

ERTAC
 March 12, 2015 Minutes
 Billings Clinic Hosts

	DISCUSSION / CONCLUSIONS	RECOMMENDATIONS ACTION PLAN	RESPONSIBLE Individual
1400	<p>FACILITIES Represented: Billings Clinic – Brad, Drew, Dr. Englehart, Mara B., Craig P., Courtney B., Jami M., Rob C. Beartooth BC –Chris B., Dr. Exley Big Horn Hospital- Nancy H., Vera O., Lindsay T., Bozeman – Sam M. Columbus – Pam, Jackie M. Colstrip – Natasha & Dr. Ortiz Crow N. Cheyenne HIS – Rebekah W. Culbertson – Teresia, Kyla Ekalaka – Dale, Raquel W. Forsythe – Mindy Price Glasgow Heidi S., Joy L. Glendive- James Barnick, Tricia Rittal Livingston – Stacy K. Malta - Lonna, Susan D. MT Health Network- Dr. Drivdahl-Smith, Christine W. Plentywood – Lisa, Adam Graham PA Scobey –Maria, Zoe McCarty NP Stat Air – Clay B. SVH – Sam K., Eric F., Dr. McKenzie, State MT EMS & Trauma – Alyssa, Carol Valley Med Flight – Kyle G. Wheatland Memorial- Sarah M., Bobbie Wolf Point – Kelsey H, Robin W.</p>	<p>49 attendees representing 23 entities!</p>	
Case Presentations	<p>Case #1 Blast Injuries (2) cases – Brad Von Bergen RN & Lonna Crowder RN Discussed importance of early airway management, ventilation issues, and common injuries associated with</p>	<p>Education & Informational</p>	

All data, reports, records, evaluation, minutes, reviews, and other documents completed by or at the request of this Committee in fulfilling its role and responsibilities are deemed peer review and therefore confidential pursuant to the SCLHS Policy on Confidentiality Pertaining to Quality Reports and Peer Review, and pursuant to the Montana State Peer Review Protection Act [Sec. 37-2-201, et seq., MCA, and 50-16-201, 50-6-415 et seq., MCA].

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	blasts Case #2 Multitrauma – Samantha Kaufman RN Discussed ATLS management, early transfer to definitive care, and TBI management.		
GENERAL MEETING	Called to order at 1510 by Dr. Englehart, Additional Facilities Joining General Meeting:		
Review of Minutes	Minutes of December 2014; motion to approve and seconded; APPROVED	Provided to ERTAC chair and State Trauma EMS.	Complete.
PI Cases	PI Discussion 9 cases presented: <ul style="list-style-type: none"> • ISS > 15 without TTA (1) EMS report not clear until after the patient had arrived. • GCS < 8 without ETT or rescue airway (1)MVC - Physician decision. Recommend using Ativan rather than Haldol for agitation. Narcan was not indicated in this case. (2) GLF vs. assault – GCS deteriorated over time, (+) alcohol. Neurosurgeon desire for not using a paralytic is not acceptable. Log roll off backboard early and keep in full spine precautions. • ISS < 20 and death (1) Assault – Difficult to review 	Recommend revamping the reporting system to require answering the critical questions (GCS, LOC, VS) needed to be prepared. Recommend intubation with deterioration. Recommend case be both Peer reviewed and process reviewed.	

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	<p>as Trauma Flow sheet not used and notes sparse. No autopsy was performed. Discussed confirmation of airway, chest decompression with loss of VS. (2) Assault – Discussed airway preferences/locations (nasal tube not best choice in this case) No autopsy was performed. (3) GLF – Discussed comfort care, non-surgical admits, respiratory monitoring, and early epidural for pain control. (4) GLF on Coumadin – Discussed use of Coumadin in patients at high risk for falling.</p> <ul style="list-style-type: none"> • IVF > 2000 NS (1) MVC Discussed early use of blood products, splints (pelvic binder, long bone), use of US, crystalloid choices, and need for early call for transfer. (2) Stab to chest – Discussed permissive hypotension, pressor use, timing of blood product transfusion 	<p>Recommend discussing option of stopping Coumadin and other anticoagulants in patients at high risk for falling with the patient, family, and PCP.</p> <p>Recommend looking at Isolyte use rather than NS d/t the high pH of Isolyte and it's compatibility with blood. Recommend allowing the SBP to be around 90 without giving crystalloids. Recommend early use of blood products. Recommend NOT using a pressor unless indicated (i.e. neurogenic shock).</p>	
Sub Committee Reports	<p>Treasurer</p> <ul style="list-style-type: none"> • \$1400 in ERTAC funds <p>State</p> <ul style="list-style-type: none"> • Designation updates for December-Feb. provided • Facility resource guide is being distributed. 	<p>State has applied for funds to assist with TEAM courses.</p>	Brad

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	<ul style="list-style-type: none"> • www.dphhs.mt.gov new re-designed website; EMS & Trauma can be found by using the search box • MTS presentations are available on the trauma system website & listserv. • 2015 legislature; link available on EMSTS website. • ATLS & PHTLS 2015 schedules available • 2015 trauma calendar is available on website for download. • Web based collector training go live. Mandatory training for paper abstract users. • State data validation being developed. • ENPC instructor courses being offered. • June 18-19 pediatric disaster preparedness course in Billings; free for 60 participants. • 6th Annual Rimrock Trauma Symposium April 23 at Billings Clinic (SVH and BC joint conference) • RMRTS planning is well underway with most speaker slots filled and several vendors already signed up. 	<p>Please contact your legislators.</p> <p>Contact Carol K. with questions regarding web based collector.</p> <p>Registration is still open. The registration form link is on the MT state website.</p>	
Informational	<p>Samantha Kaufman, RN has joined SVH Trauma Services as Trauma Supervisor.</p> <p>The next meeting is June 11, 2015 at St. Vincent Healthcare</p>	<p>Please welcome Sam to our family. Her email is Samantha.kaufman@sclhs.net Office:406-237-4171</p>	
Adjournment	At 1700 by Dr. Englehart		

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