

MINUTES

EMERGENCY MEDICAL SERVICES & TRAUMA SYSTEM DIVISION OF COMMUNITY HEALTH DRUG/DEVICE/PROTOCOL (DDP) COMMITTEE

December 2, 2020 - 10:00 A.M.

MEMBERS PRESENT

Jessica Leduc, DO, HFD, Chair Jim McAllister, LVMS Steve Johnson, MWA Matthew Horbal, MD, MCFPD Samuel Scheller, GEMS Chief Stephen Neel, MVFD Jarrod Johnson, DO, MFR Mike Barnum, MD, AMR Michael Holtz, MD, CCFD Chief Kim Moore, HFD Derek Cox, LVFR Walter West, BCFD Chief Lisa Price, NLVFD

Jeff Davidson, MD, AirMed Response

MEMBERS ABSENT

Chief Shawn Tobler, MFR Bryce Wilcox, CA Devon Eisma, RN, OM Karen Dalmaso-Hughey, AMR David Obert, DO, CA Alicia Farrow, Mercy Air

Jcalmandi@gmail.com

SNHD STAFF PRESENT

Christian Young, MD, EMSTS Med. Director John Hammond, EMSTS Manager Michelle Stanton, Recording Secretary Laura Palmer, EMSTS Supervisor Scott Wagner, EMSTS Field Representative

PUBLIC ATTENDANCE

David Slattery, MD
Christopher Cheng
Tony Greenway
Alyssa Ball
Sharon Smith

Jeff Davidson, MD
Gerry Julian
Braiden Green
Mark Calabrese
Chris Racine

CALL TO ORDER - NOTICE OF POSTING OF AGENDA

Chairman Jessica Leduc called the meeting to order at 10:05 a.m. and stated the Affidavit of Posting was posted in accordance with the Nevada Open Meeting Law. All Committee members joined the meeting by teleconference and the roll call was administered by Laura Palmer, EMSTS Supervisor, who noted that a quorum was present.

I. FIRST PUBLIC COMMENT

Dale Branks

Members of the public are allowed to speak on Action items after the Committee's discussion and prior to their vote. Each speaker will be given five (5) minutes to address the Committee on the pending topic. No person may yield his or her time to another person. In those situations where large groups of people desire to address the Committee on the same matter, the Chair may request that those groups select only one or two speakers from the group to address the Committee on behalf of the group. Once the action item is closed, no additional public comment will be accepted. Chairman Leduc asked if anyone wished to address the Board pertaining to items listed on the Agenda. Seeing no one, she closed the Public Comment portion of the meeting.

II. CONSENT AGENDA

Chairman Leduc stated the Consent Agenda consisted of matters to be considered by the DDP that can be enacted by one motion. Any item may be discussed separately per Committee member request. Any exceptions to the Consent Agenda must be stated prior to approval.

Approve Minutes for the Drug/Device/Protocol Committee Meeting: October 7, 2020

Chairman Leduc asked for a motion to approve the August 5, 2020 minutes of the DDP meeting. <u>A motion was made by Jim McAllister</u>, seconded by Dr. Barnum carried unanimously to approve the minutes as written.

III. REPORT/DISCUSSION/POSSIBLE ACTION

A. <u>Discussion of the Removal of Dopamine as a Mandatory Inventory Item</u>

Dr. Holtz stated that Clark County Fire Department would like remove Dopamine as a mandatory inventory item. In addition to the current shortage, various studies on Dopamine have identified issues with neurotherapeutic range, i.e. tachycardic dysrhythmias. Dr. Slattery recalled past discussions about removing Dopamine after adding Push Dose Epinephrine to the inventory. They elected not to remove it because it fills the gap with patients in cardiogenic shock with ST changes where Push Dose Epi probably isn't the best medication for that patient. Perhaps they could consider Push Dose Phenylephrine as an option in the future; a pure alpha agent that doesn't affect the heart in terms of rate and contractility.

A motion was made by Dr. Holtz to change Dopamine to an optional item, rather than mandatory, on the "Official Air Ambulance, Ground Ambulance, and Firefighting Agency Inventory," and to consider Push Dose Phenylephrine as an alternative in the future. The request will be forwarded to the Medical Advisory Board for approval. The motion was seconded by Jim McAllister and carried unanimously.

[Due to technical issues, Dr. Young takes over as Chairman for the remainder of the meeting.]

B. <u>Discussion of Education for Hemorrhage Control Protocol</u>

Ms. Palmer stated the Education Committee discussed the need to develop education for hemorrhage control. The agencies agreed to work together to utilize PHTLS and Stop the Bleed information to be presented at their next meeting. The agenda item was forwarded to the DDP for further discussion.

A motion was made by Dr. Slattery to move forward with the proposed education package to be developed by the Education Committee. The motion was seconded by Mr. Johnson and carried unanimously.

IV. INFORMATIONAL ITEMS/ DISCUSSION ONLY

Dr. Barnum stated that after being approached by a concerned pediatric emergency physician, he would like to place an agenda item for the next MAB meeting to discuss attitudes in pediatric cardiac arrest.

Dr. Young explained there are issues with the tachycardia protocol related to irregular Atrial fibrillation with rapid ventricular response. He suggested they look at adjusting the protocol to address potential wide complex tachycardias.

V. SECOND PUBLIC COMMENT

Members of the public are allowed to speak on Action items after the Committee's discussion and prior to their vote. Each speaker will be given five (5) minutes to address the Committee on the pending topic. No person may yield his or her time to another person. In those situations where large groups of people desire to address the Committee on the same matter, the Chair may request that those groups select only one or two speakers from the group to address the Committee on behalf of the group. Once the action item is closed, no additional public comment will be accepted. Dr. Young asked if anyone wished to address the Board pertaining to items listed on the Agenda. Seeing no one, he closed the Second Public Comment portion of the meeting.

VI. ADJOURNMENT

There being no further business to come before the Committee, Dr. Young adjourned the meeting at 10:42 a.m.