

Senate Bill 78 Public Safety – Law Enforcement and Emergency Medical Services Providers – Administration of Ketamine

State of Maryland

Maryland Institute for Emergency Medical Services Systems

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> > Larry Hogan Governor

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<u>MIEMSS Position</u>: Oppose <u>Bill Summary</u>: SB 78 (1) prohibits a law enforcement officer from administering Ketamine or from directing an EMS provider to administer Ketamine to an individual; and (2) requires an EMS provider to obtain medical direction before administering Ketamine to an individual who is combative, violent and presents an immediate danger to him/herself or others unless obtaining medical direction would cause an immediate

and imminent threat of serious harm to the individual or the EMS provider.

<u>Rationale</u>: SB 78 codifies medical practice by placing a specific EMS protocol in statute; disregards the statutory responsibility of the State EMS Board to establish EMS protocols; and erroneously assumes that law enforcement directs EMS care.

- <u>EMS provides care to emergency patients according to standardized protocols contained in</u> <u>the Maryland Medical Protocols for EMS and through physician medical direction.</u>
 - <u>The Maryland State EMS Board is the entity authorized by statute to approve the</u> <u>Maryland Medical Protocols for EMS that standardize emergency care delivered by EMS</u>. Protocols are developed and recommended for approval by the Protocol Review Committee, which includes physician medical directors from EMS programs throughout Maryland, the Board of Nursing, and others. *See MD Code Ann., Ed Art §13-509 (b)(1)(ii) and COMAR 30.03.05*.
 - <u>EMS cannot and does not accept direction or take orders from law enforcement officers</u> <u>on any aspect of patient care, including administration of medications, such as Ketamine</u>. EMS Clinicians must follow the Maryland Medical Protocols for EMS and accept medical direction regarding patient treatment from <u>physicians only</u>.
- <u>The State EMS Board approved Ketamine for inclusion as an advanced life support (ALS)</u> <u>medication effective July 1, 2018 for</u>: (1) moderate to severe pain; (2) CPR-induced awareness/sedation in preparation for intubation; (3) maintenance of sedation for intubated patients; and (4) excited delirium. Ketamine is a sedative medication with rapid onset and less of a depressant effect on blood pressure and airway reflexes than other medications. It is a non-opioid alternative to fentanyl and morphine for the treatment of moderate to severe pain. Ketamine was administered during 2,570 patient encounters from July 1 2018 – June 30 2020.
- <u>MIEMSS, along with EMS medical directors in each jurisdiction, coordinates and monitors</u> <u>implementation and use of EMS protocols</u>. MIEMSS issued a Ketamine update in August 2020 specifying that online medical direction must be obtained prior to giving ketamine for severe agitation unless doing so would present immediate and imminent harm to the patient or EMS.
- Maryland State Police (MSP) Aviation Command Paramedics, who are assigned to the MSP Medevac program, are Maryland-licensed EMS Clinicians authorized to administer medications when needed, including Ketamine, before and during helicopter transport.