

119TH CONGRESS
2D SESSION

S. 921

AN ACT

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,*

1 **SECTION 1. SHORT TITLE.**

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

3 **SEC. 2. TESTING FOR FENTANYL IN HOSPITAL EMERGENCY**
4 **DEPARTMENTS.**

5 (a) STUDY.—Not later than 3 years after the date
6 of enactment of this Act, the Secretary of Health and
7 Human Services, acting through the Assistant Secretary
8 for Mental Health and Substance Use and in coordination
9 with other Federal departments, agencies, or stakeholders,
10 as appropriate, shall complete a study to determine—

11 (1) how frequently hospital emergency depart-
12 ments test for fentanyl or fentanyl-related sub-
13 stances when a patient is experiencing an overdose,
14 and test for other controlled substances related to
15 such an overdose;

16 (2) scenarios in which hospital emergency de-
17 partments do not administer tests for fentanyl or
18 fentanyl-related substances when a patient is experi-
19 encing an overdose, or for other controlled sub-
20 stances related to such an overdose;

21 (3) the costs associated with such testing for
22 fentanyl or fentanyl-related substances;

23 (4) the potential benefits and risks for patients
24 receiving such testing for fentanyl or fentanyl-re-
25 lated substances;

(5) potential staff training needs to support testing for fentanyl or fentanyl-related substances;

(6) how testing for fentanyl or fentanyl-related substances in hospital emergency departments may impact the experience of the patient, including—

(A) protections for the privacy and security of the patient’s protected health information (as defined in section 160.103 of title 45, Code of Federal Regulations (or any successor regulations)) under part 160 of title 45, Code of Federal Regulations, and subparts C and E of part 164 of title 45, Code of Federal Regulations (or any successor regulations); and

(B) the patient-health care professional relationship; and

(7) barriers that hospital emergency departments may encounter when trying to implement testing for fentanyl or fentanyl-related substances and recommendations on how best to address those barriers.

(b) GUIDANCE.—Not later than 9 months after completion of the study under subsection (a), based on the results of such study, the Secretary of Health and Human Services, acting through the Assistant Secretary for Mental Health and Substance Use and in coordination with

1 other Federal departments, agencies, or stakeholders, as
2 appropriate, shall issue guidance on the following:

3 (1) Whether hospital emergency departments
4 should implement testing for fentanyl or fentanyl-re-
5 lated substances as a routine procedure for patients
6 experiencing an overdose.

7 (2) How hospitals can ensure that health care
8 professionals in their hospital emergency depart-
9 ments are aware of which substances are being test-
10 ed for in their routinely-administered drug tests, re-
11 gardless of whether those tests screen for fentanyl or
12 fentanyl-related substances.

13 (3) How the administration of testing for
14 fentanyl or fentanyl-related substances in hospital
15 emergency departments may affect the future risk of
16 overdose and health outcomes.

17 (4) Available Federal resources that can assist
18 hospital emergency departments in implementing
19 testing for fentanyl or fentanyl-related substances.

20 (c) DEFINITIONS.—In this section, the term “hospital
21 emergency department” means an emergency department
22 of a hospital or an independent freestanding emergency
23 department (as such terms are defined in section 2799A—

1 1(a)(3) of the Public Health Service Act (42 U.S.C.
2 300gg-111(a)(3))).

Passed the Senate March 23, 2026.

Attest:

Secretary.

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