

Testimony in Support of HB 2547

March 12, 2024

Chairwoman Gossage and Members of the Senate Committee on Public Health & Welfare,

On behalf of the Kansas Chapter of the American Academy of Pediatrics (KAAP) and representing pediatricians throughout Kansas, I am writing to express the KAAP's support for HB 2547 which allows schools to maintain emergency medication kits for life-threatening conditions, specifically severe allergic reactions such as anaphylaxis and asthma exacerbations. This bill also provides requirements for emergency response protocols and training for school personnel to administer these stock medications. This bill will provide trained staff access to emergency medications and allow them to urgently respond to medical emergencies. This will improve the health and safety of students in Kansas schools.

Anaphylaxis is a severe and life-threatening allergic reaction that can occur within seconds or minutes after exposure to an allergen. The administration of an epinephrine auto-injector as soon as anaphylaxis is identified is critical to preventing severe harm and even death from anaphylaxis. Food allergies affect about 8% of children in the US and children are more likely to experience a severe reaction or anaphylaxis than adults¹. Sometimes the allergen is known but often the trigger is unknown. Schools currently rely on individual students to have their own epinephrine prescription, either held in the nurse's office or self-carried by older students. However, this leaves an enormous gap in addressing anaphylaxis in schools as about 25% of anaphylactic events in schools occur in students with no prior history of allergies². In fact, when the Illinois Department of Health implemented stock epinephrine in schools in 2014-2015, 58% of the administrations were in persons without a previous history of severe allergy or access to epinephrine³. Epinephrine is a safe and effective medication to reverse anaphylaxis and stop the progression to severe outcomes and death.

An **Asthma Exacerbation** is severe respiratory distress in a child with asthma and can include shortness of breath, wheezing and hypoxia. Children can experience a sudden, life-threatening exacerbation at any time and timely access to albuterol can be lifesaving and prevent the exacerbation from progressing to the point of hospitalization and intensive care. However, there are a variety of reasons why a student may not have access to their own prescribed albuterol at school or be able to use it when it is needed most. Some school district surveys note that fewer than 20% of students with asthma had their inhaler at school⁴. When a school district in Arizona implemented stock albuterol in schools, in the first year they saw 20% fewer 911 calls and 40% less EMS transports than the prior year^{5,6}. Beyond acute exacerbations, asthma is a leading cause of chronic absenteeism and loss of student learning days. Stock Albuterol helps students stay in school, actively learning. A report from Missouri of 1720 stock albuterol administrations reported that 84.5% of students returned to class after receiving the medication^{6,7}. Similarly, a program in Arizona, which included 229 schools accounting for 1038 stock medication administration events led to 83.9% of students returning to class, 15.6% being sent home and fewer than 1% needing EMS assistance⁸.

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But this type of legislation isn't new as every state has legislation pertaining to stock epinephrine in schools and at least 18 states have laws or guidelines to allow stock albuterol in schools. These medications are safe and there are validated toolkits and implementation guides for schools that address obtaining the medication, storage, training, protocols to ensure appropriate and effective use. Yet, Kansas students are missing out on access to these life-saving emergency medications due to barriers that this legislation addresses.

Although our state has legislation for stock epinephrine in schools, current legislation requires that a school have a consultant pharmacist that supervises and maintains the control of the stock medication. The Kansas Board of Pharmacy has yet to adopt regulations on this topic.

Most other states have not required consulting pharmacist oversight and allow pharmacists to dispense these medications to schools for stock use from a physician order or other programs. Few Kansas schools have implemented stock epinephrine kits due to these regulations. HB 2547 addresses this barrier.

Another barrier is lack of protections for trained persons who are acting in good faith and providing emergency care and administration of these medications. Protections for the school nurse and school staff responding to the medical emergency as well as the physician or mid-level practitioner and pharmacist that prescribed and dispensed the medications will allow physicians, pharmacists, school nurses and other school leaders to work together to create policies and procedures for the use of these lifesaving medications in schools. HB 2547 addresses this barrier.

As practicing pediatricians, we frequently see firsthand how access to and timely administration of these emergency medications is crucial to giving children the best chance to recover from their acute health emergency, decrease severity and improve outcomes. This has been shown as more schools and non-medical community locations have increased access to naloxone and epinephrine auto-injectors to save lives. Many schools have trained and certified school nurses with the skills and expertise to respond to acute medical emergencies and train emergency response teams. Yet, without stock medications, schools must rely on local EMS services. Throughout Kansas, access to these medications is even more crucial for students in rural areas of the state that do not have rapid access to EMS Services. Allowing trained staffed in schools to administer these medications within the regulations of their policies and procedures while awaiting EMS arrival will save lives and prevent severe health outcomes from these medical conditions that are common in children.

Thank you for your time and consideration for passing this legislation that will allow schools to be prepared for emergencies with stock epinephrine and albuterol.

Respectfully submitted,
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References:

1. Gupta RS, Warren CM, Smith BM, Blumenstock JA, Jiang J, Davis MM, Nadeau KC. The Public Health Impact of Parent-Reported Childhood Food Allergies in the United States. *Pediatrics*. 2018 Dec;142(6):e20181235. doi: 10.1542/peds.2018-1235. Epub 2018 Nov 19. Erratum in: *Pediatrics*. 2019 Mar;143(3): PMID: 30455345; PMCID: PMC6317772.
<https://pubmed.ncbi.nlm.nih.gov/30455345/>
2. White MV, Hogue SL, Odom D, et al. Anaphylaxis in Schools: Results of the EPIPEN4SCHOOLS Survey Combined Analysis. *Pediatr Allergy Immunol Pulmonol*. 2016;29(3):149-154. doi:10.1089/ped.2016.0675 <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5314730/>
3. Illinois State Board of Education. Report of use of undesignated epinephrine school year 2014-15. 2016. Available at: <https://www.isbe.net/Documents/epinephrine-use-report14-15.pdf>.
4. Volerman A, Lowe AA, Pappalardo AA, et al. Ensuring Access to Albuterol in Schools: From Policy to Implementation. An Official ATS/AANMA/ALA/NASN Policy Statement. *Am J Respir Crit Care Med*. 2021;204(5):508-522. doi:10.1164/rccm.202106-1550ST
<https://ncbi.nlm.nih.gov/pmc/articles/PMC8491259/>
5. Gerald LB, Snyder A, Disney J, Gerald JK, Thomas A, Wilcox G, Brown MA. Implementation and Evaluation of a Stock Albuterol Program for Students with Asthma. *Ann Am Thorac Soc*. 2016 Feb;13(2):295-6. doi: 10.1513/AnnalsATS.201510-683LE. PMID: 26848605.
<https://pubmed.ncbi.nlm.nih.gov/26848605/>
6. Krieger, J., Nelson, R., Vandas, E., Subramanian, H., Pan, H., & Warriar, M. (2016). P122 state-wide legislation positively impacts attendance for students with asthma. *Annals of Allergy, Asthma & Immunology*, 117(5). <https://doi.org/10.1016/j.anai.2016.09.132>
[https://www.annallergy.org/article/S1081-1206\(16\)30759-1/fulltext#articleInformation](https://www.annallergy.org/article/S1081-1206(16)30759-1/fulltext#articleInformation)
7. Andrea A. Pappalardo, Lynn B. Gerald; Let Them Breathe: A Plea to Pediatricians to Advocate for Stock Inhaler Policies at School. *Pediatrics* July 2019; 144 (1): e20182857. 10.1542/peds.2018-2857
<https://publications.aap.org/pediatrics/article/144/1/e20182857/37061/Let-Them-Breathe-A-Plea-to-Pediatricians-to?autologincheck=redirected>
8. Lowe, A. A., Gerald, J. K., Clemens, C. J., Stern, D. A., & Gerald, L. B. (2021). Managing respiratory emergencies at school: A county-wide stock inhaler program. *Journal of Allergy and Clinical Immunology*, 148(2). <https://doi.org/10.1016/j.jaci.2021.01.028>
[https://www.jacionline.org/article/S0091-6749\(21\)00175-5/fulltext](https://www.jacionline.org/article/S0091-6749(21)00175-5/fulltext)

