



Testimony of James Parker, MD, Emergency Room Physician and Medical Director of the Critical Care Transport Team at Connecticut Children's Medical Center to the Public Health Committee regarding *House Bill 6678, An Act Concerning Revisions to Department of Public Health Licensing Statutes.*

March 16, 2009

Senator Harris, Representative Ritter, Members of the Public Health Committee. Thank you for the opportunity to testify regarding *House Bill 6678, An Act Concerning Revisions to Department of Public Health Licensing Statutes* (in particular my testimony concerns Sections 14 and 15 of the bill). My name is Jim Parker and I am an Emergency Room Physician at Connecticut Children's Medical Center. I am also the Medical Director of Connecticut Children's Critical Care Transport Team.

Connecticut Children's needs to operate a critical care transport team to bring critically ill or injured children and newborns from community hospitals to our facility when they need tertiary care services that are not available at the community facility. Current Office of Emergency Medical Services regulations require that every individual who provides care to a patient in an ambulance must be licensed as a paramedic. This regulation prevents our team of trained pediatric critical care clinicians from providing the specialized services that these newborns and children need. Connecticut Children's is currently not operating this service because of potential liability for our clinicians' licenses. As a result, children who need our transport services do not have access to them.

On March 6, 2009, I testified before the Public Health Committee on this same issue regarding *House Bill 6599, An Act Concerning Patient Safety*. In that testimony, I asked that you amend House Bill 6599 to include a section that defines Neonatal and Pediatric Specialty Care Transport. With one exception, the proposed legislative language that included on the reverse side of my testimony for that bill is the same as the language that is included in Sections 14 and 15 of House Bill 6678. The one difference is that House Bill 6678 includes an effective date of October 1, 2009. As I will discuss later in this submitted testimony, it is important that this language be effective upon passage.

The language defining Neonatal and Pediatric Specialty Care Transport should promote patient safety by requiring the use of a basic level ambulance with a licensed EMT-Paramedic on board. The language should also recognize that critically ill neonates and children need ongoing care that must be furnished by certified or licensed health professionals who specialize in neonatology or pediatrics. Current standards established by the American Heart Association and the American Academy of Pediatrics define the qualifications for members of a neonatal and pediatric critical care teams.

It is important that this language be written so that it will be effective upon passage since Connecticut Children's is not currently offering critical care transport services, pending the statutory change. When enacted, this amendment will allow Connecticut Children's to resume operation of its critical care transport team, providing our patients with access to the specialized health care transport services they need in a safe environment. I urge you to support the language in Sections 14 and 15 of House Bill 6678, with an amended effective date, to statutorily define Neonatal and Pediatric Specialty Care Transport.

Thank you for your time and attention to this important matter.