

Union Calendar No.

119TH CONGRESS
2^D SESSION

H. R. 2004

[Report No. 119-]

To direct the Secretary of Health and Human Services to issue guidance on whether hospital emergency departments should implement fentanyl testing as a routine procedure for patients experiencing an overdose, and for other purposes.

IN THE HOUSE OF REPRESENTATIVES

MARCH 10, 2025

Mr. LIEU (for himself, Mr. LATTA, Ms. KAMLAGER-DOVE, Mr. GRIJALVA, Mr. CRENSHAW, Mr. BALDERSON, Mr. CISCOMANI, Mr. VALADAO, Mr. LAWLER, Ms. DAVIDS of Kansas, Ms. NORTON, Mr. KRISHNAMOORTHY, Mrs. CHERFILUS-McCORMICK, Ms. BARRAGÁN, Mr. VEASEY, Ms. TITUS, Ms. MCBRIDE, Mrs. DINGELL, Mr. BACON, and Mr. PETERS) introduced the following bill; which was referred to the Committee on Energy and Commerce

SEPTEMBER --, 2026

Committed to the Committee of the Whole House on the State of the Union,
and ordered to be printed

A BILL

To direct the Secretary of Health and Human Services to issue guidance on whether hospital emergency departments should implement fentanyl testing as a routine procedure for patients experiencing an overdose, and for other purposes.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as “Tyler’s Law”.

5 **SEC. 2. TESTING FOR FENTANYL IN HOSPITAL EMERGENCY**
6 **DEPARTMENTS.**

7 (a) STUDY.—Not later than 1 year after the date of
8 enactment of this Act, the Secretary of Health and
9 Human Services shall complete a study to determine—

10 (1) how frequently hospital emergency depart-
11 ments test for fentanyl (in addition to testing for
12 other substances such as amphetamines,
13 phencyclidine, cocaine, opiates, and marijuana) when
14 a patient is experiencing an overdose;

15 (2) the costs associated with such testing for
16 fentanyl;

17 (3) the potential benefits and risks for patients
18 receiving such testing for fentanyl; and

19 (4) how fentanyl testing in hospital emergency
20 departments may impact the experience of the pa-
21 tient, including—

22 (A) protections for the confidentiality and
23 privacy of the patient’s personal health informa-
24 tion; and

25 (B) the patient-physician relationship.

1 (b) GUIDANCE.—Not later than 6 months after com-
2 pletion of the study under subsection (a), based on the
3 results of such study, the Secretary of Health and Human
4 Services shall issue guidance on the following:

5 (1) Whether hospital emergency departments
6 should implement fentanyl testing as a routine pro-
7 cedure for patients experiencing an overdose.

8 (2) How hospitals can ensure that clinicians in
9 their hospital emergency departments are aware of
10 which substances are being tested for in their rou-
11 tinely-administered drug tests, regardless of whether
12 those tests screen for fentanyl.

13 (3) How the administration of fentanyl testing
14 in hospital emergency departments may affect the
15 future risk of overdose and general health outcomes.

16 (c) DEFINITION.—In this section, the term “hospital
17 emergency department” means a hospital emergency de-
18 partment as such term is used in section 1867(a) of the
19 Social Security Act (42 U.S.C. 1395dd(a)).