

**TITLE:** Health Care Providers and Extreme Risk Protective Orders in Oregon

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**STUDENT SUBMISSION:** No

**TOPIC/TARGET AUDIENCE:** Health Care Providers and Extreme Risk Protective Orders in Oregon. Topic is of specific interest to health care providers including physicians, nurse practitioners, nursing staff, social workers, case managers, psychologists, counselors. Additionally of

**ABSTRACT:** The implementation of Extreme Risk Protection Order (ERPO) statutes has been associated with reductions in firearm violence and suicide. Currently, 20 states and jurisdictions have passed ERPO or equivalent laws, yet awareness of these statutes and the provider's role in counseling patients and family remains poor. This presentation explores the published evidence supporting the role of ERPOs in addressing violence and suicide, including evidence suggesting efficacy in preventing mass shootings. The health care provider's role in approaching and advocating for ERPO petitions for at-risk individuals is explored, as is the argument for expanding current state-level statutes by granting ERPO petitioning powers to providers. Implications for public health includes increased awareness of opportunities to intervene and prevent firearm violence and suicide by novel legal means.

**OBJECTIVE(S):** Explain the role of Extreme Risk Protection Orders in addressing risk of firearm violence and suicide. Evaluate evidence supporting ERPO efficacy on a state-level basis. Critically analyze Oregon's implementation of the ERPO statute and identify the health care provider's role. Assess ways in which broader implementation of Oregon's ERPO statute would address violence and suicide risk.

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