



Illinois Law Expands Options for Schools in Stocking, Administering Epi-Pens

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Governor Quinn Signs Bill to Expand Emergency Access to Life-Saving Allergy Medicine for Children Law Expands Options for Schools in Stocking, Administering Epi-Pens

CHICAGO ? August 15, 2011. Governor Pat Quinn today signed legislation to increase access to potentially life-saving medicine for children with severe allergies. House Bill 3294, the School Access to Emergency Epinephrine Act, allows schools to stock and utilize epinephrine auto-injectors (often known as ?epi-pens?) in the case of life-threatening allergic reactions.

?When a child suffers a severe allergic reaction, every second counts,? Governor Quinn said. ?With food allergies on the rise, we take action to help children with dangerous allergies. This law allows our schools to be prepared and for school nurses to take the immediate action that could save a child?s life.?

Sponsored by Rep. Chris Nybo (R-Elmhurst) and Sen. Jeffrey Schoenberg (D-Evanston), the new law allows schools to keep a supply of emergency epinephrine auto-injectors for students. The supply can be used in an emergency if a child forgets their prescribed epi-pen, or when a severe reaction requires a second dose. In addition, the law allows school nurses to administer epi-pens to any child suspected of having an anaphylactic (life-threatening allergic) reaction, regardless of whether the child has been previously diagnosed with an allergy. The law also protects all school personnel from liability when an epi-pen is administered in good faith. It goes into effect immediately.

A growing percentage of children in the United States are being diagnosed with food allergies. Recent studies suggest that one in 13 children are affected by food allergies. Nearly 40 percent of children with food allergies have a history of severe reaction, and 30 percent are allergic to multiple foods. The most common food allergen is peanuts, followed by milk and shellfish.

Under current law, students with severe allergies may carry their own personally-prescribed epi-pen at school and may allow specific school personnel to administer it in case of emergency. However, before House Bill 3294 was signed into law, schools were prohibited from administering epinephrine auto-injectors to children that had

forgotten their epi-pens or to children that had never been diagnosed with a severe allergy. Schools were instead required to dial 911, potentially losing key moments during a life-threatening reaction.

A quarter of anaphylactic reactions amongst children involved individuals that had not been previously diagnosed with a severe allergy. Twenty-five percent of first-time reactions to peanuts or tree nuts among children occurred in a school setting. In instances of epi-pen administrations at schools, 20 percent involved students whose condition was unknown at the time.

‘I keep an epi-pen with me because I have severe allergies,’ Sen. Schoenberg said. ‘Quite a few children have food allergies, and many have reactions at school if they are unknowingly exposed to an allergen that triggers an attack. Schools should be able to respond quickly and appropriately to increase the child’s chance of survival in the case of a serious allergic reaction.’

Symptoms of anaphylaxis include difficulty breathing due to swelling and/or spasm in the airways, loss of consciousness, and loss of heartbeat. Anaphylaxis results in the hospitalization of 300,000 children each year. According to the American Academy of Pediatrics, administering an epinephrine auto-injector is the best response to a child having an anaphylactic reaction.

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