EMERGENCY MEDICAL SERVICES
COMMISSION MEETING MINUTES

**DATE:**
October 28, 2016

**TIME:**
10:00am

**LOCATION:**
City Of Fishers
Fishers City Hall
One Municipal Drive
Fishers, IN 46038

**MEMBERS PRESENT:**
- G. Lee Turpen II (Private Ambulance)
- Darin Hoggatt (Paramedics)
- Stephen Champion (Medical Doctor)
- John Zartman (Training Institution)
- Myron Mackey (EMTs)
- Mike Garvey (Indiana State EMS Director)
- Melanie Jane Craigin (Hospital EMS)
- Terri Hamilton (Volunteer EMS)
- Sara Brown (Trauma Physician)
- Charles Valentine (Municipal Fire)
- Matthew McCullough (Volunteer Fire and EMS)
- Brandon Wood (Director of Preparedness and Training)

**Members Not Present:**
- Andrew Bowman (RN)

**OTHERS PRESENT:**
Field Staff, Robin Stump, Tony Pagano, Candice Pope, and members of the EMS Community.
CALL TO ORDER AND ROLL CALL

Meeting called to order at 10:00am by Chairman Lee Turpen. Mrs. Candice Pope called roll and announced quorum.

ADOPTION OF MINUTES

a. Adoption of minutes from the August 24, 2016 session.

A motion was made by Commissioner Mackey to accept the minutes from the August meeting. The motion was seconded by Commissioner Hoggatt. The motion passed.

Commissioner Mackey took a moment to recognize the Community Hospital EMT and Paramedic students that were in attendance.

Switzerland County Letter

Chairman Turpen asked Commissioner Zartman to review all the information from the investigation for Switzerland County and the complaints received the week prior to the Commission meeting. The following is Commissioner Zartman’s report:

Mr. Chairman,

Per your request, I have reviewed the documents submitted to me on the Switzerland County EMS investigation that IDHS conducted over the last 2 years. In reviewing the investigation summaries, audio and tracking reports, fact sheets, time lines and complaint letters, and also have reviewed what appears to be multiple email form letters that we have all received over the last several days.

From this, I believe that IDHS, its EMS staff members, Director Kane, EMS Director Garvey, and the State Fire Marshall Chief Greeson, were dealing with a very complex situation(s) involving both operational and educational activities. I find that their investigation and actions to be appropriate for the complex events, responses, and activities that have been documented.

It does appear to have taken a long period of time, however, in retrospect, and as previous stated, this investigation was more complex than an average or routine, normal investigation. I would also comment that from the following complaint letters we have received, those who wished to appeal any part of the states corrective actions should have done so within the timelines set forth.

All administrative orders clearly spell out the legal appeal process. Representative of Switzerland County EMS (the provider) and Switzerland County EMS Training Institution (the training institution) did in fact sign the final agreed orders and did not appeal the final orders basically agreeing to the findings of facts and any orders issued. That would have been the appropriate time to properly voice their disagreements with the facts and final order outcomes.

Respectfully submitted,

John R. Zartman
IDHS-EMS Commissioner

Honorary Certifications

a. Fox, Jeff (see attachment #1)
b. Gamble, Joe (see attachment #2)
c. Martin, Paul “Pete”(see attachment #3)

A motion was made by Commissioner Valentine to approve all three honorary certifications. The motion was seconded by Commissioner Zartman. The motion passed.

INDIANA DEPARTMENT OF HEALTH

a. “In the Process” applications –Mr. Murray Lawry reported that Mrs. Katie Holkonson had her baby. He also announced that Good Samaritan Hospital has become verified as a level III trauma center. He also announced that there are still 8 in the process hospitals due to delays with the American College of Surgeons (ACS). Director Michael Garvey announced that there are regional trauma coordination committees being formed. He encouraged EMS to get involved now and have a voice in the decisions. The Department of Health is getting a list of the groups and locations to Director Garvey.

EMS FOR CHILDREN (EMSC)

Ms. Margo Knefelkamp announced EMSC is currently accepting nominees for Pediatric Heroes. The deadline for submission is April 1, 2017.

TECHNICAL ADVISORY COMMITTEE (TAC)

a. Report – Chairman of the TAC Leon Bell announced that the TAC had not met prior to the EMS Commission meeting due to low attendance. Chairman Bell announced that the TAC will meet on Tuesday November 1st at 10am in Noblesville.

b. Chairman of the EMS Commission Turpen announced that during the Executive session earlier in the morning the Commission members discussed applications for the opened TAC positions. The following were picked for the opened TAC positions, Linda D. Minton, Michael Hunter, and Eric Allmon.

A motion was made by Commissioner Valentine to approve Linda D. Minton, Michael Hunter and Eric Allmon for the opened positions on the TAC. The motion was seconded by Commissioner Mackey. The motion passed.

INDIANA EMERGENCY MEDICAL SERVICES ASSOCIATION (IEMSA)

No report given at this meeting.

EMS EDUCATION WORKING GROUP

Mr. Jeffrey Quinn reported for the group. Mr. Quinn announced that Mr. Kinney has changed jobs and that will limit his time to work with the group. Mr. Quinn has been named co-chair for the group. Mr. Quinn stated that the group tabled the discussion of setting the meeting dates for 2017. Mr. Quinn stated that the group is looking at the strategic plan for EMS. The group has also started looking at training institution data to come up with a plan to help the low performing training institutions. Mr. Quinn announced that the next meeting will be at Ivy Tech in Lawrence on December 14 at 10am. They will be holding election for new officers at this meeting.

PERSONNEL WAIVER REQUESTS

The following requested a waiver of 836 IAC 4-5-2 Certification and recertification; general Sec. 2. (a) Application for certification will be made on forms and according to procedures prescribed by the agency. In order to be certified as an emergency medical services primary instructor, the applicant shall meet one (1) of the following requirements: (1) Successfully complete a commission-approved Indiana emergency medical services primary instructor training course and complete all of the following: (A) Successfully complete the primary instructor written examination. (B) Successfully complete the primary instructor training program. (C) Be currently certified as an Indiana emergency medical technician. (D) Successfully pass the Indiana basic emergency medical services written and practical skills
examinations within one (1) year prior to applying for certification as a primary instructor. (2) Successfully complete a training course equivalent to the material contained in the Indiana emergency medical service primary instructor course and complete all of the following: (A) Successfully complete the primary instructor written examination. (B) Successfully complete the primary instructor training program. (C) Be currently certified as an Indiana emergency medical technician. (D) Successfully pass the Indiana basic emergency medical services written and practical skills examinations within one (1) year prior to applying for certification as a primary instructor. Ms. Reed is requesting a waiver to allow her NAEMSE Primary Instructor Level 1 course and certification to account for her training and to waive testing. Staff recommends: Deny as the Commission has already approved the course as being equivalent but has previously required applicant to complete all testing and internship.

Jessica Reed

A motion was made by Commissioner Zartman to approve staff recommendation. The motion was seconded by Commissioner Hamilton. The motion was passed.

The following requested a waiver of 836 IAC 4-5-2 Certification and recertification; general Sec. 2. (a) Application for certification will be made on forms and according to procedures prescribed by the agency. In order to be certified as an emergency medical services primary instructor, the applicant shall meet one (1) of the following requirements: (1) Successfully complete a commission-approved Indiana emergency medical services primary instructor training course and complete all of the following: (A) Successfully complete the primary instructor written examination. (B) Successfully complete the primary instructor training program. (C) Be currently certified as an Indiana emergency medical technician. (D) Successfully pass the Indiana basic emergency medical services written and practical skills examinations within one (1) year prior to applying for certification as a primary instructor. (2) Successfully complete a training course equivalent to the material contained in the Indiana emergency medical service primary instructor course and complete all of the following: (A) Successfully complete the primary instructor written examination. (B) Successfully complete the primary instructor training program. (C) Be currently certified as an Indiana emergency medical technician. (D) Successfully pass the Indiana basic emergency medical services written and practical skills examinations within one (1) year prior to applying for certification as a primary instructor. Ms. Shaughnessy is requesting a waiver to allow her NAEMSE Primary Instructor Level 1 course and certification to account for her training and to waive testing. Staff recommends: Deny as the Commission has already approved the course as being equivalent but has previously required applicant to complete all testing and internship.

Nicole Shaughnessy

A motion was made by Commissioner Zartman to approve staff recommendation. The motion was seconded by Commissioner Hamilton. The motion passed.

The following requested a waiver of 836 IAC 4-5-2 Certification and recertification; general Sec. 2. (a) Application for certification will be made on forms and according to procedures prescribed by the agency. In order to be certified as an emergency medical services primary instructor, the applicant shall meet one (1) of the following requirements: (1) Successfully complete a commission-approved Indiana emergency medical services primary instructor training course and complete all of the following: (A) Successfully complete the primary instructor written examination. (B) Successfully complete the primary instructor training program. (C) Be currently certified as an Indiana emergency medical technician. (D) Successfully pass the Indiana basic emergency medical services written and practical skills examinations within one (1) year prior to applying for certification as a primary instructor. (2) Successfully complete a training course equivalent to the material contained in the Indiana emergency medical service primary instructor...
course and complete all of the following: (A) Successfully complete the primary instructor written examination. (B) Successfully complete the primary instructor training program. (C) Be currently certified as an Indiana emergency medical technician. (D) Successfully pass the Indiana basic emergency medical services written and practical skills examinations within one (1) year prior to applying for certification as a primary instructor Ms. Shilling is requesting a waiver to allow her NAEMSE Primary Instructor Level 1 course and certification to account for her training and to waive testing. Staff recommends: Deny as the Commission has already approved the course as being equivalent but has previously required applicant to complete all testing and internship.

Tessa Shilling

A motion was made by Commissioner Zartman to approve the staff recommendation. The motion was seconded by Commissioner Hamiton. The motion passed.

The following requested a waiver of Emergency Rule LSA Document #12-393(E) Section 49 (f) Advanced emergency medical technicians shall: (1) not perform a procedure for which the advanced emergency medical technician has not been specifically trained: (A) in the Indiana emergency medical technician basic and the Indiana advanced emergency medical technician curriculums; or (B) that has not been approved by the commission as being within the scope and responsibility of the advanced emergency medical technician; The following individuals are requesting a waiver to use the Morgan lens, CPAP and the following medications while working at the United States Steel facility: Cyanokit Epinephrine 1:10,000 Toradol Zofran ODT Atrovent.

Jeff Szostek 8122-8367  
Kevin Stumpe 4164-4589  
Deborah Petersen 8816-6943  
Robert Engelhardt 5652-6078  
Ediz Null 8625-2838  
Melanie Bales 8753-6205

Staff Recommends: Approval

After discussion a motion was made by Commissioner Mackey to approve staff recommendation. The motion was seconded by Commissioner Zartman. There was one vote against the motion. The motion passed.

The following requested a waiver836 IAC 4-4-1 General certification provisions Authority: IC 16-31-2-7 Affected: IC 16-31-3 (e) Emergency medical technicians shall comply with the following: (1) An emergency medical technician shall not perform procedures for which the emergency medical technician has not been specifically trained: (A) in the Indiana basic emergency medical technician curriculum; and (B) that have not been approved by the commission as being within the scope and responsibility of the emergency medical technician. The following individuals are requesting a renewal of the waiver to use the Morgan lens while working at the United States Steel facility.

Matthew Adams 6816-5412  
Alexis Banks Betsacon 3688-4051  
John Blumer 8395-7594  
Jason Bogue 4646-1885  
Darrell Bolin 1572-6542  
Christopher Brady 1333-3944  
Jason Builta 5676-7455
Roy Burgess          2701-0356
Rene Cabrera        2113-7703
Todd Christian      3752-3591
Jon Cooke II        2156-3246
Kaitlyn Dick        3731-9234
Jeffrey Duca        6647-0534
Korey Duvall        6866-5997
Bradley Elias       5024-1830
Gary Elliott         2268-6559
Sheryl Hayes        9501-9002
Austin Haynes      1732-4688
Dennis Hill          4308-0496
Erik Jacobson       5451-6977
Boe Jones            7287-6367
Russell Jorgensen   9039-0786
Ray Kane            6000-6836
Jason Kimbrough     6313-5043
Brian Kishel        1701-1193
Kevin Kraus         3391-9749
Nicholas Lambert     7152-8454
Chris Lundy         2609-0921
Ismael Maldonado    9857-8365
Scott Mann           7328-5366
David Marek         1487-3837
Michael Meinert     5777-5738
Kenneth Moore       6662-3166
Michael Moskalick    3625-1174
Philip Mulroe       7751-0248
Kevin Nowaczyk      8032-5034
Douglas Olson       6108-6023
Wilfred Ortiz       1404-2976
Sonny Otano         7579-3779
Ronald Patterson    6382-9587
Matthew Pocela      5661-7327
Gary Peterson       2048-2954
Brandon Piggee      6257-9656
Andrew Pike          8776-8051
Christopher Plewniak 9452-7939
Michael Poch        8573-7322
Joseph Rhoades      5856-1271
Jose Rodríguez      8178-7949
Joseph Rumback      4255-8729
Hector Sandoval     7997-2071
Joseph Scibor       3486-7750
David Semplinski   4413-0071
Shelby Sharpless    2593-3672
Leslie Simpson      7299-3090
William Slosser    9360-6313
Gregory Smith       8590-7009
David Snell         9206-7345
Jonathon Stewart     2827-9061
A motion was made by Commissioner Zartman to approve the waiver. The motion was seconded by Commissioner Mackey. The motion passed.

The following requested a waiver of 836 IAC 4-9-5 Continuing education requirements Sec. 5. (a) To renew a certification, a certified paramedic shall submit a report of continuing education every two (2) years that meets or exceeds the minimum requirements in subsection (b). 836 IAC 4-5-2 Certification and recertification; general (b) Certification as an emergency medical services primary instructor is valid for two (2) years. (c) In order to retain certification as a primary instructor, a person shall meet the following requirements: (1) Retain affiliation with at least one (1) Indiana certified training institution. (2) Conduct a minimum of eighty (80) hours of educational sessions based upon the emergency medical service curricula, which in content are either less than or equal to the primary instructor’s level of clinical certification. (3) Complete a minimum of twelve (12) hours of continuing education that specifically addresses the topic of educational philosophy and techniques, offered or approved by the affiliating training institution. (4) Be evaluated by the training institution in regard to instructional skills and compliance with existing standards of the training institution and the commission at least once per course. (5) Every two (2) years present, to the agency, evidence of compliance with this subsection during the period of certification as prescribed by the commission. (6) Maintain the prerequisite certification described in subsection (a)(1)(C). Mr. Wark is requesting an extension of his paramedic license and primary instructor certification. Mr. Wark’s license and certification both expired on September 30, 2016 while he was off work for medical since December 2015. He is requesting an extension until September 30, 2017 to allow time to finish his hours and submit for recertification. Staff recommends: Approve based on past Commission action.

Ron Wark

A motion was made by Commissioner Mackey to approve the staff recommendation. The motion was seconded by Commissioner Hoggatt. The motion passed.

PROVIDER WAIVER REQUESTS

The following requested a waiver 836 IAC 3-2-1 Air ambulances; general requirements (c) Advanced life support rotorcraft ambulance service provider organizations will have an agreement with one (1) or more supervising hospitals for the following services: (1) Continuing education. (2) Audit and review. (3) Medical control and direction. (4) Provide liaison and direction for supply of medications, fluids, and other items utilized by the provider organization. (5) Safety and survival programs and education. The agreement shall include a detailed description of how such services will be provided to the advanced life support rotorcraft ambulance service provider organization. In those cases where more than one (1) hospital enters into an agreement, or seeks to enter into an agreement, with an advanced life support rotorcraft ambulance service provider organization as a supervising hospital, an interhospital
agreement will be provided to the commission that clearly defines the specific duties and responsibilities of each hospital to ensure medical, safety, and administrative accountability of system operation. An agreement is not required when the hospital and the provider are the same organization. Air Methods Corporation is requesting a renewal of their waiver of having a supervising hospital. The currently work very closely with University of Louisville but U of L is not currently certified as a supervising hospital. Staff recommends: Approval based on previous Commission action (Jason Smith is working with them to see about them being certified)

Air Methods- Kentucky

A motion was made by Commissioner Valentine to approve the staff recommendation. The motion was seconded by Commissioner Champion. The motion passed.

The following requested a waiver of 836 IAC 1-1-5 Reports and records Sec. 5. (a) All emergency medical service provider organizations shall comply with this section. (b) All emergency medical service provider organizations shall participate in the emergency medical service system review by collecting and reporting data elements. The elements shall be submitted to the agency by the fifteenth of the following month by electronic format or submitted on disk in the format and manner specified by the commission. The data elements prescribed by the commission are the following National Emergency Medical Service Information System (NEMSIS), created by the National Association of EMS Directors in partnership with the federal National Highway Traffic Safety Administration data elements: Air Methods is requesting a renewal of this waiver to submit data collection. Although the aircraft is based in Indiana the majority of their runs initiate out of Kentucky. Staff recommends: Approval based on previous Commission action

Air Methods- Kentucky

A motion was made by Commissioner Mackey to approve the staff recommendation. The motion was seconded by Commissioner McCullough. The motion passed.

The following requested a waiver of Air Methods is requesting a renewal of this waiver to only carry pediatric equipment on the fixed wing aircraft. Although Air methods holds the certification, the team is supplied by Kosairs Children’s hospital and the team brings most of the equipment with them. Staff recommends: Approval based on previous Commission action

Air Methods- Kentucky

A motion was made by Commissioner Mackey to approve the staff recommendation except for runs that originate in Indiana those will still require a run report. The motion was seconded by Commissioner McCullough. The motion passed

The following requested a waiver of 836 IAC 3-3-5 Staffing Sec. 5. (a) Each certified fixed-wing ambulance while transporting an emergency patient shall be staffed by no less than three (3) people and include the following requirements: (1) The first person shall be a properly certified pilot who shall complete an orientation program covering flight and airmedical operations as prescribed by the air-medical director. (2) The second person shall be an Indiana certified paramedic or registered nurse or a physician. (3) The third person shall be any appropriate personnel to properly care for the medical needs of the patient as required on board the fixed-wing aircraft in the patient compartment. (4) All medical personnel on board the aircraft must be trained in air transport problems and
principles of flight physiology. Air Methods is requesting a renewal of this waiver to allow the second person to not be certified or licensed in Indiana as they are all certified or licensed in Kentucky as the team comes from Kosairs Children’s Hospital out of Kentucky. Staff recommends: Approval based on previous Commission action.

Air Methods

A motion was made by Commissioner Mackey to approve the waiver. The motion was seconded by Commissioner Valentine. The motion passed.

The following requested a waiver of SECTION 16. (a) This SECTION supersedes 836 IAC 2-7.2-3 (B) Endotracheal intubation devices, including the following: (i) Laryngoscope with extra batteries and bulbs. (ii) Laryngoscope blades (adult and pediatric, curved and straight). (iii) Disposable endotracheal tubes, a minimum of two (2) each, sterile packaged, in sizes 3, 4, 5, 6, 7, 8, and 9 millimeters inside diameter. (D) Medications limited to, if approved by the medical director, the following: (i) Acetylsalicylic acid (aspirin). (ii) Adenosine. (iii) Atropine sulfate. (iv) Bronchodilator (beta 2 agonists): (AA) suggested commonly administered medications: (aa) albuterol; (bb) ipratropium; (cc) isoetharine; (dd) metaproterenol; (ee) salmeterol; (ff) terbutaline; and (gg) triamcinolone; and (BB) commonly administered adjunctive medications to bronchodilator therapy: (aa) dexamethasone; and (bb) methylprednisolone. (v) Dextrose. (vi) Diazepam. (vii) Epinephrine (1:1,000). (viii) Epinephrine (1:10,000). (ix) Vasopressin. (x) Furosemide. (xi) Lidocaine hydrochloride, two percent (2%). (xii) Amiodarone hydrochloride. (xiii) Morphine sulfate. (xiv) Narxone. (xv) Nitroglycerin. Carlisle Lions is requesting a renewal waiver of the equipment and medications in the Intermediate rules. Carlisle Lions has ADV EMTs that are certified at the ALS level. Currently our rules do not have ADV EMT so the provider needs to follow the rules at the intermediate level. Staff recommends: Approval – based on previous Commission action.

Carlisle Lions Community Ambulance

A motion was made by Commissioner Valentine to approve the waiver. The motion was seconded by Commissioner Hamilton. The motion passed.

The following requested a waiver 836 IAC 2-7.2-1 General requirements for Advanced/Intermediate EMT provider organization (f) The emergency medical technician-intermediate provider organization shall do the following: (1) Maintain a communications system that shall be available twenty-four (24) hours a day between the emergency medical technician-intermediate provider organization and the emergency department, or equivalent, of the supervising hospital using UHF (ultrahigh frequency) and cellular voice communications. The communications system shall be licensed by the Federal Communications Commission. (2) Maintain an adequate number of trained personnel and emergency response vehicles to provide continuous, twenty-four (24) hour advanced life support services. Crawford County EMS is requesting a renewal of waiver of the 24 hour rule. They currently have 7 ADV EMT or paramedics (that will function as ADV EMT’s) and waiting on 7 more to finish testing and become certified. This will allow coverage when personnel are available. Staff recommends: Approve – based on previous commission action. 6 month update e-mail EMS District Manager

Crawford County

A motion was made by Commissioner Mackey to approve the waiver. The motion was seconded by Commissioner Valentine. The motion passed.
The following requested a waiver of 836 IAC 2-2-1 General requirements for paramedic provider organizations (g) Each paramedic provider organization shall do the following: (1) Maintain an adequate number of trained personnel and emergency response vehicles to provide continuous, twenty-four (24) hour advanced life support services. Letts Community VFD is requesting a waiver of the 24 hour rule. They are upgrading to paramedic level and have 5 paramedics that volunteer for their department. There could be times that a paramedic is not available to cover a call but they are dual dispatched with an ALS Ambulance from Decatur County EMS. Staff recommends: Approval based on previous Commission action.

Letts Volunteer Fire Department

A motion was made by Commissioner Valentine to approve the waiver. The motion was seconded by Commissioner Hoggatt. The motion passed.

The following requested a waiver of 836 IAC 2-2-1 General requirements for paramedic provider organizations Sec. 1. (a) A person shall not: (1) furnish; (2) operate; (3) maintain; (4) advertise; or (5) otherwise engage in providing; emergency medical services as a paramedic provider organization unless the person is certified by the commission as a paramedic provider organization Logansport Fire Department is a BLS Ambulance Service and is requesting a waiver to allow Logansport FD personnel licensed as paramedic to operate at the paramedic level when responding with Prompt Ambulance Service. Prompt Ambulance and Logansport FD have written up a MOU and the MD has also approved this request.

Logansport Fire Department

A motion was made by Commissioner Valentine to table this waiver pending further research by staff. The motion was seconded by Commissioner Hoggatt. The motion passed.

The following requested a waiver of 836 IAC 2-2-1 General requirements for paramedic provider organizations (g) Each paramedic provider organization shall do the following: (1) Maintain an adequate number of trained personnel and emergency response vehicles to provide continuous, twenty-four (24) hour advanced life support services. Madison Twp FD is requesting a waiver of the 24 hour rule. They are currently certified at the ALS level but with recent resignations and injuries they may experience times with no ALS personnel for coverage. They do currently have in place mutual aid agreement with two other ALS provider organizations for coverage. They are currently in a hiring process to gain more ALS personnel.

Madison Township Fire Department (Morgan County)

A motion was made by Commissioner Valentine to approve the waiver for six (6) months. The motion was seconded by Commissioner Champion. The motion passed.

The following requested a waiver of 836 IAC 2-2-1 General requirements for paramedic provider organizations (h) A paramedic ambulance service provider organization must be able to provide a paramedic level response. For the purpose of this subsection, "paramedic response" consists of the following: (1) A paramedic. (2) An emergency medical technician or higher. (3) An ambulance in compliance with the requirements of section 3(e) of this rule. (4) During transport of the patient, the following are the minimum staffing requirements: (A) If paramedic level advanced life support treatment techniques have been initiated or are needed: (i) the ambulance must be staffed by at least a
paramedic and an emergency medical technician; and (ii) a paramedic shall be in the patient compartment. (B) If an emergency medical technician-intermediate level advanced life support treatment techniques have been initiated or are needed: (i) the ambulance must be staffed by at least an emergency medical technician-intermediate and an emergency medical technician; and (ii) an emergency medical technician-intermediate shall be in the patient compartment. (C) If advanced life support treatment techniques have not been initiated and are not needed: (i) the ambulance must be staffed by at least an emergency medical technician; and (ii) an emergency medical technician shall be in the patient compartment. (i) For a paramedic provider organization, when an advanced life support nontransport vehicle is dispatched for a paramedic response, it shall, at a minimum, be staffed by a paramedic. Prompt Ambulance Service is requesting a waiver to allow them while doing a NICU transport from a hospital to supply only the EMT driver. The other staff will be the required staff from the transporting hospital.

Prompt Ambulance

A motion was made by Commissioner Zartman to table the waiver. The motion was seconded by Commissioner Valentine. The motion passed to table the waiver.

The following requested a waiver IC 16-31-3-23.5 Use of overdose intervention drugs; prescription, drug order, or protocol Sec. 23.5. (a) The following may administer an overdose intervention drug to an individual who is suffering from an overdose: (1) An advanced emergency medical technician. (2) An emergency medical responder. (3) An emergency medical technician. (4) A firefighter or volunteer firefighter. (5) A law enforcement officer. (6) A paramedic. (b) A health care provider who is licensed in Indiana and whose scope of practice includes the prescribing of medication may write a prescription, drug order, or protocol for an overdose intervention drug for any of the following: (1) An advanced emergency medical technician. (2) An emergency medical responder. (3) An emergency medical technician. (4) A fire department or volunteer fire department. (5) A law enforcement agency. (6) A paramedic. (c) A pharmacist licensed under IC 25-26 may dispense a valid prescription, drug order, or protocol for an overdose intervention drug issued in the name of any of the following: (1) An advanced emergency medical technician. (2) An emergency medical responder. (3) An emergency medical technician. (4) A fire department or volunteer fire department. (5) A law enforcement agency. (6) A paramedic. (a) "Basic life support", for purposes of IC 16-31, means the following: (1) Assessment of emergency patients. (2) Administration of oxygen. (3) Use of mechanical breathing devices. (4) Application of anti-shock trousers. (5) Performance of cardiopulmonary resuscitation. (6) Application of dressings and bandage materials. (7) Application of splinting and immobilization devices. (8) Use of lifting and moving devices to ensure safe transport. (9) Administration of epinephrine through an auto-injector. (10) Blood glucose monitoring that is not more invasive than a capillary sampling using a lancet. (11) Other procedures authorized by the Indiana emergency medical services commission, including procedures contained in the revised national emergency medical technician basic training curriculum guide. (b) Except as provided by: (1) subsection (a)(9) and the training and certification standards established under IC 16-31-2-9(3); and (2) the training standards established under IC 16-31-2-9(4); the term does not include invasive medical care techniques or advanced life support. Dr. Smith would like to allow his BLS providers and BLS personnel to administer epine to using a vial and syringe to manually draw up the correct dose. Staff recommends: EMS Commission cannot waive state law and the definition for Basic Life Support specifically states ep through auto-injector.

Reid Hospital

The Commission has no authority to waive the rules that are requested. Dr. Smith withdrew the request.
The following requested a waiver of 835 IAC 2-2-3, 2-7.2-3 and 2-14 ET Tubes sizes 3, 4, 5 (2) Endotracheal intubation devices, including the following: (A) Laryngoscope with extra batteries and bulbs. (B) Laryngoscope blades (adult and pediatric, curved and straight). (C) Disposable endotracheal tubes, a minimum of two (2) each, sterile packaged, in sizes 3, 4, 5, 6, 7, 8, and 9 millimeters inside diameter. Dr. Smith has changed area protocol and has removed intubation of children under the age of 8. He is requesting that the ALS provider organizations supervised by Reid Health System not carry sizes 3, 4 and 5 from all ALS ambulances and ALS non-transport units.

Reid Hospital

A motion was made by Commissioner Zartman to approve sizes 3 and 4 but to deny the size 5. The motion was seconded by Commissioner Brown. The motion passed.

The following requested a waiver of 836 IAC 2-7.2-3 Emergency medical technician-intermediate provider organization operating procedures Authority: IC 16-31-2-7; IC 16-31-3-14; IC 16-31-3-14.5; IC 16-31-3-20 Affected: IC 16-31-3 (B) Endotracheal intubation devices, including the following: (i) Laryngoscope with extra batteries and bulbs. (ii) Laryngoscope blades (adult and pediatric, curved and straight). (iii) Disposable endotracheal tubes, a minimum of two (2) each, sterile packaged, in sizes 3, 4, 5, 6, 7, 8, and 9 millimeters inside diameter. (D) Medications limited to, if approved by the medical director, the following (i) Acetylsalicylic acid (aspirin). (ii) Adenosine. (iii) Atropine sulfate. (iv) Bronchodilator (beta 2 agonists); (AA) suggested commonly administered medications: (aa) albuterol; (bb) ipratropium; (cc) isethionate; (dd) metaproterenol; (ee) salmeterol; (ff) terbutaline; and (gg) triamcinolone; and (BB) commonly administered adjunctive medications to bronchodilator therapy: (aa) dexamethasone; and (bb) methylprednisolone. (v) Dextrose. (vi) Diazepam. (vii) Epinephrine (1:1,000). (viii) Epinephrine (1:10,000). (ix) Vasopressin. (x) Furosemide. (xi) Lidocaine hydrochloride, two percent (2%). (xii) Amiodarone hydrochloride. (xiii) Morphine sulfate. (xiv) Naloxone. (xv) Nitroglycerin. United States Steel is requesting a renewal of this waiver of the equipment and medications in 836 IAC 2-7.2-3 in the Intermediate rules. United States Steel has ADV EMTs. Currently our rules do not have ADV EMT so the provider needs to follow the rules at the intermediate level. Staff Recommends: Approval based on previous Commission action

US Steel

A motion was made by Commissioner Valentine to approve the waiver. The motion was seconded by Commissioner Zartman. The motion passed.

The following requested a waiver of 836 IAC 2-7.2-3 Emergency medical technician-intermediate provider organization operating procedures Authority: IC 16-31-2-7; IC 16-31-3-14; IC 16-31-3-14.5; IC 16-31-3-20 Affected: IC 16-31-3 d) The emergency medical technician-intermediate provider organization shall ensure the following: (1) That stocking and administration of supplies and medications are limited to the Indiana emergency medical technician-intermediate curriculum. Procedures performed by the emergency medical technician-intermediate are also limited to the Indiana emergency medical technician-intermediate curriculum. United States Steel is requesting a waiver of adding CPAP, Cyanokit, Epinephrine 1:10,000, Toradol, Zofran and Atrovent. This is a renewal of a waiver granted in January 2013. US Steel has about 150 amb calls a year. 2015 to now numbers: CPAP = 0 Atrovent = 2 Zofran = 12 Toradol = 6 Epi 1:10,000 = 2 Morgan Lens = 3 Staff recommends: Approval based on previous Commission action

US Steel
A motion was made by Commissioner Valentine to approve the waiver. The motion was seconded by Commissioner McCollough. One Commission member opposed the waiver. The motion passed.

The following requested a waiver of 836 IAC 1-1-8 Operating procedures Authority: IC 16-31-2-7; IC 16-31-3-14; IC 16-31-3-14.5; IC 16-31-3-20 Affected: IC 4-21.5; IC 16-31-3 (g) An emergency medical service provider organization shall not engage in the provision of advanced life support unless the: (1) emergency medical service provider organization is certified under 836 IAC 2; and (2) vehicle meets the requirements of 836 IAC 2. United States Steel is requesting a waiver of adding to the EMT’s and ADV EMT’s the use of Morgan lens. This is a renewal of a waiver. Staff recommends: Approval based on previous Commission action

US Steel

A motion was made by Commissioner Valentine to approve the staff recommendation. The motion was seconded by Commissioner Hoggatt. The motion passed.

Training Institution Waiver Requests

The following requested a waiver of Rule 2. Emergency Medical Services Training Institution 836 IAC 4-2-1 General requirements for training institutions; staff Sec. 1. (a) All institutions administering or seeking to administer emergency medical services training programs shall: (g) Certified advanced life support training institutions conducting paramedic training programs on or after July 1, 2008, shall show written proof of national accreditation of the program. Scott County Training Institution is requesting a waiver to be able to conduct a paramedic training program to gain their nations accreditation. They have received their letter of review and are working through the process. Staff recommends: Approval pending letter of review

Scott County EMS

A motion was made by Commissioner Zartman to approve the waiver with the stipulation that the classes do not start without their letter of review from CoAMPS. The motion was seconded by Commissioner Valentine. The motion passed.

OLD BUSINESS

a. Tables Business and/or waivers-none at this time
b. Current ongoing studies- none at this time
c. National Registry Implementation Briefings – Director Garvey commented that the briefings were going well. (see attachment #4)
d. Final readoption of 836 IAC

A motion was made by Commissioner Mackey to approve LSA Doc. # 16-328, concerning the readoption of 836 IAC that will expire on January 1 of the seventh year in which this rule took effect, as published in the Indiana Register on August 10, 2016. The motion was seconded by Commissioner Valentine. The motion passed.

NEW BUSINESS

a. EMS Commission meeting date for 2017
Mrs. Candice Pope read into record the 2017 EMS Commission dates and stated that if there were no objections the months for the EMS Commission and the TAC meetings will be switched to try to help with not having meetings close to holidays and help with attendance.

January 20, 2017 at 10 am held at Brownsburg Territory
March 24, 2017 at 10am location TBA
May 19, 2017 at 10am location TBA
July 28, 2017 at 10am location TBA
September 20 time TBA and location TBA
November 17 at 10am location TBA

ASSIGNMENTS
   a. Past Assignments
   b. Today’s Assignments

ADMINISTRATIVE PROCEEDINGS

1. Administrative Orders Issued
   a. Personnel Orders
      i. 1 Year Probation
      Order No. 0087-2016 Holton, Benjamin A.
      No action required, none taken
      Order No. 0085-2016 Tolnay, Meagan N.
      No action required, none taken
      Order No. 0086-2016 Young, Steven L.
      No action required, none taken
      ii. 2 Year Probation
      Order No. 0059-2016 Miller, Dakotah L.
      No action required, none taken
      iii. Probation
      Order No. 0056-2016 Story, Colton
      No action required, none taken
      iv. Renewal of Emergency Orders
      Order No. 0022-2016 Amones, Gregory A.
      No action required, none taken
      Order No. 0030-2016 Anderson, Bryan E.
      No action required, none taken
      Order No. 0105-2015 Ison, Derreck A.
No action required, none taken
Order No. 0043-2016 Keller, Cary M.
No action required, none taken
Order No. 0044-2016 Ontiveros, Jamie M.
No action required, none taken

\[ \text{v. Emergency Order} \]
Order No. 0091-2016 Boring, Rodney
No action required, none taken
Order No. 0084-2016 Powell, Nicholas L.
No action required, none taken

**STAFF REPORTS**

A. Data Report – Mr. Michael Lockard discussed the report that was sent to the EMS Commission members. Mr. Lockard asked the Commission to approve any providers that are prepared for v 3 on NEMSIS to be able to start submitting their version 3 data.

A motion was made by Commissioner Valentine to allow providers that are on version 3 to start submitting their data to the state. The motion was seconded by Commissioner Mackey. The motion passed.

1. Mr. Lockard discussed item 2 on the report which reads: Indiana NEMSIS V3.4.0 Element Addition Update
   a. Based on the information presented at the last EMS Commission meeting regarding the syncing of the Indiana Administrative Code (836 IAC 1-1-5 Reports and Records), this is to finalize the IAC so that the parts regarding data collection requirements and the portions dealing with the legal requirements for an Indiana EMS medical record that must be retained for seven (7) years
   b. This is to request the following elements be included in the Indiana EMS data elements under NEMSIS V3.4.0
      i. Patient’s Last Name
      ii. Patient’s First Name
      iii. Patient’s Middle Initial/Name
      iv. Patient’s Home Address
      v. Patient’s Home City
      vi. Closest Relative/Guardian First Name
      vii. Closest Relative/Guardian Last Name
      viii. Patient Care Report Narrative

A motion was made by Commissioner Valentine to accept item 2 of the report. The motion was seconded by Commissioner Zartman. The motion passed.

Discussion was held regarding what a run sheet is and what it should contain. Commissioner Craigin suggested putting together an interdisciplinary group to look at the issue.

A motion was made by Commissioner Hoggatt to assign the agency staff to put together the group. The motion was seconded by Commissioner Valentine. The motion passed.

B. Operations Report – Ms. Robin Stump reported that providers should have received information regarding death benefits from District managers. Ms. Stump introduced Ms. Amber Miller as a new staff member. Ms.
Stump briefly discussed opened staff positions. Ms. Stump also announced that Mrs. Elizabeth Westfall has accepted a position with the Training Division.

C. Compliance Report- Mrs. Candice Pope reported to the Commission that the reciprocity process for EMTs has been updated. If a person applies for reciprocity at the EMT level and has a current and valid National Registry EMT the person will only have to take the POST course and exam in order to gain their full two year Indiana certification. Mrs. Pope reported that currently there are 17 pending audits, 14 have been sent letters to let them know that they are now expired. We have 170 audit that have been cleared, 172 certification that have been audited, 11 that have been auto-rejected, and have held 2 more team reviews since the last EMS Commission meeting.

D. Certifications report – (see attachment #5) – Chairman Turpen assigned staff to send out a direct mail letter to complete the POST.

E. Training Report – (see attachment #6) – Mr. Tony Pagano briefly talked about his report. Mr. Pagano also discussed the AEMT cardiac exam. Chairman Turpen assigned Commissioner Zartman to analyze and audit the AEMT exam to see if it is needed or not. Mr. Pagano introduced Mrs. Elizabeth Westfall. Mrs. Westfall reported that 250 bleeding control kits have been distributed. The bleeding control training has been held in 24 counties. There have been 2 completed TECC trainings one will be held in District 9 and one will be held in District 10. There is a TECC class pending in District 3 for December.

STATE EMS MEDICAL DIRECTOR’S REPORT - Dr. Olinger reported that the medical director’s conference was well attended and have received good feedback. Only 26 physicians attended. Dr. Olinger would like to see better physician attendance. This year the conference will be held in conjunction with the Indiana ASEPS. Dr. Olinger briefly discussed Narcan administrations. He states that not all Narcan administrations are due to drug overdoses and not all Narcan administrations do not equal a save.

STATE EMS DIRECTOR’S REPORT - Director Garvey reported that the agency is continuing work on the rule package with legal. The revisions will be sent to the TAC and EMS Commission for review. The strategic plan is still moving forward. Director Garvey also mentioned the opened positions in the EMS sections.

CHAIRMAN’S REPORT AND DIRECTION- Chairman Turpen mentioned the upcoming Eagles Consortium in February in Dallas and the NASP will be in January and will be held in New Orlands. Chairman Turpen highly recommends both conferences.

NEXT MEETING
January 20, 2017 at 10am
Brownsburg Fire Territory

ADJOURNMENT
A motion was made by Commissioner Hamilton to adjourn the meeting. The motion was seconded by Commissioner Zartman. The motion passed. The meeting was adjourned at 12:45pm.

Approved __________________________________________
G Lee Turpen, Chairman