




Emergency Medical Services *Partners*

May 2016, Issue 72

uconnems.uhc.edu

CARDIAC ARREST SAVES - In the past six months we have seen five cardiac arrest saves (neurologically intact) in our area. All had the following components — witnessed arrest, bystander, CPR, early defibrillation, strong BLS and ALS care, post ROSC 12-lead, UConn ED, cardiac cath lab, ICU and step down care. We salute all our life savers, from those willing to do bystander CPR to first responder, EMT, paramedic, and hospital staff. 

Burlington Cardiac Arrest Save

Connecticut State Police Officers Laurie Del Torto, Keriann St.Germain, Kevin Mellon and **Burlington Ambulance EMS** Captain Michael Haaser responded for a male in cardiac arrest. They delivered one shock and within minutes the patient began breathing on his own. The patient was transported to **John Dempsey Hospital** by



Canton EMS, along with **UConn Fire Department** paramedic Wendell Cote, who did a post ROSC 12-lead which showed ST elevation in aVR and V1. Cote called in a **STEMI Alert** and the cardiac cath lab was activated 14 minutes prior to their arrival. The cath lab team found a 100% occlusion of the patient's LAD, which was successfully stented and cleared. The patient is now home with his family and will soon be back at work.

West Hartford Cardiac Arrest Save

American Medical Response paramedic Marisa Carriveau responded in West Hartford along with responders from the **West Hartford Fire Department**



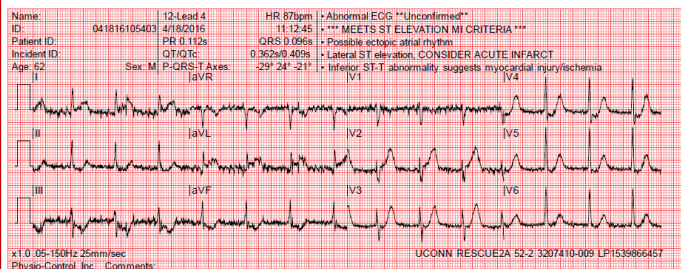
(AO Neal Sinatra and FF Lawrence Irvine, Lt Chris Pettinelli and FF Kevin Foster) and AMR EMTs Brandon Getty and Thomas Baracchi for a man who had a witnessed cardiac arrest and received immediate bystander CPR from **UConn Health** cardiologist Manny Katsetos, who happened to be driving by and saw the patient collapse. Carriveau applied her cardiac monitor, and observing ventricular fibrillation shocked the patient at 300 joules, while the WHFD provided chest compressions and assisted ventilations. Carriveau obtained intravenous access and administered a milligram of epinephrine. The patient soon had pulses. Carriveau administered 150 mg Amiodarone, and called in an alert to **UConn John Dempsey Hospital**. By the patient's arrival, his color had pinked up and he was breathing on his own. In the ED, he was intubated for airway protection, had a CT scan of his head, which was negative, and he was taken to the cardiac cath lab where his arteries turned out to be clean. He was treated in the ICU and on the cardiac step down unit, and he received an internal defibrillator. He was discharged home five days later, with full neurological function, doing great!

New ED Opening May 14, 2016

The opening date of the new University Hospital tower is now scheduled for the weekend of May 14. The building completion is on target but the logistics of scheduling surveys to obtain the Temporary Certificate of Occupancy and Department of Public Health certification will likely take a few more days than anticipated. Questions, please contact Peter Canning at canning@uhc.edu.



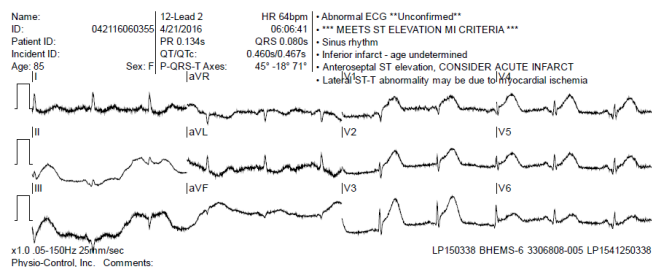
STEMI Honor Roll



UConn Fire Department paramedic Josh Levin and **American Medical Response** EMTs Ashley Wells and Mathew Kresel responded for a male with pain between his shoulder blades and tingling in his left arm. Levin did a 12-lead ECG, which indicated a lateral ST-Elevation Myocardial

Infarction. He called in a **STEMI Alert** to **UConn John Dempsey Hospital**. On arrival the patient was taken directly up to the lab where the cardiac cath team found a 99% stenosis of the proximal D1 artery. The patient did well post-procedure and was released home two days later.

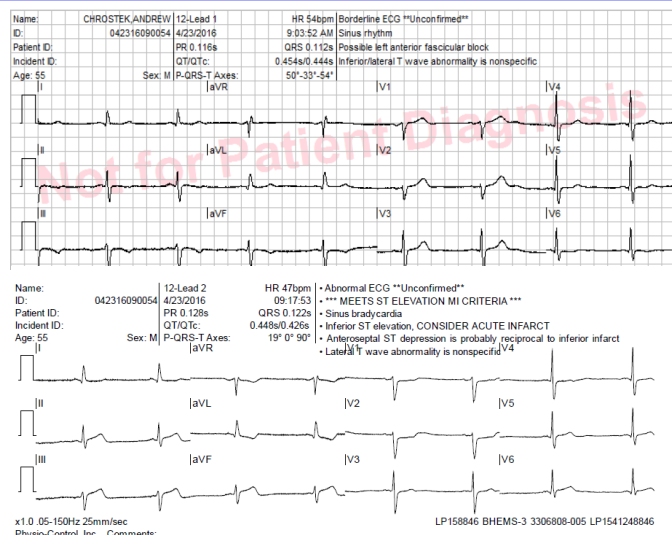
22 Minute Door to Balloon 56 Minute First Medical Contact to Balloon



Bristol EMS paramedic Matt Behuniak and his partner Kyle Belanger responded for a female who woke up with

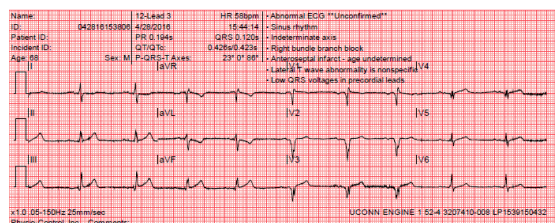
severe central chest pain that took her breath away. Behuniak did a rapid 12-lead ECG that revealed an extensive anterior myocardial infarction. He called in a **STEMI Alert** from the patient's home to **UConn John Dempsey Hospital**, immediately activated the cardiac lab. The patient had a 100% occlusion of the proximal Left Anterior Descending Artery (LAD), which they successfully cleared and stented, restoring perfusion. Thanks to the early notification, the team was able to salvage a great deal of the patient's heart function.

40 Minute Door to Balloon. 78 Minute First Medical Contact to Balloon



Bristol EMS paramedic Scott Bullock and his partner Matt Barksdale responded for a male with an episode of chest pain that had subsided to the point that the patient was now refusing transport. Bullock did a 12-lead ECG, which was normal, but he insisted along with his partner that it was in the patient's best interest to be transported to the hospital for evaluation. They were able to convince him, and it likely saved his life as Bullock's next 12-Lead ECH showed an emerging STEMI. Bullock contacted the **UConn John Dempsey ED** with a **STEMI Alert** and the lab was activated 9 minutes before the patient's arrival. In the cath lab, the cath team found a 100% occlusion of the patient's left circumflex artery, which was successfully stented and cleared restoring perfusion. The patient did well and is now back home on a heart healthy diet.

33 Minute Door to Balloon. 80 Minute First Medical Contact to Balloon/ 64 Minute Diag ECG to Balloon



UConn Fire Department paramedics Neil Prendergast and Jed Morrissey intercepted with EMTs from **Canton Ambulance** for a male with sudden chest pain. Prendergast did an immediate 12-lead ECG, which showed subtle ST elevations in the inferior leads with depression in aVF. He called in a possible **STEMI ALERT** to **UConn John Dempsey Hospital**. The patient went straight to the cath lab where he had a 95% occlusion of the left circumflex artery successfully stented and cleared..

26 Minute Door to Balloon. 55 Minute First Medical Contact to Balloon

UConn John Dempsey Hospital New Patient Care Tower

Services by floor:

B Level

- Emergency Department
- ED Entrance and dedicated, adjacent parking

Ground Level

- Lobby and Information Desk
- Hospital Entrance and adjacent parking
- Operating Suite

Main Level

- Family Waiting and Comfort Room
- Murray-Heilig Chapel
- Gift Shop
- Imaging
- Starbucks

Floor 1

- Intensive Care Unit

Floor 2

- Intermediate Care: cardiac, medicine, and surgery

Floor 3

- Medicine
- Dialysis Care Center

Floor 4

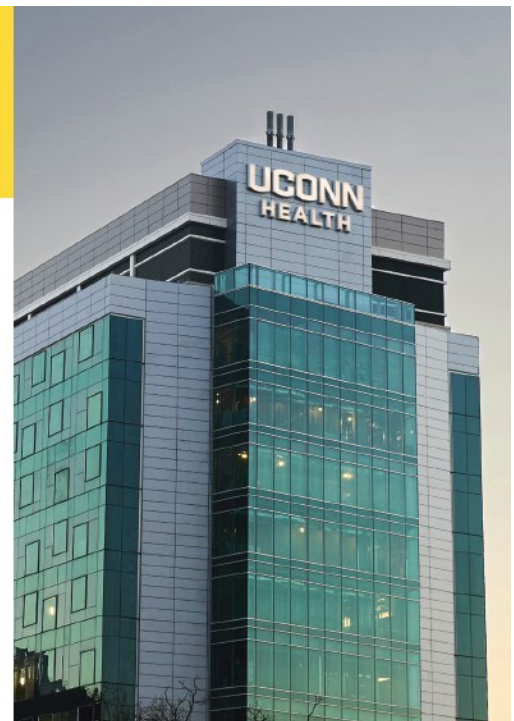
- Respiratory Therapy Department

Floor 5

- Medicine
- Orthopaedic Surgery Care

Floor 6

- Medicine
- Surgery
- Oncology Care
- Bone Marrow Transplant Unit



BUILT AROUND PATIENTS' NEEDS



381,000+ sq. ft.

PATIENT READY

Our 169 private inpatient rooms include 28 modern intensive care rooms with advanced monitoring and features, including pull-out couches, to support visitors and patients.



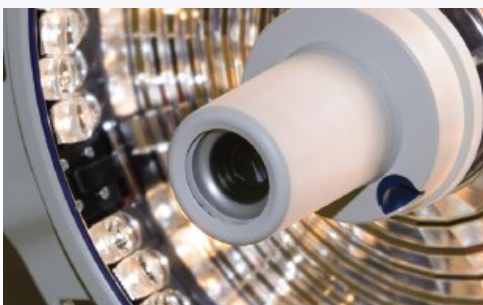
EMERGENCY DEPARTMENT

More than 40 private patient-care rooms, dedicated CT scan and X-ray, and an ER fast track for minor emergencies add privacy, safety, and speed. Prepared for the uncommon, additional support includes decontamination rooms, resuscitation rooms,



OPERATING SUITE

Ten state-of-the-art, spacious operating rooms can handle the complexity of all cases, and 30 private pre- and post-surgical recovery rooms offer safety and quality.



EDUCATION IN HD

Each OR and the ED resuscitation room is equipped with Black Diamond HD cameras and plasma screens for live broadcasting for training and medical education.

HYBRID OR

Our 1200-sq.-ft. Hybrid Operating Room is equipped with imaging capabilities for minimally invasive and complex procedures, especially interventional vascular procedures (coming soon).



CONNECTED CARE

Nurses use phones linked with patients' bedside call systems to improve response time and increase patient satisfaction.



HIGH-TECH PHARMACY

Smart robots and a high-speed tube system safely get medication from pharmacy to patients.

UConn Health

health.uconn.edu/opening

Emergency Stroke Care Conference **May 26, 2016**



Endovascular Therapy for Acute Ischemic Stroke:

Dr. Charles Matonk: Yale



Intracranial Hemorrhages and Stroke:

Dr. Ryan Zengou

Stroke in patients with Atrial Fibrillation

Dr. Christopher Pickett

Priorities of EMS Stroke Care

Dr. Richard Kamin

Peter Canning

Acute Stroke Care in the Emergency Department:

Dr. Alberto Perez

Special EMS Breakout Sessions

More Speakers to Be Announced

8:00-4:30

Keller Auditorium

Registration link 1-800-535-6232 or 860-679-7692

Free to all Attendees

Breakfast and Lunch Included

All participants will receive stroke workbooks.

Good for 7 Hours EMS CME

Register Today!

Call 1-800-535-6232 or 860-679-7692 to register

May 18, 2016 CME



Case Reviews

Richard Kamin M.D.



Feature Topic TBA

Kevin Stimson, M.D.

Journal Review:

Amiodarone, Lidocaine or Placebo in Cardiac Arrest

BLS Fentanyl

Peter Canning, Paramedic R.N.

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

ALL EMS RESPONDERS WELCOME

2016 UCONN EMS CONTINUING EDUCATION

Monthly Morning CME



May 18, 2016

June 15, 2016

July-No CME

August – No CME

September 21, 2016

October 19, 2016

November 16, 2016

December 21, 2016



SAVE THE DATE

Emergency Stroke Care Conference

Thursday, May 26, 2016

**UConn
HEALTH**

UConn Health EMS Website

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

uconnems.uchc.edu



2016 UCONN EMS CMES

Look for our special CME presentations coming this year



2nd Annual UConn Stroke Conference

May 26, 2016

8:00 A.M.-3:00 P.M.

2016 New Statewide Protocol Review

June 15, 2016

8:30-11:30 A.M.

12-Lead ECG and STEMI Care

TBA

EMS Pain Management

TBA

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.