

## 11-15-21 Ad Hoc Committee re Whole Blood in EMS

Participants: Frieda Bright, Lynne Drawdy, Chief Chris Kammel, Dr. Peter Pappas, Michelle Rud, Rudy Rivas

Dr. Pappas explained that the Region 5 Trauma Advisory Board agreed to convene an ad hoc committee to look at use of whole blood by EMS. Dr. Pappas thanked Chief Kammel for bringing this issue forward and thanked all who volunteered to serve on the committee. He stated that committee's goal is to review the literature, best practices and develop guidelines for EMS agencies who wish to use whole blood.

Chief Kammel agreed to chair the committee. He stated that the biggest barrier is the inability to exchange blood that may expire with local trauma centers, and contracts with One Blood. Michelle Rud stated that Osceola Regional Medical Center has been using whole blood for over a year. She stated that they have had issues with limited supplies and usually only carry two to four units. They have a contract to use whole blood before using components. She stated that she also confirmed this is the Orlando Health practice as well. Frieda stated that here is not a shortage of whole blood, but the manufacture of this takes two and a half days and must be ordered in advance. It is only good for 21 days and if not used, is not returnable and is wasted. She stated that she knows that the helicopter services that use whole blood have a rotation system. Chief Kammel asked if the trauma centers could share in the cost and if they would be willing to set up a rotation system to keep whole blood from expiring. Rudy stated that he has raised this issue and we first need to demonstrate that this is viable and beneficial. Chief Kammel stated that he will send links to literature that shows the benefits. Rudy discussed coolers available and costs and stated that he will share this information. Chief Kammel stated that there was a \$10,000 investment to get the program operating in the helicopters and that their biggest barrier was that local trauma centers do not use whole blood. The group discussed costs and potential funding. Frieda stated that whole blood is approximately \$500 per unit. There is a state matching EMS grant (the state pays 75%) that might be a possibility. The group discussed storage at the hospitals; this would require extra effort by EMS. Frieda stated that One Blood has an inventory management software that might be of benefit. Frieda asked if we have an idea on how much whole blood would be needed; this may vary. She stated that contracts with each agency will be needed, and she will give her contract department a heads up. The group discussed the need for training on whole blood transfusions and Chief Kammel stated that the helicopter crews can assist with this. Michelle Rud asked if the helicopter crews had any hesitancy. She stated that they have experienced some hesitancy in use of TXA. Chief Kammel stated that each agency has to be motivated to want this.

The group discussed next steps:

- The group agreed to develop regional guidelines (a step by step procedure for implementing use of whole blood in EMS, including exchanges and a sample grant application)
- Chief Kammel will share a protocol, and the literature demonstrating benefits by December 15
- Michelle Rud will check with trauma centers within the region to see which use whole blood
- The group will explore grant opportunities
- Rudy Rivas will send information on coolers
- The committee will provide updates at the December Clinical Leadership Committee and Executive Committee meetings
- The next committee meeting was scheduled for December 15 at 9 am

## 12-15-21 Whole Blood in EMS Committee

Participating: Lynne Drawdy, Chief Kammel, Chief Kemp, Dr. Peter Pappas

Chief Kammel sent out information on protocols and resources and a mock grant proposal. He asked if there were any issues with what he provided. None were expressed. Chief Kammel asked how we assemble these into a package that others would find useful. Dr. Pappas suggested that we delegate different parts to those with expertise, and then combine into a whole document for the group to review. He stated that he thinks logistics will be the biggest challenge. Dr. Pappas stated that we have linkages to other groups where we can share this document. Chief Kemp stated they are on a parallel path; he agrees with this approach and would like to partner with the group. He stated that he has information from Broward he can share, and that Freida Bright is looking at a common contract across Florida. He stated that the local jurisdiction will need to work out an exchange process. Chief Kammel stated that neither of the trauma centers he works with are willing to exchange, and Dr. Pappas stated that HCA is working on a whole blood process, and he may be able to assist with St. Mary. Chief Kemp stated that Leon is in the beginning stages. He suggested this be presented to the EMS Advisory Council as a best practice. Dr. Schepke has recently been appointed as a Deputy Secretary with the Florida Department of Health and is an advocate for EMS. Dr. Pappas agreed and stated that he will also let the EMS Advisory Council and FCOT know of the project.

Next Steps:

- Chief Kammel will contact Frieda Bright at One Blood to determine their requirements and document a step-by-step process for establishing a relationship.
- Dr. Pappas agreed to do a preamble for the materials by the end of the year.
- Chief Kammel has the protocols and resources.
- Chief Kammel will put all together into one document and send out before the next meeting.
- The next meeting is scheduled for January 28 at noon. Lynne will send a meeting invite using GoToMeeting
- Chief Kammel will provide an update at the 12/16/21 Trauma Advisory Board meeting