



## Emergency Medical Services

# Partners

August 2010, Volume 1

uconnems.uhc.edu

This is the first edition of the UConn Health Center EMS newsletter, "Partners." We recognize that care for our patients begins in the field. From 911 dispatcher to ED MD, from first responder to ICU nurse, from Paramedic to cardiologist, team work, up-to-date training, education and evidenced-based medicine will lead to the best outcomes for our patients and communities. We will use this newsletter to highlight EMS best practices and keep you up-to-date about EMS activities at the Health Center.



We're proud to be partners with you!

Richard Kamin, M.D.      Peter Canning, Paramedic, R.N.  
EMS Medical Director      EMS Coordinator

### EARLY NOTIFICATION

- ◆ Your 12-lead done in the house in West Hartford shows your patient is having an inferior wall MI
- ◆ A man at work in Avon has a sudden onset of facial droop and right-sided weakness
- ◆ You are on a rollover scene in Farmington with a twenty-year-old with a shoulder dislocation.



A key part of your treatment is **early notification** to the UConn ED so we can be ready when you roll through the doors:

- ◆ The Cath Lab will be activated for the STEMI patient
- ◆ The CAT scan readied for the stroke patient
- ◆ In the case of severe trauma, based on your patch, we will either accept the patient or divert you to a Trauma Center.

### BENCHMARKS

Traditionally, EMS systems have been judged based on ALS response times and cardiac arrest survival statistics. Along with other hospitals in the North Central EMS Region we are implementing new evidenced-based benchmarking to assess and improve our pre-hospital care performance, including:

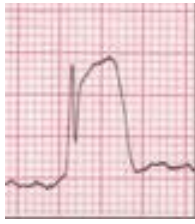
- ◆ *Cardiac Arrest – Time of 911 call to initiation of CPR and placement of AED or cardiac monitor on patient in cardiac arrest: 5 minutes or less.*
- ◆ *STEMI Care - All EMS patients with signs and symptoms consistent with ischemia with ST elevation of at least 1 mm in 2 contiguous leads who are acutely sent to the cath lab.*
  1. *Patient received ASA, unless contraindicated or recent previous ingestion documented.*
  2. *12-Lead performed with appropriate interpretation by paramedic or transmission to physician for interpretation*
  3. *Time from EMS Dispatch to Balloon < 90 Minutes*
- ◆ *Airway Management - No unrecognized misplaced intubations or other advanced airways.*
  1. *All intubated / advanced airway patients receive capnography documented by number and wave form strip.*
  2. *All intubated patients who arrive at the hospital have airways verified in correct location.*

These benchmarks are based on those developed by the 2007 Consortium U.S. Metropolitan Municipalities EMS Medical Directors. Here at UCONN, we will also be measuring performance in other areas such as CHF, asthma, seizure, and pain management care. By analyzing our performance and comparing it to these benchmarks, we can better target training, education and other resources to improve the care we provide our patients and communities.

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## STEMI

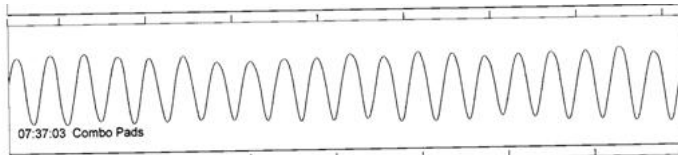
UCONN will soon begin accepting 12-lead transmission for STEMI patients. If your service doesn't have this capability, you can still call in a STEMI alert. Ask for medical control and start your patch off with these words:



### “I have a STEMI alert.”

If you are not certain, say, “I have a possible STEMI alert...” Describe the 12-lead and your patient's condition. Based on your patch, we will activate our Cath Lab. Studies have shown that mortality increases for every minute of delay in door-to-balloon time. EMS is a critical partner in our STEMI care.

## CARDIAC ARREST SAVE



Congratulations to the following for their recent cardiac arrest save:

### **Canton Police:**

Officer Messier and Sgt. Deloy

### **Canton Ambulance Crew:**

Colin Narducci, Rowan Sheldon, Jim Juhl, and Richard Hutchings

### **and UCONN Health Center Paramedics:**

John Martinez and Neil Prendergast

Thanks to a rapid response, excellent CPR, timely defibrillation (patient received 4 shocks over 10 minutes), and good airway management, the EMS team was able to restore the patient's circulation. En route, the medics performed a 12-lead ECG which revealed a ST-elevation MI (STEMI). The cardiac cath lab was activated. The ED staff at JDH, along with the cath lab team, the ICU and cardiac stepdown teams took it the rest of the way.

The patient, who underwent therapeutic hypothermia, walked out of the hospital nine days later. Great work by all!

## MORRONE HONORED

UCONN Health Center Fire Department Paramedic **Victor Morrone** was honored at the state Capitol this May with the 2010 Emergency Medical Services Distinguished Achievement Award given to an individual who has given of his time and talents to improve pre-hospital care in Connecticut. Victor, who has been a paramedic for over twenty years, and who has mentored many EMS students over the years, retired this past June from the fire department, and has taken a position as a supervisor at New Britain EMS. We are extremely proud of Victor, wish him all the best and are glad he is remaining involved in EMS in our area.



## QUICK THINKING

When their patient being transferred from one hospital to a more distant facility suddenly went into cardiac arrest, Bristol EMS crew **Brett Kwasniewski** and **David Murphy**, defibrillated the patient twice, restoring pulses and breathing, then diverted to the closest hospital – the UCONN Health Center. On arrival the patient was rushed to the Cardiac Cath Lab, where her life-threatening coronary blockage was cleared and a drug eluting stent was placed. Thanks to the quick action of Kwasniewski and Murphy, the patient walked out of the hospital five days later and is back living an independent life. Great job!

## EDUCATION SESSIONS

- ◆ Monthly CMEs – All levels of responders are welcome at our monthly EMS CMEs held the first Thursday of each month (except August) at 9:00 AM in the Administrative Resources Building ground floor conference room on the Health Center campus (building by the helipad).
- ◆ Coming Soon – Quarterly evening CMEs and a one-day EMS conference.

## CONTACT US:

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

