

SENATE BILL REPORT

HB 1317

As Reported By Senate Committee On:
Health & Long-Term Care, March 28, 2001

Title: An act relating to the emergency administration of epinephrine.

Brief Description: Removing the expiration date on emergency administration of epinephrine.

Sponsors: By Representatives Ballasiotes and Morell.

Brief History:

Committee Activity: Health & Long-Term Care: 3/21/01, 3/28/01 [DP].

SENATE COMMITTEE ON HEALTH & LONG-TERM CARE

Majority Report: Do pass.

Signed by Senators Thibaudeau, Chair; Franklin, Vice Chair; Costa, Deccio, Fraser, Parlette and Winsley.

Staff: Chelsea Buchanan (786-7446)

Background: Anaphylaxis is an allergic hypersensitivity reaction of the body to a foreign protein or drug. In some cases it can result in convulsions, unconsciousness, and even death. Epinephrine is used to treat anaphylactic reactions.

In 1999, the Legislature passed HB 1992, the Kristine Kastner Act,– which requires emergency medical technicians (EMTs) to carry epinephrine and authorizes them to administer it upon the request of the patient or to other authorized individuals under the age of 18, with specifications. These provisions expire on December 31, 2001.

The bill also required the Department of Health (DOH), in cooperation with the House of Representatives Health Care Committee and Senate Committee on Health and Long-Term Care, to review the use of epinephrine for anaphylaxis by EMTs. DOH has recommended extending the legislation beyond December 2001.

Summary of Bill: The expiration date of December 31, 2001 on the authorization of EMTs to carry and administer epinephrine specified in RCW 18.73.250 is cancelled.

Appropriation: None.

Fiscal Note: Available.

Effective Date: Ninety days after adjournment of session in which bill is passed.

Testimony For: The pilot program established under the Kristine Kastner Act worked even better than expected and saved over 20 lives. The House bill that simply cancels the

expiration date is preferable to the amended Senate bill that also makes provisions for school employees to administer epinephrine because: (1) the school issue needs to be looked at in more detail with parental involvement; and (2) rule development could take too long, and complicate existing arrangements with schools that are working now. If a school provision is pursued, existing emergency plans should be grandfathered in.

Testimony Against: None.

Testified: Representative Ida Ballasiotes, prime sponsor (pro); Marlo Martinez-Lynch, Food Allergy Awareness Parent Group (pro); Stacia Hollar (pro); Tom Saelid (pro); Judy Maire, Office of Superintendent of Public Instruction (pro with amendments).