



MINUTES

EMERGENCY MEDICAL SERVICES & TRAUMA SYSTEM

DIVISION OF COMMUNITY HEALTH

DRUG/DEVICE/PROTOCOL (DDP) COMMITTEE

August 7, 2024 – 9:00 A.M.

MEMBERS PRESENT

Kelly Morgan, MD, Chair
Jessica Leduc, DO, HFD
Chief Kim Moore, HFD
Chief Jennifer Wyatt, CCFD
Chief Brian Young, MVFD (Alt)
Nate Jenson, DO, MFR
Jared Eldred, MD, NLVFD
Jim McAllister, LVMS

Mike Barnum, MD, AMR
Jeff Davidson, MD, MWA
Chief Frank Simone, NLVFD
Michael Holtz, MD, CCFD
John Osborn, CA
Derek Cox, LVFR
Capt. James Whitworth, BCFD

MEMBERS ABSENT

Troy Biro, Guardian Flight
Samuel Scheller, GEMS

Alicia Farrow, Mercy Air
Sydni Senecal, OptimuMedicine

SNHD STAFF PRESENT

Christian Young, MD, EMSTS Med. Director
Laura Palmer, EMSTS Supervisor
Dustin Johnson, EMTS Field Representative
Kristen Anderson, Senior Admin. Assistant
Edward Wynder, Associate General Counsel

John Hammond, EMSTS Manager
Roni Mauro, EMSTS Field Representative
Stacy Johnson, EMSTS Regional Trauma Coordinator
Rae Pettie, Recording Secretary
Tawana Bellamy, Senior Admin. Specialist

PUBLIC ATTENDANCE

Sandra Horning, MD
Maya Holmes
Brett Olbur
Dan Shinn
John Recicar
Jared Von Aken

Sean Collins
Kady Dabash-Meiningner
Tony Greenway
Stacy Pokorny
Tim Gunderson
Ailyn Risch

I. CALL TO ORDER AND ROLL CALL

Chairman Kelly Morgan, MD, called the meeting to order at 9:06 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 who noted that a quorum was present.

II. DIRECTIONS FOR PUBLIC ACCESS TO MEETINGS

Members of the public may attend and participate in the Drug, Device, and Protocol Committee meeting over the telephone by calling (415)655-0001 and entering access code 2556 178 0455. To provide public comment over the telephone, please press *3 during the comment period and wait to be called on. To provide public comment over Webex, please click on the hand icon to raise your hand during the comment period and wait to be called on.

III. 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. Morgan asked if anyone wished to address the Board concerning items listed on the agenda. Seeing no one she closed the public comment portion of the meeting.

IV. ADOPTION OF THE AUGUST 7, 2024 AGENDA

A motion was made by Chief Brian Young, seconded by Dr. Jenson, and carried unanimously to adopt the August 7, 2024 Agenda as written.

V. CONSENT AGENDA

Items for action to be considered by the Drug/Device/Protocol Committee which may be enacted by one motion. Any item may be discussed separately per Committee Member request before action. Any exceptions to the Consent Agenda must be stated prior to approval.

Approve Minutes June 5, 2024 Drug/Device/Protocol Committee Meeting (for possible action)

A motion was made by Dr. Davidson, seconded by Dr. Jenson, and carried unanimously to approve the June 5, 2024 Consent Agenda.

VI. REPORT / DISCUSSION / ACTION

A. Discussion and Approval of the Recommendation to Revise the Pediatric Allergic Reaction Protocol

The committee discussed the need to make revisions to the Pediatric Allergic Reaction protocol. In the absence of a consensus, the committee agreed to table the agenda item until the next meeting.

B. Discussion and Approval of the Recommendation to Revise the Adult Allergic Reaction Protocol

The committee discussed the need to make revisions to the Adult Allergic Reaction protocol. In the absence of a consensus, the committee agreed to table the agenda item until the next meeting.

C. Discussion and Recommendation to Approve Adding Tranexamic Acid (TXA) to the Formulary and the Hemorrhage Control Protocol

Dr. Morgan explained that the consideration of TXA was added to the Hemorrhage Control protocol under "Torso Hemorrhage" for blunt or penetrating chest or abdominal trauma, for adults with suspected blood loss (paramedic level skill).

Dr. Holtz noted that the verbiage regarding the application of a tourniquet under "Extremity Hemorrhage" needs to be revised. The tourniquet is no longer supposed to be placed "high and tight." The 'Stop the Bleed' training advises placing the tourniquet 2-3 inches above the site of hemorrhage, but not over a joint. He stated the pictures included in the protocol may confuse the providers. Mr. Young stated that he just completed the instructor course for both TECC and TCCC. Both still teach the appropriate tourniquet placement as "high and tight" in the axillary and groin areas. Dr. Holtz noted the TCCC education is for the military and more of a "care under fire" recommendation, not a guideline for civilians. He added that it's more for penetrating gunshot or combat wounds. Mr. Young noted they are still teaching "high and tight" in the ATLS course. The rationale is that you're less likely to crush a vessel or cause nerve damage, and more likely to control the hemorrhage.

A motion was made by Chief Young to approve adding Tranexamic Acid to the Formulary. The motion was seconded by Dr. Leduc and a roll call vote was taken. The motion passed with 13 in favor, and 1 abstention.

A motion was made by Dr. Leduc to approve revisions made to the draft Hemorrhage Control protocol. The motion was seconded by Dr. Jenson and a roll call vote was taken. The motion passed with 13 in favor, and 1 abstention.

D. Discussion and Recommendation to Approve Adding Buprenorphine to the Formulary and Adult Overdose Protocol

Dr. Morgan stated that Las Vegas Fire & Rescue submitted an application to add buprenorphine to the formulary and Adult Overdose protocol to address the opioid crisis. She did a brief overview of her PowerPoint presentation outlining the Buprenorphine (Bup) Field Start Protocol. In the absence of time, the committee agreed to table the discussion until the next meeting, which will tentatively be scheduled for September. It was suggested they bring in a subject matter expert in addiction medicine and/or toxicology. Dr. Morgan stated she will make the necessary contacts.

VII. BOARD REPORTS

None

VIII. INFORMATIONAL ITEMS/ DISCUSSION ONLY

None

IX. 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. Morgan asked if anyone wished to address the Board regarding items listed on the agenda. Seeing no one, she closed the Public Comment portion of the meeting.

X. ADJOURNMENT

There being no further business to come before the Committee, the meeting was adjourned at 10:08 a.m.