

# FINAL BILL REPORT

## ESHB 1608

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Synopsis as Enacted

**Brief Description:** Expanding access to anaphylaxis medications in schools.

**Sponsors:** House Committee on Education (originally sponsored by Representatives Bronoske, Simmons, Duerr, Ramel, Wylie, Paul, Jacobsen, Macri, Kloba, Leavitt and Reed).

**House Committee on Education**  
**Senate Committee on Early Learning & K-12 Education**

### **Background:**

#### Anaphylaxis Guidelines for Students.

The Office of the Superintendent of Public Instruction adopts guidelines for the care of students with anaphylaxis, a severe, life-threatening, systemic allergic reaction requiring immediate medical treatment and follow-up care. The guidelines indicate that food is the leading cause of anaphylaxis in children and that deaths have occurred in schools because of delays in recognizing and responding to symptoms with immediate treatment and further medical interventions.

#### Epinephrine and Requirements for Schools.

Epinephrine, which can be administered intramuscularly in a fixed dose through an autoinjector, is used for the first-aid treatment of anaphylaxis. The American Academy of Pediatrics indicates that prompt prehospital epinephrine injection is associated with a lower risk of hospitalization and fatality.

A qualified and licensed health professional may prescribe epinephrine autoinjectors (autoinjectors) in the name of the school or school district for use when necessary. The prescriptions must be accompanied by a standing order for the administration of school-supplied, undesignated autoinjectors for potentially life-threatening allergic reactions.

School districts and private schools may maintain a supply of autoinjectors based on the number of students enrolled in the school. Autoinjectors may be obtained from donation

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sources but must be accompanied by a prescription.

The requirements and protocols governing responses to anaphylactic reactions of students differ depending on whether the student has a prescription for an autoinjector on file, but in either case the school nurse may utilize the school or school district supply of autoinjectors to respond to the reaction.

Autoinjectors may be used on school property, including the school building, playground, and school bus, and during field trips or sanctioned excursions away from school property. The school nurse or designated, trained school personnel may carry an appropriate supply of school-owned autoinjectors on field trips or excursions.

Civil and criminal liability immunity is provided to school personnel and governing boards in accordance with the provision of epinephrine to a student. The immunity applies if a school nurse or other school employee administers epinephrine prescribed by a qualified licensed health professional to a student in substantial compliance with a student's prescription and according to written policies of the school district or private school.

#### Secretary of Health.

The Secretary of Health (Secretary) is the director of the Department of Health and has various public health and vital statistics duties prescribed in law, including enforcing public health laws, investigating outbreaks and epidemics of disease, taking measures to promote public health, and licensing health care providers and facilities. The Secretary or the Secretary's designee also issues standing orders (formal written instructions for specific areas or statewide) related to public health, with recent examples pertaining to administering COVID-19 vaccinations and prescribing opioid overdose reversal medications.

#### **Summary:**

The Secretary of Health (Secretary) or the Secretary's designee, in accordance with proper prescriptive authority and the exercise of sound professional judgment, must issue a statewide standing order prescribing epinephrine and epinephrine autoinjectors (autoinjectors) to any school district or school for use by a school nurse or other designated trained school personnel for any student or individual experiencing anaphylaxis on school property, a school bus, a field trip, or a designated school activity.

School districts and private schools may maintain a supply of epinephrine and autoinjectors (rather than only autoinjectors). Requirements governing the use of autoinjectors for students are modified to permit the use of both epinephrine and autoinjectors in schools and sanctioned excursions.

Liability immunities for school personnel and governing boards that apply when epinephrine is administered to a student through a prescription from a qualified, licensed

health professional are extended to include prescriptions made in accordance with a statewide standing order of the Secretary or the Secretary's designee.

Provisions directing the Office of the Superintendent of Public Instruction to review anaphylaxis policy guidelines and make related recommendations to the Legislature by December 1, 2013, are repealed.

**Votes on Final Passage:**

House 93 0

Senate 46 0

**Effective:** June 6, 2024