



February 13, 2019

TO: The Honorable Laurie Monnes Anderson, Chair
Senate Health Care Committee

FROM: Dana Selover, Section Manager
Health Care Regulation and Quality Improvement
Public Health Division
Oregon Health Authority

SUBJECT: SB 452 – Emergency use medications

Chair Monnes Anderson and members of the committee; I am Dana Selover, Section Manager for the Health Care Regulation and Quality Improvement program with the Public Health Division. I am submitting written testimony to provide information about SB 452 as it relates to the Emergency Medical Services (EMS) and Trauma System program.

The EMS and Trauma System program licenses and regulates EMS providers, ambulance service agencies and ambulance vehicles. The program is also responsible for supporting the work of the State EMS Committee established under ORS 682.039. SB 452 will require the program, in collaboration with the State EMS Committee, to develop triage, treatment and transportation protocols for the care of individuals who carry emergency use medication.

Currently, clinical protocols are developed by each ambulance service agency's EMS medical director. The EMS providers working for an ambulance service agency must operate under the direction of their EMS medical director. Decisions as to which medications are administered and the corresponding protocols to operate correctly falls within the practice of medicine. These protocols are frequently updated based upon current medical evidence and standards of care. Requiring the Oregon Health Authority to establish clinical protocols is a substantial change in practice and may cause a conflict with Oregon Medical Board statutes. Medicine changes much more quickly than can be addressed through an administrative rule change or through a committee process.

There are multiple levels of EMS providers that operate under a specific scope of practice established by the Oregon Medical Board. Depending on the level of ambulance staff responding to a call, not all medications can be administered,

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regardless if the medication is supplied by the patient or the ambulance service. For example, many medications must be administered by a Paramedic. Only a fraction of the licensed ambulance service vehicles are staffed with a Paramedic.

The EMS and Trauma Systems program is happy to provide additional information. Thank you for the opportunity to provide this written testimony.