

Joe Lombardo
Governor

Richard Whitley, MS
Director



**DEPARTMENT OF
HEALTH AND HUMAN SERVICES**
DIVISION OF PUBLIC AND BEHAVIORAL HEALTH
Helping people. It's who we are and what we do.



Lisa Sherych
Administrator

Ihsan Azzam,
Ph.D., M.D.
Chief Medical Officer

NOTICE OF PUBLIC HEARING

VICTORIA PEREA, PO BOX 1408, MCGILL, NV 89318 IS REQUESTING A VARIANCE, #746, FROM THE NEVADA STATE BOARD OF HEALTH REGULATIONS.

NOTICE IS HEREBY GIVEN THAT Victoria Perea, PO Box 1408, McGill, NV 89318 has requested a variance from Nevada Administrative Code (NAC) 450B.320 "Licensing of attendants: Qualifications".

A public hearing will be conducted on March 3, 2023, at 9:00 am by the Nevada State Board of Health to consider this request. This meeting will be held online and at physical locations, listed below.

Physical Locations:

Southern Nevada Health District (SNHD)
Red Rock Trail Rooms A and B
280 S. Decatur Boulevard; Las Vegas, Nevada 89107

Nevada Division of Public and Behavioral Health (DPBH)
Hearing Room No. 303, 3rd Floor
4150 Technology Way; Carson City, Nevada 89706

Meeting Link:

https://teams.microsoft.com/l/meetup-join/19%3ameeting_MDIOM2VINDItNzU5NS00YjFhLTNmMDUtMWEzOTA1NWUxODRj%40thread.v2/0?context=%7b%22Tid%22%3a%22e4a340e6-b89e-4e68-8eaa-1544d2703980%22%2c%22Oid%22%3a%22e2f9f008-841c-437d-b037-927c30ea003e%22%7d

Please Note: If you experience technical difficulties connecting online, please call into the meeting to participate by phone.

Join by Phone:

1-775-321-6111
Phone Conference ID Number: 443 843 916#

Victoria Perea, PO Box 1408, McGill, NV 89318, is requesting a variance from NAC 450B.320.

NAC 450B.320 Licensing of attendants: Qualifications. ([NRS 450B.120](#), [450B.160](#))

1. The Division may not issue a license to an applicant unless all the information required by [NAC 450B.330](#) is contained in the application and the Division is satisfied that the applicant meets the following criteria:

- (a) Is 18 years of age or older as of the date of the application.
- (b) If applying to become an attendant:
 - (1) Holds a Class A, Class B or Class C driver's license or its equivalent issued in this state; or
 - (2) Is employed in Nevada, makes his or her residence in another state and is required by reason of residence to maintain a driver's license issued by that state, and that license is equivalent to a Class A, Class B or Class C driver's license in this state.
- (c) Is able to read, speak and understand the English language.
- (d) Has been found by a licensed physician, physician assistant or advanced practice registered nurse within the 6 months immediately preceding the date on which the application is submitted to be of sound physical and mental health and free of physical defects or diseases which may impair the applicant's ability to drive or attend an ambulance, air ambulance or other motor vehicle not used for the transportation of patients and that determination is verified by the physician, physician assistant or advanced practice registered nurse on a form approved by the Division for that purpose.
- (e) Has not been convicted of:
 - (1) Murder, voluntary manslaughter or mayhem;
 - (2) Assault or battery with intent to kill or to commit sexual assault or mayhem;
 - (3) Sexual assault, statutory sexual seduction, incest, lewdness or indecent exposure, or any other sexually related crime;
 - (4) Abuse or neglect of a child or contributory delinquency;
 - (5) A violation of any federal or state law regulating the possession, distribution or use of any controlled substance or any dangerous drug as defined in [chapter 454](#) of NRS, within the 7 years immediately preceding the date of application;
 - (6) Abuse, neglect, exploitation, isolation or abandonment of older persons or vulnerable persons, including, without limitation, a violation of any provision of [NRS 200.5091](#) to [200.50995](#), inclusive, or a law of any other jurisdiction that prohibits the same or similar conduct;
 - (7) Any offense involving fraud, theft, embezzlement, burglary, robbery, fraudulent conversion or misappropriation of property, within the 7 years immediately preceding the date of application;
 - (8) Any other felony involving the use or threatened use of force or violence against the victim or the use of a firearm or other deadly weapon, within the 7 years immediately preceding the date of application; or
 - (9) Any felony or misdemeanor for committing an act which, in the judgment of the Division, indicates that the applicant may not be able to function properly as a licensee or to care for patients for whom he or she would become responsible.
- (f) Possesses a certificate evidencing successful completion of a program of training with testing for competency in the procedures for emergency care which is equivalent to the national standard or an equivalent standard approved by the Administrator of the Division for a driver, emergency medical technician, advanced emergency medical technician or paramedic.
- (g) Possesses a valid certificate to provide cardiopulmonary resuscitation issued by the American Heart Association or an equivalent certificate approved by the Division.
- (h) Submits evidence satisfactory to the Division of verification of the applicant's skills.

2. In addition, an applicant for a license as an air attendant must:

- (a) Meet all the prerequisites for an attendant set forth in [NAC 450B.310](#) to [450B.350](#), inclusive.
- (b) Possess the following:
 - (1) A certificate as an advanced emergency medical technician or as a paramedic which was issued pursuant to [chapter 450B](#) of NRS; or
 - (2) A license as a registered nurse issued pursuant to [chapter 632](#) of NRS and a certificate of completion of training as an attendant pursuant to subsections 7 and 8 of [NRS 450B.160](#).
- (c) Provide to the Division documentation verifying successful completion of a course of training approved by the medical director of the service employing the applicant. The course must include:
 - (1) Special considerations in attending a patient in an air ambulance;

- (2) Aircraft safety and orientation;
- (3) Altitude physiology and principles of atmospheric physics;
- (4) Familiarization with systems for air-to-ground communications;
- (5) Familiarization with the system of emergency medical services in the service area;
- (6) Survival procedures in an emergency landing or other unforeseen incident involving an air ambulance;
- (7) Response procedures to accidents or crashes involving hazardous materials;
- (8) Use of modalities for in-flight treatment;
- (9) Infection control;
- (10) Oxygen therapy in relation to altitude;
- (11) Patient assessment in the airborne environment; and
- (12) Vital sign determination in the airborne environment.

3. In addition to the qualifications listed in subsections 1 and 2, a paramedic or an emergency medical services registered nurse providing advanced life support care in an air ambulance must provide evidence of completion of a course in:

(a) Advanced Cardiovascular Life Support issued by the American Heart Association or an equivalent course approved by the Division;

(b) Pediatric Advanced Life Support issued by the American Heart Association or an equivalent course approved by the Division; and

(c) International Trauma Life Support or an equivalent course approved by the Division.

[Bd. of Health, Ambulance Reg. § 13.005 subsecs. (a)-(g) & (i), eff. 12-3-73; A and renumbered as §§ 15.5-15.5.7.7 & 15.5.9-15.5.9.4, eff. 2-28-80]—(NAC A 10-14-82; 8-22-86; 8-1-91; 5-18-92; R045-97, 10-30-97; R182-01, 3-5-2002; R024-14, 10-24-2014; R068-16, 1-27-2017)

The authority of the State Board of Health to consider and grant a variance from the requirements of a regulation is set forth at NRS 439.200 and NAC 439.200 – 439.280.

Persons wishing to comment upon the proposed variance may appear at the scheduled public hearing or may submit written testimony at least five days before the scheduled hearing to:

Secretary, State Board of Health
Division of Public and Behavioral Health
4150 Technology Way, Suite 300
Carson City, NV 89706

Anyone wishing to testify for more than five minutes on the proposed variance must petition the Board of Health at the above address. Petitions shall contain the following: 1) a concise statement of the subject(s) on which the petitioner will present testimony; 2) the estimated time for the petitioner's presentation.

This notice has also been posted at the following locations:

DIVISION OF PUBLIC AND BEHAVIORAL HEALTH (DPBH), 4150 TECHNOLOGY WAY, CARSON CITY, NV
DIVISION OF PUBLIC AND BEHAVIORAL HEALTH WEBSITE:

<http://dpbh.nv.gov/Boards/BOH/Meetings/Meetings/>

NEVADA STATE BOARD OF HEALTH
DIVISION OF PUBLIC AND BEHAVIORAL HEALTH
4150 Technology Way, Suite 300
CARSON CITY, NV 89706

APPLICATION FOR VARIANCE

Please check the appropriate box that pertains to the NAC for which you are requesting a variance.

Division Administration
(NAC 439, 441A, 452, 453A, & 629)

Health Care Quality & Compliance
(NAC 449, 457, 459 & 652)

Child, Family & Community Wellness
(NAC 392, 394, 432A, 439, 441A, & 442)

Health Statistics, Planning,
Epidemiology and Response
(NAC 440,450B, 452, 453, 453A, & 695C)

Public Health & Clinical Services
(NAC 211, 444, 446, 447, 583, & 585)

Date: 01/10/2023

Name of Applicant: Victoria Perea Phone: (385) 258-9177

Mailing Address: P.O. Box 1408

City: McGill State: NV Zip: 89318

We do hereby apply for a variance to _____ of the Nevada
chapter/section NAC 450B.320
Administrative Code (NAC). (For example: NAC 449.204)

Title of section in question: Licensing of attendants: Qualifications

Statement of existing or proposed conditions in violation of the NAC:
Inability to obtain driver's license to apply for
EMS attendant license.

NEVADA STATE BOARD OF HEALTH
DIVISION OF PUBLIC AND BEHAVIORAL HEALTH
4150 Technology Way, Suite 300
CARSON CITY, NV 89706

APPLICATION FOR VARIANCE

Please state in detail the circumstances or conditions which demonstrate that:

1. An exceptional and undue hardship results from a strict application of the Regulation:

Inability to obtain my attendants license therefore not allowing me to work.

2. The variance, if granted, would not:

- A. Cause substantial detriment to the public welfare.

I always make sure that I am signing up with an EMS partner that I have equal certification or higher certification then.

- B. Impair substantially the purpose of the regulation from which the application seeks a variance.

Not having a drivers license in the past has not impaired my abilities to provide patient care.
(Please see attached with further information)

The bureau may require the following supporting documents to be submitted with and as a part of this application:

1. Legal description of property concerned

2. General area identification map

NEVADA STATE BOARD OF HEALTH
DIVISION OF PUBLIC AND BEHAVIORAL HEALTH
4150 Technology Way, Suite 300
CARSON CITY, NV 89706

APPLICATION FOR VARIANCE

Date of initial operation (if existing): _____

ATTENTION: Please read this section closely. Your request for variance will be examined against these criteria:

Any person who, because of unique circumstances, is unduly burdened by a regulation of the State Board of Health and thereby suffers a hardship and the abridgement of a substantial property right may apply for a variance from a regulation. (NAC 439.200(1))

1. The State Board of Health will grant a variance from a regulation only if it finds from the evidence presented at the hearing that:
 - (a) There are circumstances or conditions which:
 - (1) Are unique to the applicant;
 - (2) Do not generally affect other persons subject to the regulation;
 - (3) Make compliance with the regulation unduly burdensome; and
 - (4) Cause a hardship to and abridge a substantial property right of the applicant; and
 - (b) Granting the variance:
 - (1) Is necessary to render substantial justice to the applicant and enable him to preserve and enjoy his property; and
 - (2) Will not be detrimental or pose a danger to public health and safety.

2. Whenever an applicant for a variance alleges that he suffers or will suffer economic hardship by complying with the regulation, he must submit evidence demonstrating the costs of his compliance with the regulation. The Board will consider the evidence and determine whether those costs are unreasonable. (NAC 439.240)

Therefore, it is important for your variance request to be as complete as possible. It is your responsibility to attach documentation supportive of your variance request.

Statement of degree of risk of health

ambulance Not being able to drive the
on an emergency call if needed.

NEVADA STATE BOARD OF HEALTH
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APPLICATION FOR VARIANCE

- _____ 3. Plat map showing locations of all pertinent items and appurtenances
- _____ 4. Well log (if applicable)
- _____ 5. Applicable lab reports
- _____ 6. Applicable engineering or construction/remodeling information
- X 7. Other items (see following pages)

This application must be accompanied by evidence demonstrating the costs of your compliance with regulations or specific statutory standards. Your request will be placed on the Board of Health agenda 40 days or more after receipt in this office if accompanied by the required fee (NAC 439.210). The application and supporting documentation will form the basis for the Health Division staff report and recommendation to the Board. Failure to respond to the above statements may cause the Board to deny consideration of the application at the requested Board meeting.

Please schedule this hearing as:

- The next regularly scheduled Board of Health meeting, regardless of location.
- The next scheduled meeting in Carson City.
- The next scheduled meeting in Las Vegas.

Signature: Victoria Perea
Printed Name: Victoria Perea
Title: AEMT/Instructor
Date: 01/10/2023

Nevada State Board of Health

In further response to question 2a, I would like to provide a little more information. In 2016 I did have my Utah driver's license, however due to my vision I had a posted 40 MPH speed restriction. When I moved back to Nevada in 2019, I felt that it was not worth having a driver's license, as we are in a very rural area, and I would not be able to drive most places here with the speed restriction. However not being able to drive has not affected my ability to provide quality patient care in the past two years of being an AEMT for both the Ely Volunteer Fire Department and White Pine County Fire District.

I thank you for taking the time to take my request for this variance into consideration.

Victoria Perea



City of Ely Fire Department

1780 Great Basin Blvd.
Ely, Nevada 89301

Business Phone: (775) 289 6633
Fax: (775) 289 3122

To: Department of Health and Human Services
Nevada Division of Public and Behavioral Health,
Emergency Medical Systems

12/06/2022

RE: Victoria Perea

Good Day! Please accept this letter on behalf of the City of Ely Fire Department in support of Victoria "Tori" Perea. Tori is seeking a waiver for the requirement having a valid Nevada Driver's license to continue to hold her Advanced EMT certification.

The City of Ely Fire Department is willing to ensure that Tori is not put into a position where it would be necessary for her to operate an ambulance at any point in time. The City of Ely Fire Department could ensure this by several means to include:

Proper scheduling: Tori would only be allowed to schedule under a set of circumstances that would ensure she is the highest level of provider on that ambulance.

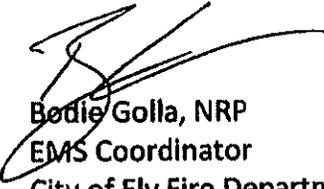
Utilizing our driver only program: Tori would be the highest level of care on the ambulance making her a direct patient care provider.

3rd provider: Tori could also be scheduled as a third provider alongside a RN, Paramedic, Advanced EMT or EMT.

The City of Ely Fire Department has successfully employed Tori in a volunteer capacity for the past several years and has not had any instances where she was put in a position to drive an ambulance. Furthermore, Tori has been a successful Advanced EMT in our service and has provided exceptional patient care without any negative incidents.

The City of Ely Fire Department respectfully requests the Board of Health approve Victoria "Tori" Perea's waiver or variance to this requirement of having a valid Nevada Driver's License.

Should you have any questions, please feel free to contact me at any time.


Bodie Golla, NRP
EMS Coordinator
City of Ely Fire Department