Access to Emergency Epinephrine in Schools
Information for School Nurses and Health Suite Personnel

Access to Emergency Epinephrine in Schools Amendment Act of 2015

The Access to Emergency Epinephrine in Schools Amendment Act of 2015 (D.C. Law 21-77) authorizes public and public charter schools in the District of Columbia to possess and administer epinephrine auto-injectors. Additionally, it authorizes the Office of the State Superintendent of Education (OSSE) to procure undesignated epinephrine auto-injectors (UEAs) for schools and to annually train and certify school staff in the administration of epinephrine to students experiencing anaphylaxis.

The Act and subsequent regulations mandate public and public charter schools to have:

- A minimum of two pediatric dose (0.15 mg) and two adult dose (0.3 mg) UEAs stored in an easily accessible location.
- A minimum of two staff members to serve as Certified Epinephrine Administrators (EPAs) and receive annual training from OSSE in the identification of an anaphylactic reaction and the proper administration and storage of epinephrine. Staff members shall not include a licensed health practitioner assigned to the school by the District of Columbia Department of Health.
- An Epinephrine Liaison to serve as OSSE’s primary point of contact at the school to coordinate all program activities and communications with school personnel and OSSE including: the development and dissemination of the school’s annual UEA Plan; the procurement, inspection, and monitoring of UEAs; and the submission of an incident report within 24 hours of administration of a UEA.

Purpose of the Program

The purpose of this law is to expand knowledge and capacity within schools in the identification and emergency response to instances when students experience life-threatening allergic reactions. School health suite personnel are always part of a school’s emergency response team, but if they are not available or nearby during an anaphylactic emergency, this law mandates that other school staff be available and knowledgeable on how to respond.

Additionally, this law mandates schools to maintain a minimum of two unexpired UEAs of each dosage at all times. These UEAs are to be stored in an easily-accessible location. During an anaphylactic emergency, health suite personnel or EPAs may utilize the UEAs if a designated auto-injector is not prescribed, available, or accessible for the student. Students may experience their first severe allergic reaction while in school and not have a prescribed auto-injector. This law requires that UEAs be available for any instance when they are necessary.
Emergency Protocol

While health suite personnel do not count towards the number of mandated EPAs in schools, health suite personnel are still part of the school’s emergency response team. During an anaphylactic emergency, school staff are encouraged to first contact the health suite personnel if the health suite is near the incident. If a health suite staff member is not nearby or available, then a school employee that has been trained and certified by OSSE may administer emergency epinephrine. An EPA may also administer a designated auto-injector if a student is self-carrying but unable to self-administer the auto-injector.

In the event of an anaphylactic emergency, the health suite personnel or EPA shall:

1. Administer the epinephrine auto-injector.
2. Call 9-1-1 and request an ambulance with epinephrine. Place the used auto-injector in its original carrying case and give it to the emergency responder upon their arrival.
3. Stay with the student until an ambulance arrives and be prepared to administer a second epinephrine auto-injector in case of a biphasic reaction.
4. Alert the student’s emergency contacts.
5. Notify the school’s Epinephrine Liaison and provide necessary details to submit an incident report to OSSE within 24 hours of administering an UEA.
6. If health suite personnel were not present during the incident, they must be notified in writing so that information about the anaphylactic emergency can be entered into the student’s health record.
Location and Storage of Undesignated Epinephrine Auto-Injectors (UEAs)

Individual school leaders select an Epinephrine Liaison at the beginning of each school year. The Epinephrine Liaison serves as OSSE’s primary point of contact at the school to coordinate all program activities, UEA procurement, communications with school personnel, and reporting. The Epinephrine Liaison is also responsible for the proper storage and inspection of UEAs in the school. UEAs must be kept in an unlocked and easily accessible location such as the school front office, cafeteria, or near a fire extinguisher or automated external defibrillator (AED) machine. In order to promote easy access to UEAs, they shall not be kept inside the health suite because health suites are often locked and inaccessible before and after school. Schools are encouraged to utilize the yellow epinephrine locker (EpiLocker™) that is distributed by OSSE for storing UEAs.

The EpiLocker™ should be hung on the wall and never locked. The names of EPAs and Epinephrine Liaison should be posted next to the EpiLocker™ along with a copy of the school’s UEA Plan so that staff and students know who to contact during an emergency.

Epinephrine Liaisons are trained to follow these proper storage and inspection protocols:

- Never lock the UEAs in a drawer or room that is not easily accessible during an emergency. Finding a key wastes time when a student is suffering an anaphylactic episode.
- Post the names and contact information of the Epinephrine Liaison and EPAs next to the UEAs.
- Always store UEAs in the carrier tube with the safety release on until the UEA needs to be administered.
- Keep UEAs at room temperature. Do not refrigerate.
- UEAs can be exposed to temperatures between 59°-86°F (15° to 30°C).
- Do not keep UEAs in a vehicle during extremely hot or cold weather.
- Protect UEAs from light.
- Do not separate twin-pack UEAs, including for field trips or events off school premises. The twin-pack UEAs should always be stored together for instances when a student may need more than one dose.
- Inspect UEAs monthly for particles or discoloration. Report problems with the supply immediately to OSSE. Submit monthly logs to OSSE when inspections are complete.
Disposal of Undesignated Epinephrine Auto-Injectors (UEAs)

Epinephrine Liaisons are trained on the proper disposal of discharged or expired UEAs. The school shall dispose of a discharged UEA by placing it in its original carrying case and giving it to the emergency responder or medical provider upon their arrival.

The school shall dispose of an unused and expired UEA as infectious waste pursuant to 22-B DCMR § 502 (Disposal of Unused Pharmaceuticals) through:

- A waste to energy program
- A pharmaceutical waste container with appropriate procedures for disposal
- Recommended procedures as published by the FDA and DEA

The DC Department of Public Works (DPW) provides guidance for disposal if a red sharps/biohazard needle disposal box is not available. For more information, visit https://dpw.dc.gov/service/proper-disposal-needles-and-sharps.

More Information about the Program


Questions about the program may be directed to the OSSE Allergy Management Team at: OSSE.Epi@dc.gov.
Frequently Asked Questions (FAQs)

Question 1: What are designated epinephrine auto-injectors?
Designated epinephrine auto-injectors are medically prescribed by a physician to an individual student with known allergies. They are provided to a school by the student’s parent/guardian along with an Action Plan for Anaphylaxis. Designated epinephrine auto-injectors are typically kept in the health suite with other prescribed medications or are self-carried by students with known allergies if it is stipulated in their Action Plan for Anaphylaxis. Certified Epinephrine Administrators (EPAs) are trained in the administration of both designated and undesignated epinephrine auto-injectors.

Question 2: What are undesignated epinephrine auto-injectors (UEAs)?
Undesignated epinephrine auto-injectors (UEAs) are not prescribed to an individual student and are available for any student or adult suffering an anaphylactic reaction. UEAs may be used on any person who does not have a designated auto-injector, or if a designated auto-injector is inaccessible. OSSE provides schools with one twin-pack of each dosage of UEAs free of charge to be kept in an unlocked and easily accessible location in case of an emergency. Certified Epinephrine Administrators (EPAs) are trained in the administration of both designated and undesignated epinephrine auto-injectors.

Question 3: Why can the health suite personnel not count towards the number of required Certified Epinephrine Administrators (EPAs) in schools?
The DC Municipal Regulations specify that staff certified in the use of designated and undesignated epinephrine auto-injectors "shall not include a licensed health practitioner assigned to the public school by the Department of Health" (5-A DCMR § 1101.1). The reason for this is to increase the number of school staff who can respond to an anaphylactic emergency throughout the instructional day, including before- and after-school activities, on field trips, or instances when the health suite personnel are out of the building or not nearby during an anaphylactic emergency.

Question 4: What is the role of the health suite personnel in the Emergency Epinephrine in Schools program?
Although health suite personnel do not count towards the number of required Certified Epinephrine Administrators (EPAs), they are still part of the school’s emergency response team. In order to promote coherent communications and protocols, schools are encouraged to include the health suite personnel in the development and implementation of the school’s UEA Plan. Epinephrine Liaisons are trained to introduce themselves to health suite personnel to form clear communication and protocols within the school. In the event of an anaphylactic emergency, health suite personnel may administer both designated and undesignated epinephrine auto-injectors. Health suite personnel should notify the school’s Epinephrine Liaison and provide all necessary details for the completion of an incident report to be submitted to OSSE within 24 hours of the anaphylactic emergency. The Epinephrine Liaison will be responsible for submitting the incident report and ordering replacement UEAs.

Question 5: Can health suite personnel administer an undesignated epinephrine auto-injector (UEA)?
Yes. Health suite personnel may administer both designated and undesignated epinephrine auto-injectors (UEAs). Health suite personnel should notify the school’s Epinephrine Liaison and provide necessary details for the completion of an incident report to be submitted to OSSE within 24 hours of using a UEA.
Question 6: How will the health suite personnel know who are the school’s designated staff members?
The Epinephrine Liaison is responsible for coordinating all program activities and communications with school staff as well as the health suite personnel. Before the start of the school year, OSSE encourages the Epinephrine Liaison to include the health suite personnel in the development of the school’s UEA Plan, and provide the names and emergency contact information for the Epinephrine Liaison and Certified Epinephrine Administrators (EPAs) to health suite personnel. Throughout the school year, the Epinephrine Liaison should provide the health suite personnel with a copy of all communications sent home to parents/guardians regarding the epinephrine program to ensure consistent messaging. The school is also strongly encouraged to post the names and contact information of EPAs next to the UEAs. The health suite personnel can also contact OSSE’s Allergy Management Team to request the names and contact information for the school’s Epinephrine Liaison and EPAs.

Question 7: Who is responsible for the storage of undesignated epinephrine auto-injectors (UEAs)?
The Epinephrine Liaison is responsible for the proper storage of UEAs. OSSE encourages schools to utilize the yellow EpiLocker™ for storing the UEAs, and to hang the EpiLocker™ in an unlocked and easily accessible location in the school. OSSE encourages the Epinephrine Liaison to communicate the location of the UEAs to the health suite personnel.

Question 8: What kind of training is provided to Certified Epinephrine Administrators (EPAs)?
Certified Epinephrine Administrators (EPAs) receive annual training and certification from OSSE. The training was created in collaboration with Food Allergy and Research Education (FARE) and includes information about the Access to Emergency Epinephrine in Schools Amendment Act of 2015, symptoms of an anaphylactic reaction, emergency protocols and administration of epinephrine, and reporting and compliance requirements. Upon course completion, staff undergo a skills check and then receive a certificate which is valid for a calendar year. EPAs must become re-certified every year in order to continue serving as one of their school’s designated personnel for administration of epinephrine.

Question 9: Does DC Health’s Administration of Medication (AOM) Training fulfill the annual epinephrine administration training requirement?
No, DC regulations require annual training and certification of school staff in the administration of emergency, undesignated epinephrine. Although the Administration of Medication (AOM) certificate is valid for three years, AOM certificates are only valid for the administration of undesignated epinephrine for one year. After the first year, AOM-certified individuals are required to take OSSE’s Epinephrine Administration Training annually if they wish to remain one of the school’s certified personnel for the administration of undesignated epinephrine.

Question 10: Can schools have more than two Certified Epinephrine Administrators (EPAs)?
Schools may choose to have additional staff certified. OSSE supports schools who wish to train more than the required minimum of two EPAs by conducting on-site trainings at schools for groups of 10-20 individuals.

Question 11: Are Certified Epinephrine Administrators (EPAs) allowed to access medication in the health suite?
Certified Epinephrine Administrators (EPAs) are not allowed to access medication in the health suite unless the school’s UEA Plan stipulates that they may access designated epinephrine auto-injectors for students with a known allergy in case of emergency. Epinephrine Liaisons are encouraged to coordinate with health suite personnel to create a plan that establishes who is permitted to access
designated epinephrine auto-injectors in the health suite in times of emergency. Such plan should be documented in the school’s UEA Plan.

**Question 12: Are the health suite personnel responsible for ordering undesignated epinephrine auto-injectors (UEAs)?**
No. The health suite personnel are not responsible for procuring UEAs. The school’s Epinephrine Liaison is responsible for ordering UEAs through OSSE.

**Question 13: Are the health suite personnel responsible for inspecting stocked undesignated epinephrine auto-injectors (UEAs)?**
No. The health suite personnel are not responsible for inspecting stocked UEAs. The school’s Epinephrine Liaison is responsible for the inspection, monitoring, and reporting relating to UEAs to OSSE.

**Question 14: Are the health suite personnel responsible for disposing of used or expired undesignated epinephrine auto-injectors (UEAs)?**
No. The health suite personnel are not responsible for disposing of discharged UEAs because they should be disposed of by being placed in the original carrying case and given to the emergency responder or medical provider upon their arrival. Epinephrine Liaisons are trained on proper disposal of expired, unused UEAs.

**Question 15: If health suite personnel have questions or concerns regarding the undesignated epinephrine in the school, who should they contact?**
Health suite personnel are encouraged to work with the Epinephrine Liaison or school leadership regarding questions or concerns with the UEAs. Health suite personnel may also contact the OSSE Allergy Management Team at: OSSE.Epi@dc.gov.