
Education Committee

ESB 5104

Brief Description: Placing epinephrine autoinjectors in schools.

Sponsors: Senators Mullet, Frockt, Hatfield, Litzow, Ericksen, Fain and Kohl-Welles.

Brief Summary of Engrossed Bill

- Permits school districts and schools to maintain a supply of epinephrine autoinjectors, including those that are prescribed by a physician in the name of the school district or school.
- Permits school nurses and designated trained school personnel to administer epinephrine autoinjectors and carry them on school trips away from school property.
- Limits liability for prescribing physicians or pharmacists and school employees if students are harmed due to the administration of epinephrine, unless there was a conscious disregard for human safety.
- Indicates that schools, school districts, and the Office of the Superintendent of Public Instruction (OSPI) are not responsible for injuries caused by the administration of epinephrine.

Hearing Date: 3/14/13

Staff: Luke Wickham (786-7146).

Background:

Anaphylaxis.

Anaphylaxis is a serious allergic reaction that is rapid in onset and might cause death. Symptoms may include throat swelling, an itchy rash, and low blood pressure. The causes of this allergic reaction may include medication, food, and insect bites or stings. The World Health Organization classifies epinephrine as an essential medication for the treatment of anaphylaxis. An epinephrine autoinjector is a delivery system that contains the proper dose of epinephrine and

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is used to treat anaphylaxis. These autoinjectors are disposable and supply the epinephrine through a spring-loaded syringe.

Guidelines for Care of Students with Anaphylaxis.

RCW 28A.210.380 directs the Office of the Superintendent of Public Instruction (OSPI), in consultation with the Department of Health, to develop policy guidelines for schools to prevent anaphylaxis and deal with medical emergencies resulting from it. These guidelines were developed and distributed in March 2009. The statute further requires that school districts use the guidelines to develop and adopt a policy to assist schools in prevention of anaphylaxis.

Summary of Bill:

School districts and nonpublic schools are allowed to maintain a supply of epinephrine autoinjectors at schools. Physicians may prescribe epinephrine autoinjectors in the name of the school district or school that can be maintained for use at the school. Epinephrine prescriptions must have a standing physician's order for the administration of school-supplied, undesignated epinephrine autoinjectors for potentially life-threatening allergic reactions. Epinephrine autoinjectors may be donated to schools, but must be accompanied by a physician's prescription.

If a student does not have a prescription for epinephrine, the school nurse or designated trained school personnel may administer an epinephrine autoinjector maintained by the school to respond to an anaphylactic reaction under a standing protocol from a physician. Epinephrine autoinjectors may be used on school property, including the school bus, and during sanctioned trips away from school property. The school nurse or designated trained school personnel may carry epinephrine autoinjectors on these trips.

If a student is harmed due to the administration of epinephrine:

- physicians and pharmacists may not be liable for the injury unless he or she issued the prescription with a conscious disregard for safety; and
- school employees who administer epinephrine may not be liable for the injury if they act in good faith professionally and according to his or her training level, but may be held liable if he or she administers the epinephrine with a conscious disregard for safety.

School employees, except licensed nurses, who do not agree in writing to using epinephrine autoinjectors as part of their job description, may file with the school district a written letter of refusal to use epinephrine autoinjectors. This letter may not serve as grounds for actions negatively affecting the employee's contract status.

Schools, school districts, nonpublic schools, and the OSPI are not responsible for injuries caused by the administration of epinephrine.

Appropriation: None.

Fiscal Note: Available.

Effective Date: The bill takes effect 90 days after adjournment of the session in which the bill is passed.