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### BACKGROUND

- Unresolved hypoxia is detrimental to patient outcomes and is linked to increased mortality.
- Hypoxia is resolved by administration of oxygen until the patient's oxygen saturation reading, SPO2, is within normal limits.
- The purpose of this study is to determine whether EMS is resolving hypoxemia from the first documented SPO2 to the last documented SPO2, prior to arrival to the emergency department (ED).

#### METHODS

- Retrospective analysis of 2022 ImageTrend Collaborate data
- Inclusion/Exclusion criteria adapted from the EMS Performance Measure Airway-24 developed by the National EMS Quality Alliance for the National Association of State EMS Officials1
- Inclusion criteria:
  - 911 EMS patients transported to an emergency department
  - Adults  $\geq$  18 years old
  - Primary or secondary impression of Respiratory Distress
  - Initial SPO2 ≤ 89%
  - At least 2 documented SPO2 values
- Excluded cardiac arrest prior to EMS arrival
- Hypoxia defined as SPO2 <90%
- Resolution of hypoxia defined as final documented SPO2  $\geq$  90%





# EMERGENCY MEDICAL SERVICES RESOLUTION OF HYPOXEMIA

Table 1: Patient Demographics							
Chavestavistic	Total Resolution		No Resolution	p-Value			
Characteristic	N=71,792	N=55,133 (76.8%)	N=16,659 (23.2%)	<0.001			
Age in Years							
Median [IQR]	71 [61,80]	71 [61,80]	71 [62,80]	0.329			
Race							
White	43,161 (60.1%)	33,055 (60.0%)	10,106 (60.7%)	0.103			
Black/African American	9,890 (13.8%)	7,862 (14.3%)	2,028 (12.2%)	<0.001			
Hispanic/Latino	2,860 (4.0%)	2,114 (3.8%)	746 (4.5%)	<0.001			
Other/Multiple	2,740 (3.8%)	2,158 (3.9%)	582 (3.5%)	0.014			
Missing	13,141 (18.3%)	9,944 (18.0%)	3,197 (19.2%)	<0.001			
Gender							
Female	36,600 (51.0%)	28,911 (52.4%)	7,689 (46.2%)	<0.001			
Male	35,031 (48.8%)	26,111 (47.4%)	8,920 (53.5%)	<0.001			
Missing	161 (0.2%)	111 (0.2%)	50 (0.3%)	0.023			
Urbanicity							
Metro	60,173 (83.8%)	46,284 (83.9%)	13,889 (83.4%)	0.078			
Non-Metro	9,077 (12.6%)	6,882 (12.5%)	2,195 (13.2%)	0.019			
Rural	1,551 (2.2%)	1,200 (2.2%)	351 (2.1%)	0.026			
Missing	991 (1.4%)	767 (1.4%)	224 (1.3%)	0.679			
Region							
South	34,056 (47.4%)	26,493 (48.1%)	7,563 (45.4%)	<0.001			
West	19,274 (26.8%)	14,413 (26.1%)	4,861 (29.2%)	<0.001			
Midwest	12,415 (17.3%)	9,617 (17.4%)	2,798 (16.8%)	0.054			
Northeast	6,029 (8.4%)	4,595 (8.3%)	1,434 (8.6%)	0.272			
Missing	18 (0.0%)	15 (0.0%)	3 (0.0%)	0.705			
Cardiac Arrest	826	260 (31.5%)	566 (68.5%)	< 0.001			

#### **Table 2: Primary Impressions**

<b>Primary Impression</b>	Total	<b>Resolution of Hypoxia</b>	No Resolution of Hypoxia
Resp Arrest	501	307 (61.30%)	194 (38.70%)
Resp Failure	3,808	2344 (61.60%)	1464 (38.40%)
Pulmonary Edema	2,874	1969 (68.50%)	905 (31.50%)
FBAO	272	188 (69.10%)	84 (30.90%)
ARDS	2,702	1952 (72.20%)	750 (27.80%)



#### Ryba, C<sup>1</sup>, <sup>2</sup>, Wilson, SM<sup>3</sup>, Brook, M<sup>4</sup>.<sup>5</sup>.<sup>6</sup>, Baker, GL<sup>3</sup>, Green, A<sup>7</sup>, Page, D<sup>8</sup>, Aufderheide TP<sup>9</sup>

## RESULTS

- N=71,791
- Successful resolution of hypoxemia occurred in 55,133(76.8%)
- Did not resolve in 16,659(23.2%).
- Overall, 826(1.2%) patients had subsequent cardiac arrest;
  - 260/826 (31.5%) had resolution
  - 566/826 (68.5%) no resolution of hypoxemia, p<0.000001.
- Of 150/826(18.2%) cardiac arrest patients who died in the field or ED,
  - 30/150(20.0%) had resolution
  - 120/150(80%) no resolution of hypoxemia, p<0.0000001;
  - Odds of death in the field or ED after cardiac arrest with unsuccessful resolution of hypoxemia was OR:15.74,Cl: 9.06,28.24

# LIMITATIONS

- Retrospective study design
- Time of last SPO2 may be different than time of completion of EMS care.
- Intermittent fluctuations may not be captured using first and last SPO2

## CONCLUSION

- EMS treatment of hypoxemia did not achieve guideline standards for resolution in 23.2% of cases.
- Unsuccessful EMS resolution of hypoxemia was significantly associated with a higher proportion of subsequent cardiac arrest and odds of death in the field or ED.