MINUTES OF THE MEETING FOR THE
NEVADA STATE BOARD OF ATHLETIC TRAINERS (NSBAT)

DATE: **November 01, 2012**

LOCATIONS:

University of Nevada Reno 1664 N. Virginia Street Mathewson/IGT Knowledge Center Room #110 Reno, Nevada 89557	College of Southern Nevada Cheyenne Campus 3200 E. Cheyenne Avenue Room 2647B N. Las Vegas, Nevada 89030

1. Meeting called to order by Chairman, Jim Porter at 9:01 a.m.

Board Members Present: Jim Porter, Rob Conatser, Eathan O'Bryant and Christine Wittorff.
Staff Present: Stacey Whittaker, Executive Secretary; Keith Marcher, Attorney General Representative via teleconference.
Public Present: Carolyn Cramer, General Counsel for the Nevada State Board of Pharmacy; Shelley Germann, Frank Sakelarios, Andy Mutnan, Joseph McBeth, Dustin Hopfe, Jay Mellette, Kerry Gordon, Steve McCauley, Tedd Girouard, Michelle Samuel, and Sebastian Zarkowski.

2. **Public Comments.** Steve McCauley (former Chairman of the NSBAT and current Legislative Chair for the Nevada Athletic Trainers Association) presents his thoughts regarding Item #3. Overall, Steve feels that it is unfortunate that the information sent out by the Board to the Licensed Athletic Trainers regarding the Nevada Drug Law provided no education or direction regarding their use of medications in an Athletic Training setting. After reviewing the meeting minutes from September 20th, Steve's concern was that assumptions were made regarding the ability of Athletic Trainers to make informed choices and that information was withheld from the original information sent out by the Nevada State Board of Pharmacy. Steve then references NRS 454.213 Authority to possess and administer dangerous drugs in particular item 12 referencing the ultimate user. Steve states that Athletic Trainers are highly educated, qualified health care professionals in the state and are more than qualified to determine how and when to utilize information contained in NRS 454.213. Steve agrees with the Board that a subcommittee needs to be formed and advises that 1. A thorough survey is performed; 2.Consult with Pharmacy Board regarding what an Athletic Trainer can and cannot do, 3. Present the language to the Board for possible adoption via the legislative process. There are no further public comments at this time.

3. **Review and discuss Nevada Drug Law and its impact on Licensed Athletic Trainers, including information from the Nevada State Board of Pharmacy.** Jim explains that this issue came about when the Board received a public complaint regarding a Nevada Athletic Trainer and their distribution of Over the Counter Medications. In addition to conducting an investigation into this complaint, the Board reviewed the current NRS and requested assistance from the Nevada State Board of Pharmacy. Jim clarifies that he is not saying Athletic Trainers are not qualified, rather the NRS does not currently allow for them to do so. The practice act will need to be opened up in the Legislative Session for 2013.
Rob Conatser discusses the three different areas that need to be addressed. The High School Level (in which there should not be any pharmaceuticals whatsoever), the College Level, and the Professional Sports Settings. Rob asks if a Dr. wants to have a locked cabinet of drugs at the College and Professional Sports Settings, that they control, isn't it their right?

Carolyn Cramer says that a Practitioner would have authority to possess and administer dangerous drugs under their control. Physicians need to have a controlled substance registration for that location in order to possess, administer and prescribe. It would be difficult for an Athletic Trainer to know what is in the cabinets and to decipher the different drugs.
Rob feels that the initial letter sent out by the Board may have put too much responsibility on the Athletic Trainers instead of advising them to know what they are doing, understand their rights, and follow the procedures of the Doctor.
Jim reiterates that it is not the role of the Board to dictate what the other practitioners should do, rather what the AT's are allowed to do in their setting. At this time, the NRS does not allow Athletic Trainers to deal with medications.
Kerry Gordon states that they have made changes at Cirque du Soleil since the information came out regarding pharmaceuticals. They have the Over the Counter Medications in a locked cabinet that the performers have to sign out and the Athletic Trainers are no longer making recommendations for the medications. The problem is, a lot of the performers do not speak English as their first language and it is very concerning that the Athletic Trainers cannot provide assistance or guidance. Another concern Kerry has is the ability or inability to carry Epipens and diabetic insulin for emergency use.
Carolyn says that OTC Medications are designed to be self administered. What we are discussing today is whether or not this is within the scope of practice for Athletic Trainers.
Kerry reiterates that she is not asking to administer anything other than what is directed on the packaging. She had a performer who because of the language barrier, took 8 pills under the direction of the Doctor because he told her to take 800 milligrams. Kerry feels that she is no longer in a position to help with this type of situation.
Carolyn says this is whether or not this group believes that this is within your course of scope for their authority.
Jim states that the problem is an omission in the original NRS to advise athletes as to what they are taking. It's not that the profession is incapable, and the meeting was set up today to educate everyone as far as what needs to be done.
Carolyn addresses the issue of Epipens and that they are considered a dangerous drug. The State Board of Pharmacy doesn't care who is on the list to use these, just that they are on the list.
Frank asks that as both a parent and an Athletic Trainer, can he carry and administer the Epipen to his child as a parent but not as the Athletic Trainer. Carolyn says that as a parent, you have the right to administer, not as an Athletic Trainer.
Jim asks if he has a written agreement from the parent to administer an Epipen is that ok. Carolyn advises Jim to get approval from the School District. Rob says that in the meantime, before we get to Legislation, if he had to choose between life and death vs. Epipen, he would choose the Epipen. Carolyn says you have to look at the worst case scenario and that it is not without risk. It would be wise to get clarification from the Legislature.

Steve asks to take a step back and look at the NRS, what Athletic Trainers are allowed to do. NRS 640B.090, prevention and recognition were written in this manner for a reason specifically for these purposes. You have to look at the breadth and depth of our practice. Controlled drugs are very clear in the NRS and do not need to be discussed. The end user is the issue; we have to look within ourselves to determine if we are doing what we were educated to do. Steve feels that Athletic Trainers are practicing what they were educated to do under the direction of a Physician in a multitude of settings. Steve agrees with Carolyn in that the definition of direction should be better defined. Steve reiterates that Over the Counter Medications are not regulated by the Board of Pharmacy and as long as it is within the education of an Athletic Trainer and under a Physician, he feels that they are qualified. This conversation has nothing to do with Controlled Substances or Dangerous Drugs.

Jim asks Carolyn for clarification with NRS 639 regarding dispensing and administering. Does administer mean to "provide to". The Board needs to be able to tell the LAT's what they can do now and

what needs to be changed in the NRS language moving forward. Jim says it appears that at this point Over the Counters' fall under NRS 639 even thought the Board does not actively enforce it.
Carolyn states that the Pharmacy Board does not get involved in OTC's because they are approved by the FDA as safe for self administration. Administer is giving someone a pill, then they take it. Dispensing is giving someone a pill and they leave with that pill. The Legislature, depending on what the act is can use these terms in different ways.
Dustin Hopfe asks if an Athlete takes the OTC out of the cabinet themselves and takes it, is this self administration.
Carolyn says that the Athlete has chosen to self administer if they get the medication themselves. It is different if you are using your professional judgment as an AT to advise him to take a certain amount of that medication. For example, taking 4 Naproxen would be the equivalent of a dangerous drug. Carolyn asks if an Athletic Trainer would know that through their education and training. The consensus is yes.

Rob reiterates that the letter that came out from the Pharmacy Board was for educational purposes only. The letter that went out with it from the Board brought up a lot of questions and needs to be clarified. Licensed Athletic Trainers need to think about their practice, know what their policies and procedures are, and talk to their Physicians.

Jay Mellette would like clarification on storage and possession. If an Athletic Trainer purchases and stocks OTC medications, but the athletes and performers self administer, have we stepped into administering? Carolyn says that storage is a subset of possession. Those would be your drugs since you purchased them. Jay asks how they can best protect the Athletic Trainers, the Company and the Athletes. Carolyn recommends that the Medical Director be the one to purchase the OTC's. Jay says that this is difficult with over 8 facilities and that is not how the Director's structure is functioned. Carolyn says that if the performers are self administering, then that is ok. The function is to keep your athletes healthy and performing. Carolyn recommends that Jay ask the Company Lawyer and they should be able to structure the program.
Kerry Gordon asks if it is ok for them to purchase OTC's since it's not regulated by the Pharmacy Board. Jim says it's not the intention of the Board to tell Companies how to practice, there needs to be language written to present to the Legislature.
Steve reiterates, OTC's are not regulated and in any situation, if the Athletic Trainer is educated and qualified and under the direction of a Physician then it is not an issue. There is no reason to continue the discussion as to where the medications are located.
As a former athlete himself, Eathan feels that he is much more comfortable having an Athletic Trainer advise him on OTC's versus self administering.

Keith agrees with a lot of what Steve is saying in regards to Over the Counter medications. This is not a prevalent issue; the Board has had one complaint in several years. The Board may want to consider flushing out the regulation or policy as to the Physician Director. There is nothing that currently broaches this subject. Keith doesn't feel based on the conversation that a statutory change is necessary but at a minimum, think about working together to come up with some sort of regulatory language that you could pass as a temporary regulation and then make permanent. This topic is confusing and a little broken but the Athletic Trainers need to look at their everyday situations.

Tedd Girouard asks for clarification on topicals that are being applied in an Athletic Setting such as rubbing alcohol, hydrogen peroxide, and Betadine. These are all OTC's that would have the same rules apply. Tedd feels that Athletic Trainers are educated and trained to use with protocol within the package directions. Jim says that topicals are addressed in NRS 639 and are not an issue. Jim asks if there are any further questions or comments. Carolyn Cramer asks to be excused at this time.

4. **Review and discuss formulating a committee to further evaluate the issue of Athletic Trainers and pharmaceuticals in the state of Nevada.** The Board discusses what the role of a subcommittee would be and whether or not they are capable of forming the language to suggest regulatory changes. Keith recommends to the Board that they come up with draft language to present at the next board meeting regarding OTC's and the direction of a Physician, and then hold a subsequent Workshop and Public Hearing in order for the language to be considered as a temporary regulation by the Legislature. The Board would then go through the process again next year in order to make it a permanent regulation. The Board will work on drafting language to present at the next board meeting.

5. **Review and approve minutes of meeting 9/20/12.** Rob Conatser motions to approve the 9/20/12 meeting minutes as written. Eathan O'Bryant seconds the motion. Christine Wittorff asks later in the meeting to abstain from the approval of the meeting minutes as she has not had time to read them thoroughly. Approved 3-0.

6. **Update on disciplinary action reports and investigations of unlicensed activity.** Stacey reports no disciplinary action or reports of unlicensed activity during this quarter. 21 licenses were issued or restored and there are currently 169 Licensed Athletic Trainers in Nevada. There are no further questions or comments.

7. **Review and discuss the Sunset Subcommittee of the Legislative Commission and their review of the Nevada State Board of Athletic Trainers.** Jim and Stacey have no new information to report on this item.

8. **Review and discuss current status of A.B.455 and the provisions governing athletics in public schools.** Jim reports that at the October meeting for the NIAA, they approved NRS 386.435. It is then discussed who will be responsible for disseminating this information to the public and who will be responsible for ensuring that the protocol is followed. Jim states that it is not the role of the Board to put this information out (the NIAA will) but from an ethical standpoint of the Licensed Athletic Trainer, they need to know that this is the law to follow. Frank Sakelarios states that the Association will be sending this information out to the LAT's. There are no further questions or comments.

9. **Review and discuss whether the NSBAT needs to monitor Physician Directors for Athletic Trainers annually or on a case by case basis.** Jim states that at renewal time, the Board requested the name of the Athletic Trainer's Physician Director. Steve asks where the statutory authority is that requires AT's to submit the name of their Medical Directors. Rob explains that the Board decided as a group to send it out and see what type of response we get. Most people responded with a Physician Director and met with very little problems from the AT's. Steve's concern is that the Board does not have statutory authority to request this information. Jim clarifies that the Board did not ask for their Medical Director, they asked for the name of their Physician Director. Keith agrees that it should be done on a case by case basis and to remove the question from the Application and the Renewal Application. Jim motions to remove the Physician Director question from both Applications. Rob seconds the motion. Approved 4-0.

10. **Review and discuss converting the NSBAT Executive Secretary position from an Independent Contractor to a part time employee.** At the last Board meeting, it was discussed that this position cannot be covered under the State's General Liability Insurance program because Stacey is currently an Independent Contractor. The cost through the state is roughly $128 per year versus $1,200-1,500 per year for personal liability coverage. After further discussion, Chris Wittorff motions to employ Stacey Whittaker as a part time employee of the Board at her current rate and to be included in the premium for the State's self-funded plan. Rob Conatser seconds the motion. Approved 4-0. Stacey asks

that this become effective January 1, 2013 in order to allow time for the conversion. There are no further questions or comments.

11. **Review and discuss financial status of the Board.** There are no questions or comments regarding the financial statements that were sent out for review.

12. **Future agenda items.**

Rob would like to address the issue of sending out a clarification letter to all LAT's regarding the pharmaceutical issue. The way the letter was written has changed the way a lot of LAT's are practicing, the Board overstepped their bounds. Keith recommends drafting another letter that says the Board has met again regarding this issue and would like to rectify any miscommunication or misunderstanding. The Board is not instructing anybody or any organization to change their practice or protocol (conduct business as usual) and is working towards developing a policy or regulation that will help further define things in the future. Rob will work on drafting the letter and send it to Stacey for dissemination.

A. Review and approve minutes of meeting 11/01/2012.
B. Update on disciplinary action reports and investigations of unlicensed activity.
C. Review and discuss regulation language regarding Licensed Athletic Trainers and pharmaceuticals. (Jim will begin the initial draft of language and send to the Board Members.)
D. Review and discuss the Sunset Subcommittee of the Legislative Commission and their review of the Nevada State Board of Athletic Trainers.
E. Review and discuss financial status of the Board.

13. **Discussion, possible decision on date of next board meeting.** The next meeting is scheduled for Thursday, January 17th, 2013 at 9:00 a.m.

14. **Public Comments.** Dustin Hopfe expresses his concern regarding the presence of Athletic Trainers in Northern Nevada and the struggle to keep them here. Rob Conatser informs him that this isn't something the Board oversees and that he would be happy to discuss it with him after the meeting. There was also mention of an article in the Sparks Tribune regarding Help Wanted for Athletic Trainers and that there was misinformation in it regarding UNLV. There are no further comments.

15. **Meeting adjournment.** Rob Conatser motions to adjourn the meeting of the Nevada State Board of Athletic Trainers at 11:00 a.m. Chris Wittorff seconds the motion. Approved 4-0.