

**MEDICAL CONTROL BOARD
EASTERN AND WESTERN DIVISIONS
EMERGENCY PHYSICIANS FOUNDATION**

The regularly scheduled meeting of the Medical Control Board was held, pursuant to Oklahoma Statute, Title 25 & 307.1 on Wednesday, January 7th, 2026, 09:00 am at EMSA Administrative Offices located at 6205 S. Sooner Road, Oklahoma City, OK 73135 and 1417 N. Lansing Avenue, Tulsa, OK 74106, linked via videoconference.

NOTICE AND AGENDA for the regularly scheduled meeting of the Medical Control Board of the Emergency Physicians Foundation, was posted in the Office of the Deputy City Clerk of Tulsa, Friday, January 2nd, 2026, and in the Office of the City Clerk of the City of Oklahoma City on Friday, January 2nd, 2026, more than 24 hours prior to the time set for the specially scheduled meeting of the Medical Control Board.

- 1. Roll Call** indicated a quorum was present and the meeting was called to order at 0902 by Dr. Russell Anderson. Dr. Amanda Celii has moved her practice of trauma surgery outside the service areas of the EMS System for Metropolitan Oklahoma City and Tulsa. Dr. Anna Wanahita, stroke neurologist with Regional Brain Institute and on staff at multiple area hospitals is now fulfilling the non-emergency physician position on MCB.

MEMBERS PRESENT:

Dr. Russell Anderson
Dr. Jeffrey Dixon
Dr. Peyton Holder
Dr. David Smith
Dr. Keri Smith
Dr. Anna Wanahita

MEMBERS ABSENT:

Dr. Justin Davis
Dr. David Gearhart
Dr. John Nalagan
Dr. Ryan Parker
Dr. Matthew Wood

2. Review and Approval of November 2025 MCB Meeting Minutes

A motion was made and seconded to approve the minutes of the November 2025 MCB Meeting.

AYE:

Dr. Russell Anderson
Dr. Jeffrey Dixon
Dr. Peyton Holder
Dr. David Smith
Dr. Keri Smith
Dr. Anna Wanahita

ABSENT:

Dr. Justin Davis
Dr. David Gearhart
Dr. John Nalagan
Dr. Ryan Parker
Dr. Matthew Wood

NAY:

None

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The motion is passed.

3. Oklahoma City Fire Department Report – Chief Richard Kelley & Chief Carl Cobb

OKCFD ambulances responded to approximately 24,000 calls with approximately 13,000 transports in calendar year 2025. In the OKCFD Mobile Integrated Health (MIH) programs, there is an increase in the number of patients receiving suboxone bridge therapy until referral to longer-term substance use treatment facilities. There has been some recent shortage of whole blood at Our Blood Institute, with OKCFD keeping units for 2 weeks prior to return to OBI. Donors of LTO+WB will now be informed their donation will be allocated to ambulances.

4. Tulsa Fire Department Report – Chief Michael Baker

TFD EMS Director Justin Lemery confirmed that Station 5 is now staffed with paramedics as announced in the November 2025 MCB meeting. TFD budgeting includes staffing a new paramedic class, currently with paramedic numbers overall +9 in the field. This paramedic class would commence in the fall of 2026. In the TFD MIH programs, there were over 6,500 contacts within calendar year 2025. 2026 is the 10th anniversary of TFD CARES. There is grant funding from the Oklahoma Department of Mental Health and Substance Abuse Services for creating another MIH team. This team will be similar to ART1/ART2 and will be assigned an area of Tulsa based upon “Neighborhood Condition Index” scores of 0.2-0.6 (on a 5-point scale) factoring substance use challenges and other social determinants of health. The team will be composed of a paramedic, medical social worker, and a “lived experience” peer counselor. TFD was awarded a national award for its work in MIH. Another new program is with Dispose RX to help inactivate prescription medications at home. Citizens add water and the included chemical to pill bottles of meds to inactivate the medications.

5. EMSA President Report – Johna Easley

MS. Easley reported that EMSA had approximately 250,000 responses and approximately 190,000 transports in calendar year 2025. The EMSA Clinical Services team is focusing on in-house education. Accreditation applications for in-house education and simulation training are in progress as planned and previously reported.

6. Chief Medical Officer/Associate Chief Medical Officer Reports

Dr. Goodloe updated the MCB on activities completed by the OMD team in the interim since the November 2025 MCB meeting.

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Dr. Goodloe briefly highlighted the numerous meetings that the OMD team continues to have with agencies within the EMS system, including orientation academies as well as the long-established monthly CQI meetings led by OMD.

Dr. Goodloe updated the MCB on the first meeting of its Trauma Advisory Committee (TAC), composed of Drs. Alisa Cross (OUMC), Joseph Love (Integrus Baptist NW Expressway), Eric Shinnerer (SJMC), and John Marc Shellenberger (Saint Francis Hospital). The TAC met in mid-November and was unanimous in support of IV cefazolin in the setting of acute, open long-bone fractures as long it did not delay transport. This is consistent with a policy statement from the American College of Surgeons Committee on Trauma, the Orthopedic Trauma Association, the American College of Emergency Physicians, the National Association of EMS Physicians, and the National Association of Emergency Medical Technicians published in 2024. There was additional consensus for calcium chloride IV administration if transfusing low-titer O+ whole blood. The members of the TAC will be evaluating hemostatic agents in comparison to the currently utilized QuikClot gauze. The next meeting is scheduled for mid-February.

Dr. Goodloe updated the MCB on progress in Impella cardiac support interfacility transport education resources, mentioning recent filming and production of training videos, one on Impella orientation and interfacility troubleshooting as well as one on patient movement/loading with the Impella device and controller. The first of the two videos was partially played for the MCB.

Dr. Goodloe highlighted a \$60K grant from Medtronic for research into the predictive value of waveform capnography in cardiac arrest outcomes. The research will be retrospective, is already in review by the University of Oklahoma Institutional Review Board and will commence later in January. Anna Bailey was instrumental in this grant being awarded to MCB/OMD.

Matt Cox and Anna Bailey discussed the ChartSmart program led by OMD over the past 7 months to evaluate advancing documentation capabilities within the EMS system and work towards technologies being more efficient in interoperability. Discussion also included referencing a highly valuable on-site consultation with ESO Solutions in Austin in December.

Part of the OMD team will travel to the 2026 NAEMSP Annual Meeting and Scientific Assembly later in January in Tampa, Florida to learn the latest in EMS system capabilities.

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Team OMD has put in two proposals for EMS World 2026 in September, one being on the Impella implementation program and the other highlighting the ChartSmart program led by OMD. Decisions for program inclusion are slated for end of January.

Dr. Goodloe updated the MCB on the latest 2-month (November and December 2025) analysis of 911 BLS response within EMSA. 24% of eligible for BLS ambulance calls were answered by BLS ambulances, meaning the remaining 76% were answered by a paramedic-staffed ambulance. The typical three parameters are within MCB/OMD goals: use of RLS return 0.77% (less than 1%); ALS assist 3.3 % (less than 10%); and unstable VS as defined by MCB protocols 2.94% (less than 3%).

Dr. Cody discussed some emerging MIH program designs in which a system credentialed paramedic may be positioned within high frequency call locations, such as a homeless shelter or mental health treatment facility to evaluate for clinically unnecessary EMS calls. More to follow.

MCB physicians received the divert reports, compliance reports presented earlier by Ms. Easley and the hospital destination reports. Dr. Goodloe commented that part of the complexity of the EMS system involves 31 transport destinations in the metropolitan OKC area and 10 transport destinations in the metropolitan Tulsa area.

7. Review and Approval of MCB Treatment Protocols

- **4E: Double Sequential External Defibrillation – Adult**
- **10G: Extremity/Amputation Injury – Adult & Pediatric**
- **10K: Crush Injury Syndrome – Adult & Pediatric**
- **16G: Calcium Chloride**
- **16SS: Cefazolin – Adult & Pediatric**
- **17O: Low Titer O+ Whole Blood (LTOWB)**

A motion was made and seconded that the MCB approve the recommended changes to the protocols above. These changes include: (4E) vector change of defibrillation after unsuccessful defibrillation(s) in the setting of availability of a single defibrillator; (10G, 10K, and 16SS) additional capability of IV cefazolin in the transport phase of acute, open long-bone fractures; and (16G, 17O) additional indication for calcium chloride to accompany the administration of low-titer O+ whole blood.

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Dr. Keri Smith
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ABSENT:

Dr. Justin Davis
Dr. David Gearhart
Dr. John Nalagan
Dr. Ryan Parker
Dr. Matthew Wood

NAY:

None

The motion is passed.

8. Review and Approval of October 2025 and November 2025 MCB Financial Statements

Dr. Goodloe presented the financial statement to the MCB, discussing revenue and expenses for the fourth and fifth months of FY 2025-2026.

A motion was made and seconded that the MCB approve the October 2025 and November 2025 MCB Financial Statements.

AYE:

Dr. Russell Anderson
Dr. Jeffrey Dixon
Dr. Peyton Holder
Dr. David Smith
Dr. Keri Smith
Dr. Anna Wanahita

ABSENT:

Dr. Justin Davis
Dr. David Gearhart
Dr. John Nalagan
Dr. Ryan Parker
Dr. Matthew Wood

NAY:

None

The motion is passed.

9. Information Items

10. New Business

Chief Cobb stated that effective in early February 2026, CMS will no longer require nursing homes to have 24/7 RNs on site. The impact on EMS calls and transports is to be determined.

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11. Next Meeting – March 4th, 2026, at 0900 hrs.

12. Adjournment

Upon Motion by Dr. Russell Anderson, the Medical Control Board voted to adjourn the meeting at 10:20 am.

Approved By:
Keri Smith, DO
MCB Secretary

Date Approved: