

# Senate Bill 384

Sponsored by Senator BATES (Pre-session filed.)

## SUMMARY

The following summary is not prepared by the sponsors of the measure and is not a part of the body thereof subject to consideration by the Legislative Assembly. It is an editor's brief statement of the essential features of the measure **as introduced**.

Requires Oregon Health Authority to prescribe criteria for training on treatment of opiate overdose and specifies requirements for training. Allows person successfully completing training to possess and administer naloxone for treatment of opiate overdose. Makes person providing treatment immune from civil liability except for wanton misconduct.

Declares emergency, effective on passage.

## A BILL FOR AN ACT

Relating to opiate overdose treatment; and declaring an emergency.

**Be It Enacted by the People of the State of Oregon:**

### **SECTION 1. (1) As used in this section:**

(a) **"Opiate"** means a narcotic drug that contains opium or any chemical derivative of opium or any synthetic or semisynthetic drug with opium-like effects.

(b) **"Opiate overdose"** means a medical condition that causes depressed consciousness and mental functioning, decreased movement, depressed respiratory function and the impairment of the vital functions as a result of ingesting opiates in an amount larger than can be physically tolerated.

(2) **The Oregon Health Authority shall establish by rule protocols and criteria for training on lifesaving treatments for opiate overdose to be provided to persons who have or expect to have ongoing contact with someone who takes a prescription or nonprescription opiate. The criteria must include, but are not limited to:**

(a) **The minimum qualifications of the persons who may conduct the training;**

(b) **The frequency of required retraining or refresher training; and**

(c) **The curriculum for the training including:**

(A) **The recognition of symptoms and signs of opiate overdose;**

(B) **Nonpharmaceutical treatments for opiate overdose, including rescue breathing and proper positioning of the victim;**

(C) **Obtaining emergency medical services;**

(D) **The proper administration of naloxone to reverse opiate overdose; and**

(E) **The observation and follow-up that is necessary to avoid the recurrence of overdose symptoms.**

(3) **Training meeting the protocols and criteria established by the authority under subsection (2) of this section may be conducted by public health authorities or by community-based organizations that provide education and outreach services to individuals who take opiates.**

(4) **A person who has successfully completed the training described in this section may obtain from any health care professional with prescription and dispensing privileges individ-**

**NOTE:** Matter in **boldfaced** type in an amended section is new; matter *[italic and bracketed]* is existing law to be omitted. New sections are in **boldfaced** type.

1 ually packaged doses of naloxone and the necessary medical supplies to administer the doses.  
2 The person may administer a dose to an individual who appears to be experiencing an opiate  
3 overdose if a health care professional with prescription and dispensing privileges is not im-  
4 mediately available.

5 (5) A person who has successfully completed the training described in this section is  
6 immune from civil liability for any act or omission committed during the course of providing  
7 the treatment pursuant to the authority granted by this section, if the person is acting in  
8 good faith and the act or omission does not constitute wanton misconduct.

9 SECTION 2. This 2013 Act being necessary for the immediate preservation of the public  
10 peace, health and safety, an emergency is declared to exist, and this 2013 Act takes effect  
11 on its passage.

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