

## **BILL ANALYSIS**

C.S.H.B. 2827  
By: Taylor  
Public Health  
Committee Report (Substituted)

### **BACKGROUND AND PURPOSE**

Currently, anaphylaxis treatment is not carried in every emergency medical service vehicle. C.S.H.B. 2827 requires every emergency medical service (EMS) vehicle to carry an epinephrine injector or similar device to treat anaphylaxis, while allowing the local medical director full authority in determining which personnel are eligible to administer epinephrine or similar treatment. It also provides for continuing training of EMS personnel in the treatment of anaphylaxis.

### **RULEMAKING AUTHORITY**

It is the committee's opinion that the rulemaking authority of the Texas Department of State Health Services and the Texas Board of Health is modified in SECTIONS 1 and 2 of this bill.

### **ANALYSIS**

C.S.H.B. 2827 clarifies that emergency medical services (EMS) personnel may carry, maintain, administer, and dispose of epinephrine auto-injector devices (device), only in accordance with rules adopted by the Department of State Health Services (department) and a delegated practice agreement that provides for medical supervision by a licensed physician with certain qualifications, and deletes language limiting the authorization to certain certified EMS personnel. The bill provides that rules adopted by the department must provide that EMS personnel may administer the device to another only if the person has successfully completed a training course, approved by the department, in the use of the device that is consistent with the national standard training curriculum for emergency medical technicians.

The bill allows a licensed physician acting as a medical director for an EMS system to restrict the use and administration of epinephrine auto-injector devices to certain EMS personnel of the system through the delegated practice agreement or the adoption of policies governing the use of the devices by personnel within the system.

C.S.H.B. 2827 provides that rules adopted by the Texas Board of Health for minimum standards mandate that an EMS vehicle be equipped with an epinephrine auto-injector device or similar device to treat anaphylaxis and that EMS personnel complete continuing education training in the administration of anaphylaxis treatment.

### **EFFECTIVE DATE**

Upon passage, or, if the Act does not receive the necessary vote, the Act takes effect September 1, 2007.

### **COMPARISON OF ORIGINAL TO SUBSTITUTE**

C.S.H.B. 2827 differs from the original bill by modifying Section 773.014, Subsections (a), (b), and (c), of the Health and Safety Code striking the following language, "certified as emergency medical technicians or at a higher level of training" and adding Subsection (c-1) to allow a licensed physician acting as a medical director for an emergency medical services system to restrict the use and administration of epinephrine auto-injector devices to certain emergency medical services personnel of the system through: (1) a delegated practice agreement; or the adoption of policies governing the use of the devices by personnel within the system. The original bill amended Section 773.050 of the Health and Safety Code by adding Subsection (g)

C.S.H.B. 2827 80(R)

requiring rules adopting minimum standards under this section, including an EMS vehicle to be equipped with an epinephrine injector or similar device to treat anaphylaxis; and EMS personnel to complete continuing education training in the administration of anaphylaxis treatment. C.S.H.B. 2827 reflects the new Subsection (g) language as seen in the original bill.