
Creating a State of Health

Northeast (2) Regional Trauma Advisory Board (RTAB)
REGULAR MEETING
Wednesday, February 10, 2026 1 p.m.

Location of Meeting: Tri-County Technology Center
1601 Nowata Rd. Bartlesville, OK

Draft Minutes

1. Carson Combest, Chair called the meeting to order at 1:00 p.m.
2. Garret Knight Vice Chair, recorded attendance and quorum was met.
3. Carson asked if there were any introductions and announcements.

Cody Larson was introduced as the ED Manager for Stillwater. David Graham introduced himself, he is now the Trauma Coordinator for OSDH. Norma Perez was introduced in assisting with CQI. Carson introduced Keely Leeper, she will be doing today's presentation.

4. Heidi Gilbert moved to approve November 12, 2025, minutes and Erik Dickover seconded the motion. The motion passes.

5. Reports

- Judy Dyke reported CQI has not met since the last meeting in November. She deferred to Norma Perez, Norma states CQI is getting new processes in place. She urges everyone participating in CQI to update their information to ensure accurate communication. Regions 6 & 8 are doing EMS one month, Hospitals one month and they come together at the quarterly CQI meetings to discuss the cases. Norma will send those invites when CQI is back up and running.
- Regional planning committee, Judy Dyke reported REPC did meet this morning. They discuss the ACS report which is 77 pages and covers different elements. She states this is a ground opportunity to rewrite what we do and help the trauma care of Oklahoma. So, she urges everyone to join the REPC. She also states they are trying to rewrite the trauma plan but is waiting on the state.
- RMRS. There is exercise training in March and Healthcare Coalition meeting February 18th.
- Emergency Systems Update, David Graham OSDH. David Graham gave updates for the ACS recommendations, ImageTrend, Rural Health Transformation and Education and Training sub-committee. The ACS recommendations cover 12 recommendations. The department of health is meeting with chairs of RTAB, REPC, OTERAC, Hospitals, physicians and other key stakeholders on March 5th. They will cover the 12 recommendations. There will be an initial working group of 20-25 key stakeholders. With Rural Health, the state was awarded 223.5 million. David states the state is waiting to hear from CMS. Once they do the state will start to award contracts and disperse the funds to start the transformation project. This is a 5 year federally funded grant. The state is working on improving EMS infrastructure, communications and several other very important areas. ImageTrend was approved to be used for online licensing and Trauma Fund. This will be implemented in 2027. Education and Training Sub-Committee chair, Blake Braden, is asking for more members to join. They are looking for

other specialties such as OB/GYN and physicians at smaller hospitals that will help the committee. The committee is more education focused at this time.

6. Stroke liaison, Lauren Clark, The American Heart Association came up with new guidelines for ischemic stroke. She is looking at it with EMS in mind and how they respond.
7. Bobbie Keith informed the board that Julia Smith will be speaking. Julia informed the board there is a pediatric patient tracking and reunification exercise going on February 25. There is also a National Pediatric Readiness Project assessment launching in March.
8. Presentation: Keely Leeper, ABLS coordinator, Mercy Hospital from Springfield Missouri presenting on burns. Keely started with common areas to highlight for better helping those patients with burns. Data from 2020 showed survival rate is 97.6%. Total burns, males are more commonly burned at 60% than females at 40%. The median age is 40 years old. 56-58% of pediatric burns are reported to the skull. There is also common abuse, such as dipping fingers and body parts in hot water. Majority of burns occur on the weekend, even more so on holidays. There is a total of 128 burn centers across the US. Across those centers there is an average of 400 admissions. There is consideration for comorbidities and age of patients. Not all patients with burns are admitted. In 2025 Mercy Hospital, Springfield saw over 1500 patients in their outpatient clinic. In the Midwest region there is a total of 89 dedicated burn beds in various hospitals across multiple states. One of the big things is doing a proper airway assessment for inflammation injuries of the mouth and nose, looking for soot as well. There is a risk for edema with facial burns and airway compromise with neck burns. Keely states it's very important to get vital signs and monitor color of unburnt skin. It is recommended to do 2 large bore IV's if there is a total burn area of 20% or more. Keely then discusses various infusion rates for fluids in EMS and hospital settings. Keely also states that prehospital, cutting away clothing, jewelry and things like contacts, especially with chemical burns. Use clean dry sheets to cover the burn and ensure the body is kept warm. She urges not to use ice as it restricts blood flow and pulls nutrients away from cell death. Keely mentions the patients are always going to rate the pain extremely high. Often the patient has severe anxiety which exacerbates the pain. So, she urges that both are treated. There is always going to be a max amount of medication they can give. It's a burn, it's going to hurt. Helping with that anxiety will often help with the pain. Keely discusses various types of burns, degrees and how to calculate total area burn. She discusses medical advancements that help those patients with burns such as skin printed with stem cells. This promotes new skin to form and repair damaged skin. Keely thanks everyone for their time and if anyone has any questions you can reach out to her.
9. Public Comment -
10. May 12, 2026 – 1:00 pm – will be held at Tri Technology Center – Bartlesville, OK
11. Tanna Hudson made a motion to adjourn and seconded by Zach Harris at 2:17 p.m. The motion passes to adjourn