

Please Support S. XX

Protecting Patient Access to Emergency Medications Act of 2017

Request

Please support S. XX, Protecting Patient Access to Emergency Medications Act of 2017, introduced by Senator Bill Cassidy (R-LA) and Senator Michael Bennet (D-CO) to secure and maintain access to emergency medications when patients need it most.

A similar bill, [H.R. 304](#), introduced by Congressman Richard Hudson (R-NC) and Congressman G.K. Butterfield (D-NC) passed the House in January by a vote of 404 to 0.

Background

Laws and regulations lag behind the evolution of modern medicine. In a recent review of the Controlled Substances Act (CSA), the Department of Justice determined legislation is needed to codify “standing orders.” Standing orders allow prehospital providers to administer controlled substances without the written prescription from a physician for patients with conditions such as seizures or severe pain related to a traumatic injury or medical event.

The Drug Enforcement Administration (DEA) recently indicated they would promulgate a rule regarding the delivery, storage and administration of controlled substances by emergency medical services’ (EMS) personnel due to the current language of the CSA – ending the current practice of standing orders allowing EMS personnel to administer these medications in life-saving emergencies. Without Congressional action, patients will lose access to life-saving medications in emergency situations and established practices will be disrupted because laws lag behind the evolution of medicine. The DEA’s actions will directly and negatively affect the ability to provide immediate lifesaving care to the most critically ill patients. The DEA’s actions will compromise EMS personnel and put patients’ lives at risk.

Triage, treatment, and transport by EMS practitioners are often the difference between life and death for patients with a medical emergency. EMS practice is governed by the Controlled Substances Act and directly affected by DEA’s interpretations of the CSA. Controlled substance medications are successfully utilized and often necessary in the practice of EMS medicine - ranging from the administration of pain to anti-seizure medications. Emergency Medical Technicians (EMTs) and Paramedics often give these lifesaving drugs as quickly as possible, preventing additional patient harm and often preventing death. The smallest delay wastes valuable time. With the DEA’s new ruling, minutes will be wasted contacting a physician by radio or phone requesting permission to use medications which may cost valuable time and threaten the well-being or life of the patient.

Current established practice allows EMS practitioners to administer and deliver these controlled substances under the oversight of physicians, primarily through existing operational guidelines/medical direction written by physicians, commonly known as “standing orders.” The current existence of these “standing orders” bypasses the need to contact physicians for administration permission, thus medications are delivered to the patients in a timely manner,

preserving the well-being and life of the patient. The DEA's ruling will unnecessarily put lives at risk.

To ensure patients have access to needed vital emergency medications, S. XX will:

- Safeguard the administration of controlled substances by EMS, such as pain and anti-seizure medications, under the supervision of the EMS physician medical director. The established practice of medicine and "standing orders" allows appropriately trained EMS personnel to administer controlled substances to patients via pre-existing treatment protocols established by physicians commonly referred to as "standing orders."
- Codify the use of standing orders in the CSA statute to assure this vital care continues to be available to patients in need of emergency medical services.

Cost

No CBO score

S. XX/H.R. 304 is endorsed by:

Air Medical Physician Association, American Academy of Emergency Medicine, American Academy of Pediatrics, The American Ambulance Association, American Association of Orthopaedic Surgeons, American College of Emergency Physicians, Association of Air Medical Services, Association of Critical Care Transport, International Association of Fire Chiefs, International Association of Fire Fighters, National Association of EMS Physicians, National Association of Emergency Medical Technicians, National Association of Police Organizations, National Association of State EMS Officials, Trauma Centers Association of America.

Contact

To cosponsor S. XXX, please contact Matt Gallivan in Senator Cassidy's office (Matt_Gallivan@cassidy.senate.gov) or Rita Habib (Rita_Habib@bennet.senate.gov) in Senator Bennet's office.