SENATE DOCKET, NO. 299 FILED ON: 1/11/2019

SENATE . . . . . No. 1312

The Commonwealth of Massachusetts

PRESENTED BY:

Michael O. Moore

To the Honorable Senate and House of Representatives of the Commonwealth of Massachusetts in General Court assembled:

The undersigned legislators and/or citizens respectfully petition for the adoption of the accompanying bill:

An Act relative to timely care and saving lives.

PETITION OF:

NAME:	DISTRICT/ADDRESS:	
Michael O. Moore	*Second Worcester*	
William C. Galvin	*6th Norfolk*	*2/1/2019*

SENATE DOCKET, NO. 299 FILED ON: 1/11/2019

SENATE . . . . . No. 1312

By Mr. Moore, a petition (accompanied by bill, Senate, No. 1312) of Michael O. Moore and William C. Galvin for legislation relative to timely care and saving lives. Public Health.

The Commonwealth of Massachusetts

In the One Hundred and Ninety-First General Court
(2019-2020)

An Act relative to timely care and saving lives.

Be it enacted by the Senate and House of Representatives in General Court assembled, and by the authority of the same, as follows:

SECTION 1. Chapter 111 of the General Laws, as appearing in the 2016 Official Edition, is hereby amended, after Section 51J, by inserting the following new section:-

"Section 51K. No later than January 1, 2020, the department and the regional emergency medical services councils shall update their pre-hospital care protocols and point-of-entry plans related to the assessment, treatment and transport of stroke patients by licensed emergency medical services providers in this state. Such protocols shall include point of entry criteria and plans for the triage and transport of stroke patients who may have an emergent large vessel occlusion, to the most appropriate facility that offers advanced neuroendovascular treatment within a specified timeframe of onset of symptoms. For purposes of this section, hospitals offering neuroendovascular treatment shall mean "facilities with the capabilities to properly assess, diagnose using advanced imaging devices, and treat stroke patients with complex cases of ischemic stroke, including emergent large vessel occlusion caused by the loss of blood supply to a part of the brain, or hemorrhagic stroke, caused by bleeding into a part of the brain, and

requiring immediate treatment at a facility with a trained team of neurointerventional surgeons, vascular neurologists and assisting medical personnel and the ability to perform a mechanical thrombectomy 24 hours per day, seven days per week to treat the stroke. The department shall identify facilities that meet the criteria set forth in this section. After January 1, 2020, the department and regional emergency medical services councils shall annually review and update, if appropriate, their pre-hospital care protocols and point-of-entry plans to ensure stroke patients are transported to the most appropriate facility in accordance with this section."