

March 27, 2026

Representative Carol Hagan McEntee
Chairwoman
House Judiciary Committee
Rhode Island General Assembly

c/o Clerk Roberta DiMezza
HouseJudiciary@rilegislature.gov

Support for H7743

Dear Representative McEntee and members of the committee,

I, Evan Katz, am writing this letter to express my support for H7743, which has the potential to save lives. Anaphylaxis is a true medical emergency that requires administration of Epinephrine as quickly as possible once symptoms are observed. For Rhode Islanders, the initiative of having more access to Epinephrine is especially important as RI has the highest rate of food allergies in the US according to Food Allergy Research and Education, a non-profit organization that advocates for policy changes to ensure those with food allergies have better access, care and education.

I've worked as an EMT/Paramedic for over 15 years, first as a volunteer in Jamestown and for then, for the last 13 years, with the Newport Fire Department where I currently hold the rank of Lieutenant. During this time I have managed countless cases of anaphylaxis. Anecdotally, I've witness many cases escalate quickly. Anaphylaxis causes swelling in a person's airway that if not corrected with Epinephrine will cause the airway to completely close within minutes. Once an airway is occluded from swelling the only option to restore oxygen to the lungs is through a surgical cricothyrotomy. In order to receive this procedure a paramedic level provider working for a paramedic level service needs to be on scene to open a hole in the patient's neck in order to provide artificial ventilation. Currently in Rhode Island there are only a few paramedic level services including Newport, Portsmouth, East Providence, Woonsocket, Cumberland and South Kingstown. Guaranteeing that a paramedic level provider is available to perform this life saving maneuver is not possible, but increasing access to Epinephrine to prevent the allergic reaction from reaching the point of airway occlusion is a measure that would greatly reduce the chances of needing such an invasive procedure.

I also have personal stake in this bill. I have 2 sons at home who have severe food allergies. Our household has experienced multiple anaphylactic events. Were it not for our early recognition and prompt administration of Epinephrine the outcome could have been fatal. I shudder to think about what could have happened were this life saving medication not readily available. To that end, Epinephrine is an incredibly expensive medication. Just the other day I ordered 2 sets of Epi-Pens for Salve Regina where I work as their EMS Coordinator. The total cost was over \$1,000. For families without insurance living paycheck to paycheck they may not be able to

afford to replace their epinephrine delivery devices annually. Having police carry Epinephrine would allow this population to have more peace of mind knowing that there is a source within their community should they need it.

While anaphylaxis is often associated as being a food-induced disease there are other allergens that can incite a reaction. In fact, the other common allergens, mainly animal venom (bee stings) and medications, cause anaphylaxis symptoms to progress at a much faster rate. The average time from ingestion of a food allergen to death without intervention is 30 minutes. The average time from exposure to animal venom to death without intervention is 15 minutes, and the average time from exposure to a medication that causes anaphylaxis to death without intervention is 5 minutes.

As someone who is a strong advocate for EMS and advanced life support services I can admit that there is a flaw within our system, ambulance availability. While the vast majority of the municipalities in RI are adequately staffed there is still potential for long wait times for EMS to arrive. Take my home town of Jamestown for example, there is 1 ambulance that is staffed and ready to respond right away. Should a second call occur volunteers need to respond from home or work to get the ambulance to drive it to a call. Wait times for the ambulance to show up on scene could be 15+ minutes. A person in anaphylaxis does not have that kind of time. Police, however, are typically on the road, readily available and frequently arriving before EMS and fire to the scene of an emergency. Providing police with the ability to deliver a lifesaving medication to a person in need will save lives. Not many saves lives, will save lives. I strongly support this legislation and hope that you will too.

Thank you for your consideration.

Sincerely,

Evan Katz

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