



**Texas EMS Alliance Testimony:
House Select Committee on Opioids and Substance Abuse**

“Identify how opioids and substance abuse have impacted the normal scope of work for law enforcement, first responders, and hospital emergency department personnel.”

June 26, 2018

Presented by Ernesto Rodriguez, Austin-Travis County EMS, Chief

Good morning, Chairman Price and members of the committee. My name is Ernesto Rodriguez, and I am the chief of Austin-Travis County EMS. I serve as a board member of the Texas EMS Alliance, and I am here today representing the organization. The Texas EMS Alliance was founded in 2014 to serve as the unified voice of Texas EMS agencies, and it currently represents EMS agencies that provide 911 services to communities throughout Texas, including both urban and rural communities.

The Legislature did its homework when it chose to not limit the name and scope of this select committee to opioid abuse and chose to expand its examination to substance abuse in general. While opioids consume the headlines, EMS officials across the state are witnessing overdoses related to methamphetamine and other illegal drugs that are plaguing our communities. For example, here in Austin, we are responding to an average of 140 calls per month related to K2 synthetic marijuana overdoses.

I was asked by Chairman Price to focus on the experience of rural EMS when it comes to opioid overdoses. A number of rural EMS agencies make up TEMSA’s membership, and many of them responded to our call for information.

In March 2018, TEMSA conducted a survey of its members on the EMS response to opioid overdoses. Thirty-eight Texas EMS agencies that provide 911 services to Texas communities and represent a mix of rural and urban agencies responded. Many of the respondents provide 911 services to rural areas in the West Texas and Big Bend regions.

Only 11 percent of the respondents indicated that they had witnessed an increase in responses to opioid overdoses over the past 12 months. Seventy-nine percent responded that they had not witnessed a change over the same time period.

The following is a look at some of the statistics that were supplied in response to the survey:

- Big Bend region ambulance service, which features a population of approximately 2,500 in its response area and a call volume of approximately 300 per year, indicated that it has



only responded to one opioid overdose call, and that was in 2016. However, like many EMS agencies in the West Texas region, it indicated that it expects to see more opioid overdose calls as the oil field moves closer.

- Cooke County, which covers a mostly rural population, reported that of a recent dataset of 1,336 overall EMS responses, only two of those were related to opioid overdoses. They indicated that they are not seeing the level of opioid overdoses that other parts of the country are experiencing.
- Balmorhea EMS indicated that it had zero opioid overdose responses over the past year. Five years ago, it had five opioid overdose responses.
- An EMS agency that covers a rural West Texas county with a population of approximately 17,000 indicated that it featured approximately 96 opioid-related calls over a 10-year period.
- The City of Paris EMS, which provides service to Lamar County, indicated that it has approximately two opioid overdose responses each year. In comparison, the EMS agency indicated that it responds to K2 overdoses on a weekly basis.

One rural EMS agency in West Texas indicated that its opioid overdose responses tend to “move with the oil fields.” Another rural agency stated: “I believe that physicians have controlled the amount of opioids that they have prescribed, which has prevented an increase.”

It is important to note that some EMS agencies indicated that there are some cases in which it may be difficult for an EMS agency to determine whether a response was related to an opioid overdose or if it was related to a different substance. A patient may have multiple substances in their bodies, including opioids.

Closing

Thank you, Mr. Chairman, for the opportunity to provide the Texas EMS Alliance’s insight. I will be happy to entertain any questions.

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