
SENATE COMMITTEE ON HEALTH

Senator Ed Hernandez, O.D., Chair

BILL NO: SB 1305
AUTHOR: Glazer
VERSION: February 16, 2018
HEARING DATE: April 4, 2018
CONSULTANT: Vincent D. Marchand

SUBJECT: Emergency preveterinary services: immunity

SUMMARY: Permits an emergency medical services provider to provide preveterinary emergency care, as specified, to a dog or a cat to the extent the provider has received commensurate training and is authorized by the employer to provide the care.

Existing law:

- 1) Establishes the Emergency Medical Services Authority (EMSA) within the California Health and Human Services Agency, and requires EMSA, among other things, to develop planning and implementation guidelines for emergency medical services systems which address specified components, including manpower and training, communications, transportation, system organization and management, data collection and evaluation, and disaster response. [HSC §1797.100 et. seq.]
- 2) Establishes the EMS Commission within the California Health and Human Services Agency, and requires the EMS Commission to review and approve regulations, standards and guidelines to be developed by EMSA for implementation of the EMS System and the Prehospital Emergency Medical Care Personnel Act. [HSC §1799 et. seq.]
- 3) Defines "Emergency Medical Technician-I" or "EMT-I" as an individual trained in all facets of basic life support, as specified. Defines an "Emergency Medical Technician-II," "EMT-II," "Advanced Emergency Medical Technician," or "Advanced EMT" as an EMT-I with additional training in limited advanced life support according to specified standards. Both EMT-Is and EMT-IIs are certified at the local level. [HSC §1797.170 and 1797.171]
- 4) Defines "Emergency Medical Technician-Paramedic," "EMT-P," "paramedic" or "mobile intensive care paramedic" as an individual whose scope of practice includes the ability to provide advanced life support, as specified, including administering specified medications. EMT-Ps are licensed and regulated at the state level through EMSA. [HSC §1797.172]
- 5) Limits the civil liability for any act or omission, other than an act or omission constituting gross negligence or willful or wanton misconduct, of any person who, in good faith and not for compensation, renders emergency medical or nonmedical care or assistance at the scene of an emergency (known as the Good Samaritan Law). [HSC §1799.102]
- 6) Limits the civil liability of various types of professionals who render emergency medical services at the scene of an emergency, including EMS providers, law enforcement officers, firefighters, and registered nurses, so that these professionals are only liable for acts or omissions performed in a grossly negligent manner or for acts or omissions not performed in good faith. Specifies that a public agency employing these personnel are not liable for civil damages if the person providing the emergency medical services is not liable. [HSC §1799.106]

- 7) Establishes the Veterinary Medicine Practice Act, and prohibits any person from practicing veterinary medicine unless the person holds a valid, unexpired, and unrevoked license as a veterinarian, or is the bona fide owner of the animal. [BPC §4811 and 4825]
- 8) Defines the practice of veterinary medicine as including, among other things, administering a drug, medicine, appliance, application, or treatment of whatever nature for the prevention, cure, or relief of a wound, fracture, bodily injury, or disease of animals. [BPC §4826]
- 9) Establishes that a violation of the Veterinary Medicine Practice Act is a misdemeanor, and is punishable by a fine of between \$500 and \$2,000, or by imprisonment in a county jail for up to one year, or both. [BPC §4831]

This bill:

- 1) Permits an EMS provider, notwithstanding any other law including the Veterinary Medicine Practice Act, to provide preveterinary emergency care to the extent the provider has received commensurate training and is authorized by the employer to provide the care.
- 2) Defines, for purposes of this bill, a “cat” as a small domesticated feline animal that is kept as a pet, and excludes from this definition nondomesticated wild animals, and defines “dog” as a domesticated canine animal.
- 3) Defines “EMS provider” as a person who is certified or licensed to provide EMS, and defines “employer” as an entity or organization that employs or enlists the services of an EMS provider.
- 4) Defines “preveterinary emergency care” to mean the immediate medical stabilization of a dog or cat by an EMS provider, in an emergency situation to which the EMS provider is responding, through means that include, but are not limited to, all of the following:
 - a) Administering oxygen;
 - b) Opening and manually maintaining an airway;
 - c) Giving mouth-to-snout or mouth-to-barrier ventilation;
 - d) Managing ventilation by mask;
 - e) Controlling hemorrhage with direct pressure;
 - f) Immobilizing fractures;
 - g) Bandaging; and,
 - h) Administering naloxone hydrochloride, if administering the drug is either in accordance with a written protocol established and provided by, or pursuant to a consultation with, a veterinarian licensed in this state.
- 5) Specifies that “preveterinary emergency care” is intended to enable the dog or cat to be transported as soon as practical to a veterinarian for treatment. Prohibits “preveterinary emergency care” from including care provided in response to an emergency call made solely for the purpose of tending to an injured dog or cat, unless a person’s life could be placed in danger attempting to save the life of the dog or cat.

- 6) Exempts an EMS provider and his or her employer from liability for civil damages, and specifies an EMS provider is not subject to criminal prosecution or professional disciplinary action, for an act or omission resulting from the provision of preveterinary care pursuant to this bill, unless the act or omission constitutes willful or wanton misconduct.
- 7) Exempts a licensed veterinarian who acts in good faith in accordance with this bill from liability for damages, and from any civil action, criminal prosecution, or professional disciplinary action, for an act or omission authorized by this bill.
- 8) Specifies that this bill, notwithstanding any other provision of law, does not impose a duty or obligation upon an EMS provider to provide care to a dog or cat.
- 9) Permits the employer's policies governing the provision of care to specify requirements governing the circumstances under which EMS providers are permitted to provide preveterinary emergency care to dogs and cats.
- 10) Makes various legislative findings and declarations, including that personnel of some fire districts and other first responder agencies currently provide stabilizing, life-saving emergency care to dogs and cats, which violates the Veterinary Medicine Practice Act, and that it is the intent of the Legislature to authorize EMS providers to provide, on a voluntary basis, emergency preveterinary care for dogs and cats in accordance with policies and procedures designed and implemented by the employers of those EMS providers.

FISCAL EFFECT: This bill has not been analyzed by a fiscal committee.

COMMENTS:

- 1) *Author's statement.* According to the author, current law does not allow personnel of fire districts and other first responder agencies to provide stabilizing, life-saving emergency care to dogs and cats. As a result, some first responders are hesitant to provide assistance due to liability for civil damages, criminal prosecution, or professional disciplinary action. The Veterinary Medicine Practice Act of the Business and Professions Code makes it unlawful for any person to practice veterinary medicine in California unless they are a licensed veterinarian. Any person who violates this Act is guilty of a misdemeanor punishable by a fine of \$500 to \$2,000, or by imprisonment in a county jail for up to one year, or by both a fine and imprisonment. This bill would allow first responders to provide pre-veterinary care for dogs and cats in accordance with policies and procedures designed and implemented by the employers of those first responders. Further, this bill protects first responders by making explicit that an EMS provider and his or her employer are not liable for civil damages, and an EMS provider is not subject to criminal prosecution or professional disciplinary action for administering pre-veterinary emergency care.
- 2) *Article on EMS treatment of dogs and cats involved in fires.* The Journal of Emergency Medical Services published an article in November of 2016, entitled "*EMS Assessment and Treatment of Dogs and Cats Involved in Fires.*" According to this article, given the high numbers of domesticated animals in the U.S. and the speed at which today's structure fires develop, the chance of encountering an injured pet on scene is very real. According to this article, any dog or cat exposed to smoke in a structure fire should receive oxygen therapy as soon as possible, and that many departments carry special oxygen masks on their EMS or fire apparatus that can be used on pets. This article notes that animals are unpredictable, and even a seemingly friendly animal will defend itself when it feels threatened or is injured, and that

the go-to defense mechanism in dogs and cats is to bite. With regard to legal considerations, an attorney and EMT/firefighter from Pennsylvania was quoted in the article saying that there has been “little to no litigation in the area of treating a pet in an emergency situation. It’s important to understand the specific laws of your state and to have a policy in place that was drafted with these laws in mind.”

- 3) *Similar law recently enacted in Ohio.* In 2016, Ohio enacted legislation that is very similar to this bill. The Ohio statute has the same list of medical interventions as proposed by this bill, and the immunity provisions are very similar. While the Ohio statute permits a veterinarian to establish written protocols with first responders, the only requirement to perform the listed interventions is that the EMS provider must be authorized to provide the corresponding form of the service on human patients.
- 4) *Triple referral.* This bill has been triple referred to the Committees on Health, Business, Professions and Economic Development, and Judiciary. Should it pass out of this Committee, it will be heard in the Senate Business, Professions and Economic Development Committee next.
- 5) *Related legislation.* AB 1776 (Steinorth) authorizes EMTs to provide emergency medical transportation for a police dog, as defined, injured in the line of duty to a facility capable of providing veterinary medical services if there is not a person requiring medical attention or medical transportation at the time. Provides immunity for civil damages resulting from an act or omission relating to an EMT’s transport of a police dog. *AB 1776 is pending in Assembly Health Committee.*
- 6) *Support.* The American Society for the Prevention of Cruelty to Animals (ASPCA) states in support that a guiding principle of ASPCA is that animals deserve freedom from pain, injury and disease by prevention or rapid diagnosis and treatment. Therefore, ASPCA supports this bill to alleviate or prevent unnecessary suffering of dogs and cats injured in emergency situations. The San Diego Humane Society (SDHS) and the San Francisco SPCA state in support that veterinarians are not among the personnel who respond to calls for emergencies like home fires, even though more California households include dogs and cats than children. The San Francisco SPCA and SDHS state that in San Francisco alone, of the more than 120,000 calls that the San Francisco Fire Department responds to each year, thousands of those calls involve firefighters rescuing animals trapped in burning structures. The San Francisco SPCA states that it led a fundraiser that led to outfitting by donation 70 fire department ambulances with lifesaving masks for dogs and cats. The California Fire Chiefs Association and the Fire Districts Association of California write in support that this bill is needed to allow first responders to provide preveterinary care if they choose to in accordance with policies and procedures designed by their employers.
- 7) *Support if amended.* The California Veterinary Medical Association (CVMA) is requesting several amendments that will ensure that the practice of veterinary medicine remains with licensed veterinary professionals, while also endeavoring to protect the safety of emergency responders, the public, and most importantly injured animals. CVMA states that it supports allowing first responders to administer oxygen to the cat or dog, and to control hemorrhage with direct pressure. According to CVMA, these tasks are more in line with “good Samaritan” first aid for animals, while the remainder of the tasks pose greater risk to the animal and the first responder and require extensive education and training beyond what can be provided in a certification course. CVMA states, for example, that setting/immobilizing a

fractured bone or opening and manually maintaining an airway are challenging tasks that should only be performed by a veterinary professional. CVMA states that veterinarians will attest that some of the worst bites and scratches they have received during their years in practice occur in the act of administering emergency care to animals, as the animals are frightened and react with a “fight or flight” behavior. CVMA also is requesting that the phrase “preveterinary emergency care” be replaced with a phrase such as “basic first aid,” as a “preveterinary” is not a term that is recognized in the Veterinary Medicine Practice Act, and does not believe it is acceptable to create a new category of care in the Act. Finally, CVMA points to provisions of the bill that permits EMS providers to act “notwithstanding any other law.” According to CVMA, this appears to exonerate EMS providers from any portion of the Veterinary Medicine Practice Act, which is not acceptable to CVMA.

8) *Policy comments.*

- a) *Training requirements unclear.* This bill permits an EMS provider to provide emergency care to dogs and cats “to the extent the provider has received commensurate training” and is authorized by the employer to provide the care. However, the bill does not define what is meant by “commensurate training,” nor does the bill specify which entity is to develop the training standards or provide the training. The existing training standards for EMS providers is generally developed by the EMS Commission and EMSA, but it is unclear if the author intends for this new training to be developed in the same manner. Further, the concept of establishing training standards to provide “preveterinary emergency care” suggests a new level of certification or license, and it is unclear if this is the author’s intent. If the goal is simply to provide “Good Samaritan” style immunity protection for EMS providers to voluntarily provide basic first aid to dogs and cats, then establishing training standards might not be necessary or appropriate.
- b) *Are the listed interventions appropriate for nonveterinarians?* As noted by CVMA, some of the tasks listed in this bill, such as immobilizing a fractured bone or opening and maintaining an airway can be challenging, and CVMA suggests that the tasks allowed to be performed be limited to more basic first aid tasks. This bill also specifically permits administering naloxone in accordance with a written protocol or consultation with a veterinarian. Naloxone is used to address drug overdoses, and this provision appears to be intended to assist dogs trained to detect drugs and other substances who overdose through inhaling narcotics. However, police officers and other trained handlers of these detection dogs are increasingly carrying naloxone that has been prescribed for their specific dog, and it is unclear whether this provision is necessary or appropriate.

SUPPORT AND OPPOSITION:

Support: American Society for the Prevention of Cruelty to Animals
California Fire Chiefs Association
Fire Districts Association of California
San Diego Humane Society
San Francisco SPCA

Oppose: None received