

**MINUTES
EMERGENCY MEDICAL SERVICES
MEDICAL ADVISORY BOARD MEETING
JANUARY 5, 2005 – 3:30P.M.**

MEMBERS PRESENT

Jeff Davidson, M.D., Chairman, Valley Hospital
Philis Beilfuss, R.N., North Las Vegas Fire Department
E. P. Homansky, M.D., ED Physician at Large
David Rosin, M.D., Mental Health Representative
David Daitch, D.O., Boulder City Hospital
William Z. Harrington, M.D., UMC
Donald Reisch, M.D., Desert Springs Hospital
Jon Kingma, EMT-P, Boulder City Fire Department
Donald Kwalick, M.D., Chief Health Officer, CCHD
David L. Watson, M.D., Sunrise Hospital
Chief David Petersen, Mesquite Fire & Rescue
Richard Henderson, M.D., St. Rose/Rose de Lima

Kurt Williams, American Medical Response
Allen Marino, M.D., St. Rose Dominican/Siena
John J. Fildes, M.D., University Medical Center
Chief Randy Howell, Henderson Fire Department
William Elsaesser, M.D., North Vista Hospital
Sam Kaufman, FAB Representative
Wade Sears, M.D., MountainView Hospital
Natalie Seaber, R.N., Nurse Manager
Frank Pape, D.O., Summerlin Hospital
Brian Rogers, EMT-P, Southwest Ambulance
John Henner, D.O., Southern Hills Hospital

ALTERNATES

Russ Cameron, EMT-P, Clark County Fire Department

Sandy Young, R.N., Las Vegas Fire & Rescue

MEMBERS ABSENT

Chief Steve Hanson, Clark County Fire Department
Kevin Slaughter, D.O., Spring Valley Hospital
Bryan Lungo, M.D., Pediatric Representative

Darrin Houston, D.O., Mesa View Regional Hospital
Chief Mike Myers, Las Vegas Fire & Rescue

CCHD STAFF PRESENT

Rory Chetelat, EMS Manager
Trish Beckwith, Field Representative
Eddie Tajima, Administrative Assistant
James Osti, Grant Writer

Mary Ellen Britt, R.N., Quality Improvement Coordinator
Moana Hanawahine-Yamamoto, Recording Secretary
Joseph J. Heck, D.O., Operational Medical Director

PUBLIC ATTENDANCE

Don Hales, EMT-P, Southwest Ambulance
Judith Hendriksen, R.N., Spring Valley Hospital
Jo Ellen Hannom, R.N., Clark County Fire Department
Pete Carlo, EMT-P, Southwest Ambulance
Julian Genilla, EMT-P, Southwest Ambulance
Davette Shea, R.N., Southern Hills Hospital
Melinda Hursh, R.N., Sunrise Hospital
Derek Cox, EMT-P, American Medical Response
Kathy Kopka, R.N., Sunrise Hospital

Sydney Selitzky, EMT-P, Henderson Fire Department
Roy Carroll, American Medical Response
Donna Fitzpatrick, R.N., University Medical Center
Margaret Russitano, Sunrise Hospital
Pam Turner, R.N., Valley Hospital
Brent Hall, EMT-P, Clark County Fire Department
Gail Yedinak, University Medical Center
Jo Ann Lujan, WestCare

CALL TO ORDER - NOTICE OF POSTING OF AGENDA

The Medical Advisory Board convened in the Clemens Room at the Ravenholt Public Health Center at 3:44 p.m. on Wednesday, January 5, 2005. The meeting was called to order by Chairman Jeff Davidson, M.D. 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 Davidson noted that a quorum was present.

I. CONSENT AGENDA

A. Minutes Medical Advisory Board Meeting November 3, 2004

Dr. Davidson 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 minutes as written was made, seconded, and carried unanimously.

B. Endorse Draft Changes to EMS Regulations

A motion for Board endorsement of draft changes to EMS Regulations was made, seconded and carried unanimously.

II. REPORT/DISCUSSION/POSSIBLE ACTION

A. Education Committee-Report from Focus Group on 2002 EMS Instructor Course Curriculum

Randy Howell advised there was one change under the Master Instructor requirements. They must have three years of experience as a primary EMS instructor and one of the following: attend the National Association of EMS Educators train-the-trainer EMS instructor course or attend the instructional methodologies or training program management course at the National Fire Academy or hold a bachelor's degree in education, health education, vocational education or other related fields approved by the Health District.

A motion to approve the changes to the District Procedure for EMS Instructor training was made, seconded and carried unanimously.

B. Addition of Regulation Change to Section 1700: Regional Trauma Advisory Committee

Rory Chetelat from the Health District advised the new section 1700: Regional Trauma Advisory Committee (RTAC) of the EMS Regulations was a separate item on the agenda because it was not included in the previous workshops. The language gives authority to the Clark County Health District and the Chief Health Officer to oversee the RTAC and provide for the breakdown of membership.

There was discussion with regard to adding the word "designated" or "expanded" to the language of, "each facility providing trauma services;" however, Mr. Chetelat noted that the State is allowing Sunrise to provide trauma services under a provisional license, therefore before final designation.

Dr. Joseph Heck suggested the verbiage be changed to, "each facility licensed to provide trauma services." Dr. Donald Kwalick also suggested the language, "until a successor is named or appointed," be included in IV. Dr. John Fildes requested the words "and system performance" be added in VII. D.

A motion was made to approve the above revisions to Section 1700: Regional Trauma Advisory Committee. The motion was seconded and passed unanimously by the Board.

C. Approval of Trauma Field Triage Criteria Operations Protocol

Mr. Chetelat advised that the proposed amendments are called catchment zones and the tentative effective date of the catchment zones is January 17, 2005 provided Sunrise Trauma has received State approval for licensure. Mr. Chetelat also stated that the EMS office would closely monitor the system and make necessary adjustments when needed. The protocol does allow for the EMS providers to go outside of the catchment zones to avoid traffic and/or weather conditions.

Dr. Fildes mentioned that the catchment zones were created to provide an adequate number of patients for a new trauma center to gain experience but not be overwhelmed. UMC was asked by the Health District to collect data on the point of origination of patients delivered to their trauma center and based on the

hypothetical set of boundaries, he advised it would produce too many patients for a new center. Dr. Fildes also commented that he is uncomfortable with the accelerated timeline.

Sandy Young advised that the two-week timeline to educate their employees on this new protocol was inadequate. Most of the EMS providers on the Board requested a timeline of 30 days. Dr. Michael Metzler stated that Sunrise Trauma would like to have a positive relationship with EMS, therefore he is willing to extend the effective date to four weeks so that the EMS providers will have adequate time for training.

Brian Rogers questioned how the telemetry would be handled for Sunrise Trauma. Dr. Metzler noted that they have purchased an 800 MHz radio so that there would be separate channel for Sunrise Trauma; however, it needs to be programmed. Mr. Chetelat explained that the next remapping of the 800 MHz radios would occur in about six months. Therefore, when using the telemetry, the EMS providers need to identify that they are calling for Sunrise Trauma. Ms. Young noted that radio traffic for Sunrise is difficult and asked if there could be a dedicated phone line in the interim for Sunrise Trauma. Dr. Metzler agreed to provide this to streamline communication.

Dr. Homansky made a motion to approve the Trauma Field Triage Criteria Operations Protocol with the recommendation that implementation will begin no earlier than Tuesday, February 1, 2005 at 0700 or thereafter, when Sunrise has been designated for licensure by the State. The motion was seconded and passed by the Board. Dr. Fildes opposed the motion.

Mr. Chetelat commented that a concern was presented in the earlier RTAC meeting with regard to the fact that the operations protocol did not address the issue of trauma overload. The Board deferred to RTAC to review this issue.

D. Discussion on Legal 2000 Patient Transport Guidelines Protocol

Mr. Chetelat presented material to the Board showing that EMS was doing a pretty good job of level loading. The data showed that 70% of the Legal 2000 patients are coming from north of Sahara Boulevard, this is the reason the St. Rose facilities numbers have been slightly lower than the other facilities. However, when the numbers have been higher, the distribution has been fairly equitable. EMS is delivering approximately 1.5 Legal patients per hospital per day however; the problem lies with the larger number of Legal 2000 patients holding in the Emergency Departments.

The consensus of the Board was that the Legal 2000 Patient Transport Guidelines Protocol is not working. The suggestion was to send this issue back to the subcommittee for further discussion.

Dr. Davidson stated that the current Legal 2000 Patient Transport Guidelines Protocol and the data collection would continue until next month and the Board requested that the subcommittee convene next month to discuss other options.

Brian Rogers made a motion to add the 45-minute general patient care on Legal 2000 patients. The motion was seconded and passed by the Board. There were eight members in opposition.

III. INFORMATIONAL ITEMS/DISCUSSION ONLY

A. Trauma System Development Update

No Report.

B. E.D. Nurse Managers Report

No Report.

C. QI Committee Report

No Report.

D. Update on Community Triage Center

Jo Ann Lujan from WestCare submitted the breakdown of people served at the Community Triage Center in December 2004.

IV. PUBLIC APPEARANCE/CITIZEN PARTICIPATION

None.

V. ADJOURNMENT

As there was no further business, Chairman Davidson called for a motion to adjourn. The motion was seconded and passed unanimously to adjourn at 5:08 p.m.