (oral medication against COVID) and Sotrovimab (IV monoclonal antibody) are the remaining recommended therapies with efficacy against omicron in patients early in their illness course with mild to moderate illness and risk factors for severe disease. They being distributed centrally by the state and have limited quantities.
- CDPHE is still offering free in-home COVID testing for frontline workers in the state or for your organization as a whole. Can order at: <https://covid19.colorado.gov/covid-19-testing-at-home>
- Epidemiology from the state shows that we pretty much have exclusively omicron variant now. But vaccination and boosters continue to be very effective at preventing hospitalizations and death from COVID. Overall hospital capacity and staffing are improving, with fewer COVID patients on ventilators in the ICU and fewer staff out sick.

Education opportunities:

- Pediatric Emergency Care Coordinator conference in Ridgway March 10-11. Great line up of speakers, free registration! RSVP to Danny.
- ALS skills night: March 24 from 6pm to 8pm at Gunnison Hospital. Hands on skills stations: neonatal resuscitation, difficult airway, EKG interpretation, Cric and needle decompression. Look out for email to register coming from Danny

Please feel free to reach out with any questions, concerns, or ideas!

-Avery