

Testimony to the House Education Committee – January 30, 2020 In support of HOUSE BILL No. 2488: Authorizing schools to maintain supplies of certain emergency medications and to administer such medication in emergency situations.

Chairman Huebert and members of the House Committee on Education, I want to thank you for the opportunity to provide you with information about the need for an update to the legislation allowing school districts to stock epinephrine for emergency use in the event of anaphylaxis and the need to include stock albuterol for emergency use for severe respiratory distress.

## Background:

Kansas schools care for a major portion of our population five days per week throughout the school year. School nurses are on the front line of health care in the school setting and must be equipped with supplies to attend to the most common life-threatening situations. Emergency devices including emergency medications are becoming increasingly common in schools, since they help to fill in the gap from the time an emergency health event is detected and emergency help arrives. Stock epinephrine and stock albuterol assist in emergencies for individuals that display the signs and symptoms of either a severe allergic reaction or respiratory distress. Seconds count during anaphylaxis and breathing emergencies and rapid response can make the difference between life and death for these individuals. Access to evidence-based, lifesaving medications are necessary for Kansas schools (Galemore, 2019).

In 2009, Kansas passed K.S.A. 72-6283 (was 8258), K.S.A. 65-1680, and K.S.A. 65-2872b that allowed epinephrine kits to be stocked in schools for use in emergencies involving life-threatening allergies. However, while allowing for stock epinephrine, it required, not only a physician order for the medication, but also required the establishment of a consultant pharmacist with supervisory responsibility to maintain the epinephrine kits. Also lacking, was protection from civil liability for physicians and pharmacists who collaborate with school districts to provide these services.

Few schools in Kansas have been able to establish the requisite partnerships to implement Epinephrine kits in schools due to these requirements. Therefore, Kansas School Nurses Organization (KSNO), proposes updated legislation to remove barriers to implementation while maintaining legal medical and nursing practice standards. At the same time, the need for stock albuterol for respiratory distress has been recognized in many states and KSNO recommends addressing this additional emergency medication in this proposed legislation.

**Supporting Data:** It is estimated that 4 to 6% of children in the U.S. have food allergies (Centers for Disease Control and Prevention [CDC], 2018c). Nearly 40% of children with food allergies have a history of experiencing at least one serious reaction including anaphylaxis (Gupta et al, 2011). Initial studies show that 20% to 25% of anaphylactic episodes in schools

involved individuals with no known history of severe allergies (McIntyre, Sheetz, Carroll, & Young, 2005). Administering epinephrine and calling 911 are the standard of care for individuals exhibiting symptoms of anaphylaxis in the school and community setting (Schoessler & White, 2013). Fifty-five doses of epinephrine were administered to Kansas students under emergency circumstances to save lives in the 2017-2018 school year according to the KDHE School Nurse Survey Summary (KDHE, 2019)

With regard to asthma, it is estimated that 8.4% of children and 7.5% of adults have asthma (CDC, 2019). Asthma is the leading chronic disease in children (CDC, 2018a) and is the top reason for missed school days (Zahran, et al., 2018). In 2015, 47.5 percent of children age 18 and younger who had asthma reported having one or more asthma attacks in the previous year (CDC, 2018b).

Table 1 – Kansas Students with Asthma and Life-threatening Allergy (KDHE, 2019)

2017-2018	Asthma	Life-threatening Allergy
Kansas Students	21,042	7,179
	(6.9%)	(2.3%)

**Summary:** Kansas students need access to the life-saving emergency medications that are the standard of care across the United States for anaphylaxis and breathing emergencies, epinephrine and albuterol. These medications will both save lives and assist school nurses and trained designated school personnel in managing two of the chronic illnesses that impact student health and diminish student readiness to learn and academic performance.

On behalf of Kansas School Nurses Organization, I strongly support this bill.

Respectfully submitted,

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