“Protecting Patient Access to Emergency Medications Act of 2016 (S. 2932)”

The Problem

EMS providers often provide the first, and sometimes only, medical treatment a patient receives in the event of an emergency. This response is critical to provide timely and lifesaving care, and often times patients cannot survive delays in the delivery of this care.

The unique nature of field emergency medical services is unlike other health care services governed by the Controlled Substances Act (CSA). There is a routinely encountered clinical need for controlled substance medications in the practice of EMS medicine ranging from the administration of pain narcotics to epinephrine (which treats severe allergic reactions in an emergency situation). Yet, currently there is considerable confusion around Drug Enforcement Agency (DEA) regulations that do not take into account the significant differences between field EMS practice and that of other (brick and mortar) healthcare entities covered by the same regulations.

The DEA has raised concerns regarding EMS personnel administering controlled substances under current law. Taking away the ability of EMS to administer controlled substances would prevent them from quickly and effectively providing necessary treatments to patients in emergency situations.

Solution

To remedy this problem, Senator Cassidy has introduced S. 2932, the Protecting Patient Access to Emergency Medications Act. S. 2932 would ensure that EMS personnel can administer emergency medications in a timely manner and provide needed care to patients.

This legislation will clarify that the current practice of physician Medical Directors overseeing care provided in the field by paramedics and other EMS practitioners via “standing orders” or via “online medical direction” is statutorily allowed and protected. In the absence of standing orders and online medical direction, patients would not have access to the time-sensitive and potentially life-saving interventions they so desperately need.

Supporting Organizations

American Academy of Pediatrics (AAP)
American College of Emergency Physicians (ACEP)
Association of Critical Care Transport (ACCT)
Emergency Nurses Association (ENA)
The Epilepsy Foundation
International Association of Fire Chiefs (IAFC)
International Association of Fire Fighters (IAFF)
National Association of EMS Physicians (NAEMSP)
National Association of Emergency Medical Technicians (NAEMT)
National Association of State EMS Officials (NASEMSO)
Oregon State Ambulance Association (OSAA)