

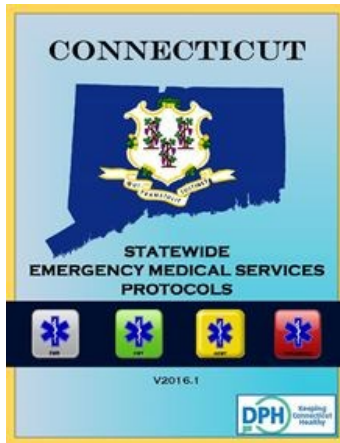


## Emergency Medical Services *Partners*

August 2016, Issue 75

[uconnems.uhc.edu](http://uconnems.uhc.edu)

### Statewide Protocols Released



The new Statewide EMS Protocols have been released. The protocols are the results of a multi-year effort between the Connecticut EMS Medical Advisory Committee (CEMSMAC), and the five Regional EMS Council Medical Advisory Committees, as well as many EMS

stakeholders across Connecticut. The document creates a standard for all EMS providers across the state, based on the best available evidence and medical consensus. The protocols address the minimum competencies that everyone will be able to demonstrate at both BLS and ALS levels. Sponsor Hospitals may choose not to authorize specific meds or procedures but may not add or substitute anything not already written in the protocols. The protocols are considered a living document that will be reviewed and reissued every two years, but may be updated at any time as circumstances and new evidence dictates.

The Connecticut EMS Advisory Board Education & Training Committee has developed an educational presentation for implementing these new protocols. The dates for the education rollout and start dates are still being discussed, but it is likely that the protocols will be in effect in some services by October 1, 2016 and by all services across the state by January 1, 2017. UConn John Dempsey Hospital will be releasing a special newsletter supplement on the guidelines in September.

### West Hartford Fire Department Starts Paramedic Service

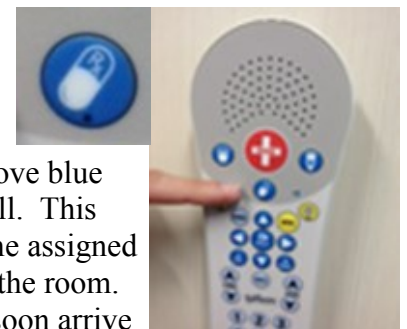
On August 1, 2016, the **West Hartford Fire Department** will begin providing first responder paramedic service in their town. They were previously first responder EMTs. **American Medical Response** who had provided the paramedic service for decades will continue to provide the transport. We welcome the new WHFD paramedics to UConn John

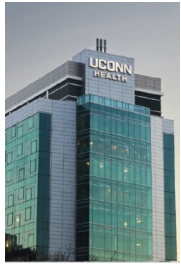


Dempsey Hospital and look forward to working closely with West Hartford Fire in the coming years. Kudos to West Hartford Fire Chief Garry Allyn for years of hard work and planning putting the new system into place. It is expected the West Hartford Fire will eventually have five paramedics on duty throughout the town. We also want to thank the paramedics of AMR for the wonderful prehospital care they rendered in the past to the patients of our hospital who come from West Hartford. Best wishes for success and a smooth transition of care.

### Call Button

When bringing your patient to an assigned room in the ED, after getting the patient in bed, hit the above blue RX button on the call bell. This will send a message to the assigned nurse that a patient is in the room. Advised, the nurse will soon arrive to take the report from you.





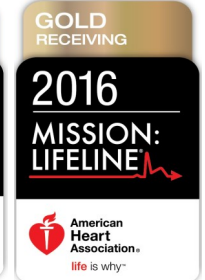
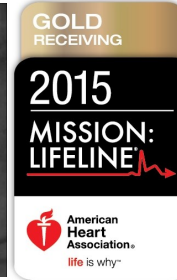
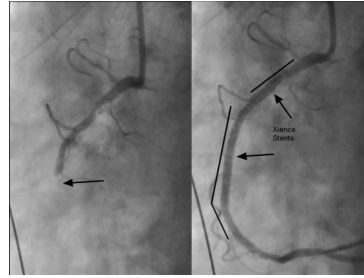
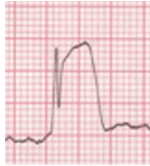
# UConn John Dempsey Hospital Services

To our EMS Partners, this is an annual report on our hospital's specialty patient care capabilities.



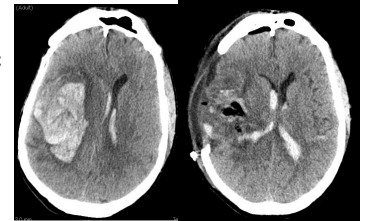
**STEMI/Heart Attack Care**—UConn John Dempsey Hospital is the only hospital in Connecticut to win the Mission: Lifeline Gold Award two years running. Our STEMI Performance composite score is 99.5%. Our door-to-balloon times are among the lowest in the nation. Our 2015 Median Door-to-Balloon time was 47 minutes. We encourage

field STEMI activation and provide EMS direct to cath lab patient delivery on the EMS stretcher if the lab is ready on patient arrival. While we like to receive ECGs we will activate based on the EMS patch with a good clinical story. Our Cath lab is one of the few that offers radial access approach which is faster and safer than the traditional groin access. We thoroughly review each STEMI Case and strive to provide EMS feedback within two business days.



**Stroke Care**— We are an American Heart Association certified Primary Stroke Center, capable of rapidly delivering tPA and providing CTA screening to determine candidates for endovascular therapy. We offer direct to CT

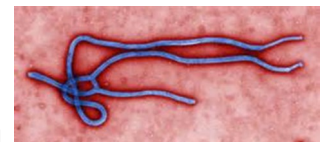
Scan for EMS Stroke Alerts. Through the first half of 2016 our median door to needle for EMS patients was 54 minutes. 17.3% of our ischemic stroke patients arriving by EMS received tPA. Only 5% of all our EMS stroke patients are later transferred to a comprehensive stroke center. We have neurosurgeons on staff who can perform emergency craniotomy on patients with intracranial hemorrhage.



**Resuscitation**— Our multidisciplinary resuscitation team rapidly responds to cardiac arrest victims arriving via EMS. We offer rapid stabilization, quick transport to the cardiac cath lab when indicated, open-heart surgery capability, therapeutic hypothermia, and a top notch Intensive Care and Intermediate Care Units. Thanks to early defibrillation and great prehospital care, we have seen 5 EMS cardiac arrest patients walk out of John Dempsey Hospital with full neurological recovery in the last six months.



**Infectious Disease**—We are a designated Frontline Hospital for Ebola and other serious infectious diseases. We have a comprehensive readiness plan, conduct regular drills and have a state of the art decontamination room with outside access. We are committed to protect patient and provider. EMS is reminded to always patch ahead and inform us of with any patient with suspected infectious disease and a travel history to a danger zone. In these cases, await ED instruction before making hospital entry.



**Trauma**-We are working toward verification as a Level III Trauma Center. This means we are following established best-practice guidelines as well as participating in quality improvement review of all trauma cases.

Patients who meet the following criteria should be transported to Level I or Level II Trauma Centers:

Glasgow Coma Scale  $\leq 13$   
Systolic Blood Pressure (mmHg)  $< 90$  mmHg  
Respiratory rate  $< 10$  or  $> 29$  breaths per minute\*  
( $< 20$  in infant aged  $< 1$  year),  
or need for ventilatory support

All penetrating injuries to head, neck, torso and extremities proximal to elbow or knee  
Chest wall instability or deformity (e.g., flail chest)  
Two or more proximal long-bone fractures  
Crushed, degloved, mangled, or pulseless extremity  
Amputation proximal to wrist or ankle  
Pelvic fractures  
Open or depressed skull fracture  
Paralysis

Patients in the following categories may be transported to UCONN John Dempsey Hospital after consultation with medical control:

Falls  $> 20$  feet  
Apparent high speed impact  
Ejection of patient from vehicle  
Death of same vehicle occupant  
Pedestrian hit by car at  $> 20$  mph  
Rollover accident  
Significant vehicle deformity – especially of steering wheel  
Age  $< 5$  or  $> 50$   
Known cardiac disease or respiratory distress  
Penetrating injury to neck, thorax, or abdomen other than gunshot wounds



**When in doubt about patient destination, contact medical control.**

**Orthopedics/Geriatrics**- UConn John Dempsey Hospital specializes in both Orthopedics and Geriatrics through its UCONN Musculoskeletal Institute and the UCONN Center on Aging. 62.5% of all our trauma patients are 65 years of age or over. 82.5% are fall victims. We have specialists who can provide the best modern care to the senior citizens in our community.



**Labor and Delivery**- UConn physicians deliver with care at UConn Health's John Dempsey Hospital in Farmington. Here, moms and babies receive care in a topflight facility, with a distinctively home-like feeling. Families enjoy the quiet setting and family birthing rooms. And UConn also delivers peace of mind. Babies born with complications receive expert care in the adjacent Neonatal Intensive Care Unit – one of the finest units of its kind in the country.



**Adult Psychiatric and Substance Abuse**– The UConn John Dempsey Adult Inpatient Psychiatric Unit is dedicated to assessing and treating adults, ages 18 and up, who require a hospital level of care. Patients are admitted with a full spectrum of mental illnesses, including mood disorders, schizophrenia and other psychiatric disorders. Alcohol detoxification protocols are utilized on the Unit, with full medical back-up available. When clinically appropriate, opiate detoxifications and benzodiazepine detoxes are also admitted.





## STEMI Kudos

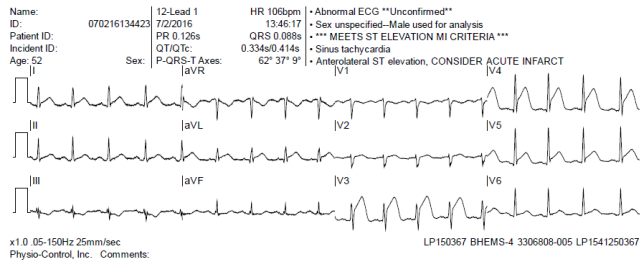
**Bristol EMS** paramedics

Jay Nanni and David

Murphy responded for a male with substernal chest

pain that began when he awoke. They called in a **STEMI Alert** from the scene and transported to **UConn John Dempsey Hospital**, providing 21 minutes of advance notification. In the cardiac cath lab, Dr. JuYong Lee and team found a 90% occlusion of the patient's Left Main Artery, which they successfully cleared and stented. The patient did well under the care of our ICU and intermediate floor staffs and has been discharged home, much improved. Great job team!

**38 Minute Door to Balloon/70 Minute First Medical Contact to Balloon.**



## Kim Quinn Retires

It happens all the time, and too often without adequate appreciation for a career's worth of work. EMTs and paramedics who have devoted their lives to taking care of the sick and injured in the homes and streets of our communities, often under the most stressful circumstances, step away from the work — to move on to other fields or to retire. Today we honor the latest. **American Medical Response** paramedic Kimberly Quinn is retiring on August 3, 2016 after 22 years with American Medical Response and the Professional Ambulance Group. For the last several years she has been a fly car medic in West Hartford, and has brought many patients to UCONN John Dempsey Hospital. We will miss her smile, her professionalism, and the great care she gave to all her patients. Good luck, Kim, thank you, and enjoy the next phase of your life.



## Ice Pops Are Here!

It's summer time and ice pops are here in the EMS room — all summer long! We appreciate your hard work out in the field. Stop by our EMS room next time you are here and enjoy an ice-pop on a hot day.



## Hip Fracture Care

We monitor hip fracture care as a surrogate for prehospital pain management. For the first six months of 2016, 63.7% of EMS hip fractures had recorded pain scales. 62.7% received ALS care, 31.0% received prehospital analgesia, 50% of those with ALS care received analgesia. Kudos to the following medics for their pain management efforts: Eric Toll, Chris Devine, Michael Kerr, Devin McDermott, Rick Fortier, Michael Palmieri, Rick Bergen, Anthony Ruggiero, Joe Speich, Wendell Cote, Jim Devaney, and Ashley Merritt. We appreciate your efforts to provide pain and comfort management to your patients.



## 2016 UCONN EMS CONTINUING EDUCATION

Monthly Morning CME



August – No CME  
September 21, 2016  
October 19, 2016  
November 16, 2016  
December 21, 2016



Cell and Genome Sciences Building Conference Room  
400 Farmington Avenue  
Farmington, CT  
8:30-11:30 A.M.

Bagels and Coffee will be served  
For Questions, email Peter Canning at [canning@uchc.edu](mailto:canning@uchc.edu)  
ALL EMS RESPONDERS WELCOME

## UConn Health EMS Website

For news, educational information, CME schedule and past copies of our newsletter *Partners*, check out our website at:

[uconnems.uhc.edu](http://uconnems.uhc.edu)

## 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.