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DEPARTMENT OF HUMAN SERVICES



NEVADA DIVISION of PUBLIC
and BEHAVIORAL HEALTH



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MEETING MINUTES

Emergency Medical Services for Children Advisory Committee

May 6, 2026

Meeting Locations:

This meeting was held virtually via Microsoft Teams, by phone, and at physical locations.

Online Meetings Link:

<https://teams.microsoft.com/meet/25857835486788?p=VdVEXWKJ9TjrQPumTE>

Phone Number:

+1-775- 321- 6111

Phone Conference ID: 857-210-591#

Physical Meeting Locations:

1210 S. Valley View Blvd.

Las Vegas, NV Ste. 104

1. Call to Order/ Roll Call – Dr Sandra Horning - Chair
Dr. Sandra Horning
Michael Bologlu
Bobbie Sullivan
Jeremy Sonenschein
Irene Navis
John Mittelman
Kevin Haywood
Andrea Esp
Jamie Carlson
Zebulon Nomura
2. Public Comment: No public comment.
3. For Possible Action: Review and approval of the minutes from February 4, 2026, meeting minutes. Kevin Haywood approved the minutes, Zeb Nomura seconded the motion. Motion approved unanimously.

4. Informational Only: Discussion and update of possible State of Nevada EMS-C initiatives –Dr. Sandra Horning, Chair.

- a. Handtevy Implementation. - Michael Bologlu mentioned Dr. Nicole Brown would not be attending the meeting but the committee received an update regarding the pending data on medication dose increases and field utilization. Ross was unable to provide the requested information this week due to unforeseen circumstances.

A summary of the status of the Handtevy implementation was presented. Of the six agencies selected for rollout, all except Lander County have completed Session 1, which includes protocol review and development of training plans. It was noted that the medical director for Central Lyon and Esport Fire has also incorporated Carson City Fire into the initiative. Although Carson City is not included in the EMSC grant, the agency has opted to participate independently, expanding coverage within the Quad County region.

Training sessions for participating agencies are nearing completion. Work continues with Handtevy to finalize training components and complete application builds, with an anticipated completion timeline of approximately two months.

The committee expressed interest in reviewing the data that will be generated once agencies begin active use of the application, particularly regarding enhancements to field capability.

The project remains on schedule, and all deadlines have been met to date. Major milestones will be reported to the committee as agencies transition to active use of the system.

- b. Safe Transport for Children Initiative- Michael reported that we still have 22 of the 500 AEGIS Wraps that need to be distributed and were hoping to have those fully distributed as we complete our annual inspection. We are looking to include the larger services, Community and AMR are 2 that we are looking to bring on board.
- c. Pediatric Disaster Preparedness. - Irene Navis with WRAP-EM reports on recent additions to its website, including new resources highlighted in the top banner, and noted ongoing support for the national PEDS Ready Survey, which currently has a response rate of approximately 62%. Organizations were encouraged to reach out for assistance with identifying gaps even before receiving formal survey results. Irene also announced that its 13-module Pediatric Disaster Management Course is now live, with four modules scheduled for presentation at the Rural Preparedness Summit in June, and that training requests and instructor opportunities are available online. Additional updates included the release of three new pediatric resource guides—covering RSV, mass casualty incidents and mass gatherings, and active shooter events—as well as a new webinar on evacuating a behavioral health facility during extreme heat, developed by AzCHER (Healthcare Coalition in Arizona) and AMR. The Pediatric Pandemic Network has added new materials on measles, mpox, mosquito-borne illnesses, respiratory viruses, and CBRN topics, along with virtual tabletop exercise toolkits and optional facilitation support. Irene Navis also highlighted its “Keeping Kids Safe” fact sheet series, which includes resources on extreme heat, chemical burns, tear gas exposure during mass gatherings, and wildfire safety. Michael and Irene agreed to meet to review Nevada’s posted resources, identify gaps, and ensure all relevant WRAP-EM and PPN materials are available to Nevada providers. Jeremy offered his assistance if needed.
- d. EMS Newsletter. - Dr. Sandra Horning reports that its half done and promises it will be done in the next few weeks, Michael reports that he has been in touch with the EMSC program managers that do have a monthly newsletter and are willing to share some of their resources that could us a guideline instead of starting from scratch.
- e. Updates from committee members relating to EMSC activities. – Jamie Carlson reported that the

team conducted a full-scale exercise on April 24, simulating a heat-wave emergency despite the cold weather conditions. The scenario involved multiple heat-related and traumatic injuries occurring during a mock graduation setup, followed by a vehicle crash that occurred 15 minutes after the initial callout, adding additional stress to responding agencies. Participating partners included Elko County and Elko City Fire, Nevada Gold Mines—whose medics and ambulance responded until diverted to real calls—along with local law enforcement, dispatch, and community partners. Patients were transported to NNRH, with the Manor and Convergence Health Center serving as green stabilization centers, while Great Basin College nursing students simulated receiving hospitals such as HGH. Jamie noted the exercise was successful overall, with strong community involvement, and highlighted communication failures as the primary area for improvement, including last year's issue with callout notifications and this year's failure to notify hospitals of incoming patients. Despite these challenges, the event provided valuable experience for students, providers, and public safety partners, and planning is already underway for next year's exercise.

Michael Bologlu and Kevin Haywood provided an update for national discussions within the EMS Data Managers Council regarding improvements to pediatric and neonatal transport documentation. The group is working to refine terminology—particularly around the word “restraint,” which carries different interpretations across healthcare, law enforcement, and federal partners—and to expand data elements that capture how infants and children are transported, whether in a neonatal transport device, pedipod, isolette, or secured with a caregiver using equipment such as an Aegis wrap. Work continues with NHTSA to finalize long-standing crash-test safety standards, supported by \$2 million already secured for standardization and an additional \$2 million needed for vendor testing. Upcoming NEMSIS 3.5.2 data set updates are expected to significantly improve the ability to track pediatric transport methods, addressing current limitations where electronic patient care reports primarily document transport via gurney without specifying how infants or children were secured. With all 50 states and territories involved, finalizing consistent wording and ensuring documentation remains practical for field providers remains a key priority. It is confirmed that validation is necessary.

Zebulon Nomura reported that all staff have now completed the NALS training, which took approximately six weeks to complete. He noted that the new pediatric restraint system was recently used during a call, but the crew mistakenly disposed of it afterward due to contamination with bodily fluids. The team was contacted when another unit requested a replacement, prompting them to retrieve the device from the hospital trash and decontaminate it. This incident highlighted the importance of proper handling and cleaning procedures, especially since the selected model is designed for wipe-down decontamination rather than machine washing, which is more practical for field providers. The situation served as a learning opportunity for the crew, and no additional issues were reported. Bobbie Sullivan suggested everyone go back to their groups to get an accurate PCR.

5. Information Only: Update on our current budget, Michael Bologlu reports that the EMSC grants across the state are under thirty-four percent and for the remaining part of the year is \$68,510 instead of \$190,000 like we were anticipating. We are facing several funding issues which has put us in a difficult position causing work programs to be needed just to fund our in-state travel based on our projections and obligations, so what we need to do as a committee is vote on rescheduling our November 4th meeting to Carson City for no cost. HRSA has mentioned that it is like last year's funding and we do have 6 months to hopefully get funded by the government. Irene Navis offered letters of support. The program currently has 53,000 to spend that isn't already dedicated to travel. HandTevy has agreed to let us pay in advance for FY 2027/2028. Michael proposed our November 4, 2026 meeting to be moved to Carson City to save on travel funds on the program.
6. Informational Only: Update on current National Pediatric Readiness Project progress and review of non-respondent list, Michael Bologlu mentions were at 62% but are still over the national average of

response rates. The goal is 100% and he has sent out the 8th invitation to complete the survey before the deadline of May 31, 2026. Discussion from the committee regarding the link on PEDSready.org occurred, ensuring everyone knows where to go on the website.

7. Information Only: Update on the annual in-person Pediatric Emergency Care Council, Michael Bologlu reports that he and additional staff attended a Pediatric Emergency Care Council in Kansas City, MO. A big conversation was received funding from HERSA, possibly looking at impacting the community with items that can be bought that will not affect the budget. In 2025 the Broslow tapes came out with two errors including dosage errors. Broslow has not released the updated version.
8. For Possible Action: Discussion and suggestions relating to recruitment and voting on a new EMT/Paramedic who is currently practicing, ground level pre-hospital provider for Amy Carpenter was tabled due to an emergency.
9. Information Only: Presentation on the Truckee Meadows Fire Protection District pediatric response and medication dosage cards Zebulon Nomura shared a presentation on the dosage cards that were created for PEDS patients. It's tried into the Broslow tape, to show consistency across the board. This is updated yearly, something new added to the card was the volume of the medication. Michael Bologlu asked to remove the agency specific medication and possibly post this on the EMSC website. There was discussion about what can be used and shared. Michael Bologlu and Zeb Nomura will be meeting to further discuss.
10. For Possible Action: Emergency Department Hospital Recognition Program and application review, for Sunrise Michael Bologlu reports they have a couple options on what best way to review the application for Sunrise Pilot Program and after reaching out to the Attorney Generals office it was determined that there are two options. When applications come in, one member of the committee can formulate a work program. We need a subject matter expert, work on the applications as they come in as a subcommittee then make a recommendation to the EMS Advisory Committee. Second option. Second option is to create a formal subcommittee PEDS Recognition committee. Committee decided, Michael Bologlu obtained. Discussion on how and how it will work and decide if we need to have a special meeting for an agenda item. Possible work group options were discussed. A motion was made to create a work group led by Michael Bologlu, Zebulon Nomura motioned, John Mittelman seconded, Motion passed.
11. Information Only: Upcoming meeting dates for the next budget period.
 - August 5, 2026
 - November 4, 2026
 - February 3, 2027
12. Public Comment: No Public comment
13. Adjournment: Kevin Haywood motioned to adjourn, Zeb Nomura seconded the motion, meeting adjourned.

