



**MINUTES  
EMERGENCY MEDICAL SERVICES & TRAUMA SYSTEM  
MEDICAL ADVISORY BOARD MEETING  
November 5, 2008 – 11:00A.M.**

**MEMBERS PRESENT**

Allen Marino, MD, Chairman, MedicWest Ambulance  
Christian Young, MD, Boulder City Fire Dept.  
John Wilson, American Medical Response  
Chad Henry, EMT-P, MedicWest Ambulance  
Troy Tuke, EMT-P, Clark County Fire Dept.  
Chief Mike Myers, Las Vegas Fire & Rescue  
E. P. Homansky, MD, American Medical Response

Jarrod Johnson, DO, Mesquite Fire & Rescue  
David Slattery, MD, Las Vegas Fire & Rescue  
Chief Randy Howell, Henderson Fire Dept.  
Chief David Petersen, Mesquite Fire & Rescue  
K. Alexander Malone, MD, North Las Vegas Fire Dept.  
Chief Bruce Evans, North Las Vegas Fire Dept.

**MEMBERS ABSENT**

Dale Carrison, DO, Clark County Fire Department  
Richard Henderson, MD, Henderson Fire Dept.

Chief Kevin Nicholson, EMT-P, Boulder City Fire Dept

**SNHD STAFF PRESENT**

Rory Chetelat, EMSTS Manager  
John Hammond, EMSTS Field Representative  
Lan Lam, Recording Secretary  
Steve Kramer, OPHP Supervisor

Mary Ellen Britt, RN, Regional Trauma Coordinator  
Trish Beckwith, EMSTS Field Representative  
Judy Tabat, Administrative Assistant

**PUBLIC ATTENDANCE**

Bob Byrd, EMT-P, American Medical Response  
Kim Voss, UMC Hospital  
James Holtz, Valley Hospital  
Amelia Hoban, RN, Sunrise Hospital  
MaryAnn Dube, St Rose Siena  
Amy Bochenek, CHH MC  
Minta Albietz, Sunrise Hospital  
Davette Shea, Desert Springs Hospital  
Michael Chave, UNLV SN  
Dan Petcavage, UMC Hospital  
Scott Cinelli, UMC Hospital  
Kevin Dickerson  
Tammi Vogel, Spring Valley Hospital  
Joe Richard, EMT-P, Las Vegas Fire & Rescue  
Michele McKee, MD, UMC Pediatrics  
Jennifer Adams, EMT-P, American Medical Response  
Gregg Fusto, RN, UMC

Mike Teague, EMT-P, American Medical Response  
Kathleen Silver, UMC Hospital  
Brian Brannmer, UMC Hospital  
Victor Montecerin, EMT-P MedicWest Ambulance  
Sandy Young, RN., Las Vegas Fire & Rescue  
Michelle Dimoff, Summerlin Hospital  
Mark Guiamzen, UNLV SN  
Will Wagon, Mountain View Hospital  
Rose O'Donnell, Spring Valley Hospital  
Kady Dabash, EMT-P, MedicWest Ambulance  
Fred Neujahr, Sunrise Hospital  
Patricia Hatcher, Spring Valley Hospital  
Christopher Monson, EMT-P, American Medical Response  
Jay Fisher, MD, UMC Pediatrics  
Ken Riddle  
Nancy Harpin, RN, UMC Hospital  
Steve Maggy

## **CALL TO ORDER - NOTICE OF POSTING OF AGENDA**

The Medical Advisory Board convened in the Clemens Conference Room at the Ravenholt Public Health Center at 11:12 a.m. on Wednesday, November 5, 2008. The meeting was called to order by Chairman Allen Marino. He stated that the Affidavit of Posting, Mailing of Agenda, and Public Notice of the Meeting Agenda were executed in accordance with the Nevada Open Meeting Law. Chairman Marino noted that a quorum was present.

### **I. CONSENT AGENDA**

Chairman Marino stated the Consent Agenda consisted of matters to be considered by the Medical Advisory Board that can be enacted by one motion. Any item may be discussed separately per Board member request. Any exceptions to the Consent Agenda must be stated prior to approval. A motion for Board approval of the following items on the Consent Agenda was made, seconded, and carried unanimously.

A. Minutes Medical Advisory Board Meeting September 3, 2008

### **II. REPORT/DISCUSSION/POSSIBLE ACTION**

A. Report from Transfer of Care Committee

Chief Randy Howell reported on three issues that were discussed and their resolutions.

1. Commerx Corporation is requiring payment in order to continue to provide service for the Transfer of Care Software – 23 agencies will pay the Nevada Hospital Association (NHA) for services beginning September 2008 through June 2009. NHA will forward monthly payments to Commerx. The cost is approximately \$1700.00 for each of the 23 agencies involved in the project.
2. Status of current Transfer of Care Software – The agencies will continue service with Commerx Corporation; meanwhile, a committee is established to look into other vendors. Chief Mike Myers will look into First Watch and report his findings at the next TOCC meeting.
3. Transfer of Care Data – The October data shows an average time of 18 minutes which has been consistent with the data from the past 6 months.

B. Report from Stroke Executive Committee

Dr. Slattery reported that each committee has done a tremendous amount of work on the objectives given to them over the past few months.

The Protocol Committee reported that the 911 dispatch system is dialed in for stroke patients. When a 911 caller calls, Card 28 is used to determine if the symptoms match those of a stroke. The issue with Card 28 is the alpha response; which results in transporting without lights and sirens. The workgroup recommended striking the use of alpha calls when dealing with stroke patients. This Committee has decided on using the Cincinnati Stroke Scale as the tool for screening stroke patients. The Protocol Committee will continue to work with the QA Committee to develop a protocol. There is currently a draft protocol in the works which will direct education efforts and protocol for stroke care.

The Hospital Committee met and decided to use The Joint Commission accreditation as the requirement for receiving stroke destination patients. This Committee will continue to work with the QA Committee to review outcome measures as well as other objectives.

Dr. Slattery noted that he was very impressed with the amount of work put forth by each committee in such a short amount of time and extended his gratitude to each of them.

C. Discussion of Draft Conflict of Interest Statement

Mr. Chetelat reported that the draft Conflict of Interest Statement was reviewed by Steve Minagil, SNHD lawyer. Mr. Minagil believes that the NRS language provides enough conflict of interest coverage and adding the draft Conflict of Interest Statement would only make it more restrictive.

Dr. Homansky stated that he would not only like the conflict of interest policy to apply to board members but expressed his concern especially for those presenting before the Board. Mr. Chetelat suggested a possible solution of adding it in to the EMS Regulations. Dr. Slattery felt that it wouldn't be necessary to have something so formal; he believes that any presenter speaking before the Board could simply state whether or

not they have conflicts and for the chairman to enforce this rule for consistency. Mr. Chetelat stated that he would review these options with the OEMSTS and come back with a recommendation at the January meeting. A motion to continue to pursue a Conflict of Interest statement for speakers before the Board was made, seconded, and carried unanimously.

D. Discussion of Changing to Quarterly MAB Meetings

Mr. Chetelat suggested that the MAB meet quarterly instead of monthly as a result of the short meetings in the past months. He stated that by doing this, it would allow for subcommittees to meet every other month and get more work done at that level. Dr. Marino expressed his concern that by doing this, it is considered an act of satisfaction with the system as it is. He stated that there are still lots of tasks at hand and moving to quarterly meetings will slow down the process. A motion for MAB to meet every other month was made, seconded, and carried unanimously. The next meeting will be held on January 7, 2009.

E. Report from Regional Trauma Advisory Board

Mary Ellen Britt reported that the Clark County Trauma Report was complete and would be mailed out to all the members. The report outlines the status, activities and achievements of the trauma system since its inception in 2005 under the Southern Nevada Health District authority. The report describes the components of the trauma system, its leadership and primary functions which include promoting injury prevention activities, facilitating the delivery of specialized trauma care, performing system evaluation performance improvement activities and participating in disaster planning and management. Over the past year, several injury and mortality data sources have been identified at the national, state and local levels. These include the Centers for Disease Control & Prevention, the American College of Surgeons, the Nevada State Health Division, Bureau of Health Planning and Statistics, Center for Health Information Analysis at UNLV, the Clark County Coroner's Office and all three trauma centers (St. Rose Dominican Hospitals-Siena Campus, Sunrise Hospital & Sunrise Children's Hospital & University Medical Center). These data have been compiled and placed into the report as an initial step to provide a broad overview of trauma system performance. The future activities will focus on further data analysis, improved access to high quality data, and establishment of an information management system to enhance capacity to evaluate trauma system preparedness and performance.

Ms. Britt also reported that the RTAB has created a new subcommittee called the Trauma System Performance Improvement Committee which was recommended by Brian Rogers. The first meeting was cancelled due to a time conflict with the EMS Expo but there will be another one scheduled for some time in November.

**III. INFORMATIONAL ITEMS/DISCUSSION ONLY**

Possible Addition of 2 Pediatric Destination Hospitals (MountainView & St. Rose San Martin)

Mr. Chetelat stated that MountainView Hospital notified the OEMSTS that they are now capable of receiving pediatric patients. Mr. Chetelat explained that a pediatric destination protocol was established in 2005 and noted that MountainView Hospital has met all those requirements. He stated that the OEMSTS is ready to move forward with designating them as a pediatric destination hospital unless the Board disagrees. Mr. Chetelat reported that St. Rose San Martin also submitted a request to become a pediatric designated hospital but noted that the OEMSTS requested more information, which to date has not been submitted. Dr. Jay Fisher, Medical Director of Pediatric Emergency Medicine for UMC and St. Rose Siena and Chief Bruce Evans raised some concerns that generated much discussion. It was decided by the Board that this topic will be further discussed at a subcommittee meeting that will take place in December.

**IV. PUBLIC APPEARANCE/CITIZEN PARTICIPATION**

None

**V. ADJOURNMENT**

As there was no further business, Chairman Marino called for a motion to adjourn. The motion was seconded and passed unanimously to adjourn at 11:40 a.m.