

February 11, 2019

Dear Chair Monnes Anderson and Members of the Senate Healthcare Committee:

I am writing you to state my opposition to SB 544.

As background, I am the EMS Medical Director of two large counties in the State of Oregon. Previously, I served as Oregon's first State EMS/Trauma Medical Director and have been President of the National Association of EMS Physicians.

This bill sets a dangerous precedent of practicing medical care directly through state statute. EMS supervising physicians/medical director practice medicine through the creation of protocols, providing training and overseeing quality improvement. Creating statutory requirements based on a specific disease is bad policy as well as a usurpation of medical practice. It is unlikely that the state legislature would be willing or able to maintain the ability to keep current on medical practice to care for the myriad of diseases and conditions that EMS practitioners care for on a daily basis.

The bill requires every licensed ambulance to carry a medication that may not be within the scope of practice of the EMS practitioners on board. By state scope of practice as well as national standard, injected steroids are paramedic level medications. Lower level of provider do not have the training or clinical expertise to prepare, draw and inject these medications. This would result in unnecessary cost for primarily rural EMS agencies.

While I am understanding of the unique medical needs of these patients, as well as all of my patients, this bill creates a poor precedent that does not create a useful solution.

Thank you for your consideration.

Sincerely,

A handwritten signature in black ink, appearing to be 'R. Sahni', written in a cursive style.

Ritu Sahni, MD, MPH, FAEMS