



Sen. Chapin Rose

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10000SB2889sam001

LRB100 19109 MJP 36758 a

1 AMENDMENT TO SENATE BILL 2889

2 AMENDMENT NO. _____. Amend Senate Bill 2889 by replacing
3 everything after the enacting clause with the following:

4 "Section 5. The School Code is amended by changing Section
5 22-30 as follows:

6 (105 ILCS 5/22-30)

7 Sec. 22-30. Self-administration and self-carry of asthma
8 medication and epinephrine injectors ~~auto-injectors~~;
9 administration of undesignated epinephrine injectors
10 ~~auto-injectors~~; administration of an opioid antagonist; asthma
11 episode emergency response protocol.

12 (a) For the purpose of this Section only, the following
13 terms shall have the meanings set forth below:

14 "Asthma action plan" means a written plan developed with a
15 pupil's medical provider to help control the pupil's asthma.
16 The goal of an asthma action plan is to reduce or prevent

1 flare-ups and emergency department visits through day-to-day
2 management and to serve as a student-specific document to be
3 referenced in the event of an asthma episode.

4 "Asthma episode emergency response protocol" means a
5 procedure to provide assistance to a pupil experiencing
6 symptoms of wheezing, coughing, shortness of breath, chest
7 tightness, or breathing difficulty.

8 "Asthma inhaler" means a quick reliever asthma inhaler.

9 ~~"Epinephrine auto injector" means a single-use device used~~
10 ~~for the automatic injection of a pre-measured dose of~~
11 ~~epinephrine into the human body.~~

12 "Epinephrine injector" includes an auto-injector for the
13 administration of epinephrine or a pre-filled syringe used for
14 the administration of epinephrine that contains a pre-measured
15 dose of epinephrine that is equivalent to the dosages used in
16 an auto-injector.

17 "Asthma medication" means a medicine, prescribed by (i) a
18 physician licensed to practice medicine in all its branches,
19 (ii) a licensed physician assistant with prescriptive
20 authority, or (iii) a licensed advanced practice registered
21 nurse with prescriptive authority for a pupil that pertains to
22 the pupil's asthma and that has an individual prescription
23 label.

24 "Opioid antagonist" means a drug that binds to opioid
25 receptors and blocks or inhibits the effect of opioids acting
26 on those receptors, including, but not limited to, naloxone

1 hydrochloride or any other similarly acting drug approved by
2 the U.S. Food and Drug Administration.

3 "School nurse" means a registered nurse working in a school
4 with or without licensure endorsed in school nursing.

5 "Self-administration" means a pupil's discretionary use of
6 his or her prescribed asthma medication or epinephrine injector
7 ~~auto-injector~~.

8 "Self-carry" means a pupil's ability to carry his or her
9 prescribed asthma medication or epinephrine injector
10 ~~auto-injector~~.

11 "Standing protocol" may be issued by (i) a physician
12 licensed to practice medicine in all its branches, (ii) a
13 licensed physician assistant with prescriptive authority, or
14 (iii) a licensed advanced practice registered nurse with
15 prescriptive authority.

16 "Trained personnel" means any school employee or volunteer
17 personnel authorized in Sections 10-22.34, 10-22.34a, and
18 10-22.34b of this Code who has completed training under
19 subsection (g) of this Section to recognize and respond to
20 anaphylaxis.

21 "Undesignated epinephrine injector ~~auto-injector~~" means an
22 epinephrine injector ~~auto-injector~~ prescribed in the name of a
23 school district, public school, or nonpublic school.

24 (b) A school, whether public or nonpublic, must permit the
25 self-administration and self-carry of asthma medication by a
26 pupil with asthma or the self-administration and self-carry of

1 an epinephrine injector ~~auto-injector~~ by a pupil, provided
2 that:

3 (1) the parents or guardians of the pupil provide to
4 the school (i) written authorization from the parents or
5 guardians for (A) the self-administration and self-carry
6 of asthma medication or (B) the self-carry of asthma
7 medication or (ii) for (A) the self-administration and
8 self-carry of an epinephrine injector ~~auto-injector~~ or (B)
9 the self-carry of an epinephrine injector ~~auto-injector~~,
10 written authorization from the pupil's physician,
11 physician assistant, or advanced practice registered
12 nurse; and

13 (2) the parents or guardians of the pupil provide to
14 the school (i) the prescription label, which must contain
15 the name of the asthma medication, the prescribed dosage,
16 and the time at which or circumstances under which the
17 asthma medication is to be administered, or (ii) for the
18 self-administration or self-carry of an epinephrine
19 injector ~~auto-injector~~, a written statement from the
20 pupil's physician, physician assistant, or advanced
21 practice registered nurse containing the following
22 information:

23 (A) the name and purpose of the epinephrine
24 injector ~~auto-injector~~;

25 (B) the prescribed dosage; and

26 (C) the time or times at which or the special

1 circumstances under which the epinephrine injector
2 ~~auto-injector~~ is to be administered.

3 The information provided shall be kept on file in the office of
4 the school nurse or, in the absence of a school nurse, the
5 school's administrator.

6 (b-5) A school district, public school, or nonpublic school
7 may authorize the provision of a student-specific or
8 undesignated epinephrine injector ~~auto-injector~~ to a student
9 or any personnel authorized under a student's Individual Health
10 Care Action Plan, Illinois Food Allergy Emergency Action Plan
11 and Treatment Authorization Form, or plan pursuant to Section
12 504 of the federal Rehabilitation Act of 1973 to administer an
13 epinephrine injector ~~auto-injector~~ to the student, that meets
14 the student's prescription on file.

15 (b-10) The school district, public school, or nonpublic
16 school may authorize a school nurse or trained personnel to do
17 the following: (i) provide an undesignated epinephrine
18 injector ~~auto-injector~~ to a student for self-administration
19 only or any personnel authorized under a student's Individual
20 Health Care Action Plan, Illinois Food Allergy Emergency Action
21 Plan and Treatment Authorization Form, or plan pursuant to
22 Section 504 of the federal Rehabilitation Act of 1973 to
23 administer to the student, that meets the student's
24 prescription on file; (ii) administer an undesignated
25 epinephrine injector ~~auto-injector~~ that meets the prescription
26 on file to any student who has an Individual Health Care Action

1 Plan, Illinois Food Allergy Emergency Action Plan and Treatment
2 Authorization Form, or plan pursuant to Section 504 of the
3 federal Rehabilitation Act of 1973 that authorizes the use of
4 an epinephrine injector ~~auto-injector~~; (iii) administer an
5 undesignated epinephrine injector ~~auto-injector~~ to any person
6 that the school nurse or trained personnel in good faith
7 believes is having an anaphylactic reaction; and (iv)
8 administer an opioid antagonist to any person that the school
9 nurse or trained personnel in good faith believes is having an
10 opioid overdose.

11 (c) The school district, public school, or nonpublic school
12 must inform the parents or guardians of the pupil, in writing,
13 that the school district, public school, or nonpublic school
14 and its employees and agents, including a physician, physician
15 assistant, or advanced practice registered nurse providing
16 standing protocol or prescription for school epinephrine
17 injectors ~~auto-injectors~~, are to incur no liability or
18 professional discipline, except for willful and wanton
19 conduct, as a result of any injury arising from the
20 administration of asthma medication, an epinephrine injector
21 ~~auto-injector~~, or an opioid antagonist regardless of whether
22 authorization was given by the pupil's parents or guardians or
23 by the pupil's physician, physician assistant, or advanced
24 practice registered nurse. The parents or guardians of the
25 pupil must sign a statement acknowledging that the school
26 district, public school, or nonpublic school and its employees

1 and agents are to incur no liability, except for willful and
2 wanton conduct, as a result of any injury arising from the
3 administration of asthma medication, an epinephrine injector
4 ~~auto-injector~~, or an opioid antagonist regardless of whether
5 authorization was given by the pupil's parents or guardians or
6 by the pupil's physician, physician assistant, or advanced
7 practice registered nurse and that the parents or guardians
8 must indemnify and hold harmless the school district, public
9 school, or nonpublic school and its employees and agents
10 against any claims, except a claim based on willful and wanton
11 conduct, arising out of the administration of asthma
12 medication, an epinephrine injector ~~auto-injector~~, or an
13 opioid antagonist regardless of whether authorization was
14 given by the pupil's parents or guardians or by the pupil's
15 physician, physician assistant, or advanced practice
16 registered nurse.

17 (c-5) When a school nurse or trained personnel administers
18 an undesignated epinephrine injector ~~auto-injector~~ to a person
19 whom the school nurse or trained personnel in good faith
20 believes is having an anaphylactic reaction or administers an
21 opioid antagonist to a person whom the school nurse or trained
22 personnel in good faith believes is having an opioid overdose,
23 notwithstanding the lack of notice to the parents or guardians
24 of the pupil or the absence of the parents or guardians signed
25 statement acknowledging no liability, except for willful and
26 wanton conduct, the school district, public school, or

1 nonpublic school and its employees and agents, and a physician,
2 a physician assistant, or an advanced practice registered nurse
3 providing standing protocol or prescription for undesignated
4 epinephrine injectors ~~auto-injectors~~, are to incur no
5 liability or professional discipline, except for willful and
6 wanton conduct, as a result of any injury arising from the use
7 of an undesignated epinephrine injector ~~auto-injector~~ or the
8 use of an opioid antagonist regardless of whether authorization
9 was given by the pupil's parents or guardians or by the pupil's
10 physician, physician assistant, or advanced practice
11 registered nurse.

12 (d) The permission for self-administration and self-carry
13 of asthma medication or the self-administration and self-carry
14 of an epinephrine injector ~~auto-injector~~ is effective for the
15 school year for which it is granted and shall be renewed each
16 subsequent school year upon fulfillment of the requirements of
17 this Section.

18 (e) Provided that the requirements of this Section are
19 fulfilled, a pupil with asthma may self-administer and
20 self-carry his or her asthma medication or a pupil may
21 self-administer and self-carry an epinephrine injector
22 ~~auto-injector~~ (i) while in school, (ii) while at a
23 school-sponsored activity, (iii) while under the supervision
24 of school personnel, or (iv) before or after normal school
25 activities, such as while in before-school or after-school care
26 on school-operated property or while being transported on a

1 school bus.

2 (e-5) Provided that the requirements of this Section are
3 fulfilled, a school nurse or trained personnel may administer
4 an undesignated epinephrine injector ~~auto-injector~~ to any
5 person whom the school nurse or trained personnel in good faith
6 believes to be having an anaphylactic reaction (i) while in
7 school, (ii) while at a school-sponsored activity, (iii) while
8 under the supervision of school personnel, or (iv) before or
9 after normal school activities, such as while in before-school
10 or after-school care on school-operated property or while being
11 transported on a school bus. A school nurse or trained
12 personnel may carry undesignated epinephrine injectors
13 ~~auto-injectors~~ on his or her person while in school or at a
14 school-sponsored activity.

15 (e-10) Provided that the requirements of this Section are
16 fulfilled, a school nurse or trained personnel may administer
17 an opioid antagonist to any person whom the school nurse or
18 trained personnel in good faith believes to be having an opioid
19 overdose (i) while in school, (ii) while at a school-sponsored
20 activity, (iii) while under the supervision of school
21 personnel, or (iv) before or after normal school activities,
22 such as while in before-school or after-school care on
23 school-operated property. A school nurse or trained personnel
24 may carry an opioid antagonist on their person while in school
25 or at a school-sponsored activity.

26 (f) The school district, public school, or nonpublic school

1 may maintain a supply of undesignated epinephrine injectors
2 ~~auto-injectors~~ in any secure location that is accessible
3 before, during, and after school where an allergic person is
4 most at risk, including, but not limited to, classrooms and
5 lunchrooms. A physician, a physician assistant who has been
6 delegated prescriptive authority in accordance with Section
7 7.5 of the Physician Assistant Practice Act of 1987, or an
8 advanced practice registered nurse who has been delegated
9 prescriptive authority in accordance with Section 65-40 of the
10 Nurse Practice Act may prescribe undesignated epinephrine
11 injectors ~~auto-injectors~~ in the name of the school district,
12 public school, or nonpublic school to be maintained for use
13 when necessary. Any supply of epinephrine injectors
14 ~~auto-injectors~~ shall be maintained in accordance with the
15 manufacturer's instructions.

16 The school district, public school, or nonpublic school may
17 maintain a supply of an opioid antagonist in any secure
18 location where an individual may have an opioid overdose. A
19 health care professional who has been delegated prescriptive
20 authority for opioid antagonists in accordance with Section
21 5-23 of the Alcoholism and Other Drug Abuse and Dependency Act
22 may prescribe opioid antagonists in the name of the school
23 district, public school, or nonpublic school, to be maintained
24 for use when necessary. Any supply of opioid antagonists shall
25 be maintained in accordance with the manufacturer's
26 instructions.

1 (f-3) Whichever entity initiates the process of obtaining
2 undesignated epinephrine injectors ~~auto-injectors~~ and
3 providing training to personnel for carrying and administering
4 undesignated epinephrine injectors ~~auto-injectors~~ shall pay
5 for the costs of the undesignated epinephrine injectors
6 ~~auto-injectors~~.

7 (f-5) Upon any administration of an epinephrine injector
8 ~~auto-injector~~, a school district, public school, or nonpublic
9 school must immediately activate the EMS system and notify the
10 student's parent, guardian, or emergency contact, if known.

11 Upon any administration of an opioid antagonist, a school
12 district, public school, or nonpublic school must immediately
13 activate the EMS system and notify the student's parent,
14 guardian, or emergency contact, if known.

15 (f-10) Within 24 hours of the administration of an
16 undesignated epinephrine injector ~~auto-injector~~, a school
17 district, public school, or nonpublic school must notify the
18 physician, physician assistant, or advanced practice
19 registered nurse who provided the standing protocol or
20 prescription for the undesignated epinephrine injector
21 ~~auto-injector~~ of its use.

22 Within 24 hours after the administration of an opioid
23 antagonist, a school district, public school, or nonpublic
24 school must notify the health care professional who provided
25 the prescription for the opioid antagonist of its use.

26 (g) Prior to the administration of an undesignated

1 epinephrine injector ~~auto-injector~~, trained personnel must
2 submit to their school's administration proof of completion of
3 a training curriculum to recognize and respond to anaphylaxis
4 that meets the requirements of subsection (h) of this Section.
5 Training must be completed annually. The school district,
6 public school, or nonpublic school must maintain records
7 related to the training curriculum and trained personnel.

8 Prior to the administration of an opioid antagonist,
9 trained personnel must submit to their school's administration
10 proof of completion of a training curriculum to recognize and
11 respond to an opioid overdose, which curriculum must meet the
12 requirements of subsection (h-5) of this Section. Training must
13 be completed annually. Trained personnel must also submit to
14 the school's administration proof of cardiopulmonary
15 resuscitation and automated external defibrillator
16 certification. The school district, public school, or
17 nonpublic school must maintain records relating to the training
18 curriculum and the trained personnel.

19 (h) A training curriculum to recognize and respond to
20 anaphylaxis, including the administration of an undesignated
21 epinephrine injector ~~auto-injector~~, may be conducted online or
22 in person.

23 Training shall include, but is not limited to:

24 (1) how to recognize signs and symptoms of an allergic
25 reaction, including anaphylaxis;

26 (2) how to administer an epinephrine injector

1 ~~auto-injector~~; and

2 (3) a test demonstrating competency of the knowledge
3 required to recognize anaphylaxis and administer an
4 epinephrine injector ~~auto-injector~~.

5 Training may also include, but is not limited to:

6 (A) a review of high-risk areas within a school and its
7 related facilities;

8 (B) steps to take to prevent exposure to allergens;

9 (C) emergency follow-up procedures;

10 (D) how to respond to a student with a known allergy,
11 as well as a student with a previously unknown allergy; and

12 (E) other criteria as determined in rules adopted
13 pursuant to this Section.

14 In consultation with statewide professional organizations
15 representing physicians licensed to practice medicine in all of
16 its branches, registered nurses, and school nurses, the State
17 Board of Education shall make available resource materials
18 consistent with criteria in this subsection (h) for educating
19 trained personnel to recognize and respond to anaphylaxis. The
20 State Board may take into consideration the curriculum on this
21 subject developed by other states, as well as any other
22 curricular materials suggested by medical experts and other
23 groups that work on life-threatening allergy issues. The State
24 Board is not required to create new resource materials. The
25 State Board shall make these resource materials available on
26 its Internet website.

1 (h-5) A training curriculum to recognize and respond to an
2 opioid overdose, including the administration of an opioid
3 antagonist, may be conducted online or in person. The training
4 must comply with any training requirements under Section 5-23
5 of the Alcoholism and Other Drug Abuse and Dependency Act and
6 the corresponding rules. It must include, but is not limited
7 to:

8 (1) how to recognize symptoms of an opioid overdose;

9 (2) information on drug overdose prevention and
10 recognition;

11 (3) how to perform rescue breathing and resuscitation;

12 (4) how to respond to an emergency involving an opioid
13 overdose;

14 (5) opioid antagonist dosage and administration;

15 (6) the importance of calling 911;

16 (7) care for the overdose victim after administration
17 of the overdose antagonist;

18 (8) a test demonstrating competency of the knowledge
19 required to recognize an opioid overdose and administer a
20 dose of an opioid antagonist; and

21 (9) other criteria as determined in rules adopted
22 pursuant to this Section.

23 (i) Within 3 days after the administration of an
24 undesignated epinephrine injector ~~auto-injector~~ by a school
25 nurse, trained personnel, or a student at a school or
26 school-sponsored activity, the school must report to the State

1 Board of Education in a form and manner prescribed by the State
2 Board the following information:

3 (1) age and type of person receiving epinephrine
4 (student, staff, visitor);

5 (2) any previously known diagnosis of a severe allergy;

6 (3) trigger that precipitated allergic episode;

7 (4) location where symptoms developed;

8 (5) number of doses administered;

9 (6) type of person administering epinephrine (school
10 nurse, trained personnel, student); and

11 (7) any other information required by the State Board.

12 If a school district, public school, or nonpublic school
13 maintains or has an independent contractor providing
14 transportation to students who maintains a supply of
15 undesignated epinephrine injectors ~~auto-injectors~~, then the
16 school district, public school, or nonpublic school must report
17 that information to the State Board of Education upon adoption
18 or change of the policy of the school district, public school,
19 nonpublic school, or independent contractor, in a manner as
20 prescribed by the State Board. The report must include the
21 number of undesignated epinephrine injectors ~~auto-injectors~~ in
22 supply.

23 (i-5) Within 3 days after the administration of an opioid
24 antagonist by a school nurse or trained personnel, the school
25 must report to the State Board of Education, in a form and
26 manner prescribed by the State Board, the following

1 information:

2 (1) the age and type of person receiving the opioid
3 antagonist (student, staff, or visitor);

4 (2) the location where symptoms developed;

5 (3) the type of person administering the opioid
6 antagonist (school nurse or trained personnel); and

7 (4) any other information required by the State Board.

8 (j) By October 1, 2015 and every year thereafter, the State
9 Board of Education shall submit a report to the General
10 Assembly identifying the frequency and circumstances of
11 epinephrine administration during the preceding academic year.
12 Beginning with the 2017 report, the report shall also contain
13 information on which school districts, public schools, and
14 nonpublic schools maintain or have independent contractors
15 providing transportation to students who maintain a supply of
16 undesignated epinephrine injectors ~~auto-injectors~~. This report
17 shall be published on the State Board's Internet website on the
18 date the report is delivered to the General Assembly.

19 (j-5) Annually, each school district, public school,
20 charter school, or nonpublic school shall request an asthma
21 action plan from the parents or guardians of a pupil with
22 asthma. If provided, the asthma action plan must be kept on
23 file in the office of the school nurse or, in the absence of a
24 school nurse, the school administrator. Copies of the asthma
25 action plan may be distributed to appropriate school staff who
26 interact with the pupil on a regular basis, and, if applicable,

1 may be attached to the pupil's federal Section 504 plan or
2 individualized education program plan.

3 (j-10) To assist schools with emergency response
4 procedures for asthma, the State Board of Education, in
5 consultation with statewide professional organizations with
6 expertise in asthma management and a statewide organization
7 representing school administrators, shall develop a model
8 asthma episode emergency response protocol before September 1,
9 2016. Each school district, charter school, and nonpublic
10 school shall adopt an asthma episode emergency response
11 protocol before January 1, 2017 that includes all of the
12 components of the State Board's model protocol.

13 (j-15) Every 2 years, school personnel who work with pupils
14 shall complete an in-person or online training program on the
15 management of asthma, the prevention of asthma symptoms, and
16 emergency response in the school setting. In consultation with
17 statewide professional organizations with expertise in asthma
18 management, the State Board of Education shall make available
19 resource materials for educating school personnel about asthma
20 and emergency response in the school setting.

21 (j-20) On or before October 1, 2016 and every year
22 thereafter, the State Board of Education shall submit a report
23 to the General Assembly and the Department of Public Health
24 identifying the frequency and circumstances of opioid
25 antagonist administration during the preceding academic year.
26 This report shall be published on the State Board's Internet

1 website on the date the report is delivered to the General
2 Assembly.

3 (k) The State Board of Education may adopt rules necessary
4 to implement this Section.

5 (l) Nothing in this Section shall limit the amount of
6 epinephrine injectors ~~auto injectors~~ that any type of school or
7 student may carry or maintain a supply of.

8 (Source: P.A. 99-173, eff. 7-29-15; 99-480, eff. 9-9-15;
9 99-642, eff. 7-28-16; 99-711, eff. 1-1-17; 99-843, eff.
10 8-19-16; 100-201, eff. 8-18-17; 100-513, eff. 1-1-18.)

11 Section 10. The Epinephrine Auto-Injector Act is amended by
12 changing Sections 1, 5, 10, 15, and 20 as follows:

13 (410 ILCS 27/1)

14 Sec. 1. Short title. This Act may be cited as the
15 Epinephrine Injector ~~Auto-Injector~~ Act.

16 (Source: P.A. 99-711, eff. 1-1-17.)

17 (410 ILCS 27/5)

18 Sec. 5. Definitions. As used in this Act:

19 "Administer" means to directly apply an epinephrine
20 injector ~~auto-injector~~ to the body of an individual.

21 "Authorized entity" means any entity or organization,
22 other than a school covered under Section 22-30 of the School
23 Code, in connection with or at which allergens capable of

1 causing anaphylaxis may be present, including, but not limited
2 to, independent contractors who provide student transportation
3 to schools, recreation camps, colleges and universities, day
4 care facilities, youth sports leagues, amusement parks,
5 restaurants, sports arenas, and places of employment. The
6 Department shall, by rule, determine what constitutes a day
7 care facility under this definition.

8 "Department" means the Department of Public Health.

9 "Epinephrine injector" includes an auto-injector for the
10 administration of epinephrine or a pre-filled syringe used for
11 the administration of epinephrine that contains a pre-measured
12 dose of epinephrine that is equivalent to the dosages used in
13 an auto-injector.

14 ~~"Epinephrine auto injector" means a single use device used~~
15 ~~for the automatic injection of a pre measured dose of~~
16 ~~epinephrine into the human body.~~

17 "Health care practitioner" means a physician licensed to
18 practice medicine in all its branches under the Medical
19 Practice Act of 1987, a physician assistant under the Physician
20 Assistant Practice Act of 1987 with prescriptive authority, or
21 an advanced practice registered nurse with prescribing
22 authority under Article 65 of the Nurse Practice Act.

23 "Pharmacist" has the meaning given to that term under
24 subsection (k-5) of Section 3 of the Pharmacy Practice Act.

25 "Undesignated epinephrine injector ~~auto-injector~~" means an
26 epinephrine injector ~~auto-injector~~ prescribed in the name of an

1 authorized entity.

2 (Source: P.A. 99-711, eff. 1-1-17; 100-513, eff. 1-1-18.)

3 (410 ILCS 27/10)

4 Sec. 10. Prescription to authorized entity; use; training.

5 (a) A health care practitioner may prescribe epinephrine
6 injectors ~~auto-injectors~~ in the name of an authorized entity
7 for use in accordance with this Act, and pharmacists and health
8 care practitioners may dispense epinephrine injectors
9 ~~auto-injectors~~ pursuant to a prescription issued in the name of
10 an authorized entity. Such prescriptions shall be valid for a
11 period of 2 years.

12 (b) An authorized entity may acquire and stock a supply of
13 undesignated epinephrine injectors ~~auto-injectors~~ pursuant to
14 a prescription issued under subsection (a) of this Section.
15 Such undesignated epinephrine injectors ~~auto-injectors~~ shall
16 be stored in a location readily accessible in an emergency and
17 in accordance with the instructions for use of the epinephrine
18 injectors ~~auto-injectors~~. The Department may establish any
19 additional requirements an authorized entity must follow under
20 this Act.

21 (c) An employee or agent of an authorized entity or other
22 individual who has completed training under subsection (d) of
23 this Section may:

24 (1) provide an epinephrine injector ~~auto-injector~~ to
25 any individual on the property of the authorized entity

1 whom the employee, agent, or other individual believes in
2 good faith is experiencing anaphylaxis, or to the parent,
3 guardian, or caregiver of such individual, for immediate
4 administration, regardless of whether the individual has a
5 prescription for an epinephrine injector ~~auto injector~~ or
6 has previously been diagnosed with an allergy; or

7 (2) administer an epinephrine injector ~~auto injector~~
8 to any individual on the property of the authorized entity
9 whom the employee, agent, or other individual believes in
10 good faith is experiencing anaphylaxis, regardless of
11 whether the individual has a prescription for an
12 epinephrine injector ~~auto injector~~ or has previously been
13 diagnosed with an allergy.

14 (d) An employee, agent, or other individual authorized must
15 complete an anaphylaxis training program before he or she is
16 able to provide or administer an epinephrine injector
17 ~~auto injector~~ under this Section. Such training shall be valid
18 for a period of 2 years and shall be conducted by a nationally
19 recognized organization experienced in training laypersons in
20 emergency health treatment. The Department shall include links
21 to training providers' websites on its website.

22 Training shall include, but is not limited to:

23 (1) how to recognize signs and symptoms of an allergic
24 reaction, including anaphylaxis;

25 (2) how to administer an epinephrine injector
26 ~~auto injector~~; and

1 (3) a test demonstrating competency of the knowledge
2 required to recognize anaphylaxis and administer an
3 epinephrine injector ~~auto-injector~~.

4 Training may also include, but is not limited to:

5 (A) a review of high-risk areas on the authorized
6 entity's property and its related facilities;

7 (B) steps to take to prevent exposure to allergens;

8 (C) emergency follow-up procedures; and

9 (D) other criteria as determined in rules adopted
10 pursuant to this Act.

11 Training may be conducted either online or in person. The
12 Department shall approve training programs and list permitted
13 training programs on the Department's Internet website.

14 (Source: P.A. 99-711, eff. 1-1-17.)

15 (410 ILCS 27/15)

16 Sec. 15. Costs. Whichever entity initiates the process of
17 obtaining undesignated epinephrine injector ~~auto-injectors~~ and
18 providing training to personnel for carrying and administering
19 undesignated epinephrine injector ~~auto-injectors~~ shall pay for
20 the costs of the undesignated epinephrine injectors
21 ~~auto-injectors~~.

22 (Source: P.A. 99-711, eff. 1-1-17.)

23 (410 ILCS 27/20)

24 Sec. 20. Limitations. The use of an undesignated

1 epinephrine injector ~~auto-injector~~ in accordance with the
2 requirements of this Act does not constitute the practice of
3 medicine or any other profession that requires medical
4 licensure.

5 Nothing in this Act shall limit the amount of epinephrine
6 injectors ~~auto-injectors~~ that an authorized entity or
7 individual may carry or maintain a supply of.

8 (Source: P.A. 99-711, eff. 1-1-17.)

9 Section 15. The Illinois Food, Drug and Cosmetic Act is
10 amended by changing Section 3.21 as follows:

11 (410 ILCS 620/3.21) (from Ch. 56 1/2, par. 503.21)

12 Sec. 3.21. Except as authorized by this Act, the Illinois
13 Controlled Substances Act, the Pharmacy Practice Act, the
14 Dental Practice Act, the Medical Practice Act of 1987, the
15 Veterinary Medicine and Surgery Practice Act of 2004, the
16 Podiatric Medical Practice Act of 1987, Section 22-30 of the
17 School Code, Section 40 of the State Police Act, Section 10.19
18 of the Illinois Police Training Act, or the Epinephrine
19 Injector ~~Auto-Injector~~ Act, to sell or dispense a prescription
20 drug without a prescription.

21 (Source: P.A. 99-78, eff. 7-20-15; 99-711, eff. 1-1-17.)".