



MINUTES
EMERGENCY MEDICAL SERVICES & TRAUMA SYSTEM
DIVISION OF COMMUNITY HEALTH
MEDICAL ADVISORY BOARD (MAB) MEETING

June 07, 2017 – 11:00 A.M.

MEMBERS PRESENT

Tressa Naik, MD, Chairperson, HFD	Jim Kindel, BCFD
Logan Sondrup, MD, Community Ambulance	Brandon Hunter, AMR
Chief Kim Moore, HFD	Chief Troy Tuke, CCFD
David Slattery, MD, LVFR	Frank Simone, NLVFD
Matthew Horbal, MD, Mt Charleston FD	K Alexander Malone, MD, Vice Chair NLVFD
Mike Barnum, MD, AMR	Chief Lisa Price, NLVFD
Brian Anderson, Community Ambulance	Jeff Davidson, MD, MWA
E.P. Homansky, MD, AMR	Dale Carrison, DO, CCFD
Daniel Rollins, MD, BCFD	Steve Johnson, MWA
August Corrales, JTM	

MEMBERS ABSENT

Jarrod Johnson, DO, Mesquite Fire & Rescue	Kim Dokken, RN, RTAB Representative
Sean Dort, MD, RTAB Representative	Chief Rick Resnick, Mesquite Fire & Rescue
Chief Jon Stevenson, II, LVFR	Jorge Gonzalez, Mt Charleston FD
Greg Schowen, MWA	Brian Rogers, Community Ambulance
Eric Anderson, MD, MWA	

SNHD STAFF PRESENT

Christian Young, MD, EMSTS Medical Director	Joseph Iser, MD, Chief Health Officer
Laura Palmer, EMSTS Supervisor	John Hammond, EMSTS Manager
Scott Wagner, EMSTS Field Representative	Gerald Julian, EMSTS Field Representative
Heather Anderson-Fintak, Associate Attorney	Michelle Loel Stanton, Recording Secretary

PUBLIC ATTENDANCE

Alicia Farrow, Mercy Air	Jim McAllister, LVMS
Shane Splinter, HFD	Arleen Sheeler, BC Hospital
Sam Kaufman, Henderson Hospital	Josephine Covell, Centennial Hills Hospital
Carl Bottorf, Life Guard	Chris Stachyra, Mercy Air
Amanda Munson, BC Hospital	Dorita Sondereker, Sunrise Hospital
Daniel Llamas, HCA	Samuel Scheller, GEMS
Krystal Coffman, Spring Valley Hospital	Naomi Wilson, Valley Hospital
Paul Georgie	Nicole Iezzi

CALL TO ORDER - NOTICE OF POSTING OF AGENDA

The Medical Advisory Board convened in the Red Rock Trails Conference Room at the Southern Nevada Health District on Wednesday, June 7, 2017. Chairperson Tressa Naik called the meeting to order at 11:05 a.m. The Affidavit of Posting, Mailing of Agenda, and Public Notice of the Meeting Agenda were executed in accordance with the Nevada Open Meeting Law. Chairperson Naik noted that a quorum was present.

I. PUBLIC COMMENT

Public comment is a period devoted to comments by the general public on items listed on the Agenda. All comments are limited to five (5) minutes. Chairperson Naik asked if anyone wished to address the Board pertaining to items listed on the Agenda.

Seeing no one, Chairperson Naik closed the Public Comment portion of the meeting.

II. CONSENT AGENDA

Chairperson Naik 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. Approve Minutes/Medical Advisory Board Meeting: April 5, 2017
- B. Approval Calcium Gluconate to the EMS Formulary as an Alternative Medication due to the Current Shortage of Calcium Chloride
- C. Discussion of MicroHospital Receiving Facility Criteria to be Referred to Drug/Device/Protocol Committee
- D. Discussion of the use of Neosynephrine in the Treatment of Epistaxis to be Referred to Drug/Device/Protocol

Chairperson Naik asked for a motion to approve the consent agenda as a whole. A motion was made by Troy Tuke, seconded by E.P. Homansky and no members were opposed. The motion carried.

III. CHIEF HEALTH OFFICE REPORT

Dr. Iser reported that the Aedes aegypti mosquito has been discovered for the first time in Nevada in the 89032 zip code. The Health District is in the process of determining the range in which it resides as well as eliminating possible breeding areas. He cautioned that they could also be located in other areas and just have not been discovered yet. It is important to remember that the mosquitoes can breed in a very small amount of water such as a teaspoon full of water. Also, approximately two months ago, Southern Nevada received its first reported case of West Nile Virus which is carried by the Culex mosquito; a common mosquito to our state. Please remember to empty all possible sources of water collection e.g. birdbaths and downspouts. It is also important to use mosquito repellent and wear long pants and long sleeve shirts when possible to avoid being bitten.

IV. REPORT/DISCUSSION/POSSIBLE ACTION

- A. Committee Report: Education Committee

04/05/17 Meeting:

1. Review Discuss Proposed Changes to the Education Committee Bylaws
2. Evaluation of Mentorship Program for Paramedics
3. Discussion of Layout of Secondary & Primary Instructor Classes
4. Discussion of Monitoring Form for Instructor Applicants
5. Review/Discuss Proposed Changes to the Existing SNHD Internship/Preceptor Program Including Changes to the Major Evaluation Form
6. Review/Discuss Proposed Changes to the SNHD EMS Instructor Process Including Name, Criteria, and Course

Mr. Simone stated that these items had already been put forth to the Board at the previously scheduled meeting and he had nothing further to add.

B. Committee Report: Drug/Device/Protocol Committee

05/03/17 Meeting:

1. Review/Discuss Nomination for Vice-Chair
2. Review/Discuss Proposed Changes to the Drug/Device/Protocol Bylaws
3. Review/Discuss Schedule for Periodic Review of Protocol Manual
4. Review/Discuss First Group of Protocols for 2017
5. Review/Discuss STEMI Receiving Criteria
6. Review/Discuss Large Vessel Occlusion Diagnostic Tool
7. Review/Discuss Revised Stroke Protocol

C. Committee Report: Drug/Device/Protocol Committee

06/07/17 Meeting:

1. Review/Discuss Second Group of Protocols for 2017
2. Review/Discuss Possible Addition of 12-Lead Protocol
3. Review/Discuss Pressor Usage in Protocols for Consideration of Push Dose Pressors

Dr. Barnum reported that he was honored to be elected as the new Chairman of the Drug/Device/Protocol (DDP) Committee. He also inquired of the Board if a non-physician member of the committee can serve in the position of vice-chair. Mr. Hammond stated that the bylaws state the vice-chair has to be a member in good standing and if it be the will of the Board to require a physician fill the position the bylaws will have to be revised. No member moved to revise the bylaws, and Dr. Barnum agreed to carry the message that a non-physician may be elected co-chair.

Dr. Barnum reported the committee's bylaws were updated regarding the assignments of alternates in order to keep them consistent with all other committee bylaws.

The DDP Committee has begun a review of individual protocols. Approximately five protocols will be reviewed at each scheduled meeting until review is complete at which time they will be brought before the Medical Advisory Board in their entirety for final approval.

Dr. Barnum advised the Board that the DDP Committee has been discussing ways in which to develop STEMI receiving criteria. The DDP recommends the formation of workgroups which will include all involved stakeholders. The ED EMS Committee, lead by Chief Tuke, has begun the discussion already.

The RACE stroke assessment tool has been adopted as the standardized stroke and LVO tool. Also, a revised stroke protocol has been approved that includes a list of neuro interventional capable centers.

Dr. Barnum advised the Board that the discussion of a 12-lead protocol as well as the push dose pressor protocol has been tabled until further input can be provided.

D. Re-establishment of Communications QI Meetings with all Emergency Communications Centers

Ms Palmer reported that it has been several years since the FAO and communication departments from Henderson, Boulder City, and the private ambulance companies have met to review 9-1-1 calls. She requested contact information be forwarded in an effort to begin these meetings again.

Dr. Slattery extended an invitation to attend an upcoming peer review committee during which all agencies are together in one location.

E. EMS Field Representatives and their Agency Assignments

Ms Palmer reintroduced Scott Wagner, Field Representative, to the Board. Now that there are two field representatives in the EMS office all agencies and training centers have been assigned to either Mr. Wagner or Mr. Julian in an effort to provide better service. She also stated that both she and John Hammond are available in the event that a field representative is out of the office.

V. INFORMATIONAL ITEMS/ DISCUSSION ONLY

A. ED/EMS Regional Leadership Committee Update (06/07/17)

Chief Tuke stated that as of this morning the ED/EMS Regional Leadership Committee has reconvened and will be meeting monthly for the time being. There was good representation from all of the hospital and prehospital groups. The committee's first project will be formulating a STEMI protocol and that it will closely follow Mission: Lifeline recommendations. The committee will bring ideas, metrics, and hospital accreditation suggestions to the next meeting.

Dr. Young thanked Chief Tuke for revitalizing this committee as this is an important group to assist in the STEMI care protocols and processes.

B. Committee Report: QI Directors (06/07/17)

Dr. Young reported that during today's meeting the topic of termination of resuscitation was discussed. On occasion the 9-1-1 system is not activated in a timely manner whether it is due to the patient's traumatic injuries or other medical issues. When this occurs the EMS crews are relying on the hospital staff to provide online medical direction regarding termination of resuscitation efforts. With this in mind, there is going to be some outreach to hospitals to find out if revisions need to be made to the protocols or criteria.

Dr. Carrison expressed his desire for the committee to review these cases to ensure the best possible patient care possible.

C. Training EMS Providers on Free-Standing Receiving Facilities

Mr. Hammond advised the Board that with the opening of the E.R. at the Lakes the destination protocol for that facility has been put into place. As of a couple of weeks ago E.R. at the Lakes has had four patients transported to their facility. At this time not all agency staff has been trained but should be soon as other facilities of this kind will be opening in the foreseeable future. Mr. Hammond asked that individual training records be forwarded to ems@snhdmail.org.

D. Request for Drug/Device/Protocol Committee Vice-Chair to be a Physician

See Committee Report: Drug/Device/Protocol Committee

Dr. Naik informed the Board that this is the last meeting that Dr. "Flip" Homansky will be attending. The entire Board expressed its sincere gratitude for all his many years of dedicated commitment and service to not only this Board but all the others he has served. He has been a valued mentor and friend to many. The Board wishes Dr. Homansky nothing but success in all his future endeavors.

VI. PUBLIC COMMENT

Public comment is a period devoted to comments by the general public, if any, and discussions of those comments, about matters relevant to the Committee's jurisdiction will be held. No action may be taken upon a matter raised under this item of this Agenda until the matter itself has been specifically include on an agenda as an item upon which may be taken pursuant to NRS 241.020. All comments are limited to five (5) minutes. Chairperson Naik asked if anyone wished to address the Board.

Dr. Carrison expressed his gratitude to everyone who assisted in the placement of all 60 medical students in an EMT course. He also asked that if anyone would like to participate as either an instructor or physician to contact him directly.

Dr. Carrison reminded everyone that EDC is in two weeks. He wants all the hospital and emergency department physicians to be aware that reports from Canada said that 70% of the MDMA that was tested contained fentanyl. Dr. Carrison also stated that for malignant hypothermia off label dantrolene has been used with success, especially in Pacific Asians who metabolize MDMA at a much slower rate. Use the standard dantrolene dose, active cooling, and continuously monitor temperature.

Dr. Davidson introduced Paul Georgie and Nicole Iezzi who will be presenting the "Stop the Bleed" program for Board review. He believes this could be a way to get the hotel/casino first responders trained in using a unified kit.

Paul Georgie stated that just over a year ago he was contacted by UMC Trauma Center for ideas and products to be used to teach casino staff how to stop a bleed. He stated his company manufactures hemostatic gauze called Quick Clot which is included in kits that are used for bleeding control. Nicole Iezzi added that she and Paul would like to learn what the specific threats are to the Las Vegas area in order to best design kits for use.

Dr. Carrison and Dr. Slattery both expressed their support of looking into this product further.

Mr. Hammond reminded the board that no action can be taken on a public comment and suggested this item be agendaized for the MAB meeting for referral to DDP.

Chief Tuke recommended including the Fusion Center, Metro Police and MACTAC teams in the decision making process and Mr. Hammond added the need to include the trauma surgeons as well.

Dr. Slattery stated the emergency communication nurse system is poised to go live July 17th. Chief Sara McCrea is overseeing this program and is doing a phenomenal job. Dr. Slattery asked that anyone who has not be already contacted to contact him after the meeting for inclusion in the directory of services to be used for this program.

Dr. Slattery informed the Board that Las Vegas Fire and Rescue paramedics are being trained to the humeral IO sight that was passed by this board.

VII. ADJOURNMENT

There being no further business to come before the Board, Chairperson Naik called for a motion to adjourn. *A motion was made by Troy Tuke, seconded by Jason Driggars, and carried unanimously to adjourn at 11:40a.m.*