

26:2K-1 to 6

LEGISLATIVE FACT SHEET

on CORONARY CARE -- EMERG.

N.J.R.S. 26:2K-1 to 6

(Amendment)

LAWS OF 1973

CHAPTER 229 Oct. 16, 1973

SENATE BILL 2135 [A2240]

ASSEMBLY BILL

INTRODUCED Feb. 22, 1973

BY Wallwork and others

SPONSOR'S STATEMENT

YES ^{other} side NO

ASSEMBLY COMMITTEE STATEMENT

YES NO

SENATE COMMITTEE STATEMENT

YES NO

FISCAL NOTE

YES NO

AMENDED DURING PASSAGE

YES NO

HEARING *None discovered*

VETO

GOVERNOR'S STATEMENT ON SIGNING YES 2pp.

DEPOSITORY COPY
Do Not Remove From Library

229
APPROVED 10-16-73

SENATE, No. 2135

STATE OF NEW JERSEY

INTRODUCED FEBRUARY 22, 1973

By Senators WALLWORK, HAGEDORN, HIRKALA, McGAHN,
TANZMAN and BROWN

Referred to Committee on Institutions, Health and Welfare

AN ACT concerning emergency medical services, supplementing
Title 26 of the Revised Statutes, and making an appropriation
therefor.

1 BE IT ENACTED by the Senate and General Assembly of the State
2 of New Jersey:

1 1. For the purposes of this act:

2 a. "Defibrillation" means the technique in which the heart or
3 an incoordinate contraction of the heart muscle is stimulated by
4 a direct current electrical energy, the result of which is often the
5 return of a normal heartbeat;

6 b. "Emergency rescue act" means the administration or utiliza-
7 tion of defibrillation on patients who are pluseless, nonbreathing,
8 and unconscious;

9 c. "Mobile intensive care paramedics" means personnel of
10 volunteer or nonvolunteer first aid, rescue or ambulance squads
11 who have been specially trained in emergency cardiac care in a
12 training program accredited by the Commissioner of Health and
13 who are certified by the New Jersey Board of Medical Examiners
14 as being qualified to render the services enumerated in this act.

15 d. "Coronary care nurse" means a registered professional nurse
16 who has been certified by the board of trustees of a hospital par-
17 ticipating in programs under this act as being qualified in emer-
18 gency cardiac care.

19 e. "Accredited coronary care unit" shall mean a unit in a hos-
20 pital staffed 24 hours a day by either residents in cardiology or
21 internal medicine, or by a full-time cardiologist or specialist in
22 internal medicine.

1 2. Any hospital having an accredited coronary care unit may
2 apply to the State Department of Health for approval to conduct

3 a pilot program in emergency mobile intensive care procedures
4 and emergency rescue acts in cooperation with voluntary health
5 agencies including, but not limited to, the American Heart Asso-
6 ciation (New Jersey affiliate) and first aid, rescue or emergency
7 squads under regulations promulgated by the commissioner. When-
8 ever a pilot program is approved by the department, it shall utilize
9 mobile intensive care paramedics under the direction of a physician
10 specializing in cardiology or internal medicine who is associated
11 with a hospital certified to participate in this program by the com-
12 missioner. No project herein authorized shall extend beyond 5
13 years of the effective date of this act. The commissioner shall
14 report to the Legislature on or before January 15 of each year
15 evaluating the effectiveness of every project herein authorized.

1 3. Mobile intensive care paramedics may perform any of the
2 following enumerated medical services, providing that the para-
3 medics are maintaining direct communication with and are taking
4 orders from a physician or nurse qualified in emergency cardiac
5 care who is affiliated with an accredited coronary care unit, and
6 where a telemetered electrocardiogram is monitored:

7 a. Defibrillation in a pulseless, nonbreathing and unconscious
8 patient;

9 b. The administration of intravenous saline or glucose solutions;

10 c. Gastric suction by insertion of nasogastric tube;

11 d. The administration of parenteral injections of lidocaine,
12 atropine, sodium bicarbonate and such other drugs as may be
13 authorized by the commissioner.

1 4. No digitalis or digitalis preparations, or any controlled
2 dangerous substance except as specifically provided or authorized
3 under this act, shall be administered at any time by a mobile inten-
4 sive care paramedic.

1 5. No physician or nurse as defined herein who in good faith
2 gives emergency instructions to a paramedic at the scene of an
3 emergency, and no mobile intensive care paramedic who in good
4 faith performs any service authorized by this act, shall be liable
5 for civil damages as a result of such instructions or service. No
6 hospital corporation or first aid, rescue or ambulance squad par-
7 ticipating in any project authorized by this act shall be liable for
8 any civil damages as a result of such participation.

1 6. There is hereby appropriated from the General State Fund
2 the sum of \$200,000.00, or so much thereof as may be necessary,
3 for the purposes of this act.

1 7. Nothing in this act shall be construed as interfering with any
2 emergency training service program authorized and operated under

- 3 provisions of the "New Jersey Highway Safety Act of 1971,"
4 (C. 27:5F-1 et seq.).
1 8. This act shall take effect immediately.

STATEMENT

This bill would permit the State to develop new life-saving programs of emergency coronary care. It provides for funding pilot projects in emergency cardiac care outside of hospitals through the utilization of specially trained mobile intensive care paramedics. These paramedics, trained by the State in cooperation with hospitals and first aid, rescue and emergency squads, would be able to perform defibrillation and provide other medical services while in direct communication with coronary care units of the participating hospitals.

The special projects authorized in this bill are recommended on the basis of physicians' successful experiences with heart attack victims when expert care can be provided soon after the attacks occur. The special training for paramedics, and the special equipment they will use, will be provided by the appropriation of \$200,000.00 in the bill to the State Department of Health. The department will train and equip the staffs on the coronary care units that are approved for participation in these pilot projects.

Training for these paramedics will be complementary to, and independent of, the State's continuing training program for members of first aid, rescue and ambulance squads under the New Jersey Highway Safety Act of 1971 (C. 27:5F-1 et seq.). Under that act, the State provides training for squad members in more usual emergency treatment techniques.

FROM THE OFFICE OF THE GOVERNOR

OCTOBER 16, 1973

FOR RELEASE: IMMEDIATE

Acting Governor Alfred N. Beadleston today signed into law a bill permitting the establishment of mobile intensive coronary care units using paramedics under the direction of a physician.

At a public ceremony, Acting Governor Beadleston signed S-2135, sponsored by State Senator James R. Wallwork, (R., Essex). The Acting Governor said:

"This bill will provide another weapon to combat emergency medical situations by the use of paramedics operating under the direction of a physician.

"It authorizes hospitals with full-time coronary care units to establish pilot programs in emergency mobile coronary care.

"The mobile intensive care paramedics will provide on-the-scene information concerning the patient to physicians and will perform the specific medical services which are necessary at the direction of the physician.

"The bill," the Acting Governor said, "establishes a State training program for these paramedics and requires that they be certified by the Board of Medical Examiners."

Under the legislation, the pilot program can last no more than five years. Each year the Commissioner of Health will report to the Legislature evaluating the effectiveness of each pilot project. Hospitals with full-time coronary care units can apply to the State Department of Health for approval to conduct a paramedics program.

"These pilot programs will bring lifesaving emergency procedures to the patient suffering from a coronary attack at the earliest possible time and will permit monitoring of the patient's vital signs by a physician during the critical period prior to arrival at a hospital," Acting Governor Beadleston said.

It was noted that the State funds appropriated in the bill will be sufficient only to cover the cost of developing a training program and provide training for the mobile intensive care paramedics.

"The success of these pilot projects," acting Governor Beadleston said, "depends on the willingness of private organizations and groups to help finance the cost of the necessary hardware and telemetry systems for any hospital desiring to conduct such a pilot project."

It was noted that the personnel who will primarily take the training program are those assigned to first aid squads or ambulance units operating by hospitals.

###