Public Health Division

Health Care Regulation and Quality Improvement



Tina Kotek, Governor

January 30, 2025

TO: The Honorable Lisa Reynolds, Chair

Senate Committee on Early Childhood and Behavioral Health

FROM: André Ourso, Administrator

Center for Health Protection

Public Health Division Oregon Health Authority

971-325-5370

SUBJECT: SB 493 - Administration of short-acting opioid antagonists by EMS

Providers

Dear Chair Reynolds and members of the committee;

The Center for Health Protection within the Oregon Health Authority regulates Emergency Medical Responders (EMRs) and Emergency Medical Technicians (EMTs) in Oregon. Please consider the following information on SB 493, the proposal to modify the scope of practice for EMRs and EMTs.

Drug overdose deaths continue to be a public health crisis in Oregon. In 2023, 1,833 Oregonians died of a drug overdose, an increase of 33% compared to 2022. Short-acting opioid antagonists are medications that can safely and quickly reverse an opioid overdose. These medications, commonly known as "naloxone," are a critical component of Oregon's comprehensive strategy to reduce substance use-related harms and overdose deaths. Short-acting opioid antagonists are available in multiple forms, including nasal spray, injection, and auto-injection. There are different brands and different strengths of naloxone; however, all types are effective at reversing opioid overdoses.

The Oregon Medical Board (OMB) regulates the scope of practice (SOP) for Emergency Medical Services Providers (EMSPs) through the standard rulemaking process and as such changes to the EMS SOP may occur through normal rulemaking without requiring legislation. The Oregon SOP closely follows the National SOP for EMS and the OHA ensures that EMS providers are properly trained in the SOP and investigates any alleged violations of the scope. The current Oregon SOP for EMR's and EMT's allows these providers to "Administer and distribute short-acting opioid antagonist kit and distribute the necessary medical supplies to administer the short-acting opioid antagonist." It is not within an EMR and EMTs scope to "draw up for administration, and may administer as needed, one or more doses of a short-acting opioid antagonist from a vial or other container that contains multiple doses of the short-acting opioid antagonist."

The skills required to draw up and administer a short-acting opioid antagonist from a vial are:

- Proper sharps procedures
- Drawing up medications
- Weigh-based calculations
- Intramuscular medication administration
- Monitoring the medication reaction

EMTs have these skills for the administration of epinephrine for allergic reactions but the skill could easily translate to the treatment of opioid overdose. EMRs do not have any of the above-mentioned skills and these would have to be added to initial training increasing their course from 5 days, through the weekend to a 6- or 7-day course.

This proposed SOP change would not immediately apply to all providers until their supervising physicians issue standing orders for the preparation and administration of short-acting opioid antagonists and ensure proper training and supervision. This would occur during initial training for future EMRs and EMTs, and current EMS providers would have to be trained by their agency. This may be a particular challenge for EMRs, who, unlike EMTs, typically may not work for EMS agencies, but in public safety such as law enforcement.

It is also helpful to consider that EMRs and EMTs have access to alternatives to multidose vials of short-acting opioid antagonist and needles in the form of autoinjectors and nasal sprays. These medications can be purchased through pharmacies, harm reduction suppliers, and manufacturers. Additionally, the Save Lives Oregon Harm Reduction Clearinghouse provides harm reduction supplies, including nasal and auto-injectable naloxone, to eligible organizations at no cost. Uniformed first responder agencies must implement a "leave behind" naloxone distribution program to qualify for the Clearinghouse. The Clearinghouse is a low-barrier, cost-effective strategy for first responder agencies to access short-acting opioid antagonist medication.

Finally, it is important to highlight the option to pursue SOP changes for EMTs through the OMB rulemaking process to ensure review by subject matter experts in the practice of EMS.

Thank you for the opportunity to submit written testimony.