



**Statement for the Record  
Senate Health Care Committee  
May 14, 2019  
SB 1027, Needle stick injuries**

Chair Salinas and members of the committee, for the record, my name is Dr. John Moorhead and I'm here to testify on behalf of OR-ACEP, the Oregon Chapter of the American College of Emergency Physicians. OR-ACEP is a medical society that has represented physicians specializing in emergency medicine since 1971 and its members share a commitment to improve emergency healthcare for all Oregonians.

OR-ACEP supports SB 1027, which would allow a health care practitioner who a received needle stick injuries during the provision of medical care to an unconscious patient or otherwise unable to consent, to test for HIV for the purposes of determining treatment for the health care practitioner. Most patients are cooperative and will give consent for testing. This bill addresses those patients who can't give consent.

Current law provides that if an EMS provider, firefighter, healthcare provider or corrections officer has been stuck by a needle and the patient refuses testing for HIV, you can petition the court for an expedited court order to require testing. This can take four business days, however, the optimal window of treatment is within the first half hour of exposure and at the latest, 72 hours after an exposure. According to the CDC: every hour counts.

The post-exposure prophylactic treatment for HIV requires taking antiretroviral medications to prevent becoming infected. It must be taken once or twice for 28 days. Medication can cause side effects such as nausea and isn't one hundred percent effective to prevent infection. The drug should only be used in emergency situations.

This bill is critically needed because the best course for medical treatment doesn't align with current Oregon law. In terms of the legal process, after exposure, a health care provider or eligible class, must first make a good faith effort to receive voluntary consent. The next step is to petition the court for an ex-parte hearing (which

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will happen in three judicial days) and the court makes a decision within four days whether or not to test the source person. Court cost are waived and testing costs are paid for by the employer of the health care organization.

In the meantime, the health care provider is left waiting.

Emergency physicians and other providers are often placed in high-risk situations even as they treat patients in similar situations. This bill will allow the health care practitioner to take informed precautions to protect their health and safety.

Thank you for the opportunity to testify.

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