

How Good Are Paramedics at Shadow-Boxing?

Developing a prehospital US program

Nick Simpson, MD FACEP FAEMS

No financial

'es

A prehospital US program needs:

- C hampions
- S torage
- F eedback



Select Champions



Engage respected MDs

Identify influential physicians to champion the program and provide medical oversight.



Empower command staff

Secure buy-in from command staff to allocate resources and enforce protocols.



Recruit skilled medics

Select motivated and skilled medics to serve as mentors and trainers.

A diverse group of champions will ensure successful adoption and sustainability.

Program Champions



Dr. Aaron Robinson Emergency Physician and EMS Medical Director



Chief Kyle Koelln EMS Battalion Chief of Operations



Chief Kent Koelln EMS Battalion Chief of Operations



Spencer Schwartz P3 Program Lead and Hennepin EMS Paramedic



Hailey Kennedy P3 Program Lead and Hennepin EMS Paramedic



Sam Hanes P3 Program Lead and Hennepin EMS Paramedic

Image Storage Options: Pros and Cons

Cloud Storage - Monthly Fee + No physical space/servers required + Accessible from anywhere + Allows for QA/feedback



Local Storage

Potential Upfront cost
 Need physical space/servers
 +/- Possibly accessible through VPN
 + Allows for QA/feedback

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No Storage

+ No cost
+ No physical space/servers required
- Does not allow for QA/feedback

*Unrealistic for growth of program and skill level of prehospital personnel

education and qa -> Feedback

Initial Planning

Establish robust quality assurance processes and feedback loops.

Initial Roll Out

Identify a smaller group of interested personnel to utilize ultrasound in the field.

Review 100% of ultrasound images by experienced physicians/sonographers.

As the paramedic champions gain experience

Empower paramedic champions to create educational material and participate in the QA process.

More mature program

Expand ultrasound devices to the entire service.

Utilize ultrasound champions to oversee the QA process with select images forwarded to MDs as needed.

A prehospital US program needs:

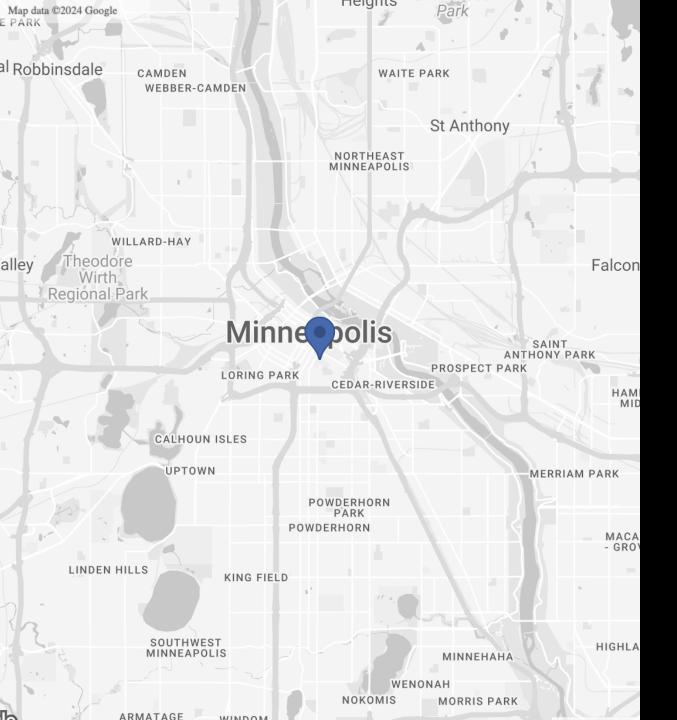
- C hampions
- S torage
- F eedback







Link to access Hennepin EMS Protocols

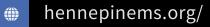


hennepin ems

701 Park Ave, Minneapolis MN 55415

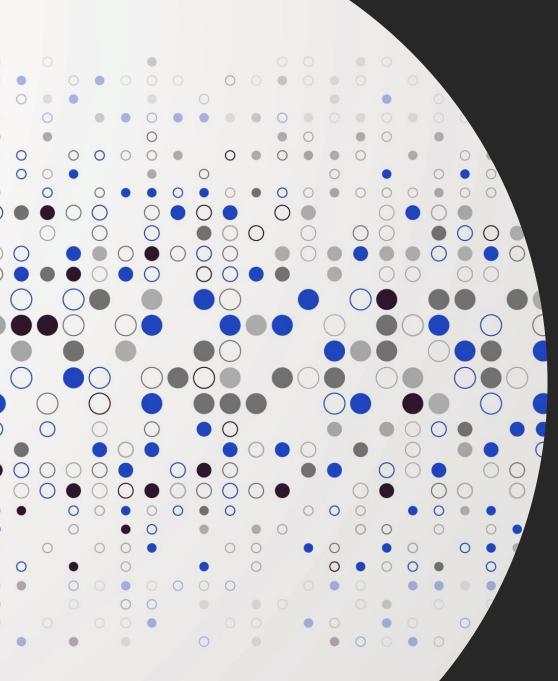


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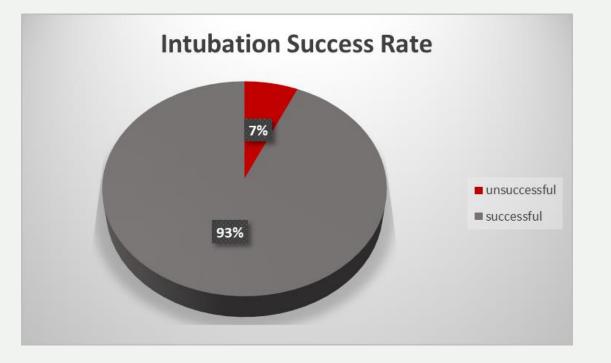


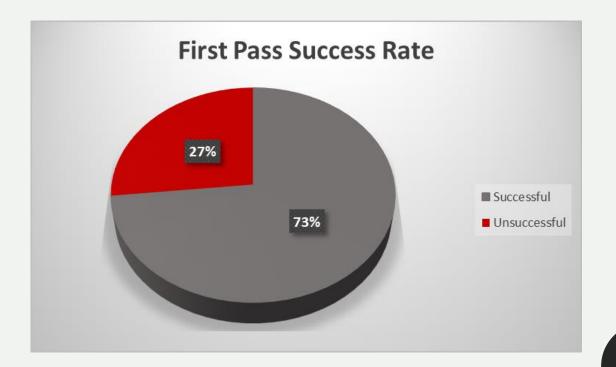


Glidescope: the first 100 uses



Intubation and First Pass Success Rate



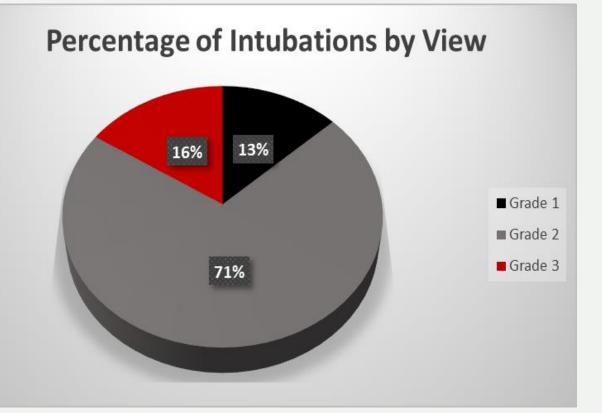


What did we need to train out of our providers to enhance Video intubation success

• Don't sweep the tongue

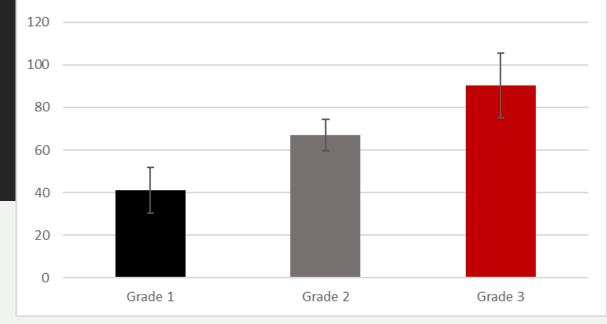
- Review of anatomy
- •A good view vs. an OK view

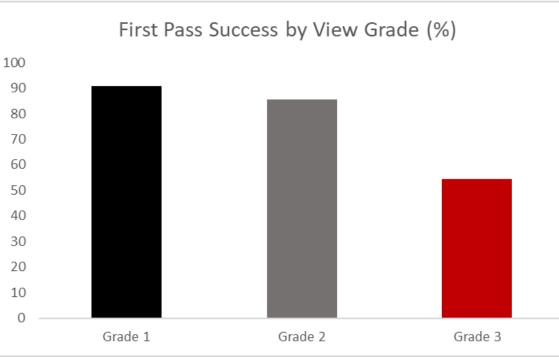
Evaluation of Intubations by View*



* Lehane-Cormack grade

Time to Intubation (Seconds)





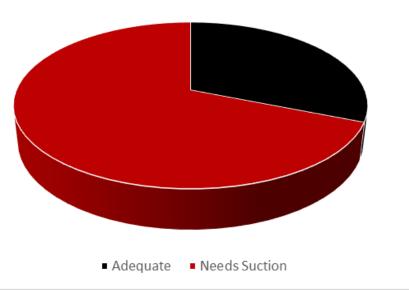
What else did we learn about our providers intubation technique

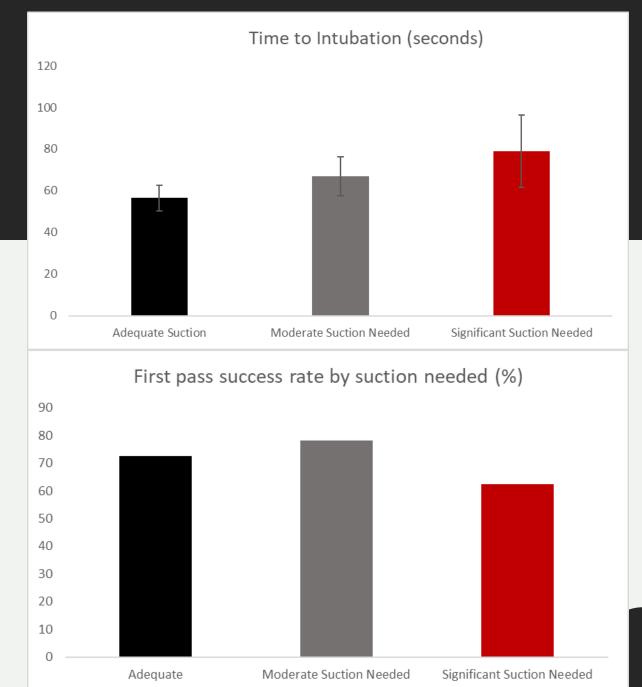
•Suction!

•Greatly needed and greatly underutilized

Problems that influence the view: Suction

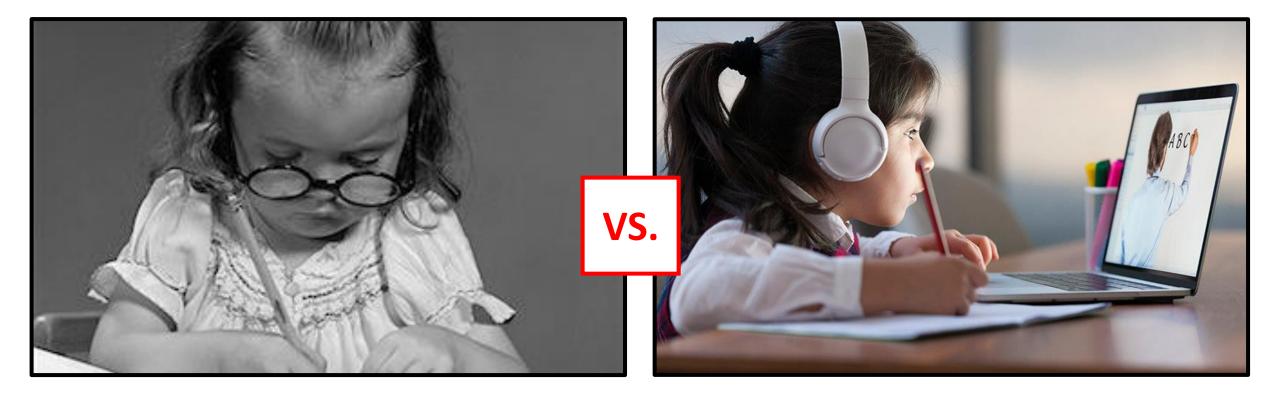
Percentage of Intubations requring additional suction





Overall Recommendations

- •**Optimize your view** pull back if in too deep and cannot visualize epiglottis and reposition into vallecular space
- •Midline approach tongue is not off to the side
- •Suction, suction, suction can make an adequate view severely compromised



EMS Educational Initiatives In New Mexico

Can We Extend The Dinner Table Conversation?





Weekly AFR Case Studies



AFR Case Studies: Mountain Rescue





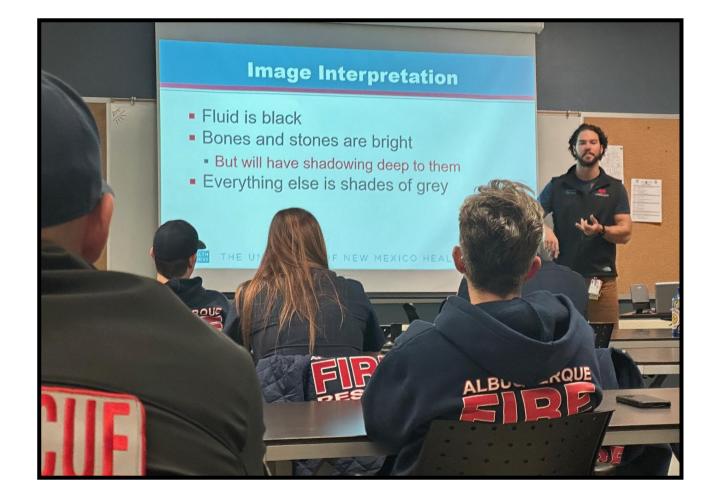






311 views • 1 year ago

How Can We Get EM Residents More Interaction With EMS Providers?



We All Like To Learn From Our Patients...But Sometimes Getting Follow Up Is Difficult

The way in which I am able to get follow-up currently include:	Count (n=667)
I am not currently able to get follow-up	82 (12.3%)
A formal process through my EMS agency	219 (32.8%)
Asking my medical director	229 (34.4%)
Asking a friend or colleague at the hospital	365 (54.7%)
Other	116 (17.4%)
No Response (i.e., did not select any of these options)	1 (0.1%)

Barriers to being able to currently get follow-up on patients I care for	Count (n=667)
include:	
No standardized process at my EMS agency	414 (62.1%)
Don't feel comfortable asking my medical director	117 (17.5%)
Not enough time	140 (21.0%)
Too busy at work	166 (24.9%)
I don't find it useful	15 (2.2%)
Other	146 (21.9%)
No Response (i.e., did not select any of these options)	4 (0.6%)

EMS PROVIDERS

Wondering what happened to a patient you brought to UNM/SRMC?

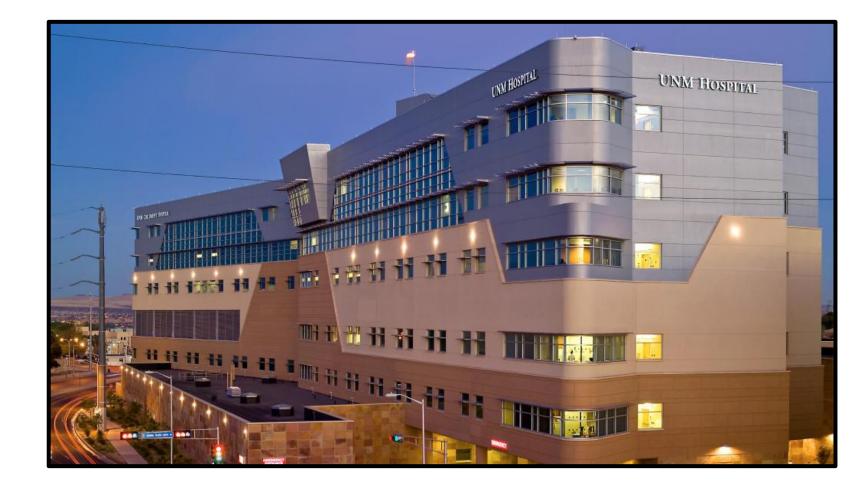
REQUEST PATIENT FOLLOW-UP WITH THIS FORM



https://redcap.link/unmemsfollowup



How Can We Extend The Reach Of The University Medical Center?



Rural and Tribal EMS ECHO

- BLS lectures on the 1st Tuesday and 3rd Thursday
 - Accommodate volunteer FF schedule
 - Average 42 participants from 12-15 agencies
- CAPCE accredited to issue CEs
 - Can watch the video later for asynchronous CE credit
- Incorporates EMS Fellows into didactics







VIDEO LIVE SHOWS ELECTIONS 538 SHOP 🔛 🔎

3 dead, 5 injured as biker gang shootout erupts in Red River, New Mexico

"There will be a zero tolerance from this point on," said the police chief.

By <u>Kevin Shalvey</u>, <u>Amanda M. Morris</u>, <u>Abigail Shalawylo</u>, and <u>Bill Hutchinson</u> **(F)** X **(C)** May 28, 2023, 11:46 AM



³ dead, 5 injured during motorcycle rally in New Mexico Police said three people were killed and five others hurt during a shootout between two outlaw biker ga...<u>Show More</u>