

MINUTES

EMERGENCY MEDICAL SERVICES & TRAUMA SYSTEM DIVISION OF COMMUNITY HEALTH

MEDICAL ADVISORY BOARD (MAB) MEETING

October 5, 2022 - 11:00 A.M.

MEMBERS PRESENT

Jeff Davidson, MD, MWA (Chairman) Douglas Fraser, MD, RTAB Rep. Jessica Leduc, DO, HFD Ryan Hodnick, DO, Moapa Chief Frank Simone, NLVFD Paul Stepaniuk, HFD (Alt) Chief Scott Phillips, LVFR Chief Stephen Neel, MVFD Evan Befus, MWA Kelly Morgan, MD, NLVFD Mike Barnum, MD, AMR Mike Holtz, MD, CCFD David Obert, DO, CA Chief Jennifer Wyatt, CCFD Chief Shawn Tobler, MFR Mark Calabrese, CA Samuel Scheller, GEMS

MEMBERS ABSENT

Nate Jenson, DO, MFR Jessica Goldstein, AMR Nigel Walton, BCFD

SNHD STAFF PRESENT

John Hammond, EMSTS Manager Christian Young, MD, EMSTS Medical Scott Wagner, EMSTS Field Rep. Nicole Charlton, EMS Program/Project Coordinator Rae Pettie, Recording Secretary Laura Palmer, EMSTS Supervisor Fermin Leguin, District Health Officer Roni Mauro, EMSTS Field Rep.

Edward Winder, Associate General Counsel

PUBLIC ATTENDANCE

Rae Niedfeldt, MD James "Bud" Adams Jim McAllister Jeremy Benneman Eric Grismanauskas Fernando Juarez

CALL TO ORDER - NOTICE OF POSTING OF AGENDA

Dr. Jeff Davidson called the meeting to order at 11:02 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

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. Davidson asked if anyone wished to address the Board pertaining to items listed on the agenda. Seeing no one, he closed the Public Comment portion of the meeting.

II. CONSENT AGENDA

Dr. Davidson stated the Consent Agenda consists 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.

Approve Minutes/Medical Advisory Board Meeting: August 3, 2022

<u>A motion was made by Dr. Holtz, seconded by Chief Simone, and carried unanimously to approve the Consent Agenda as written.</u>

III. CHIEF HEALTH OFFICE REPORT

Mr. Hammond gave a state-of-the-office report as follows:

- Bobbie Sullivan, EMS Program Manager for the rest of the state, informed him that the state-wide radio system is coming on-line. He stated the current is going to be taken down and replaced by the new system.
 The Southern Nevada Area Communications Council who provides 800 MHz radio communications will address this with the individual agencies so we can remain operational.
- The EMS office has transitioned to a 4/10 work schedule. As the office is closed on Fridays, an additional afternoon testing time has been added to Tuesday's schedule.
- All agencies that have a Community Paramedicine endorsement added to their permit must adhere to the submission of certain data elements on a quarterly basis as provided for in EMS Regulations. He will forward the relevant regulations to all whom it applies.
- The EMS Office is continuing to work with the processing of workflow. There have been delays in processing within the EMS Office that are currently being addressed. However, the agencies need to be aware that individuals applying for licensure who have additional documents/information to supply to the office are asked to notify us via email after they have done so. The software, ImageTrend, does not notify us when a change has been made to an account, such as the uploading of a CPR card to the individual's file. He asked that the agencies provide further direction in this matter to expedite the process.
- The Physician Statement is a form signed by a Nevada licensed MD, DO, PA, or APN stating the applicant is found to be of sound physical and mental health, and free of physical defects or diseases which might impair the applicant's ability to drive or attend an ambulance. The need for an optometric assessment is unnecessary, so it has been removed from the form.
- The EMS Office is working towards making changes to the continuing medical education hours related to recertification. The concept is to remove the current mandatory category hours to allow the agencies/training centers the flexibility to educate their EMS personnel in areas where they identify a need. The total hours required at each level of certification will remain unchanged, and they can continue to submit education for approval in the current category format. All education needs to continue to be either approved by CAPCE or the OEMSTS. The OEMSTS is currently working on revising the procedures, so the change will go into effect after the new EMS Procedure Manual is rolled out.
- The EMS office is looking at revising the process for the submission of student course evaluations. Instead of having the student complete the post-course evaluation at the training center, an online link will be provided to the student following course completion.

- All permitted agencies and training centers were encouraged to become familiar with EMS Regulations and the EMS Procedure Manual.
- The permitted agency/training center responsibilities have been divided between the two field representatives, Scott Wagner and Roni Mauro. All investigations will be handled by Ms. Mauro. It is recommended that all global requests also be submitted to ems@snhd.org so it can be directed to the appropriate person should one of the field representatives be out of the office or otherwise unavailable.

IV. REPORT/DISCUSSION/ACTION

A. Committee Report: Education Committee (10/05/2022)

Chief Simone reported the Education Committee reviewed the education outline for the Transport Destination protocol. The outline consists of four sections: Review Changes; Emphasizing Points; Supporting Documents; and Overall Learning Objectives. The committee agreed it was important to include a section titled "Special Considerations" to allow the individual agencies to expand the education component as needed.

A motion was made by Chief Simone to approve the education outline for the Transport Destination Protocol. The motion was seconded by Dr. Morgan and carried unanimously.

The education outline for the Trauma Field Triage Criteria protocol was also approved by the committee but until it is presented to the Regional Trauma Advisory Board and approved by Dr. Leguen it cannot be voted on by the MAB.

B. Committee Report: Drug/Device/Protocol Committee (10/05/2022)

Dr. Holtz reported the DDP had a discussion on the removal of taser darts. EMS providers have been seeking guidance about where the responsibility lies. The consensus was that EMS providers should only remove the barbs to facilitate medical care. He stated that Dr. Barnum agreed to bring back a draft proposal for further discussion at the next meeting.

Dr. Holtz reported that Clark County Fire Department (CCFD) conducted a pilot study from August 2020 to April 2021 to test the efficacy of acetaminophen administration as an alternative to a narcotic for pain management. Chief Wyatt presented the results of the study to the DDP, including the Application for Petition of addition of acetaminophen to the EMS drug inventory. Dr. Sandra Horning, pediatric emergency physician, was in support of the use of acetaminophen for children. The DDP approved the motion to add acetaminophen for use initially at the paramedic level, and to continue to track the results prior to rolling it out at the AEMT level, pending approval by the Medical Advisory Board.

A motion was made by Chief Simone to add Ofirmev (acetaminophen) to the Official Paramedic Drug Inventory as a non-opiate analgesic for pain management and reduction of fever and to authorize the Drug/Device/Protocol Committee to make the necessary revisions to all related protocols. The motion was seconded by Chief Neel and carried unanimously.

V. INFORMATIONAL ITEMS/ DISCUSSION ONLY

A. ED/EMS Regional Leadership Committee Update - Tabled

B. QI Directors Committee Update

Dr. Young reported the committee reviewed cases related to the Prehospital Death Determination and Termination of Resuscitation protocols. There were no overall issues to report.

Also discussed was the importance of ensuring there is adequate documentation for patients signing an AMA or formed refusal. They are looking at bringing a group together to discuss best practices from each agency.

C. Emerging Trends

No report.

VI. 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. Davidson asked if anyone wished to address the Board pertaining to items listed on the agenda.

VII. ADJOURNMENT

There being no further business, the meeting was adjourned at 11:21 a.m.