CHAPTER 52

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(HB 172)

AN ACT relating to emergency anaphylaxis medications in schools.

WHEREAS, nearly 6 million American children have food allergies, more than 15 percent of school-aged children with food allergies have had a reaction in school, and many of these children are at risk of anaphylaxis, a systemic allergic reaction that can lead to death within minutes; and

WHEREAS, the National Institutes of Health recommends treating anaphylaxis immediately after symptoms begin with an intramuscular injection of epinephrine because delayed administration of epinephrine is the most predictive risk factor for prolonged or fatal anaphylaxis; and

WHEREAS, epinephrine auto-injectors are life-saving for individuals with severe allergic, anaphylactic reactions. Epinephrine is safe and easy to administer. It is dispensed in a pre-measured dosage through an auto-injector containing a spring-loaded needle that is enclosed before administration and automatically retracts following an injection; and

WHEREAS, the delay in the administration of epinephrine in a life-threatening anaphylactic reaction that may occur from storing the devices only in the front office, in the nurses' office, or when students are in other locations and their devices are in the classroom, could potentially lead to a fatal outcome for a student with anaphylaxis; and

WHEREAS, rapid administration of epinephrine is critical for effective treatment of anaphylaxis; and

WHEREAS, as Kentucky schools continue to improve their preparedness to address children who are at risk of having an anaphylactic reaction in the school environment or a school-sponsored activity, it is imperative that the epinephrine delivery devices be kept in the classroom, with the teachers, or with the students and in key locations in the school to serve as emergency backup for ready access, as these reactions may occur because of inadvertent ingestion or contact reaction of a food allergen;

NOW, THEREFORE,

Be it enacted by the General Assembly of the Commonwealth of Kentucky:

- → Section 1. KRS 158.836 is amended to read as follows:
- (1) Upon fulfilling the requirements of KRS 158.834, a student with asthma or a student who is at risk of having anaphylaxis may possess and use medications to treat the asthma or anaphylaxis when at school, at a school-sponsored activity, under the supervision of school personnel, or before and after normal school activities while on school properties including school-sponsored child care or after-school programs.
- (2) A student who has a documented life-threatening allergy shall have:
 - (a) An epinephrine auto-injector provided by his or her parent or guardian in his or her possession or in the possession of the school nurse, school administrator, or his or her designee in all school environments that the student may be in, including the classroom, the cafeteria, the school bus, and on field trips; and
 - (b) A written individual health care plan in place for the prevention and proactive management for the student in all school environments that the student may be in, including the classroom, the cafeteria, the school bus, and on field trips. The individual health care plan required under this paragraph may be incorporated in the student's individualized education program required under Pub. L. 94-142 or the student's 504 plan required under Pub. L. 93-112.
- (3) (a) Each school is encouraged to keep an epinephrine auto-injector in a minimum of two (2) locations in the school, including but not limited to the school office and the school cafeteria, so that epinephrine may be administered to any student believed to be having a life-threatening allergic or anaphylactic reaction. Schools electing to keep epinephrine auto-injectors shall maintain them in a secure, accessible, but unlocked location. The provisions of this paragraph shall apply to the extent that the epinephrine auto-injectors are donated to a school or a school has sufficient funding to purchase the epinephrine auto-injectors.
 - (b) Each school electing to keep epinephrine auto-injectors shall implement policies and procedures for managing a student's life-threatening allergic reaction or anaphylactic reaction developed and approved by the local school board.

- (c) The Kentucky Department for Public Health shall develop clinical protocols in the school health section of the Core Clinical Service Guide manual that is maintained in the county or district public health department to address epinephrine auto-injectors kept by schools under this subsection and to advise on clinical administration of the epinephrine auto-injectors. The protocols shall be developed in collaboration with local health departments or local clinical providers and local schools and local school districts.
- (4) Any school employee authorized under KRS 156.502 to administer medication shall not be liable for any civil damages for ordinary negligence in acts or omissions resulting from the administration or the assistance in the administration of epinephrine to any student believed in good faith to be having a lifethreatening allergic or anaphylactic reaction.

Signed by Governor March 21, 2013.