

MEETING SUMMARY

May 13, 2025

Suffolk County EMS, Yaphank, NY 11980

NOTE: This summary is a draft summary until approved at the July 8, 2025, meeting.

Members Present: See attendance list, provided as *attachment 1*. Subcommittees did not meet.

Meeting opened at 1903hrs with Chairman Boyd presiding. Chairman Boyd led the group in the pledge of allegiance, followed by a moment of silence.

At this point, Chairman Boyd took the meeting out of order and reported that there was a Transfer of Operating Authority (TOA) vote to be handled at the current meeting of the Council. The TOA application is from the Kings Park Fire Department, to change their name to the Kings Park Fire District. It has been reviewed by the Resource Needs Subcommittee, and comes forward as a seconded motion to approve the application.

*Secretary Hannigan performed a roll-call vote, and the motion carried unanimously. The record of the motion is provided as *attachment 2*.*

Vice Chairman Boyd expressed his thanks to the Council. Following the TOA application vote, the court reporter was released.

A motion was made by Dr. Marshall, seconded by Mr. Franz, to accept the March 11, 2025, Meeting Summary, as posted. The motion carried without opposition.

Budget – T. Prendergast

- Opening balance \$24,378.16. Deposits: 3/19 \$750.00: Integrated Wireless Technologies \$750, 4/7 \$1100.00: Strategic Safety Dynamics LLC \$300, Sapience.IT LLC \$200, St. Patrick's Church Smithtown \$300, Jennifer Rubano \$300. Adjustment: Check # 1197 \$73.50 (void), Total Deposits / Adjustment: \$1,923.50. Checks disbursed (Cleared): Check # 1201 \$741.13 (Michele Miller - Travel Expense), Check # 1202 \$7500 (Deposit Marriott), Check # 1203 \$119.25 (Language Line Services). Debit Transactions: \$240.00 (CPH Liability Insurance), \$7,541.20 (Balance due Marriott), \$2,281.00 (Custom Pins). Checks disbursed not cleared: Check # 1204 \$61.50 (Language Line Services), Check # 1205 \$319.00 (Infrastructure Solutions). Total Disbursements: \$18,422.58; Closing Checking balance \$7,879.08. Note: \$5000 budgeted for TOA Kings Park FD. Actual working available cash on hand is \$2,498.58.
- A motion was made by Mr. Franz to accept the Treasurer's Report, seconded by Mr. Zender and passed without opposition.

Vice Chairman's Report – M. Zender

- Vice Chairman Zender reported that the REMSCO EMS Conference was a success; gave thanks to Secretary Hannigan for her work on the event.

Executive Officer's Report – E. Boyd

- Chairman Boyd reported that the conference was a success, as were the CPR and Trauma Save Awards. He thanked Michele Miller-McEvoy for emceeding the event.
- Mr. Masterton has resigned as the Suffolk County REMSCO representative to SEMSCO. Michele Miller-McEvoy took over and attended the last meeting.
- Please report back to your constituency everything that happens at these meetings so everyone is well informed.
- A joint committee will be formed with REMSCO and REMAC on the use of lights and sirens in the area. If anyone is interested in serving on the committee, please contact Mr. Boyd.
- Mr. Boyd asked if anyone wanted refreshments at the REMSCO meetings; no opinions were offered. Mr. Boyd requested that members speak to their constituencies about it, as it would equate to each constituency contributing once every five years. It will be discussed at the next meeting.

May 13, 2025
Suffolk County EMS, Yaphank, NY 11980

Suffolk County EMS Division Staff Reports – Dr. Winslow / P. Marra/ S. Januszkiewicz/ D. Wayrich

- Mr. Marra reported the following on operations:
 - Controlled Substances continue to be an issue. Agencies needing assistance should reach the Division, Deputy Chief Keegan or Chief Marra. Mr. Dunlevy from NYSBEMS was asked for guidance, and he stated that a PowerPoint will be forthcoming as a joint venture of SCEMS and the State to help with these issues.
 - Cyano-Kits - grants are due to roll, purchases should be made soon after. Wouldn't expect delivery before mid-August.
 - Agencies with Division Supplied CYANOKIT's can purchase an Infusion set with 0.2 micron in-line filter having a membrane surface greater than or equal to 10 cm² to be temporarily used for administration of CYANOKIT® for Lot # 2301.
 - Mass Gathering Permits- Part 18 for large scale Should be filed with the Division well in advance of the event. Upcoming Part 18s include:
 - Stony Brook Graduation
 - Michael Murphy Run
 - Great South Bay Music Festival
 - Concerts at Bald Hill
 - Please contact the Division reference any TOAs. We are expecting one from Coram soon.
 - We are in the process of putting together a course schedules for the fall, please contact the Division with requests. We need to have a minimum number of 12 students to run courses, and we need a minimum of 90 days prior to the course start date, 120 days is preferred
 - We are also asking for a 90-day window for agencies drills that the county would participate in.
 - Lastly, on 5/19, there will be a press conference at FRES at 11 am for support of EMS Week. All are invited.
 - Legislature Thorne is hosting an event on the 20th where the legislature will be awarding providers within their districts. Eighteen providers will be recognized at an awards ceremony.

- Mr. Januszkiewicz reported the following on Education and training:
 - Eastern Suffolk BOCES EMT class is winding down. Students are wrapping up their clinical time and the class will end in the third week of June. We will be meeting with them again soon to discuss next year's contract.
 - Rapid Summer AEMT Course registration is open. Class starts here at SCEMS on May 27th.
 - Rapid Summer EMT Original registration is open. The class starts on May 28th and will be hosted by the Mastic Ambulance Company at their headquarters.
 - Rapid BLS Core CME offering at Huntington Community First Aid Squad during the week of July 14th. Schedule is posted on the website, and registration is open on bookings.
 - An additional AHA BLS Instructor Class to be held here at SCEMS on July 15th and July 17th. See posted flyer for details and to register.
 - We are considering having and ACLS/PALS Instructor course later on in the year, dependent upon interest
 - We are still waiting on a handful of contracted per diem instructors to send their acknowledgement regarding the transfer from the health department to FRES. We cannot process any vouchers unless this is signed and returned. We also continue to onboard some new instructors, many of whom are just now awaiting final execution of their contracts so that they can begin working with the division.
 - The RAVE Alert messaging notifications is a work in progress. We have cleaned up the old list, reached out to the valid emails we imported from the REMSCO page to see if they are still interested in receiving messages and training announcements, and have also published the registration page for those who wish to onboard into the alerts and notifications. As of today, we have just over 630 new registrants.
 - The Instructor Update Class held on April 11th was successful and well attended. We are working on an additional CIU class for the fall.
 - Please continue to help spread the word about course announcements released from EMS (Social media, area meetings, etc).

May 13, 2025
Suffolk County EMS, Yaphank, NY 11980

- Ms. Wayrich reported the following:
 - PA met in person Monday May 5th. Contract award letters were sent out that week and I am diligently working on completing our requirements so our contract can go through.
 - Recruitment and retention ideas? 15k it must be measurable; you will still get the money even if your efforts did not work. Must share our story at the end of the year.
 - Paramedic scholarship ideas? 20K at least 2 students' full payment
 - Update to MOLST forms, VS Academy class will be updated as well. DAL 25-03
 - Agency Audits, most common errors found policies and procedures not there or outdated, vehicles not safe, secure, and clean, ex. Sharps not in sharps containers, traction splint (other rarely used equipment) not functional, powered suction devices not working after they are unplugged, etc.
 - 45-day rule is no longer a policy but a regulation so 45-day violations are being sent out.
 - EMS Memorial May 20th
 - EMS agency leadership/provider briefings third Thursday of every month. Forms-EMS Provider feedback and surveys-EMS Agency Leader and EMS Provider sign up for Bureau Briefings
 - At the beginning of the month, all are sent "Monitoring Packet"- number of charts correctly received for the listed time period- listed by agency. Compare the number of charts listed to your agencies' call volume for the same time period and assure that no charts are missing. If the numbers do not reconcile, please contact your ePCR vendor to see why their charts are not being sent or are not validating correctly.

- Dr Winslow reported the following:
 - "From the SEMAC there are several important changes to the patient care protocols that includes: the removal of Haldol and the use of Onlazapine for behavioral emergencies and under the hospice protocol. The dose of TXA is increased to 2grams and is approved for use in Pediatrics. The use of vector change of the defibrillation pad locations for refractory V Fib and a maximum dose of 5 doses of Epinephrine in cardiac arrest. The use of Ipratroprium and Albuterol in the protocols for allergic reaction and asthma at the EMT level. The EMT-Basic use of a supraglottic airway in cardiac arrest and unresponsive adult and pediatric patients will be in protocol and no longer be a pilot program and will be an EMS agency option if they wish to train and equip their providers. There will be educational materials developed and a Suffolk County REMAC policy on the use of supra-glottic airways that we can share with the region in the upcoming weeks in advance of the July 1 implementation date. The NYS DOH Division of EMS has a policy statement with the new changes to the protocols on the website as policy 25-01 for ALS and 25-02 for the BLS protocols. There is also a policy on revisions to the MOLST form that all EMS providers should review. The Suffolk County REMAC and Program Agency will be working on development of educational materials for the upcoming protocol update with all the changes.
 - Also from State Council, the Part R of the Governor's 2026 budget was removed in its entirety. The use of Suboxone by Paramedics is not authorized at this time – there is a pilot program from Buffalo that applied for this 2 years ago and it has not yet been authorized by the NYS DOH. The administration of blood products by ground ambulances in New York State is still in the development phase and the regulations are being written with input from the SEMAC and SEMSCO and the STAC as well as the NYS DOH on the regulations on the obtaining, the storage and the safe administration of blood products to make blood available to patients in traumatic or obstetric shock without any creating any waste of this precious resource. The use of blood products by EMS agencies will require the approval of the regional REMAC and the NYS DOH – in addition to a blood bank agreement that satisfies the new regulations.
 - The last major development from the State Council is that the regional Program Agency contract award letters have been awarded to all 18 Program Agencies in New York State. This is great news and now the contracts may move forward to being finalized. As the Medical Director for the Suffolk County Program Agency, I serve as the Grant Administrator for this grant which is from the Aid to Localities portion of the NYS Budget and was signed into law May of 2024. I received the contract award letter from the NYS DOH on April 28 and this is a five-year contract that will be for the time period of July 1, 2024 to June 30, 2029. Several members of the Suffolk County EMS Division staff dedicate many hours of their time to the Program Agency and have done so for many years to serve Suffolk County. I want to publicly thank Deputy Chief Dina Wayrich who serves as the Managing Director of the Program Agency and

May 13, 2025
Suffolk County EMS, Yaphank, NY 11980

Deputy Chief Jen Hannigan who serves as Assistant Director and she also serves as both the REMAC Secretary and the REMSCO Secretary – thank you Dina and thank you Jen for many hours of work dedicated to the administrative support, the quality improvement of and the assistance to the many EMS agencies and EMS providers in Suffolk County on behalf of the Program Agency.

- From the Suffolk County REMAC – REMAC has authorized the use of Tranexamic Acid at this time under the traumatic shock protocol as an EMS agency option but not a requirement – EMS agencies should ask the trauma centers that they serve to clarify under which circumstances that they may use TXA – there is going to be educational material developed on TXA over the next few weeks to be discussed and approved both by the REMAC and by the RTAC. REMAC will be discussing the approval of Tetracaine eye drops, Oxymetazoline nasal spray and the use of Cefazolin or Moxiflocacin for open fractures – these will be EMS agency options and the agencies may work with their leadership and their agency medical directors if they wish to use these new medications that have been in the Collaborative protocols but not approved until now. REMAC has taken the stance that all the medications that are in the NYS Collaborative Patient Care Protocols may be used in Suffolk County if the agency chooses to equip and train their providers. The only exception will be that Suffolk County REMAC does not authorize the use of Nitrous Oxide due to the abuse potential and the fact that there are much better options for relief of pain. Also, to clarify the surgical airway procedure is now to be used by all Paramedics once they have been trained to do so by their agency medical director. This will eclipse the use of a needle cricothyrotomy and a jet insufflator over the next 12 months. The other major REMAC updates that will be coming in the next few months are updating the provider credentialing and the agency medical director credentialing as well as updating the regional REMAC quality improvement program.
- The Advanced EMT is now authorized by REMAC to practice in Suffolk County. If a New York State certified AEMT has the approval of both their agency leadership and their agency medical director, they may practice at this level at this time. In order to track the development of the AEMT program in Suffolk County the REMAC asks that all AEMTs register with a QR code to inform the REMAC. The EMS Division staff will post the registration link on the suffolkcounty remSCO webpage if the REMSCO is in agreement and there are fliers here as well to distribute.
- Last, I want to wish everyone a Happy EMS Week. This year’s theme is “We care for Everyone” – EMS Week is jointly sponsored by the American College of Emergency Physicians and by the National Association of EMTs. As a member of both ACEP and NAEMT, I want to thank all the EMS providers in Suffolk County for their continued service to all patients, all times of the day, all days of the year and in all types of situations and circumstances. Thank you all for your service.”

SEMSCO Representative Report- M. Miller-McEvoy:

- Ms. Miller-McEvoy reported the following:
 - Vital Signs November 11-15, 2025, in Syracuse
 - Registration opening in June
 - Hotel bookings are already open
 - NEMSIS - Prehospital Care Research – June 4-6, 2025, in Buffalo
 - Application Deadline May 16
 - This no-nonsense workshop is both inspiring and productive. Bring only your curiosity and passion for EMS. We will surround you with data and resources to advance EMS with science. Participants will work in small groups to identify a research question, design a project, gather data, analyze results and craft publishable abstracts. Expert researchers, medical directors, statisticians, developers and academic staff combine their efforts to remove barriers and empower EMS providers at all levels to turn their ideas into formal abstracts.
 - 2025 EMS Mental Wellness Symposium – June 9, 2025, in Saratoga Springs
 - No update on the cyanokit shortages. Manufacturers are out of their backlog, but distributors seem not to have them for distribution at this time.
 - From the Education and Training Subcommittee, a motion: To recommend that by no later than June 30, 2026, the DOH division of EMS create a policy so that all course sponsorship must have a signed

May 13, 2025
Suffolk County EMS, Yaphank, NY 11980

Simulation Notice and Consent Waiver in their course files who participated in any hands-on session of any course.

- Course sponsor sustainability
 - Grants and training up to March 31. \$10.5 million in budget - Spent \$8.4 million total
 - \$2.8 million on grants to REMSCO and program agency
 - \$5.5 million in training
- Project next year's budget – Recommendation to the commissioner
 - Motion to ask for 10% budget increase for EMS Training and Education, 15% increase to Program Agencies and REMSCOS with an overall yearly 6% COLA increase in subsequent years for all.
- From Quality Metrics
 - Skimatron for 2025 – release date June 1 – effective date of December 2 (the latest)
 - 13 changes to improve accuracy and documentation
 - 47 logical rule updated
 - 5 interfacility rule updated
 - 8 additional
 - Due to federal changes – national critical patch – within 60 days –
 - changes patient gender –
 - adds a patient sex
- The full report from Ms. Miller-McEvoy can be found here as *attachment 3*.

Education and Training

- No report.

Resource Needs- E. Boyd

- As the TOA is completed, nothing to report.

Communications and Technology

- Mr. Miniutti was excused, no report given.

Nominations Committee – J. Atkinson

- Mr. Atkinson was excused, no report given.

Performance Improvement – B. Talmage

- Mr. Talmage reported that he has nothing to report on; still plans to get together with the REMAC QA/QI Subcommittee.

REMAC – Dr. Marshall

- Dr. Marshall reminded all that the new protocols go live on July 1, 2025. He highlighted some of the changes, all of which can be found here as *attachment 4*. He confirmed that Haldol was left in the Hospice Protocol as a mistake; it will be updated before July 1, 2025.
- The joint committee on the use of lights and sirens in Suffolk County will meet next month; notices will be sent out to all REMSCO and REMAC members.
- The REMAC QA/QI Policy is in the process of getting updated
- Outcome data is available if agencies are interested; speak to your ePCR vendor.

May 13, 2025
Suffolk County EMS, Yaphank, NY 11980

Legislative – R. Franz

- Mr. Franz had an extensive report, and it can be found here as *attachment 5*.

Bylaws- J. Atkinson (Excused)

- No report.

Public Information- J. Manzi (excused, given by Mr. Boyd)

- Mr. Manzi thanked all that attended the CR and Trauma Save Awards and thank you to Community Ambulance for hosting the event. The next ceremony will be on September 27, 2025, at South Country at 0900.
- Newsday published an article on the CISM Team.
- Mr. Manzi also wanted to know how many stroke patients Stonybrook's MSU handled in the first quarter of 2025, and how many medevacs were there in 2024? Jason Hoffman later answered that the MSU has handled 584 calls with an approximately 35% transport rate.

Old Business

- Mr. Talmage is looking to have another Bylaw meeting before the next REMSCO Meeting.

New Business

- Mr. Prendergast introduced EMT and Suffolk County Burn Center representative John Pittarese and Dr. Steve Sandoval from the Suffolk County Firefighter's Burn Association. Both are interested in joining REMSCO as an organization and made a short presentation on services offered.
- Reminder that the July REMSCO and REMAC meetings will be together at Ocean Beach on July 8, 2025. Please fill out the form to RSVP as a head count is needed. Logistics were discussed; will be sent to membership soon.
- Mr. Marra asked that the applications for the CPR and Trauma Save Awards close one month before the ceremony to allow division staff the time to complete the research and work involved in prepping for the ceremony. The date will be discussed later, but the ceremony may not be on 9/27/25. Later in the year may be more ideal, likely November.
- A podium cover purchase was discussed, quotes need to be obtained first.
- Mr. Slovinsky reported that the freestanding ED at East Hampton planning is still undergoing. When a date is set for opening, it will be sent to REMSCO.

There being no further business to come before the council, a motion to adjourn was made by Mr. Slovinsky, seconded by Dr. Marshall, at 2010 hrs.

**Next meetings of the Suffolk Regional EMS Council will be on
Tuesday, July 8, 2025
7:00 PM
Ocean Beach FD, 480 Bayberry Walk Ocean Beach, NY 11770**

ATTACHMENTS TO FOLLOW

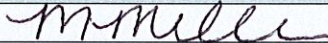
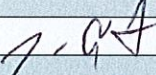
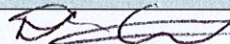

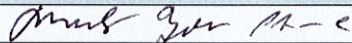
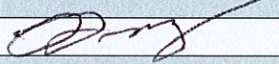


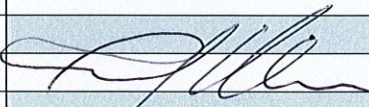
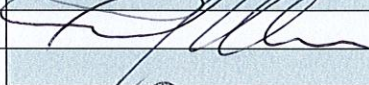
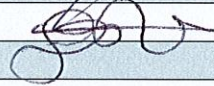
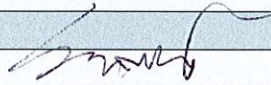
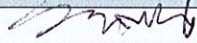
Prepared for the Suffolk Regional EMS Council by Jennifer Hannigan, Executive Secretary.

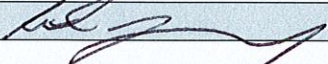
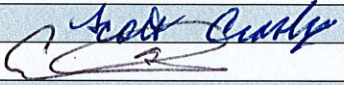

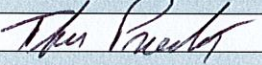
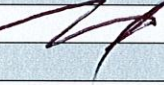
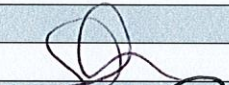
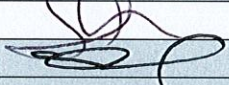
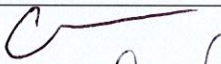
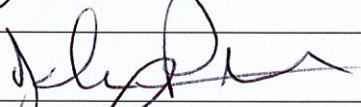

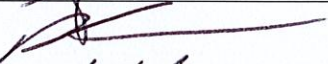

SUFFOLK REGIONAL EMERGENCY MEDICAL SERVICES COUNCIL

MEETING ATTENDANCE LIST

Date: May 13, 2025

Location: Suffolk County EMS, Yaphank

Constituency	Representative/ Alternate	Signature
UCP of Greater Suffolk	Robin Lane	Excused
	Patricia Caso	
Nassau-Suffolk Hospital Council	Michele Miller-McEvoy	
	Frank Milza	
Commercial Transport Sector	Joseph Cutrone	
East End Ambulance Coalition	Katie Hand	
Fire Island Law Enforcement and Safety Coalition	Ian Levine	
	Martin Leiderman	
North Fork Volunteer Rescue Association	Jerry Diffley	
	Peggy Killian	
NYS Society of Physician Assistants	Mark Zender, PA-C	
NYSVARA, District 7	Robert Franz	
	Edward Merchant	
Sun River Health	Angelo Viera	
	Carlos Ortiz	
Southampton Town EMS Advisory Committee	Ian King	
	Martin Leiderman	
Suffolk County Ambulance Chiefs Association	Bruce Talmage	
	Amanda Zinicki-Ceckowski	
Suffolk County Department of Health Services Commissioner	W. Michael Masterton	
	Dina Wayrich	
Suffolk County Community College	Matt Zukosky	
	Jena Canavan, RN	
Suffolk County EMS Coordinator	Paul Marra	
Suffolk County EMS Medical Director	Dr. Jason Winslow	
Suffolk County Emergency Nurses Association	Connie Kraft, RN	
	Donna Rivera, RN	
Suffolk County Fire Chiefs Council	Edward Boyd, Esq.	
Suffolk County Fire District Association	John Manzi	
	Raymond Reilly	

Suffolk County FRES	Gregory Miniutti	Excused
	Steve Januszkewicz	
Suffolk County FRES Commission	Bryan Prosek	
	Frank Boneventre	
Suffolk County Legislature	Hon. Tom Donnelly	
	Bill Shilling	
Suffolk County Medical Control	Christopher Gallway	Excused
	Stephen Slovensky	
Suffolk County Police Department	Dr. James Vosswinkel	
	Peter DiPrima	
Islip Town Ambulance Chiefs Association	Jamie Atkinson	
	Scott Crosby	
Northwell Health / South Shore University Hospital	Cono Cimino	
Suffolk County Volunteer Fireman's Association	Thomas Prendergast	
Suffolk REMAC	Dr. R. Trevor Marshall	
	Dr. Jack Geffken	
Catholic Health Services of Long Island	Dr. Eric Decena	
	Winston Lee	
Suffolk RTAC	Susan Henderson	
	Dr. Rich Scriven	
University Hospital EMS	Stephen Slovensky	
	Shawn Edouard	
GUEST NAME	AFFILIATION	SIGNATURE
Christopher Klein	Northwell	
John J. Fittabone	Burn Center South	
Steven Sarnack	Burn Center South	
R. L. Th	Ridge Park FD	
JASON HOFFMAN	Seawood Beach	

Suffolk Regional Emergency Medical Services Council

Roll Call Vote to: approve Kings Park Fire Department transfer of operating authority to Kings Park Fire District.


Date: 5/13/2025
 Location: Suffolk County EMS

Name	Affiliation	Yes	No	Abstain	Absent	Recusal
Dr. R. Trevor Marshall	Suffolk County REMAC	X				
Jamie Atkinson	Islip Ambulance Chiefs Association				X	
Edward Boyd, Esq.	Suffolk County Fire Chiefs Council	X				
Katie Hand	East End Ambulance Coalition	X				
Dr. Eric Decena	Catholic Health Services of Long Island				X	
Jerry Diffley	North Fork Volunteer Rescue Association				X	
Hon. Tom Donnelly	Suffolk County Legislature				X	
Robert Franz	7th District NYSVA & RA	X				
Susan Henderson	Regional Trauma Advisory Committee				X	
Ian King	S.H. Town Medical Advisory Comm				X	
Connie Kraft, RN	Suffolk County ENA				X	
Robin Lane	UCP of Suffolk County				X	
Ian Levine	Fire Island Safety and Law Enforcement				X	
John Manzi	Suffolk County Fire District Officer's Assn.				X	
Paul Marra	Suffolk County EMS Coordinator	X				
Dina Wayrich	Suffolk County Health Services	X				
Michele Miller-McEvoy	Nassau/Suffolk Hosp. Council	X				
Gregory Miniutti	Suffolk County FRES				X	
Joseph Cutrone	Commercial Transportation Sector	X				
Cono Cimino	Northwell/South Shore University Hospital	X				
Thomas Prendergast	Suffolk County Volunteer Fireman's Assn.	X				
Christopher Gallway	Suffolk County Medical Control				X	
Bryan Prosek	Suffolk County FRES Commission				X	
Steve Slovensky	University Hospital EMS					X
Bruce Talmage	Suffolk County Ambulance Chiefs	X				
Angelo Viera	Hudson River Healthcare	X				
Dr. James Vosswinkel	Suffolk County Police Department	X				
Dr. Jason Winslow	Suffolk County EMS Medical Director	X				
Mark Zender, PA-C	New York State Society of PAs	X				
Matt Zukosky	Suffolk County Community College				X	

Alternates:

Suffolk Regional Emergency Medical Services Council

Name	Representing	Yes	No	Abstain	Absent	Recusal
Scott Crosby	Islip Ambulance Chiefs Association	X				
Marty Liederman	Fire Island Safety and Law Enforcement	X				
Steve Januszkewicz	Suffolk County FRES	X				
Steven Slovenski	Suffolk County Medical Control	X				
Shawn Edouard	University Hospital EMS	X				
Total:		20	0	0	14	1

Pass- Jennifer Hannigan- Secretary 5/13/2025 

May 7th SEMSCO Meeting

1. Correspondence
2. Chairperson's Report
 - Good feedback on SEMSCO orientation handbook
3. First Vice Chairperson's Report – No Report
4. Second Vice Chairperson's Report - No report
5. EMS Staff Report – Ryan Greenberg
 - Hospital division and EMS division are working together to make changes and improvements (both in house Stephanie Shulman)
 - Operations
 - doing full-service inspections
 - They have been going well and we are not seeing too many red flags
 - The NYS Surge operation center is open 24/7 for anyone who needs assistance. Providers can call in or submit surveys that are always monitored.
 - Administration
 - REMSCO contracts have been awarded
 - Program agency contracts with two new deliverables
 - Paramedic contracts – at least two – if additional funds you can use that for other trainings - \$20k
 - Recruitment and retention - \$1,500
 - STAC May 28th in Troy
 - EMS for Children
 - Invoiced for and awarded 50% of grant for this year at this time
 - Vital Signs November 11-15, 2025, in Syracuse
 - Registration opening in June
 - Hotel bookings are already open
 - NEMSIS - Prehospital Care Research – June 4-6, 2025, in Buffalo
 - Application Deadline May 16
 - This no-nonsense workshop is both inspiring and productive. Bring only your curiosity and passion for EMS. We will surround you with data and resources to advance EMS with science. Participants will work in small groups to identify a research question, design a project, gather data, analyze results and craft publishable abstracts. Expert researchers, medical directors, statisticians, developers and academic staff combine their efforts to remove barriers and empower EMS providers at all levels to turn their ideas into formal abstracts.
 - EMS Memorial – May 20, 2025, in Albany
 - 5 honorees
 - Anthony Cozzino – FDNY – DOD 9/7/2024
 - Robert R. DeLeon, Jr – FDNY – DOD 4/16/2024
 - Mark E. Steffens – FDNY – DOD 11/11/2024

- Christopher Swierkowski – FDNY – 5/11/2024
 - Stephen J. Walsh – Clausson Raught Community Rescue Squad – DOD 11/16/2024
- Independent CME information due out the week of May 12, 2025
- 2025 EMS Mental Wellness Symposium – June 9, 2025, in Saratoga Springs
 - Upwards of 200 registrations
- Next SEMAC/SEMSCO meeting September 9-10 in Troy, then December 9-10

6. SEMAC

- Updated protocols that will take effect on July 1, 2025, have been posted on the website. Minor grammatical changes will still be incorporated.
- Med Standards Motion
 - BLS SGA Policy – removed the words “adult only” so can be used on any patients
 - Will go into effect with updated protocols on July 1, 2025
 - Up to individual agencies they do NOT have to train for pediatrics if they do not feel fit
 - Agency Medical Director
 - For a physician to serve as an ALS EMS agency service medical director in NYS, the physician should be approved by the regional REMAC as an on-line medical control physician. Request of the Department to make a regulatory requirement.
 - Antibiotic in open fracture update – currently states AND, will be changed to OR meaning one medication can be given not both
 - Hospice update – terminology from Haldol to olanzapine
- Advisory that Medical Control is for all levels of providers not just ALS
- EMS-C asked for letter of support from SEMAC to support this program
 - SEMSCO also will cosigned that letter
- No update on the cyanokit shortages. Manufacturers are out of their backlog, but distributors seem not to have them for distribution at this time.

7. Committee Reports -if anyone is interested in joining a committee, please let David know, they always need assistance

- Executive
 - Definition of EMS has been developed
- Med Standards
 - Blood regulation update
 - Changes as noted under SEMAC notes
- Education & Training
 - The State EMS policy job description of EMT has not been updated in a long time. We will be looking forward to an update in the next few months.
 - Motion: To recommend that by no later than June 30, 2026, the DOH division of EMS create a policy so that all course sponsorship must have a signed Simulation Notice and Consent Waiver in their course files who participated in any hands-on session of any course.

- Finance
 - Continued discussion on statewide data on hospital offload time, transfer of patients,
 - The committee had requested to look at the data on a quarterly basis
 - EMS forms page – real time submissions which are valuable to the state for short term problems, but not beneficial for long term data as not all EMS fills them out equally. Mostly isolated to Albany and Syracuse area.
 - First quarter of 2025: 228 Reports
 - Also, the state looked at EPCR offload delays for all regions
 - First quarter 2025: Longer than 45 minutes offload time more than 10% of the time: 6 hospitals in total
 - 1 in Capital
 - 1 Central
 - 1 Southern Tier
 - 3 Western
 - Up to SEMSCO to decide what metric we should use for the above. Is 45 minutes too long? This committee can provide feedback
 - Ability for the region to pull this data
 - 3 region pilot program
 - Assembly bill -A7361 – Relates to an ambulance fee schedule for ambulance service to licensed emergency departments.
 - Course sponsor sustainability
 - Grants and training up to March 31. \$10.5 million in budget - Spent \$8.4 million total
 - \$2.8 million on grants to REMSCO and program agency
 - \$5.5 million in training
 - Project next year's budget – Recommendation to the commissioner
 - Motion to ask for 10% budget increase for EMS Training and Education, 15% increase to Program Agencies and REMSCOS with an overall yearly 6% COLA increase in subsequent years for all.
 - Paramedic School Survey – 210 Paramedic students responded out of 1,000
 - 72% said they paid for it on their own
 - Division of EMS sent out to recent paramedic graduates – do you know you are eligible to receive reimbursement
 - 300 people who are working
 - Only 50 agencies sent back vouchers for reimbursement
 - People can still submit- not closed yet
- EMS Systems
 - SUNY Albany presented Gold Level Collegiate Award
 - First in NYS
 - 1 of 8 in the United States to receive this award

- They go out into high schools to try to recruit, even if they are not going to go to Albany
 - 800 calls a year – 100 are M/A into the community
 - Low acuity call work group
 - Focusing on what is the definition of a patient
 - When do they become a patient
- Legislative
 - Budget bills – Part R - A 3007c
 - No Medicaid increase
 - Quality Metrics
 - Rescue Inhaler
 - Moving forward – would like to have all committee members look through regs and part 800 and review and come back with recommendation on modifications
 - Hopefully by September will have updated regs
- Safety
 - 0013 – revisions continue to work on
 - Hazardous response plan survey is closed
 - Working on guidance documents
 - Working on restraint policy
 - Stretcher TAG group met yesterday - progress
- Quality Metrics
 - Skimatron for 2025 – release date June 1 – effective date of December 2 (the latest)
 - 13 changes to improve accuracy and documentation
 - 47 logical rule updated
 - 5 interfacility rule updated
 - 8 additional
 - Due to federal changes – national critical patch – within 60 days –
 - changes patient gender –
 - adds a patient sex
 - Analytics will continue to be based on gender
 - 3 NEMESIS changes
 - 1 – lights and sirens response
 - 2 – lights and sirens transport
 - 3- Hypoglycemia
- EMS Innovations and Research
 - Mental Health Workgroup
 - Working with OASIS – project around transportation to crisis stabilization centers
 - Will be ready for presentation after September
 - Education around mental health and EMS
 - June 4-6 – EMS Research Course in Buffalo

- Final approval for research policy which will help guide future research projects
- Working with Wadsworth related to labs for EMS – will present at next SEMSCO meeting
- AI Subcommittee
- EMS-C Advisory Committee Update
 - Federal funding concern – received 50% of funds for the year
 - Adding pediatrics to the SGA protocol
 - Joint letter from EMSC – SEMAC- SEMSCO
 - NYS Poison Control centers – what their resources are and what they can assist with
 - Most common calls
 - How can we all work together
- State Trauma Committee Update

8. Old Business

- Update on the Rural Ambulance Services Taskforce Report
 - Still waiting for that to come out

9. New Business

- Mental Health Symposium and fellowship
 - Covered above
 - June 9th in Saratoga – over 200 people registered
 - Fellowship
 - Developing champions around the state

10. Adjournment - 351



Policy Statement

Collaborative Protocol Change Log V.25.0 Effective 07.01.2025

Collaborative Protocol Change Log from v24.1 to v25.0

Throughout the protocols, language was simplified while reducing inconsistencies and efforts made to improve readability and ease of use without changing the medicine.

(2.0) Extremis / Cardiac Arrest Protocols

Cardiac Arrest – Adult: General Approach

- Removed *“a bag valve mask (BVM) should be connected to supplemental oxygen, if available”* as this is covered in **Oxygen Administration and Airway Management** protocol

Cardiac Arrest – Pediatric: General Approach

- Removed *“a bag valve mask (BVM) should be connected to supplemental oxygen, if available”* as this is covered in **Oxygen Administration and Airway Management** protocol

Cardiac Arrest – Adult: Asystole or Pulseless Electrical Activity (PEA)

- Established max of 5 doses epinephrine. Additional epinephrine with Medical Control.

Cardiac Arrest – Pediatric: Asystole or Pulseless Electrical Activity (PEA)

- Established max of 5 doses epinephrine. Additional epinephrine with Medical Control.

Cardiac Arrest – Adult: Return of Spontaneous Circulation (ROSC)

- Clarified under medical control considerations option of amiodarone or lidocaine and respective dosing.

Cardiac Arrest – Adult: Ventricular Fibrillation or Pulseless Ventricular Tachycardia

- Established max of 5 doses epinephrine. Additional epinephrine with Medical Control.
- Added *“Consider vector change for refractory shockable rhythms^{1”}* to all provider levels.
- Under key points added *“1 - A vector change refers to altering the placement of the defibrillation pads (e.g. changing from sternum/apex to anterior/posterior). A refractory shockable rhythm means that multiple shocks were given and the patient is suspected to remain in a pulseless, shockable rhythm such as VF or pulseless VT.”*

- Added Lidocaine with appropriate dosing for indicated condition as option instead of amiodarone. Clarified under medical control considerations option of amiodarone or lidocaine and respective dosing.

Cardiac Arrest – Pediatric: Ventricular Fibrillation or Pulseless Ventricular Tachycardia

- Established max of 5 doses epinephrine. Additional epinephrine with Medical Control.
- Added “*Consider vector change for refractory shockable rhythms¹*” to all provider levels.
- Under key points added “*1 - A vector change refers to altering the placement of the defibrillation pads (e.g. changing from sternum/apex to anterior/posterior). A refractory shockable rhythm means that multiple shocks were given and the patient is suspected to remain in a pulseless, shockable rhythm such as VF or pulseless VT.*”
- Added Lidocaine with appropriate dosing for indicated condition as option instead of amiodarone. Clarified under medical control considerations option of amiodarone or lidocaine and respective dosing.

(3.0) General Adult and Pediatric Medical Protocols

Anaphylaxis and Allergic Reaction - Adult

- Added Ipratropium (Atrovent) 0.5mg in 2.5 mL (unit dose) mixed with albuterol to EMT or higher
- Where necessary, removed Albuterol and Atrovent dosing at higher certification levels to prevent duplication/confusion within same protocol.
- Clarified in Key Points that CFR and higher may use autoinjector and EMT and higher may use syringe epinephrine.

Anaphylaxis and Allergic Reaction - Pediatric

- Added Ipratropium (Atrovent) 0.5mg in 2.5 mL (unit dose) mixed with albuterol to EMT or higher
- Where necessary, removed Albuterol and Atrovent dosing at higher certification levels to prevent duplication/confusion within same protocol.
- Clarified in Key Points that CFR and higher may use autoinjector and EMT and higher may use syringe epinephrine.

Behavioral: Agitated Patient - Adolescent

- Removed Haloperidol
- Add under Medical Control Options: Olanzapine 10 mg IM once or 5 mg SL once – use caution if midazolam given or anticipated. (Paramedic Only, if equipped and trained)
- Added “If the agitated patient goes into cardiac arrest, refer to the appropriate protocol and administer Sodium Bicarbonate 50 mEq IV” under paramedic

Behavioral: Agitated Patient - Adult

- Removed Haloperidol

- Add under Medical Control Options: Olanzapine 10 mg IM once or 5 mg SL once – use caution if midazolam given or anticipated. (Paramedic Only, if equipped and trained)
- Added “If the agitated patient goes into cardiac arrest, refer to the appropriate protocol and administer Sodium Bicarbonate 50 mEq IV” under paramedic

Cardiac – Pediatric: Bradycardia

- Added “consider chest compressions” for marked bradycardia with depressed mental status or respiratory rate per AHA guidelines
- Re-ordered Epinephrine and Atropine to reflect Epi would be first line

Cardiac – Adult: Tachycardia – Wide Complex with a Pulse

- Added Lidocaine with appropriate dosing for indicated condition as option instead of amiodarone. Clarified under medical control considerations option of amiodarone or lidocaine and respective dosing.

Cardiac – Pediatric: Tachycardia

- Clarified under medical control considerations option of amiodarone or lidocaine and respective dosing.

Dif Breathing – Adult: Asthma / COPD / Wheezing

- Added Ipratropium (Atrovent) 0.5mg in 2.5 mL (unit dose) mixed with albuterol to EMT or higher.
- Where necessary, removed Albuterol and Atrovent dosing at higher certification levels to prevent duplication/confusion within same protocol

Dif Breathing – Adult: Pulmonary Edema

- Revised to allow sublingual nitroglycerin under AEMT and higher as standing order. IV dosing remains restricted to paramedic only.
- Removed under key points reference to DuoNeb as albuterol previously removed from protocol

Dif Breathing – Pediatric: Asthma / Wheezing

- Added Ipratropium (Atrovent) 0.5mg in 2.5 mL (unit dose) mixed with albuterol to EMT or higher.
- Where necessary, removed Albuterol and Atrovent dosing at higher certification levels to prevent duplication/confusion within same protocol

Environmental: Heat Emergencies

- Added palms and soles to locations for cold pack placement

Hypoglycemia - Adult

- Clarified dose range of oral glucose to 15-30 grams and available sugar source options, adding maple syrup as example

Hypoglycemia - Pediatric

- Clarified dose range of oral glucose to 15-30 grams and available sugar source options, adding maple syrup as example

Shock – Adult: Hemorrhagic Shock

- Renamed from “Shock – Adult: Trauma Associated Shock” and moved into *3.0 General Adult and Pediatric Medical Protocols* section from *4.0 Trauma* section
- Clarified TXA indications to traumatic or obstetric hemorrhage
- Added: “Initiation of prehospital blood products subject to REMAC endorsed blood product distribution plan and Department of Health approval”
- Updated Tranexamic Acid dosage to 2 gm IV/IO over 10 minutes

(4.0) Trauma

Amputation

- Added moxifloxacin (All levels) and cefazolin (Paramedic Only) for amputation with delayed extrication or arrival to definitive care (if equipped and trained) to provide consistency with open fracture protocol
- Clarified moxifloxacin is only for adults
- Added pediatric dosing for cefazolin

Musculoskeletal Trauma

- Clarified moxifloxacin is only for adults
- Added pediatric dosing for cefazolin

(5.0) Resources

Advanced Directives / DNR / MOLST

- Added under Key Points a reference to Public Health Law PBH §2944-gg

Medication Formulary

- Clarified requirement for one anti-arrhythmic; amiodarone or lidocaine
- Added route of nebulized for Epinephrine 1:1,000 (1 mg/mL)
- Added Epinephrine (Racemic) (2.25%) 0.5 mL in 3 mL of Normal Saline with route of nebulized
- Added Olanzapine with route of IM and SL
- Added route of IO to Tranexamic Acid

Oxygen Administration and Airway Management

- Add under EMT: Supraglottic airway placement (if equipped and trained) in the adult cardiac arrest patient (as regionally approved).
- Clarified under AEMT: Supraglottic Airway instead of “Advanced Airway”
- Remove under Key Points requirement for viral filter.

- Revised under Key Points: “Providers may only place an endotracheal tube or supraglottic airway if they utilize waveform capnography for initial and ongoing monitoring of airway patency.”
- Added for EMT and higher “Consider PEEP 5 cm H₂O titrated up to 10 cm H₂O” and under medical control considerations “Additional PEEP >10 cm H₂O provided MAP maintained >65 mmHg”

Suffolk REMSCO – May 13, 2025 Legislative Committee Report

State Budget 2025/2026 – The Senate and Assembly approved the budget and Governor Hochul signed the budget into law on 5/9/25. It was reported at the SEMSCO meeting that Part R is out and there are no new \$20 million Medicaid funds, buprenorphine is unapproved and Community Paramedicine is extended for 2 years. A review of the final budget is a work in progress.

2025 EMS Legislation – (Updated from the March meeting).

The following 2025 bills are all in a committee unless noted otherwise.

- a. A34/S31: Provides that the thruway authority shall issue permits for ambulances and fire vehicles for toll exemptions. Passed Assembly. Assemblyman Eachus/Senator Comrie
- b. A8086 / S7501 An Act to amend the general municipal law and the public health law, in relation to emergency medical services to deem EMS as an essential service. Assemblyman Otis / Senator Mayer. (deleted from budget part R)
- c. S1123/A1064: Income Tax Credit Bill -This legislation gives state income tax credit against any income tax owed by volunteer firefighters and members of a volunteer ambulance corps in good standing up to \$2,500 (depends on amount of tax owed); requires such member must be in good standing for a minimum of five years and maintain continued eligibility. Sen. Oberacker/Assemblyman Angelino
- d. A516A/S5837A- Amends the current law for the refundable state income tax credit for volunteer firefighters and members of volunteer ambulance corps from \$200 to \$1,200. One year eligibility does not change. Assemblywoman Woerner / Sen.Skoufis.
- e. S3768/A2442: Allows for reimbursement of transportation costs for emergency care without prior authorization by the social services official including emergency medical transportation by an ambulance service certified under article 30 of the public health law; authorizes the commissioner of health to establish a reimbursement methodology to ensure providers are reimbursed. Sen. Sanders/Assemblyman Hevesi
- f. A1309 / S5333: An initiative to preserve and extend the community-based paramedicine demonstration program to expire May 2025: Authorizes collaborative programs for community paramedicine services as part of the hospital-home care-physician collaboration program. Assemblywoman Paulin / Sen. Rivera. Approved in budget.
- g. S1515 / A2177A: Would remove EMS services from the real property tax cap, allowing local municipalities to expand and support their local EMS services. Sen. May / Assemblywoman Lupardo
- h. A288 / S6019: Repeals the provision of law that volunteer firefighters and ambulance workers who receive a real property tax exemption for service may not receive the income tax credit for such service. Assemblywoman Barrett./ Sen. Baskin
- i. A7361 (No Senate bill). Seeks to charge hospitals a fee if offload delays exceed 1 hour or more. Assemblyman Steck.

j. A3299 (No Senate bill) Classes fentanyl exposure Fire & EMS personnel as an assault.
Assemblyman Durso.

k.A4675 / S190: Fire (VFBL) and EMS (VAW) death benefit paid in 90 days. Passed Senate.
Assemblyman Eachus / Senator Martinez.

l. S6233/ A6790: Amends the current law for the refundable state income tax credit for volunteer firefighters and members of volunteer ambulance corps from \$200 to \$800 and also permits the credit for those receiving the property tax exemption (must reside in the municipal district which is served by member's agency). Assemblywoman McMahan / Senator Martinez.

The end of the current legislative session is scheduled for June 12, 2025.