

From: Lance Jobe [<mailto:ljobe.ems@gmail.com>]

Sent: Tuesday, March 12, 2013 9:57 PM

To: Stan Smoke; Mike Burnett; Dave Baker; Matt Brunner; Kelly O'Brien; Phil Moser; Tim Lemon; Stan Harrison; Jim Wilson; Bovardt, Mark E. (Guardsmark at Alcoa); Glover, Terry (ccfd4@nwi.net); Matt Hill; Jim Oatey; Caille, Tyler (tcaille@nwi.net)

Cc: Mistaya Courtney; Lopez, Michael (DOH); Shawn Ballard; Kurt Middleton; Brian Pulse; Karl Jonasson; Ray Eickmeyer

Subject: Important information on CPR training--Requires your response

All Chelan/Douglas EMS Agencies:

As you all know, since 2011 we have instituted High Performance-CPR (HP-CPR) for all resuscitations. In addition, our QI Officer, Mistaya Johnston, is now doing annual evaluations and training in HP-CPR for all agencies. Washington State Administrative Code requires annual training in cardiovascular care. Part of that annual training includes CPR by "nationally recognized training programs". Some agencies have continued to have instructors use American Heart Association (AHA) guidelines for this annual training. This creates confusion among providers, which I am concerned could compromise our efforts at improving survival from out of hospital cardiac arrest (OHCA).

Per my discussion with Mr. Michael Lopez, Supervisor in the Office of Community Health Systems, EMS Section, the State already recognizes our CPR program as meeting their requirements for CPR training. If needed for the National Registry or other organizations, I can provide a signed certificate, backed by the State, as proof of CPR certification. As long as the EMT has participated in the CPR evaluation that Ms. Johnston is performing, they have met the CPR requirement of their OTEP plan.

Therefore, only HP-CPR, as per our locally published protocol, may be used for CPR training for all EMS providers in Chelan and Douglas Counties. This protocol may be found on the NorthCentral Region website <http://ncecc.net/chelan-s-douglas-county/county-protocols/>. **Please note that AHA CPR may no longer be used for CPR instruction, unless it follows our protocol precisely.** This will be important to ensure that all providers are following, and clearly understand, our county protocol for resuscitation of OCHA.

Please respond to verify that all agencies are aware of this training requirements.

Thank you,

Lance W. Jobe, MD, FACEP
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Medical Program Director
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