

American Academy of Pediatrics

DEDICATED TO THE HEALTH OF ALL CHILDREN®



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January 26, 2016

The Honorable Richard Hudson
U.S. House of Representatives
429 Cannon House Office Building
Washington, DC 20515

The Honorable G.K. Butterfield
U.S. House of Representatives
2305 Rayburn House Office Building
Washington, DC 20515

Dear Representative Hudson and Representative Butterfield:

On behalf of the American Academy of Pediatrics (AAP), a non-profit professional organization of 64,000 primary care pediatricians, pediatric medical subspecialists and pediatric surgical subspecialists, I write to offer our support for H.R. 4365, the *Protecting Patient Access to Emergency Medications Act of 2016*, legislation that ensures the continued ability of emergency medical services (EMS) to administer controlled substances to children who are sick or injured enough to need them.

An estimated ten percent of patients treated in emergency departments who arrive by EMS are under the age of eighteen.ⁱ Sixty percent of children suffer from conditions that may benefit from prehospital pain interventions.ⁱⁱ These conditions include fractured bones to burns of the skin. Opiate medications, morphine and fentanyl, are the only medications included in evidence-based guidelines for prehospital management of acute traumatic pain.ⁱⁱⁱ

Seizures are one of the three most common conditions encountered in children who seek care from EMS. Benzodiazepines, also controlled substances, are the only medications currently indicated for the emergent treatment of acute seizures.^{iv} It is well-known that the longer seizures persist, the harder they are to stop, which could lead to status epilepticus, respiratory failure, or death. Therefore, the ability of prehospital providers to treat seizures can be a matter of life and death.

H.R. 4365 will ensure that EMS providers can continue providing life-saving care to children when they need it. The AAP appreciates your leadership on the *Protecting Patient Access to Emergency Medications Act of 2016* and we look forward to working with you to see this legislation enacted. If you have any questions feel free to contact Tamar Magarik Haro in our Washington, DC office at tharo@aap.org or 202-347-8600.

Sincerely,

A handwritten signature in black ink, appearing to read "Benard P. Dreyer".

Benard P. Dreyer, MD, FAAP
President

BPD/tmh

ⁱ McLean SA, Maio RF, Domerier RM: The epidemiology of pain in the prehospital setting. *Prehospital Emergency Care* 2002;6:402-405.

ⁱⁱ Maio RF, Garrison HG, Spaite DW, Desmond JS, Gregor MA, Cayten CG, Chew JL, Hill EM, Joyce SM, MacKenzie EJ, Miller DR, O'Malley PJ, Stiell IG: Emergency medical services outcomes project I (EMSOP I): prioritizing conditions for outcomes research. *Annals of Emergency Medicine* 1999;33:423-432.

ⁱⁱⁱ Gausche-Hill M, Brown KM, Oliver ZJ, et al. An evidence-based guideline for prehospital analgesia in trauma. *PREHOSPITAL EMERGENCY CARE* 2014;18(Suppl 1):25-34.

^{iv} Shah MI, Macias CG, Dayan PS. An evidence-based guideline for pediatric prehospital seizure management using GRADE methodology. *PREHOSPITAL EMERGENCY CARE* 2014;18(Suppl 1):15-24.