

RE: HB-6658 An Act concerning the administration of naloxone, nitroglycerine and epinephrine by emergency medical technicians.

I oppose HB 6658.

I have been an EMT for 36 years and am a member of a volunteer ambulance association for 21 years. I also have 5 years experience as a Registered Nurse in a level 1 Emergency Department.

I request the House consider the following when voting for HB6658.

- All medications have positive and negative side effects.
- All medications have expiration dates.
- Requiring all EMTs and AEMTs to carry rarely used medications will result in decreased availability of medication, increased cost and increased waste.
- Administration of medications by EMTs, AEMTs and Paramedics require a physician's order.
- The Act interferes with the responsibility of OEMS, sponsor hospitals and medical direction.

State of Connecticut, Department of Public Health, Office of Emergency Services (OEMS) regulates pre hospital care, scope of practice, training and skills for EMR, EMT, AEMT, and Paramedics. Along with this oversight, practicing pre hospital medical care providers operate as an extension of a physician and require medical orders through a sponsor hospital to administer any medication. This act appears to allow EMTs to carry a drug but not use it.

Naloxone has been in the news as "saving" people. Naloxone is a drug that reverses respiratory depression caused by opiates. It is only effective on opiates. The drug is effective for a short period of time (about 20 – 40 minutes depending on what was taken). It can cause individuals to be violent from losing their "high" increasing the risk of injury to the individual and medical responder. A simple solution that all EMTs/AEMTs can use for someone not breathing is to provide ventilations. Another issue is that prefilled delivery systems don't allow for titration, which can improve breathing without the negative behavior. A third issue is the risk of an individual overdosing on a combination of drugs. Reversing the high of heroin when the person also took cocaine increases the risk of a heart attack.

Nitroglycerine is a vasodilator (relaxes smooth muscles in blood vessels) – commonly used for people with exertional chest pain. Many people have prescriptions for it from their physicians. It can reduce chest pain from decreased oxygen to the heart caused by exertion, angina or stress. It decreases blood pressure, which in some cases results in the heart having to work harder to push blood through the body increasing the injury to the heart. It will not save a life. Depending on where the damage to the heart is from a heart attack, it can increase the risk of death for individuals.

Epinephrine is a natural substance produced by the body. It has many uses. This drug has also been in the news because of the increase number of people having severe allergies. The "epi-pen" is a prefilled device carried by people with known allergies. It is currently carried by all ambulances.

Naloxone and epinephrine are packaged in single use devices at a cost of \$200 - \$300 per use. Epinephrine has a shelf life of approximately 18 months. While nitroglycerine is not as expensive as naloxone or epipen, it has a 3 month useable period once opened.

There is a wide range of EMS providers within the State of Connecticut with varying experience. OEMS is working to change the scope of practice using evidence based practice. Legislation should allow OEMS to decide the appropriate skills in conjunction with physician oversight.

Please do not support HB-6658.

Thank you for your consideration

Heidi Heim MSN, RN, AEMT,