



# House of Representatives

## File No. 343

General Assembly

February Session, 2000

**(Reprint of File No. 223)**

House Bill No. 5650  
As Amended by House  
Amendment Schedule "A"

Approved by the Legislative Commissioner  
March 31, 2000

### ***An Act Concerning The Certification Of Emergency Medical Services Personnel And The Scope Of The Practice Of Paramedicine.***

Be it enacted by the Senate and House of Representatives in General Assembly convened:

1 Section 1. Subsection (b) of section 19a-195a of the general statutes is  
2 repealed and the following is substituted in lieu thereof:

3 (b) The commissioner shall adopt regulations, in accordance with  
4 the provisions of chapter 54, to (1) provide for state-wide  
5 standardization of certification for ["emergency medical technician-  
6 intermediate"] all classes of (A) emergency medical technicians,  
7 including, but not limited to, paramedics, (B) emergency medical  
8 services instructors, and (C) medical response technicians, (2) allow  
9 course work for such certification to be taken state-wide, and (3) allow  
10 persons so certified to perform within their scope of certification state-  
11 wide.

12 Sec. 2. Section 19a-197 of the general statutes is repealed and the  
13 following is substituted in lieu thereof:

14 (a) Any person in possession of an automatic external defibrillator  
15 shall provide notice of the location of such automatic external  
16 defibrillator to the Office of Emergency Medical Services.

17 (b) The Office of Emergency Medical Services shall establish a  
18 registry of automatic external defibrillators located within the state  
19 and shall establish a procedure facilitating the use of the enhanced 9-1-  
20 1 service, as defined in section 28-25, for the location of such automatic  
21 external defibrillator nearest to the caller.

22 (c) The [Commissioner of Public Health] commissioner may adopt  
23 regulations, in accordance with the provisions of chapter 54, to  
24 [implement the purposes of the registry established by] carry out the  
25 provisions of subsections (a) and (b) of this section.

26 (d) No paramedic shall be required to be in simultaneous  
27 communication with a licensed physician when using an automatic  
28 external defibrillator in the practice of paramedicine, as defined in  
29 section 20-206jj, as amended by this act.

30 Sec. 3. Subdivision (14) of subsection (b) of section 20-9 of the  
31 general statutes is repealed and the following is substituted in lieu  
32 thereof:

33 (14) Any person rendering service as a physician assistant licensed  
34 pursuant to section 20-12b, a registered nurse, a licensed practical  
35 nurse or a [licensed] paramedic, as defined in subdivision (15) of  
36 section 19a-175, acting within the scope of regulations adopted  
37 pursuant to section 19a-179, if such service is rendered under the  
38 supervision, control and responsibility of a licensed physician.

39 Sec. 4. Section 20-206jj of the general statutes is repealed and the  
40 following is substituted in lieu thereof:

41 As used in sections 20-206jj to 20-206oo, inclusive, [ "Paramedicine"  
42 "paramedicine" means the carrying out of (1) all phases of  
43 cardiopulmonary resuscitation and defibrillation, (2) the

44 administration of drugs and intravenous solutions under written or  
45 oral authorization from a licensed physician, and (3) the  
46 administration of controlled substances, as defined in section 21a-240,  
47 [under the supervision of a physician by simultaneous  
48 communication] as amended, in accordance with written protocols or  
49 standing orders of a licensed physician.

The following fiscal impact statement and bill analysis are prepared for the benefit of members of the General Assembly, solely for the purpose of information, summarization, and explanation, and do not represent the intent of the General Assembly or either House thereof for any purpose:

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**OFA Fiscal Note**

**State Impact:** None

**Affected Agencies:** Department of Public Health

**Municipal Impact:** None

**Explanation**

**State Impact:**

It is anticipated that the Department of Public Health (DPH) will not incur any additional regulatory responsibilities as a result of passage of this bill as amended. Any resulting increase in complaints filed with the Connecticut Paramedic Peer Review Board can be accommodated within its normal course of work.

House "A" requires the DPH to adopt regulations providing statewide standardization of certification for all classes of emergency medical technicians, emergency medical services instructors and medical response technicians. As the agency currently has regulations regarding certification of these professionals, it is anticipated that no fiscal impact is associated with adoption of the amendment.

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**OLR Amended Bill Analysis**

HB 5650 (as amended by House "A")\*

**AN ACT CONCERNING THE SCOPE OF THE PRACTICE OF PARAMEDICINE.****SUMMARY:**

This bill restricts licensed paramedics' scope of practice to those activities authorized in Department of Public Health (DPH) regulations governing emergency medicine. As under current law, those activities must be performed under the supervision, control, and responsibility of a licensed physician. Paramedics operating within this scope of practice are exempt from the prohibition against practicing medicine without a physician's license. Current law permits paramedics to practice paramedicine outside the emergency medical system under a doctor's supervision.

The bill allows paramedics to administer controlled substances (e.g., morphine, demerol, and valium) under a licensed physician's written protocols or standing orders. Current law requires them to be in simultaneous communication with a supervising doctor when administering these drugs.

It specifies that paramedics do not have to be in simultaneous communication with a supervising doctor to use an automatic external defibrillator.

Finally, the bill requires DPH regulations on statewide certification standards for emergency medical technicians (EMTs) to cover all classes, not just EMT-Intermediate as required under current law. The added classes include paramedics, emergency medical services instructors, and medical response technicians.

\*House Amendment "A" requires DPH to adopt regulations governing standardized certification for all emergency medical technicians.

EFFECTIVE DATE: October 1, 2000

**BACKGROUND*****Paramedic Scope of Practice***

DPH regulations permit paramedics to administer intravenous solutions; perform pulmonary ventilations by intubation; administer medications other than orally; perform cardiac defibrillation; and perform other procedures and treatments as indicated by patient need that are consistent with training, ability, and protocols (*Conn Agency Regs.* 19a-179-12)

PA 97-311 eliminated the reference to paramedics “acting within the scope of [DPH] regulations.” A 1997 attorney general’s advisory memorandum interpreted this act to permit paramedics to practice paramedicine outside of an emergency medical system.

**COMMITTEE ACTION**

Public Health Committee

Joint Favorable Report  
Yea 22 Nay 0