



STUDENT SUPPORT SERVICES

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Guidance for Implementing Education Law Article 19 Section 921 Regarding Use of Epinephrine Auto-Injectors in Schools in Accordance with Public Health Law 3000c

Section 921 of Article 19 of Education Law permits both public and non-public schools to choose to provide and maintain epinephrine auto-injectors on site, and to permit trained school employees to administer an epinephrine auto-injector without a provider order to any student or staff member with symptoms of anaphylaxis regardless of whether or not there is a previous history of severe allergic reaction. Schools choosing to do so must meet the requirements of Public Health Law 3000c. This law requires the school to have a collaborative agreement and employees who will administer an epinephrine auto-injector must have taken a New York State Department of Health (DOH) approved course. Both must be completed prior to administering an epinephrine auto-injector pursuant to this law.

A collaborative agreement must be with an “emergency health care provider” which means:

- a physician with knowledge and experience in the delivery of emergency care; or
- a hospital licensed under article twenty-eight of Public Health Law that provides emergency care.

A collaborative agreement is a written agreement that incorporates written practice protocols, policies and procedures that shall ensure compliance with the provisions of section 3000c of Public Health Law. The agreement should also specify the quantities of epinephrine auto-injectors that will be available in the school pursuant to 8NYCRR 136.6. The school **must file** the following form (<http://www.health.ny.gov/forms/doh-4188.pdf>), regarding their intent to have a collaborative agreement for use of epinephrine auto-injectors, along with the completed and signed collaborative agreement pursuant to Public Health Law 3000c with the appropriate Regional Emergency Medical Services (EMS) Council. The Council will forward it to the Department of Health. See the following Regional EMS Council contact information:

<http://www.health.ny.gov/professionals/ems/regional.htm>

The school must submit an updated form along with the collaborative agreement whenever there is a change in the agreement or the emergency health care provider.

A district medical director who is a physician, or a nurse practitioner affiliated with a hospital that provides emergency care, qualifies to have a collaborative agreement for epinephrine auto-injectors with their district. They can provide the training course or designate the school nurse or other designee to provide the training.

The practice protocols, policies, and procedures in the agreement should include the following:

- the curriculum used to train authorized individuals; the curriculum must be approved by the Department of Health;
- designation of who will conduct the training of the authorized individuals. This is determined by the emergency health care provider;
- designation of staff to be trained to use, acquire and dispose of the auto-injector. This will include maintaining a record of those trained with training dates, training refresher dates, and curriculum followed;
- give written notice of intent (as described previously this must be on the DOH Notice of Intent form) to the Regional EMS Council that auto-injectors will be available on site (verbal and written notice to the local ambulance service is also suggested);
- a plan for trained personnel to retake the approved training at least annually;
- a protocol for use of the auto-injector for both pediatric and adult persons;
- a plan of action when an auto-injector is used, including calling for emergency transport per district policy, reporting to the collaborative provider, reporting to the Regional EMS Council if possible, and disposal of the auto-injector in accordance with OSHA regulation 29 CFR 1910.1030; and
- a procedure for obtaining, storing, and accounting for the drug. It is the responsibility of the collaborative provider to obtain the auto-injectors to be used in the school.

In order for an employee, including licensed health professionals, of the school to administer an epinephrine auto-injector without a provider order they must complete a Department of Health approved course. Any administration of an epinephrine auto-injector under the collaborative agreement must be immediately reported to the collaborative provider (e.g. the physician or hospital the school's collaborative agreement is with). Additionally, DOH encourages filing a report of the administration within 48 hours to their Regional EMS Council.

To improve health outcomes, schools are **strongly encouraged** to request that the medical director write non-patient specific orders for the school nurse (RN) to follow in order to administer epinephrine to anyone with signs of anaphylaxis while working at the school. Such orders also permit the RN to obtain the epinephrine from a pharmacy. It is recommended that the administration of the epinephrine by the RN under these orders be reported to the ordering provider. However, epinephrine administered under non-patient specific orders by an RN is not required to be reported to the Regional EMS Council.