

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

MEMBERS PRESENT

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| Richard Henderson, M.D., Chairman, Henderson Fire | Rory Chetelat, M.A., EMT-P, EMS Manager, CCHD |
| Philis Beilfuss, R.N., North Las Vegas Fire Department | Gerry Hart, American Medical Response (Alt.) |
| E. P. Homansky, M.D., American Medical Response | Chief Russell Cameron, Clark County Fire Department |
| Tim Crowley, EMT-P, Las Vegas Fire & Rescue (Alt.) | Brian Rogers, EMT-P, Southwest Ambulance |
| Allen Marino, M.D., NLVFD and Southwest Ambulance | Brian Fladhammer, Mercy Air Service, Inc. |
| Lawrence Pellegrini, D.O., Las Vegas Fire & Rescue | Chief David Petersen, Mesquite Fire & Rescue |
| Dale Carrison, D.O., Mercy Air and Clark County Fire Dept. | David Daitch, D.O., Boulder City Hospital |
| Chief Randy Howell, Henderson Fire Department | Thomas Geraci, D.O., Mesquite Fire & Rescue |

MEMBERS ABSENT

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| Donald Kwalick, M.D., Chief Health Officer, CCHD | Jon Kingma, EMT-P, Boulder City Fire Department |
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CCHD STAFF PRESENT

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| Joseph J. Heck, D.O., Operational Medical Director | Mary Ellen Britt, R.N., Quality Improvement Coordinator |
| Trish Beckwith, Field Representative | Moana Hanawahine-Yamamoto, Recording Secretary |
| Judy Tabat, Administrative Assistant | |

PUBLIC ATTENDANCE

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| Jay Craddock, EMT-P, North Las Vegas Fire Department | Cheryl Bromley, R.N., Mercy Air |
| Sheryl Hiller, APN, WestCare | Scott Vivier, EMT-P, Henderson Fire Department |
| Gordon Hildebrant, LifeNet/Mercy Air | Gerry Julian, EMT-P, Mercy Air |
| Craig Yale, LifeNet | Roy Carroll, American Medical Response |
| Derek Cox, EMT-P, American Medical Response | Trent Jenkins, EMT-P, Clark County Fire Department |
| Larry Johnson, EMT-P, Southwest Ambulance | Aaron Harvey, EMT-P, Henderson Fire Department |
| Cpt., John Higley, Mesquite Fire & Rescue | Steve Patraw, EMT-P, Southwest Ambulance |
| Debra Daly, Southwest Ambulance | Rod Hackwith, EMT-P, Comm. Coll. Of S. Nevada |
| Dan Musgrove, UMC/Clark County | James Adams, American Medical Response |
| Gwen Murray, 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 3:31 p.m. on Wednesday, August 3, 2005. The meeting was called to order by Chairman Richard Henderson. 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 Henderson noted that a quorum was present.

I. CONSENT AGENDA

A. Minutes Medical Advisory Board Meeting July 6, 2005

Chairman Henderson 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. Discussion of Priority Dispatch Card # 33 will be Referred to Priority Dispatch Committee

II. REPORT/DISCUSSION/POSSIBLE ACTION

A. Education Committee

1. Discussion of Weapons of Mass Destruction Class for Initial EMT-B Training

Dr. Carrison advised that the Education committee approved the addition of the Weapons of Mass Destruction (WMD) class into the initial EMT-Basic training without adding additional hours to the course. The training centers will have the flexibility to determine how the WMD training will be incorporated.

Dr. Carrison made a motion to include the Weapons of Mass Destruction class within the Initial EMT-Basic Training. The motion was seconded and carried unanimously by the Board.

2. Discussion of Required Clinical Hours for Initial EMT-I Training

Dr. Carrison stated that the committee would like the EMT-I clinical hours to be competency based. They will continue discussions and hope to have a recommendation regarding the standards at the next meeting.

3. Discussion of Revisions to Skills Proficiency Record

Dr. Carrison explained that there were housekeeping revisions to the Skills proficiency record.

Dr. Carrison made a motion to approve the revised Skills Proficiency Record with changes to Spinal Immobilization – Lying Patient and Combitube Proficiency (including SA). The motion was seconded and carried unanimously by the Board.

B. Procedure/Protocol Committee

1. Final Review of Draft Protocol Manual

Dr. Henderson noted that in addition to the summary of changes noted with the draft Protocol manual, there were other revisions made by the Procedure/Protocol Committee.

1. Page 8 – on 3. (2) by the teddy bear sign, deletion of reference to the manual defib.
2. Page 31 – the first # 6 should read if the patient has R on T phenomenon, couplets, triplets, or non-sustained VTach and has symptoms attributable to the ectopy then administer Lidocaine – removing reference to hemodynamically unstable
3. Page 35 – change the word administer back to consider
4. Page 37 – change to 150mg of amiodarone in 50cc NS
5. Page 38 – change etomidate from 0.1 mg/kg to 0.15 mg/kg
6. Page 106 – limit central access to PICC lines only

Dr. Marino made a motion to approve the draft protocol manual with the additional revisions. The motion was seconded and carried unanimously by the Board.

The updated protocol manual will be given to the EMS agencies by September 1 so that they may begin roll-out training. It will be effective December 1, 2005.

2. Final Review of Draft Procedure Manual

Dr. Henderson advised that the committee requires further discussion of the draft Procedure Manual.

C. Discussion of Priority Dispatch Task Force Membership

Rory Chetelat asked the Board members to contact him directly if they are interested in serving on the Priority Dispatch Task Force committee.

III. INFORMATIONAL ITEMS/DISCUSSION ONLY

A. Quality Improvement Meeting Update

Mary Ellen Britt gave a brief summary on the issues discussed at the QI Director's committee meeting. There has been difficulty receiving monthly call volume statistics from each EMS agency because of the differences in gathering data. The committee hopes this problem will be resolved once all of the agencies have ROAM IT. A brief summary of each of the 16 QI cases submitted from January – June 2005 was given. The EMS office also advised the committee that the Fire Department Field Assessment form was no longer endorsed by the Clark County Health District because the corresponding protocol was removed during the last protocol revision. Finally, each agency reported on the QI activities occurring within the agency.

B. Trauma System Development Update

Mr. Chetelat noted that there has been some discussion regarding a name change from the Regional Trauma Advisory Committee (RTAC) to the Regional Trauma Advisory Board. The subcommittee has been working on revisions to the trauma system plan and hopes to have the Board of Health's approval soon.

Brian Rogers had a concern with the destination criteria in the Trauma Field Triage Criteria protocol because recently, UMC's trauma center had an overload and Southwest Ambulance had a patient wait in the ambulance for over 2 hours. Mr. Chetelat noted that part of the problem that night was a number of moderate speed collisions. He explained that after the RTAC committee meeting, there were discussions about the Trauma Field Triage Criteria and too many low-level trauma patients being sent to the trauma centers.

Mr. Chetelat announced there will be a meeting regarding SB 458 next Wednesday, August 10 in the Clemens room after the Facilities Advisory Board meeting at 8:30 a.m.

Mr. Chetelat also clarified that if there are any concerns with regard to actionable items on the agenda, a roll call vote will be taken. There are nine voting entities on the MAB and there must be a quorum of at least five members present to vote on an agenda item. The medical director from each agency is the primary voting person. If the medical director is unable to attend the MAB meeting, he may appoint the operational representative from the agency to vote on his behalf. There are two medical directors on the Board who represent two agencies. They will have two votes, one vote per agency.

Mr. Chetelat reiterated the importance of level-loading Legal 2000 patients.

IV. PUBLIC APPEARANCE/CITIZEN PARTICIPATION

Brian Fladhammer introduced Gordon Hildebrandt, Mercy Air's new Western Regional Vice President

V. ADJOURNMENT

As there was no further business, Chairman Henderson called for a motion to adjourn. The motion was seconded and passed unanimously to adjourn at 3:59 p.m.