

CERTIFICATION OF ENROLLMENT

ENGROSSED SENATE BILL 5104

Chapter 268, Laws of 2013

63rd Legislature
2013 Regular Session

K-12 SCHOOLS--EPINEPHRINE AUTOINJECTORS

EFFECTIVE DATE: 07/28/13

Passed by the Senate April 23, 2013
YEAS 47 NAYS 0

BRAD OWEN

President of the Senate

Passed by the House April 16, 2013
YEAS 96 NAYS 0

FRANK CHOPP

Speaker of the House of Representatives

Approved May 16, 2013, 2:11 p.m.

JAY INSLEE

Governor of the State of Washington

CERTIFICATE

I, Hunter G. Goodman, Secretary of the Senate of the State of Washington, do hereby certify that the attached is **ENGROSSED SENATE BILL 5104** as passed by the Senate and the House of Representatives on the dates hereon set forth.

HUNTER G. GOODMAN

Secretary

FILED

May 17, 2013

**Secretary of State
State of Washington**

ENGROSSED SENATE BILL 5104

AS AMENDED BY THE HOUSE

Passed Legislature - 2013 Regular Session

State of Washington **63rd Legislature** **2013 Regular Session**

By Senators Mullet, Frockt, Hatfield, Litzow, Ericksen, Fain, and Kohl-Welles

Read first time 01/18/13. Referred to Committee on Early Learning & K-12 Education.

1 AN ACT Relating to placing epinephrine autoinjectors in schools;
2 adding a new section to chapter 28A.210 RCW; and creating a new
3 section.

4 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:

5 NEW SECTION. **Sec. 1.** (1) The legislature finds that allergies are
6 a serious medical disorder that affect more than one in five persons in
7 the United States and are the sixth leading cause of chronic disease.
8 Roughly one in thirteen children has a food allergy, and the incidence
9 is rising. Up to forty percent of food-allergic children may be at
10 risk for anaphylaxis, a severe and potentially life-threatening
11 reaction. Anaphylaxis may also occur due to an insect sting, drug
12 allergy, or other causes. Twenty-five percent of first-time
13 anaphylactic reactions among children occur in a school setting.
14 Anaphylaxis can occur anywhere on school property, including the
15 classroom, playground, school bus, or on field trips.

16 (2) Rapid and appropriate administration of the drug epinephrine,
17 also known as adrenaline, to a patient experiencing an anaphylactic
18 reaction may make the difference between life and death. In a school
19 setting, epinephrine is typically administered intramuscularly via an

1 epinephrine autoinjector device. Medical experts agree that the
2 benefits of emergency epinephrine administration far outweigh the
3 risks.

4 (3) The legislature further finds that, on many days, as much as
5 twenty percent of the nation's combined adult and child population can
6 be found in public and nonpublic schools. Therefore, schools need to
7 be prepared to treat potentially life-threatening anaphylactic
8 reactions in the event a student is experiencing a first-time
9 anaphylactic reaction, a student does not have his or her own
10 epinephrine autoinjector device available, or if a school nurse is not
11 in the vicinity at the time.

12 NEW SECTION. **Sec. 2.** A new section is added to chapter 28A.210
13 RCW to read as follows:

14 (1) School districts and nonpublic schools may maintain at a school
15 in a designated location a supply of epinephrine autoinjectors based on
16 the number of students enrolled in the school.

17 (2)(a) A licensed health professional with the authority to
18 prescribe epinephrine autoinjectors may prescribe epinephrine
19 autoinjectors in the name of the school district or school to be
20 maintained for use when necessary. Epinephrine prescriptions must be
21 accompanied by a standing order for the administration of school-
22 supplied, undesignated epinephrine autoinjectors for potentially life-
23 threatening allergic reactions.

24 (b) There are no changes to current prescription or self-
25 administration practices for children with existing epinephrine
26 autoinjector prescriptions or a guided anaphylaxis care plan.

27 (c) Epinephrine autoinjectors may be obtained from donation
28 sources, but must be accompanied by a prescription.

29 (3)(a) When a student has a prescription for an epinephrine
30 autoinjector on file, the school nurse or designated trained school
31 personnel may utilize the school district or school supply of
32 epinephrine autoinjectors to respond to an anaphylactic reaction under
33 a standing protocol according to RCW 28A.210.300.

34 (b) When a student does not have an epinephrine autoinjector or
35 prescription for an epinephrine autoinjector on file, the school nurse
36 may utilize the school district or school supply of epinephrine

1 autoinjectors to respond to an anaphylactic reaction under a standing
2 protocol according to RCW 28A.210.300.

3 (c) Epinephrine autoinjectors may be used on school property,
4 including the school building, playground, and school bus, as well as
5 during field trips or sanctioned excursions away from school property.
6 The school nurse or designated trained school personnel may carry an
7 appropriate supply of school-owned epinephrine autoinjectors on field
8 trips or excursions.

9 (4)(a) If a student is injured or harmed due to the administration
10 of epinephrine that a licensed health professional with prescribing
11 authority has prescribed and a pharmacist has dispensed to a school
12 under this section, the licensed health professional with prescribing
13 authority and pharmacist may not be held responsible for the injury
14 unless he or she issued the prescription with a conscious disregard for
15 safety.

16 (b) In the event a school nurse or other school employee
17 administers epinephrine in substantial compliance with a student's
18 prescription that has been prescribed by a licensed health professional
19 within the scope of the professional's prescriptive authority, if
20 applicable, and written policies of the school district or private
21 school, then the school employee, the employee's school district or
22 school of employment, and the members of the governing board and chief
23 administrator thereof are not liable in any criminal action or for
24 civil damages in their individual, marital, governmental, corporate, or
25 other capacity as a result of providing the epinephrine.

26 (c) School employees, except those licensed under chapter 18.79
27 RCW, who have not agreed in writing to the use of epinephrine
28 autoinjectors as a specific part of their job description, may file
29 with the school district a written letter of refusal to use epinephrine
30 autoinjectors. This written letter of refusal may not serve as grounds
31 for discharge, nonrenewal of an employment contract, or other action
32 adversely affecting the employee's contract status.

33 (5) The office of the superintendent of public instruction shall
34 review the anaphylaxis policy guidelines required under RCW 28A.210.380
35 and make a recommendation to the education committees of the
36 legislature by December 1, 2013, based on student safety, regarding
37 whether to designate other trained school employees to administer

1 epinephrine autoinjectors to students without prescriptions for
2 epinephrine autoinjectors demonstrating the symptoms of anaphylaxis
3 when a school nurse is not in the vicinity.

Passed by the Senate April 23, 2013.

Passed by the House April 16, 2013.

Approved by the Governor May 16, 2013.

Filed in Office of Secretary of State May 17, 2013.