Canton BLS CPAP Prevents Intubation

Canton Ambulance Responders Barry Wolmetz and Dave Bondanza became the first BLS crew in the state to use CPAP under the new BLS CPAP program. They responded for an elderly female with a history of congestive heart failure with a sudden onset of severe dyspnea, barely able to speak two word sentences. She was tired, working hard to breathe and was producing frothy pink sputum. Her oxygen saturation was in the 80’s despite 100% oxygen by nonrebreather. Once CPAP was applied, her working of breathing eased and her saturation improved to the 90’s. UCONN Fire Department paramedic Tony Ruggerio, who assumed care of the patient on his arrival, credits the Canton crew with saving the patient from having to be intubated. By arrival at the hospital, the patient had pinked up and was able to speak in full sentences, and express gratitude for the fine care she had received. Great job all!

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BLS CPAP Indications:
Severe Respiratory distress?
Accessory muscle use?
Hypoxemia despite oxygen therapy?
Marked work of breathing?
Inability to speak in full sentences?

BLS CPAP Use Always Requires Paramedic Intercept

Ventricular Fibrillation Save

UCONN Fire Department paramedics Michael Alger and Thomas Paranzino responded to an 89-year-old male with dizziness. Shortly after the medics applied the heart monitor to the patient, he went into cardiac arrest due to ventricular fibrillation. He was immediately shocked at 200 Joules and revived after a brief period of CPR. A 12-lead ECG was done and transmitted to the John Dempsey Hospital ED. A possible STEMI alert was called. Dr. Heather Sibley preactivated the cardiac cath lab 11 minutes prior to the patient’s arrival in the ED. The patient, now alert, was taken to the cath lab, where the cath lab team found two critical blockages which were both successfully cleared and stented. Three days later the patient was discharged doing well. Thanks also to American Medical Response EMTs Walter Jablonski and Andrew Drake and first responders from Tunxis Hose Chief Rich Higley Sr., Fire Fighter Rich Higley Jr., and Fire Fighter Kelly McCalmont for their key roles in the patient’s prehospital care.

Coming Soon—BLS Intranasal Narcan

The Connecticut EMS Medical Advisory Committee has approved the use of Intranasal Narcan for BLS providers with the approval of their sponsor hospital following completion of a training program. John Dempsey Hospital will be sponsoring this initiative for its BLS services, including police departments. The program comes about in response to the increasing use of deadly heroin fentanyl mixture that is causing many patients to go into respiratory arrest. The ability of first responders to treat these patients prior to the arrival of an ambulance can be life-saving. Responders should continue to assist ventilations until the patient is breathing effectively on their own. Paramedic intercept is still required. Stay tuned for news of training sessions and program implementation dates.
STEMI Kudos
Bristol EMS paramedic
Denise Shea and her partner Ashley Brown, responded to a 58-year-old male with severe chest pain, pale, moist skin and a significant cardiac history. Shea did an immediate 12-lead ECG which revealed an acute ST elevation myocardial infarction. Unable to transmit, she called in a STEMI ALERT to John Dempsey Hospital where Dr. Paul Kaloudis activated the cardiac cath lab (18 minutes prior to patient arrival) based on Shea’s description. The patient received Heparin, Nitrostat and Plavix in the ED, then was rushed up to the cath lab where Dr. Michael Azrin’s team found a 100% occlusion of the patient’s left circumflex at the mid segment. The critical occlusion was successfully cleared and 2 drug eluding stents were placed. The patient did well and was discharged home just a few days later. **44-Minute Door-to-Balloon Time! 90-Minute First Medical Contact-to-Balloon Time!** Great job team!

Suicidal Patients
When directed to a patient care room with a suicidal patient, please do not leave the patient unattended after moving them to the bed. An ED staff member should always be present. We appreciate your patience and will try to always have a staff member present when you enter the room or shortly after. Thanks for your attention in our joint effort to ensure patient safety.

Regional Treatment Updates
The North Central EMS region will be releasing updates to the treatment guidelines shortly. The guidelines, which will include cardiocerebral resuscitation (CCR), will take effect July 1, 2014. Stay tuned for training sessions.

UCONN Health Center EMS Web Site
For news, educational information, CME schedule and past copies of our newsletter *Partners*, check out our web site at: uconnems.uchc.edu

In Memoriam: Donavan Alden
The Emergency Department staff at John Dempsey Hospital would like to express our condolences to the family of AMR paramedic Donavan Alden and to the EMS community who lost a brother. Donavan was a kind man who as an EMS professional for over ten years did his best to make a difference in people’s lives. We saw he was good at what he did.

Contest Deadline
April 25, 2014
John Dempsey EMS will be offering a prize for best local EMS submission.

Videos can be any length 60 seconds or less, including 6 second Vines.

Enter now!

EMS CME
EMS CMEs will resume in May. Stay tuned for schedule

CME Topics/Speakers
If you have any ideas or requests for CME topics or know of any interesting speakers we should consider, please send us your suggestions, and we will try to get them scheduled.

CONTACT US:
Any questions or suggestions about EMS? Looking for patient follow-up?
Contact EMS Coordinator Peter Canning at canning@uchc.edu or call (860) 679-3485.