



Legislation Text

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Int. No. 623-A

By Council Members Cohen, Holden, Ampry-Samuel, Levin and Rivera

A Local Law to amend the administrative code of the city of New York, in relation to requiring the fire department to submit to the council reports relating to the administration of opioid antagonists

Be it enacted by the Council as follows:

Section 1. Chapter 1 of title 15 of the administrative code of the city of New York is amended by adding a new section 15-136 to read as follows:

§ 15-136 Opioid antagonist report a. Definitions. For the purpose of this section, the following terms have the following meanings:

De-identified. The term “de-identified” means health information that cannot be used to identify an individual as established in section 164.514 of title 45 of the code of federal regulations.

Division. The term “division” has the same meaning as defined in section 15-129.

Opioid antagonist. The term “opioid antagonist” means naloxone, narcain or other medication approved by the New York state department of health and the federal food and drug administration that, when administered, negates or neutralizes in whole or in part the pharmacological effects of an opioid in the human body.

Patient. The term “patient” shall mean a person receiving emergency medical care and treatment from the department.

Patient information. The term “patient information” shall have the same meaning as set forth in section 18 of the public health law.

b. Beginning with the calendar quarter starting on January 1, 2019, the commissioner shall submit to the speaker of the council and the department of health and mental hygiene, within 25 days of the end of each quarter and post to the department’s website five days thereafter, a report compromised of de-identified patient

information relating to the administration of opioid antagonists.

c. Such report shall include:

1. The number of opioid antagonists the department has available, disaggregated by borough and division;

2. The number of emergency medical technicians and other first responders employed by the department that are trained to administer opioid antagonists, disaggregated by borough and division;

3. The number of instances in the quarter that an emergency medical technician or other first responder employed by the department administered an opioid antagonist to a patient, disaggregated by borough, division, and by method of administration, such as syringe injection or nasal atomizer; and

4. The number, expressed in both absolute terms and as a percentage of all administrations, of instances in which the patient responded to the administration of an opioid antagonist.

d. The report created pursuant to this section shall be provided within 30 days of the end of the quarter to which the report corresponds. Where necessary, the department may use preliminary data to prepare the required report. If preliminary data is used, the department shall include an acknowledgment that such preliminary data is non-final and subject to change.

§ 2. This local law takes effect 60 days after it becomes law.

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