



General Assembly

**Amendment**

January Session, 2005

LCO No. 6936

**\*SB0120806936SD0\***

Offered by:

SEN. MURPHY, 16<sup>th</sup> Dist.

SEN. RORABACK, 30<sup>th</sup> Dist.

To: Subst. Senate Bill No. 1208

File No. 414

Cal. No. 337

**"AN ACT CONCERNING PUBLIC HEALTH PREPAREDNESS."**

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- 1 Change the effective date of section 1 to "Effective from passage"
- 2 After the last section, add the following and renumber sections and  
3 internal references accordingly:
- 4 "Sec. 501. Section 20-12c of the general statutes is amended by  
5 adding subsection (e) as follows (*Effective from passage*):
- 6 (NEW) (e) Notwithstanding the provisions this section, a licensed  
7 physician assistant may provide patient services under the  
8 supervision, control, responsibility and direction of a licensed  
9 physician who has not registered with the Department of Public  
10 Health as a supervising physician pursuant to subsection (a) of this  
11 section, provided the physician assistant is part of the Connecticut  
12 Disaster Medical Assistance Team or the Medical Reserve Corps,  
13 under the auspices of the Department of Public Health, or the  
14 Connecticut Urban Search and Rescue Team, under the auspices of the

15 Department of Public Safety, and is engaged in officially authorized  
16 civil preparedness duty or civil preparedness training conducted by  
17 such team or corps.

18 Sec. 502. Subdivision (5) of section 28-1 of the general statutes is  
19 repealed and the following is substituted in lieu thereof (*Effective from*  
20 *passage*):

21 (5) "Civil preparedness forces" means any organized personnel  
22 engaged in carrying out civil preparedness functions in accordance  
23 with the provisions of this chapter or any regulation or order  
24 [thereunder] adopted pursuant to this chapter. All the police and fire  
25 forces of the state or any political subdivision of the state, or any part  
26 of any political subdivision, including all the auxiliaries of these forces  
27 and emergency medical service personnel licensed or certified  
28 pursuant to section 19a-179, shall be construed to be a part of the civil  
29 preparedness forces. The Connecticut Disaster Medical Assistance  
30 Team and the Medical Reserve Corps, under the auspices of the  
31 Department of Public Health, the Connecticut Urban Search and  
32 Rescue Team, under the auspices of the Department of Emergency  
33 Management and Homeland Security, and the Connecticut behavioral  
34 health regional crisis response teams, under the auspices of the  
35 Department of Mental Health and Addiction Services and the  
36 Department of Children and Families, and their members, shall be  
37 construed to be a part of the civil preparedness forces while engaging  
38 in authorized civil preparedness duty or while assisting or engaging in  
39 authorized training for the purpose of eligibility for immunity from  
40 liability as provided in section 28-13 and for death, disability and  
41 injury benefits as provided in section 28-14. Any member of the civil  
42 preparedness forces who is called upon either by civil preparedness  
43 personnel or state or municipal police personnel to assist in any  
44 emergency shall be deemed to be engaging in civil preparedness duty  
45 while assisting in such emergency or while engaging in training under  
46 the auspices of the Department of Emergency Management and  
47 Homeland Security, the Department of Public Safety, the Division of  
48 State Police within the Department of Public Safety or a municipal

49 police department, for the purpose of eligibility for death, disability  
50 and injury benefits as provided in section 28-14.

51 Sec 503. Section 28-8b of the general statutes is repealed and the  
52 following is substituted in lieu thereof (*Effective from passage*):

53 (a) Any paid or volunteer firefighter, police officer or emergency  
54 medical service personnel who successfully completes a training  
55 course in the use of automatic prefilled cartridge injectors may carry  
56 and use such injectors containing nerve agent antidote medications in  
57 the event of a nerve agent exposure for self-preservation or unit  
58 preservation. Such training course shall be approved by the  
59 commissioner and provided by the Connecticut Fire Academy, the  
60 Capitol Region Metropolitan Medical Response System or the federal  
61 government.

62 (b) The state of Connecticut shall save harmless and indemnify any  
63 sponsor hospital or the medical director or designated staff of a  
64 sponsor hospital certified by the Department of Public Health to  
65 oversee the training, distribution or quality assurance of nerve agent  
66 antidote kits for purposes of subsection (a) of this section, from  
67 financial loss and expense, including legal fees and costs, if any, arising  
68 out of any claim, demand, suit or judgment by reason of alleged  
69 negligence or other act resulting in personal injury, which acts are not  
70 wanton, reckless or malicious, provided such person at the time of the  
71 acts resulting in such injury was acting in the discharge of such  
72 person's duties in providing such training, distribution or quality  
73 assurance of nerve agent antidote kits.

74 (c) For purposes of this section, "sponsor hospital" means a hospital  
75 that has agreed to maintain staff for the provision of medical control,  
76 supervision and direction to an emergency medical service  
77 organization and its personnel and that has been approved for such  
78 activity by the Office of Emergency Medical Services.

79 Sec. 504. (NEW) (*Effective from passage*) Notwithstanding any  
80 provision of the general statutes or any regulation adopted pursuant to

81 chapter 368d of the general statutes, the scope of practice of any person  
82 certified or licensed as an emergency medical technician-basic,  
83 emergency medical technician-intermediate or emergency medical  
84 technician-paramedic under regulations adopted pursuant to section  
85 19a-179 of the general statutes may include treatment modalities not  
86 specified in the regulations of Connecticut state agencies, provided  
87 such treatment modalities are (1) approved by the Connecticut  
88 Emergency Medical Services Medical Advisory Committee established  
89 pursuant to section 19a-178a of the general statutes and the  
90 Commissioner of Public Health, and (2) administered at the medical  
91 control and direction of a sponsor hospital, as defined in section 28-8b  
92 of the general statutes, as amended by this act."