



OLD DOMINION EMERGENCY MEDICAL SERVICES ALLIANCE INC.

1421 Johnston-Willis Drive
 Richmond, VA 23235-4730
 804-560-3300 • FAX: 804-560-0909
 www.odemsa.vaems.org

Pharmacy Committee

July 14, 2016; 08:30am to 10:30am

Co-Chairs: Ben Hester, VCU and Robin Sayles, JRMC

Vice Chair: Ian Orensky, SMH

Members and Guests Present: Ben Hester, Ian Orensky, Wayne Harbour, Al Thompson, Gregory Jones, John Sayers, Mark Bernas

Conference Line: Jonathan LaFrenaye, Susanna Dodd, Tulinh Le, Pasty Clary, Robin Sayles, Allen Yee

ODEMSA Staff: Megan Young, Damien Coy, Heidi Hooker

Minutes Scribed by: Megan Young

Materials provided: Meeting agenda, previous meeting minutes, Narcan handout, CI Pharmacy Card

| Topic/Subject | Discussion | Recommendations, Action/Follow-up; Responsible Person |
|---|--|--|
| Meeting Called to Order | Ben Hester called the meeting to order at 08:39am. Introductions were made, and it was determined we had a quorum. The April meeting minutes were reviewed and approved. | Motion by: Ian Orensky Seconded by: Mark Bernas Vote: April 2016 Minutes approved |
| Reports: Bon Secours HCA McGuire VA | Ian Orensky – No report from Bon Secours specifically, There has been no epinephrine label changes noted from the ratio to the milligram form and all present agreed. It could take a while for the changes to appear. Robin Sayles –No report Mark Bernas – No Report | |



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| <p>VCU</p> <p>RAA</p> <p>Chesterfield Fire & EMS</p> <p>ODEMSA</p> | <p>Allen Yee – No report</p> <p>Wayne Harbour – Richmond Ambulance Authority passed their Board of Pharmacy inspection two weeks ago which is good for two years</p> <p>John Sayers – None</p> <p>Heidi Hooker – The ODEMSA accreditation process to be a Regional Council with the Commonwealth was on 7/12/2016 and it went very well, they do not expect any problems. The Regional Awards Picnic is on August 6, 2016, all are welcome and invited.</p> <p>Megan Young – There is a pharmacy handout for Clearly Inventory. It is a laminated card that explains what to do if you cannot find a box in the system, and has updated contact information. A Drug Box was shown with what appears to be a cut or broken orange lock where a seal can be pulled off without breaking, it is probably an accidental break from an agency attempting to pull the seal off but it was advised for Pharmacies to double check that lock mechanism. Megan offered to go to any hospitals and train new staff or do a review on Clearly Inventory. The only drug diversion is on box number 1636, the one stolen from Jarett Vol. Fire Dept. which has no update on, reminded the Pharmacies to keep an eye out and it is marked as “Call Megan” on Clearly Inventory. The Medication Restocking Agreement has been board approved and placed on the ODEMSA website</p> | |
| <p>Old Business:</p> | <p>Drug Shortages – Ian mentioned the reoccurring problem of the shortage of dopamine vials which is the second agent out with Norepinephrine being first.</p> <p>Regional Medication Administration Data – The data from last quarter showed some medications given that were not in the Odemsa box. AI stated he would like to look at the quarter’s data each meeting, Megan advised she would put the Regional Medication Administrative Data as a report on the agenda.</p> | <p>Add Regional Medication Administrative Data to agenda</p> |
| <p>New Business:</p> | | |



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| <p>EMS Medication Error</p> | <p>Geodon was given instead of Glucagon by a medic being trained, to a patient that was taken to Richmond Community Hospital. Allen brought up that this has happened before at Chesterfield Fire and EMS and the medications were initially stored next to each other but were moved. Wayne stated that the medications should be cross checked by the EMS providers before being given, he has cross-checking cards that he will hand out. It is a general consensus that the medications are very similar in name and in the fact that they are the only two that are reconstituted in the drug box. A thought was brought up to remove Geodon totally from the Drug Box and replace it with Ketamine but it was decided that Ketamine is not widely used and if it is pulled out of the drug box then psyche facilities would not be able to request EMS to give it. The conclusion was to put Geodon in a separate clear bag with diluting agent and place a label on the bag that states "For Severe Agitation".</p> | <p>ODEMSA will make up a packet to be given to Pharmacies: labels, templates of labels, new schematic, laminated card, and an drug alert on burstajet syringes</p> |
| <p>Narcan Nasal Spray</p> | <p>This was brought up to be an alternative for BLS providers. The handout was looked at and it was mentioned that this spray is very expensive. It was noted by AI that Narcan burstajet syringes have been found in the drug box which BLS providers cannot utilize. AI requested to have data pulled by Adam on how much Narcan has been used in the last quarter and if possible for the last year. Robin brought up increasing the amount of Narcan in the drug box but it was thought that 4mg is enough. Pharmacies should be stocking burstajet syringes in the drug boxes. Megan will get data on how many agencies have only one box on the ambulance and see how much Narcan is given in the more rural agencies by planning district.</p> | <p>ODEMSA will pull the data for Narcan use in the last year</p> |
| <p>Air Medical Signatures</p> | <p>In May of this year a crew gave fentanyl to a patient who was then flown out to VCU. The crew then went to St. Francis to exchange their drug box and the MD refused to sign the EMS report so they drove to VCU. This created a problem with staffing in their county as multiple calls went out. The question was asked if it is required to get a signature for schedule two drugs. Greg noted that the Medivac crew does not take possession of any of the ground crews narcotics and the drugs are written on two different reports. Greg stated that the crew could have gone to the pharmacy and explained the situation and see if they could assist. Ben brought up the Governor's action two years ago, from the commonwealth perspective, as long as a standing protocol is in place that has been signed by a physician then any drug given falls under that signature. Heidi asked if the receiving pharmacies could call each other to verify the</p> | <p>ODEMSA – Megan will call other Councils to see if they have a protocol for this situation.</p> |



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| | drug being used on the patient. It was talked about getting the Medics from the call to sign the report if the attending physician refuses. Ben tabled any further discussion until next meeting asking for people to think of solutions. AI asked if Megan will call other Regional Councils to find out what they do. | |
| Next Meeting | October 13, 2016, 8:30 AM | |
| Adjourn | The meeting adjourned at 09:42am. | |