

FACT SHEET

GEORGIA OVERDOSE GOOD SAMARITAN LAW

BACKGROUND

Drug overdose is a continuing public health crisis that claimed the lives of nearly 1,700 Georgians in 2025.¹ Timely access to emergency care in an overdose saves lives and can reduce other overdose-related health harms. Unfortunately, many people hesitate to call for medical assistance in an overdose because they fear that doing so will result in themselves or the person overdosing being arrested or subject to other negative criminal-legal consequences.² These fears are often justified. In Indianapolis, for example, 10% of overdose calls result in someone [being incarcerated](#).³ Nationwide, around 20% of law enforcement agencies report that overdose calls [result in incarceration](#).⁴

To address this problem, many states have passed overdose Good Samaritan Laws. Sometimes called “Medical Amnesty Laws,” these measures provide protections from consequences such as arrest, charge, prosecution and parole and probation violations for certain offenses, usually related to possession of controlled substances or drug paraphernalia. Each state’s law is somewhat different, although studies suggest that laws that provide more protection are more effective in reducing overdose-related harm than those that provide more limited protection.⁵

“Lack of awareness and trust in GSL protections, as well as fear of police involvement and legal repercussions, remain key deterrents to help-seeking.”

T. N. Townsend, et al., *Use of an Inverted Synthetic Control Method to Estimate Effects of Recent Drug Overdose Good Samaritan Laws, Overall and by Black/White Race/Ethnicity*, 191 AM J EPIDEMIOL, (2022).

GEORGIA’S GOOD SAMARITAN LAW

Georgia has had an overdose Good Samaritan Law since 2014. Termed the Georgia 9-1-1 Medical Amnesty Law, it is intended to encourage people to seek emergency assistance in an overdose by providing immunity from certain criminal consequences to people who seek medical assistance for themselves or another person experiencing or believed to be experiencing a drug overdose and to the person experiencing or believed to be experiencing the overdose.⁶

Under the law, any person who, in good faith, seeks medical assistance for someone experiencing or believed to be experiencing a drug overdose generally cannot be arrested, charged, or prosecuted for specified drug violations if the evidence for the arrest, charge, or prosecution resulted solely from seeking such medical assistance. The law also provides protection against penalties for violations of protective orders or restraining orders, and from sanctions for violations of pretrial release, probation or parole conditions based on a drug violation. The law also protects a person experiencing an overdose who, in good faith, seeks medical assistance for themselves or is the subject of a request for medical assistance so long as the statute’s requirements are met.⁷

The protection from arrest, charge, and prosecution applies to violations of the following:

- **Georgia Code Section 16-13-30(a)** for possession of controlled substances in amounts covered by the statute, including less than four grams of a solid substance, less than one milliliter of a liquid substance, or a substance placed onto a secondary medium with a combined weight of less than four grams;⁸
- **Georgia Code Section 16-13-30(j)(1)** for possessing less than an ounce of marijuana; and
- **Georgia Code Section 16-13-32.2** for possessing or using drug paraphernalia.

The law defines “seeks medical assistance” in a specific way. A person must either call or assist in calling 9-1-1 or contact or assist in contacting law enforcement or a poison control center. They must also provide care to the person experiencing the overdose while waiting for medical assistance to arrive.⁹

SUMMARY

The effectiveness of Georgia's 9-1-1 Medical Amnesty Law depends on knowledge of its components as well as its implementation and enforcement. Law enforcement officers, prosecutors, judges, public defenders, and private criminal defense attorneys should be familiar with the law's protections, understand when they apply, and ensure that the law is followed. Because individuals who may witness or experience an overdose cannot make informed decisions about seeking emergency assistance based on protections they do not know about, public education should focus on ensuring that all relevant parties have accurate information about this important law.

In summary, if a person, in good faith, calls or assists in calling 9-1-1, contacts or assists in contacting law enforcement or a poison control center, and provides care to a person experiencing or believed to be experiencing a drug overdose while awaiting medical assistance, the person generally cannot be arrested, charged, or prosecuted for certain drug violations if the evidence for the arrest, charge, or prosecution resulted solely from seeking medical assistance. These protections cover possession of small amounts of controlled substances, possession of less than one ounce of marijuana, and possession or use of drug-related objects. The law also provides protection from penalties for violations of permanent or temporary protective orders or restraining orders, and from sanctions for violations of conditions of pretrial release, probation, or parole based on a drug violation.

This document was developed by Ashleigh Dennis, J.D. and Corey S. Davis, J.D. M.S.P.H., Network for Public Health Law – Harm Reduction Legal Project (harmreduction@networkforphl.org). The Network promotes public health and health equity through non-partisan educational resources and technical assistance. These materials provided are provided solely for educational purposes and do not constitute legal advice. The Network's provision of these materials does not create an attorney-client relationship with you or any other person and is subject to the [Network's Disclaimer](#).

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¹ Georgia Dep't of Pub. Health, Off. of Health Indicators for Planning, Georgia Annual Health Status Measures: 2026, Deaths from Drug Overdoses, Georgia, 2000–2025 (Sept. 9, 2026), available at <https://oasis.state.ga.us/oasis/ahsm/data/Georgia%20Annual%20Health%20Status%20Measures%202026.pdf>.

² See S. Koester, et al., *Why are some people who have received overdose education and naloxone reticent to call Emergency Medical Services in the event of overdose?*, 48 INT J DRUG POLICY (2017); A. D. Latimore & R. S. Bergstein, *"Caught with a body" yet protected by law? Calling 911 for opioid overdose in the context of the Good Samaritan Law*, 50 INT J DRUG POLICY (2017).

³ B. Ray, et al., *Prevalence and correlates of incarceration following emergency medical services response to overdose*, 238 DRUG ALCOHOL DEPEND (2022).

⁴ N. Richardson, et al., *National survey findings on law enforcement agency drug response practices, overdose victim outcomes, and Good Samaritan Laws*, 248 DRUG ALCOHOL DEPEND (2023).

⁵ L. Hamilton, et al., *Good Samaritan laws and overdose mortality in the United States in the fentanyl era*, 97 INT J DRUG POLICY (2021).

⁶ See Ga. Code Ann. § 16-13-5.

⁷ The Georgia Court of Appeals held in *State v. Mercier*, 349 Ga. App. 536, 539 (2019) (physical precedent only), that the caller need not subjectively believe that the person is experiencing a drug overdose for the statute's protections to apply. In *Mercier*, bystanders called 911 about an unconscious man without identifying an overdose, and the court nevertheless concluded that the overdose victim was entitled to immunity. Subsequently, in *Purdee v. State*, 376 Ga. App. 836 (2025), the Court of Appeals held that, when an overdose victim is the subject of another person's request for assistance, the person making the request must "provide care" to the victim while awaiting medical assistance, as required by § 16-13-5(a)(4).

⁸ Ga. Code Ann. § 16-13-5(a)(2)(A).

⁹ "Seeks medical assistance" means accesses or assists in accessing the 9-1-1 system or otherwise contacts or assists in contacting law enforcement or a poison control center and provides care to a person while awaiting the arrival of medical assistance to aid such person." Ga. Code Ann. § 16-13-5(a)(4). "Provides care" is not otherwise defined.