



**OLD DOMINION EMERGENCY MEDICAL SERVICES ALLIANCE INC.**

7818 E PARHAM RD  
RICHMOND VA 23294  
804-560-3300 • FAX: 804-560-0909

[www.odemsa.net](http://www.odemsa.net)

**Stroke Committee**

Meeting at West Creek  
October 24th, 2019 09:30 a.m. to 11:07 a.m.  
Chair: Stacie Stevens, VCU  
Vice Chair: Traci Wakefield, Bon Secours

**Members Present:** Tracie Wakefield, Laurie Mayer, Valena Brown, Diane Hebert, Ashley Hansen, Stacie Stevens, Danny Garrison, Greg Neiman, Cam Atkins, Mike Harmon, Kimberly Pinna

**Conference Line:** Paula Romaine, Allen Yee

**ODEMSA Staff:** Jordan Rennie, Kathy Eubank

**Minutes Scribed by:** Jordan Rennie

**Materials provided:** Meeting Agenda, Sign in Sheet

<b>Topic/Subject</b>	<b>Discussion</b>	<b>Recommendations, Action; Follow-up; Responsible Person</b>
<b>Meeting Called to Order</b>	Introductions were made. There was a quorum. Agenda was approved. Minutes from the previous meeting were approved.	<b>Motion:</b> Stacie Stevens <b>Second:</b> Danny Garrison <b>Vote:</b> Approve minutes from previous meeting.
<b>Reports:</b> <u>Hospitals</u> Kim Pinna with Johnston Willis Hospital  Tracy Wakefield with Bon Secours	On Boarding of IR Physician is going great. Teaching VAN at lots of EMS/Fire agencies. During the educational events, there have been lots of discussion regarding neglect.  Bon Secours Stroke Coordinators have come together to develop universal protocol. St. Francis had 26 minute TPA time. There are still issues when providing VAN training.	

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Tracy Wakefield with Bon Secours continued	<p>Westchester facility is still in process of obtaining stroke certification.</p> <p>The VAN training aphasia and neglect seem to be an issue and performance of each step of VAN.</p> <p>Need to consider putting addendum in protocol regarding the arm drift in Cincinnati Stroke. If Cincinnati Stroke is positive (good) – do not do VAN.</p> <p>Stacie Stevens spoke about “RACE” another LVO scale.</p>	
Laurie Mayer with Southside Regional	<p>Work continues on the survey for an acute stroke center. Work on the free standing ED and Stroke Center continues as well.</p>	
Ashley Hansen with John Randolph	<p>Still pursuing Acute Stroke Ready for tri-cities. Alteplase &lt;60 minutes most &lt;45 minutes. Reviewed some information about drug calculations. She is advocating to treat Stroke Alert like a cardiac arrest utilizing an algorithm (team members assigned to airway, iv, meds, etc.) The team used one this morning with a patient and event went very well.</p>	
Valena Brown with Swift Creek & Chippenham	<p>Swift Creek is Acute Stroke Ready with an Alteplase admin time of 32 – 36 minutes.</p> <p>Chippenham has gone live w/Stroke Launch Pad (stopping point – process implemented 3-5 minutes before CT. Code Neuro is emergent just like Cardiac Code, they continue to promulgate this new approach. They are also continuing their work with their prehospital providers regarding the VAN Scale training.</p>	
Diane Hebert with Chippenham and Johnston Willis	<p>They are utilizing Launch Pad as well, they have 39 minute average time and have done 57 this year.</p>	

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Stacie Stevens – MCV	<p>New Kent free standing ED will go live 4/2020, she is optimistic about the date. VCU implementing teleconferencing services. They have gone to Stroke Consultant team approach and use a seasoned nurse practitioner. The Stroke Attending’s and teleconferencing is available 24/7 – to keep patients at outlying facilities. To provide teleconferencing changes were made to the “team” – Stroke Attending go to the ED in person. There was a learning curve and finally have reached their “groove”.</p> <p>8 – TPA’s a month – 26 to 36 minute timeframe (since 2012)</p> <p>Neuro Surgical – Neuro Surgeons now have 3<sup>rd</sup> resident that can assist them.</p> <p>Retreat Refresh Stroke Camp, patients from all over comprised of Stroke Patients/Survivors and Care Partners. The Care Partners come and special things like massages, etc. are done for them.</p>	
Paula Romaine with Southside Community  Bon Secours	<p>Alteplase has been utilized 19 times this year within 27 to 30 minute window. The Stroke Neurologist are responding quicker.</p> <p>Work on Stroke protocol still in progress        Changed Level 1 to 4 ½ hours, Level 2 to 4 ½ to 24 hours.</p> <p>Sent 4 endovascular patients out treatment time 85 – 105 minutes.        Primary Stroke Status is still work in progress.</p> <p>Free Standing ED in works near John Tyler College in Chester (near Rt 10 and Rt 1). Projected operational date 2021/2022.</p>	

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<b><u>EMS Agencies</u></b>		
Danny Garrison – Richmond Ambulance Authority	RAA is using hear radios vs cellular phones (as they have removed cell phones from the ambulances/providers do not wish to utilize their personal phones). Question was asked about patient personal information being given could this happen on hear radio like it does on cell phones; it was advised that some personal information could be given via hear radio but not as much as on cell phone due to “line not being secure”.	
New Kent Fire Rescue	No Report	
Henrico Fire	No Report	
LfieEvac	No Report	
Jordan Rennie – ODEMSA	<p>ODEMSA has moved into the old Suntrust building on Parham Road just off of Broad Street in the basement. The building was purchased by VCU and has been vacant for 2 or 3 years. VCU has been kind enough to rent this space to ODEMSA – our new space is approximately 6000 square feet. This new space offers us offices/storage and room for training classes. Additionally, we have room for the ambulance, an Emergency Room bay/bed space, and a “house” we will be constructing. We anticipate being able to assist Henrico with the space they need for the March Central Virginia EMS Expo.</p> <p>We appreciate everyone’s support as we continue to put our new facility in order.</p> <p>Jordan thanked the committee for letting him be a part of their work for the past year. He is leaving ODMESA and going to work for Central Virginia Healthcare Coalition and will be assisting ODMESA part time for a while.</p>	

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<p>Stacie Stevens - VSSTF</p>	<p>VSSTF meets quarterly, normally before our meeting. They are excited about having access to the bridge that will allow them to obtain data. The contact at OEMS is Tim Erskine.</p> <p>They are seeking “boots on the ground” person to come onto this committee, nominations are due in November. The position serves a two (2) year term. Would prefer an EMS person, resume and letter of recommendation would be appropriate if interested.</p> <p>They meet quarterly across the state. Craig is looking to create topics for VSSTF. The topics each month would help identify gaps in areas and better educate. The group will provide education.</p> <p>Stroke Quality Group is separate from VSSTF and Chris’s group – these 3 committee’s meet all in one day</p> <p>Patrick and Tim from Department of Health have developed an  - EMS Inventory Survey and – Hospital Inventory Survey</p> <p>VSSFT Meetings are 3<sup>rd</sup> Friday Quarterly in Richmond.  VHAA next 3 meetings are at 4200 Innslake Dr Glen Allen VA</p>	
<p>Old Business</p>	<p>None</p>	
<p>New Business</p>	<p>Topic for discussion at next meeting – at what point do we discuss transport of subdural bleed patients.</p> <p>AMR is the primary transporter of these patients and lead transports of these patients in the facility to facility transport. The committee asked if Medical Direction could look into implementing transportation protocols that would help standard care for patients going interfacility.</p>	

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	Add to Medical Control for their consideration an addendum for Interfacility transport agencies to assist EMS Providers or if it is emergent. To include vital parameters for patient and medications along with specifics that will be utilized. The medications for these patients would be given to the transporting agency ALS provider for patient use based on protocol.	
Next Meeting	January 23, 2020 at 0930 hopefully at ODEMSA	