

Legislative Analysis



BLEEDING CONTROL MEASURES

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<http://www.house.mi.gov/hfa>

House Bill 4107 as reported from committee
Sponsor: Rep. Mike Harris

Analysis available at
<http://www.legislature.mi.gov>

House Bill 4108 (H-2) as reported from committee
Sponsor: Rep. Dave Prestin

House Bill 4847 as reported from committee
Sponsor: Rep. Steve Frisbie

Committee: Health Policy
Complete to 9-24-25

SUMMARY:

House Bill 4107 would amend the Revised School Code to expand the health education standards for students in grades 7 to 12 to include instruction on the use of first aid response kits for severe bleeding.

The act currently requires the Michigan Department of Education (MDE) to ensure that academic curriculum content standards for health education include instruction in cardiopulmonary resuscitation (CPR) and automated external defibrillators (AEDs) for students in grades 7 to 12.

The bill would add a requirement for instruction developed by nationally recognized programs such as Stop the Bleed or the American College of Surgeons Committee on Trauma or another program considered appropriate by the department concerning the use of first aid response kits. The kits would have to contain at least the following:

- A tourniquet.
- Bleeding control dressings.
- Compression bandages.
- Latex-free protective gloves.
- Trauma shears.
- A marker.
- A copy of instructions on the use of the kit.

The bill would strongly encourage the inclusion in the instruction of hands-on practice of CPR and first aid response skills for students who are physically able to participate.

Finally, the act encourages schools to use locally available resources to provide health education instruction, such as EMTs, paramedics, police officers, firefighters, representatives of the American Heart Association or American Red Cross, or properly trained teachers or other school employees. The bill would add licensed registered nurses (including school nurses) to this list of examples, and revise the last item to refer to properly trained teachers or other school employees *who are trained as Stop the Bleed instructors*.

Proposed MCL 380.1170a

House Bill 4108 would amend the Good Samaritan Act to extend civil liability protection to individuals who voluntarily provide bleeding control in an emergency.

The act currently shields certain individuals from liability when they administer emergency care in specific situations. The bill would add protection from liability for damages for anyone who, in good faith and under no obligation to do so, assists in an emergency medical situation by applying bleeding control measures such as:

- Direct pressure.
- Applying a dressing.
- Wound packing.
- Using a tourniquet.

However, the immunity from liability proposed by the bill would not extend to an act or omission that constitutes gross negligence or willful or wanton misconduct.

The bill cannot take effect unless House Bill 4847 is also enacted.

Proposed MCL 691.1508

House Bill 4847 would amend 2006 PA 23, which regulates certain health clubs with respect to potential medical emergencies, to ensure consistency with the Good Samaritan Act.

The act generally requires health clubs to have an automated external defibrillator (AED) available on the premises; employ at least one individual who has learned basic first aid, basic CPR, and AED use; and have a plan to address medical emergencies during the hours of operation. However, the act states that it does not create a duty to use the health club's AED to render emergency service to an individual. The act also says that nothing in it limits the liability protections provided under the Good Samaritan Act.

The bill would amend the above provisions to ensure that the reference to the Good Samaritan Act includes the liability protections related to bleeding control proposed by House Bill 4108.

The bill cannot take effect unless House Bill 4108 is also enacted.

MCL 333.26313

BACKGROUND:

Uncontrolled bleeding is a leading cause of preventable death in trauma. In the critical minutes before emergency medical services arrive, bystander intervention (such as direct pressure, wound packing, or tourniquet use) can make the difference between life and death. Programs such as Stop the Bleed, developed by the U.S. Department of Defense and managed by the American College of Surgeons, aim to teach laypeople these simple but effective steps so they can act without hesitation.¹

¹ <https://www.stopthebleed.org/>

House Bills 4107, 4108, and 4847 would expand health education, equipment placement, and liability protection related to bleeding control.

With regard to liability issues, Michigan's Good Samaritan Law currently protects certain emergency interventions, but it does not explicitly address bleeding control measures. This legal gap has raised concerns that trained bystanders, including school staff and students, might hesitate to act out of fear of liability.² In committee testimony, a representative of Stop the Bleed testifying in support of the bills indicated that participants in blood control training often ask whether they would be legally protected when intervening. Another individual shared a personal experience in which her husband sustained a severe wound from a falling branch. Because she had undergone Stop the Bleed training, she attempted to apply a tourniquet, but encountered difficulties, and soon a neighbor stepped in to assist with bleeding control. She attributed her husband's survival, in part, to that neighbor's decisive action, but noted that under current law, the neighbor's intervention may not have been protected from liability.

Supporters of the bills emphasized that the unifying purpose of providing training, access to equipment, and protection from liability is to "equip individuals to act quickly to save lives without fear of hesitation," noting that "The only thing more tragic than a death is a death that could have been prevented."

FISCAL IMPACT:

House Bill 4107 would have no fiscal impact on the state or on local school districts, intermediate school districts (ISDs), or public school academies (PSAs).

House Bill 4108 could have an indeterminate fiscal impact on the state and on local units of government depending on the number and circumstances of acts or omissions that constitute gross negligence or willful and wanton misconduct, and the extent to which the offenses result in civil or criminal liability. Because there is no way to determine the number of acts or omissions that would occur, there is no way to estimate a fiscal impact. The fiscal impact on local court systems would depend on how provisions of the bill affect court caseloads and related administrative costs.

House Bill 4847 would have no fiscal impact on the state or on local units of government.

POSITIONS:

Representatives of Stop the Bleed testified in support of the bills. (9-10-25)

The following entities indicated support for the bills (9-10-25):

- Michigan Health and Hospital Association
- Michigan Sheriffs' Association
- Michigan Trauma Coalition

The Michigan Organization on Adolescent Sexual Health indicated support for House Bill 4107. (9-17-25)

² <https://mitrauma.org/>

The Department of Health and Human Services indicated support for House Bill 4108.
(9-17-25)

The Michigan Association for Justice indicated opposition to House Bill 4847. (9-10-25)

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■ This analysis was prepared by nonpartisan House Fiscal Agency staff for use by House members in their deliberations and does not constitute an official statement of legislative intent.