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

## DATE & TIME: February 29, 2024 @ 2:30 p.m.

## Virtual Meeting Access via Zoom:

https://us06web.zoom.us/j/8975068640?pwd=ckhJYStrbi9wWk5BbXdKQX1TMnVCZz09

Meeting ID: **897 506 8640** Passcode: **640B** 

1. Meeting called to order by Board Chair, Kendell Galor at 2:37PM.

**Board Members Present:** Kendell Galor, Board Chair; Jeremy Fisher, Treasurer; Ariel Ives, Board Member; and Leo Lozano, Public Board Member.

Staff Present: Harry Ward, Deputy Attorney General; and Michelle Cothrun, Board Executive Secretary.

Public Present: Tedd Girouard.

2. **Public comment.** Tedd Girouard, a former Board Chair, raised concerns about certain athletic trainers in Nevada who are reportedly administering prescription medications via injections, a practice not allowed in Nevada. This issue was brought to his attention by a former student and further investigation revealed that it was not an isolated incident, but rather a widespread practice, sometimes occurring in physician offices with or without a physician present.

Tedd recounted the history of regulations on this matter, noting that about ten years ago, he was on a Subcommittee that worked with the State Board of Pharmacy to clarify that athletic trainers are not authorized to administer prescription medications per the State's practice act. This restriction is consistently taught in accredited programs, including at UNLV, where Tedd teaches sports pharmacology. He pointed out that the only exception within Nevada law is the administration of EpiPens in schools by designated athletic trainers.

Given that there have not been any formal complaints by patients or practitioners, Tedd suggested the issue be addressed through educational efforts rather than disciplinary action. He proposed that the Board consider educating athletic trainers and possibly the sports medicine physicians who might be instructing athletic trainers to administer these medications under standing orders, a practice that exceeds their discretionary authority. Tedd offered his expertise to assist with this educational initiative and urged the Board to include this issue on the agenda for their next meeting.

Kendell Galor thanks Tedd for his comments. Michelle Cothrun will add an item to the agenda for the next meeting regarding this issue. She also confirms that she had not received any public comments for this meeting via email or other means. No further public comments.

3. Review and discuss the documentation submitted by licensed athletic trainers in their dry needling applications and approve those who fulfill the statutory requirements for dry needling. (For Possible Action) Kendell Galor states that she has reviewed all six applications. Michelle Cothrun informs the Board that she has received comments from all three Subcommittee members for the six (6) applicants being reviewed. She explains that Steve McCauley raised a concern about the relevance of a course on the transcript of applicant #158 - Radley. He referred to the course as active and passive range of motion and requested another course more closely aligned with the requirements for dry needling. In response, Radley argued for reconsideration, stating that the course's main objective was to review and apply therapeutic modalities and exercise for upper extremity injuries, and that it included practical application of dry needling as a modality in the rehabilitation process. This feedback was forwarded to Steve, who has yet to respond. All three Subcommittee members recommended approval for all six applicants, #153 - #158, including Radley's, with this course being the only reservation.

Kendell asks if there are any further comments about applications #153 - #158. Jeremy Fisher raises concerns about the relevance of outdated coursework for some of these applicants, noting that many are using credits that are over 10 years old and were obtained prior to their certification. Citing NRS 640B.260.5, he stresses that the 150 required hours should be post-certification. He highlights inconsistencies in the Board's approval process, pointing out some previous applicants with similar issues that have been approved. Michelle Cothrun informs the Board that the Subcommittee discussed at length with much debate whether undergraduate courses met the statutory requirements and concluded that they do. Even so, they noted that applicants were relying solely on outdated undergraduate coursework without any recent continuing education. Therefore, the Subcommittee may request more current coursework instead. The Subcommittee also considered a time limit for coursework, and they concluded that neither the statute nor the regulations specify a time limit on coursework. Any time limit, even to say that the coursework needs to be within a 10-year time frame, could be considered arbitrary. Still, Michelle encourages applicants to include recent continuing education, since that is the Subcommittee's preference.

Jeremy advocates for a specific six-year lookback period for coursework, aligning with practices at many educational institutions. He mentions subsection five of the dry needling regulation to bolster his position. He argues that such a timeframe would ensure applicants' knowledge and skills are current, particularly in critical subjects like anatomy. Jeremy encourages future discussions to establish clear, standardized criteria for coursework validity through a six-year lookback policy. He adds that Leo Lozano, being in education, would understand. Leo agrees and compares it to the necessity of renewing CPR certifications every two years. He notes that inaccuracies in the practice of dry needling could lead to serious issues. Leo suggests a two-year timeframe to implement the new policy, allowing licensees sufficient time to acquire necessary continuing education in relevant fields like anatomy and physiology for postgraduates. She sees no issue with setting a policy that, starting from a specified future date, will enforce a six-year look-back period for coursework. She asks Michelle to reach out to the Subcommittee to get their feedback about implementing a six-year lookback.

Kendell asks for any other comments on applicants #153 - #158, and there are none. Kendell Galor motions to vote on approving applicants #153 – Sandoval De Leon through #138 – Radley for dry needling. Ariel Ives seconds the motion, and it passes.

4. **Discussion and possible decision on date of next meeting. (For Possible Action)** Kendell Galor confirms that the next meeting is set for Thursday, April 4<sup>th</sup> at 3:00PM. Michell Cothrun adds that there will be a workshop as well as Board business. She will be posting the Notice of Intent to Act Upon a Regulation, which requires 30 days' notice. Harry Ward explains to the Board that the workshop will need to open and close with public comment periods. He will be there to support the Board with the process. There is no further discussion.

5. **Public comment.** Kendell Galor asks Michelle Cothrun if there is any public comment. Michelle confirms that she has not received any emails during the meeting and no one else has joined the meeting. There is no public comment.

Leo Lozano brings to the Board's attention that he has been approached about the timing of the dry needling approval process. He suggests improving the process by setting specific months for application reviews to provide applicants with clear deadlines and reduce the waiting time between completing their certification and receiving approval. Applicants can prepare and submit their applications accordingly, ensuring a more efficient and predictable process. Michelle will add this discussion to the next agenda.

Ariel Ives states her concerns about possible overregulation in the certification process for dry needling by comparing it to other certifications like CSCS or blood flow restriction training, which do not require a 10-year timeframe for anatomy coursework. She highlights that while dry needling is more invasive, the regulation for its certification could be perceived as excessive. Dry needling requires certification, not another degree. The Board needs to prepare for potential feedback regarding the appropriateness of the proposed regulatory approach.

Jeremy Fisher agrees and adds that the idea was introduced with the Legislative Subcommittee that athletic training is the base license with the ability to add endorsements. He notes that as the field expands, additional endorsements can be added. Dry needling is an endorsement that is being regulated, unlike other practices such as blood flow restriction which are not yet regulated. He comments that athletic trainers in a neighboring state are allowed to perform tasks like suturing under specific conditions and theorizes that similar expansions in scope could include injections. Athletic trainers in office settings, in theory, should be able to give injections. Jeremy highlights the legislative challenges and the importance of navigating state laws to both expand practice capabilities and ensure public safety, while also gaining support from physicians and relevant groups to advance the profession.

Michelle Cothrun requests that board members with strong opinions on the matter send their thoughts via email. She will compile the feedback to streamline the next meeting and ensure all viewpoints are considered without taking up more meeting time. There is no further discussion.

## 6. Adjournment. (For Possible Action) Kendell Galor adjourns the meeting at 3:13PM.